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Form 990-EZ

Short Form

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

DLN: 93492313018380

2009

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than 500,000 and total assets less than 1,250,000 at the end of the year may use this form

Open to Public **Inspection**

			► The c	ərganızat	ıon may hav	re to use a c	opy of this	return to satı	ısfy sta	te repor	tıng requir	ement:	5.	Inspection
		2009 calendar	year, or				9	, and endin	g 06-30	-2010				J!6
	theck if a ddress c	chango	Please		of organizatio ER ISLAND HIC	on GH SCHOOL PT	ΓSA 2950				'	Empl	oyer i	dentification number
_		a change							53853					
_	nitial reti	urn	print or		er and street (65TH AVE WI		11011 15 1101	uciivereu to Str	eet auufe	292) [KOOI	m/ suite	Teleph		
_	eminate	ed	type. See										(206	718-1161
_^	mended		Specific Instruc-		town, state o	or country, and	d ZIP + 4				F	Group		ption
A	pplicatio		tions.	17.0011	17, 117, 5010	3						Numbe	er	
		•							G	Accou	ntıng meth	nod [- Ca.	sh TAccrual
) Se	ection :	501(c)(3) orga							"		(specify)		C a.	sii i Accidai
		must atta	аспа сог	тріетеа		A (Form 99		Z). 🖼						
w	ebsite:	.► <u>N</u> /A								Chec	:k ► 【Y ot required		_	ıızatıon
Та	x-Exen	npt status (che	ck only on	_{ie)} _ F 5	501(c)(3)	◀(ınsert no)	4 947(a)(1) or 「 52	27		•			0-EZ, or 990-PF)
		If the organ												
													to file	a complete return
		b, 6b, and 7b, to										▶ \$		154,262
Pa	art I	Contributions						or Fund	Dalaii	ces (S	ee the ins	tructio	ns to	68,172
									•			-	-	
	2	Program servi				iiiiient fees	anu contra	1615				-	2	54,668
	3	Membership d		assessi	ments .								3	16,519
	4	Investment in											4	119
	5a	Gross amount					ry .		5a					
₽	ь	Less cost or	other ba	sis and s	sales exper	nses .			5b					
Kevenue	c	Gain or (loss)	from sal	e of ass	ets other th	nan invento	ry (Subtra	ct line 5b fror	m line 5	a) .		. [5c	0
Ÿ	6	Special event	s and act	tivities ((complete a	applicable p	arts of Sch	nedule G) If a	any am	ount is	from gami	ng,		
		check here 🕨	٠ ,											
	а	Gross revenue	e (not ind	:luding \$	of contri	butions			1	1				
		reported on lir	ne 1)					•	6a		14	,784		
	ь	Less directe	xpenses	other th	nan fundrais	sing expens	es .		6b	<u> </u>	3	,828		
	С	Net income or	r (loss) fr	om spec	cial events	and activiti	ıes (Subtra	ict line 6b fro	om line	6a)			6с	10,956
	7a	Gross sales o	fınvento	ry, less	returns and	d allowance	s		7a	1				
	ь	Less cost of	goods so	old .					7b)		0		
	c	Gross profit o	r (loss) f	rom sale	es of invent	ory (Subtra	ct line 7b	from line 7a)					7c	0
	8	Other revenue	e (descri	be 🟲								[8	
	9	Total revenue	. Add line	es 1, 2,	3, 4, 5c, 60	 c, 7 c, and 8					. •		9	150,434
	10	Grants and si	mılar amı	ounts pa	aıd (attach	schedule) 🖁	<u> </u>						10	43,775
	11	Benefits paid										F	11	· · · · · · · · · · · · · · · · · · ·
	12	Salaries, othe				vee benefit:	5					.	12	
ψ.	13	Professional f	•	•		•		nrs	•			·	13	950
Expenses	14	Occupancy, re		•	•	•	Communica		•		•	·	14	
÷.			•	•					•	•		•		
Li.	15	Printing, publi	•		_	iniy •			•				15	02 524
	16	Other expens										—) 	16	83,524
	17	Total expense											17	128,249
S O	18	Excess or (de	•	•	•		•					•	18	22,185
un un er	19	Net assets or					m line 27,	column (A))	(must a	agree w	rith			
et#55et5		end-of-year fi	-			•						<u> </u>	19	29,149
Ž	20	Other change	s ın net a	assets o	r fund balar	nces (attac	h explanat	ıon)					20	
	21	Net assets or	fund bal	ances a	t end of yea	ır Combine	lines 18 t	hrough 20	<u>.</u>		<u> ►</u>		21	51,334
Pa	rt II	Balance S	Sheets-	—If Tota	al assets or	ı lıne 25, co	olumn (B) a	are \$1,250,0	00 or n	nore, fil	e Form 99	0 ınst	ead o	f Form 990-EZ
			/C 11		iations for "	Onet II \		1	7.3.3 -					>
					ictions for P	'art II)			(A) E	Beginnii	ng of year		(B) End of year
	•	, savings, and i	ınvestme	nts .							29,14		<u> </u>	51,334
		and buildings										23		
		assets (descr	ribe 🏲)				24	<u> </u>	
		assets .	·					• •			29,14	_		51,334
		liabilities (des	-)				26	<u> </u>	
27	Net a	ssets or fund b	alances ((line 27	of column /	(B) must ad	ree with lir	211	I		29 14	19 27	1	51 334

What is the organization's primary exempt purpose? PROMOTE EDUCATION AND HEALTH OF YOUTH Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each spring and section 4947 (a)(1) trusts, optional for others.) 28 STUDENT/TEACHER ENRICHMENT (Grants \$ 40,375)
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title. 28 STUDENT/TEACHER ENRICHMENT (Grants \$ 40,375) If this amount includes foreign grants, check here
describe the services provided, the number of persons benefited, and other relevant information for each program title 28 STUDENT/TEACHER ENRICHMENT (Grants \$ 40,375) If this amount includes foreign grants, check here
program title optional for others) 28 STUDENT/TEACHER ENRICHMENT (Grants \$ 40,375) If this amount includes foreign grants, check here
CGrants \$ 40,375 If this amount includes foreign grants, check here 28a 108,706
CGrants \$ 40,375 If this amount includes foreign grants, check here 28a 108,706
(Grants \$ 3,400) If this amount includes foreign grants, check here
(Grants \$) If this amount includes foreign grants, check here
31 O ther program services (attach schedule)
31 O ther program services (attach schedule)
If this amount includes foreign grants, check here 31a
32 Total program service expenses (add lines 28a through 31a)
Part IV List of Officers, Directors, Trust ees, and Key Employees. List each one even if not compensated (See the instructions for Part IV) (b) Title and average hours per week (If not paid, employee benefit plans & account and
(b) Title and average (c) Compensation (d) Contributions to (e) Expense (a) Name and address hours per week (If not paid, employee benefit plans & account and
(a) Name and address hours per week (If not paid, employee benefit plans & account and
devoted to position enter -u) deferred compensation other allowances

Ρ	а	a	e	3
•	ч	9	_	_

Pa	rt V Other Information (Note the statement requirements in the instructions for Part V.)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed			
	description of each activity	33		No
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		Νo
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033			
_	(e) notice, reporting, and proxy tax requirements? 🚨	35a		Νo
	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		Νο
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 🕨			
b	Did the organization file Form 1120-POL for this year?	37b		Νo
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		Νo
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b]		
39	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on line 9]		
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section $501(c)(3)$ organizations. Enter amount of tax imposed on the organization during the year under			
	section 4911 ▶, section 4912 ▶, section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		No
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		Νo
41	List the states with which a copy of this return is filed 🕨			
42a	The organization's books are in care of ▶ DARBY YOUNG Telephone no	(20	6)718	1161
	4116 85TH AVE SE Located at MERCER ISLAND, WA ZIP + 4	▶ 98	3040	
Ь	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Yes	No
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	42b	162	
	account)?	42D		Νο
	If "Yes," enter the name of the foreign country •			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U S ?	42c		Νo
	If "Yes," enter the name of the foreign country 🕨			_
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041— Check here and enter the amount of tax-exempt interest received or accrued during the tax year		• •	▶ □
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of			
	Form 990-EZ.	44		Νo
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes", Form 990 must be completed instead of Form 990-EZ.	45		Νο
		O	90-E7	/2000

Part \	All section 501(c)(3) organ 46-49b and complete the	nizations and section 4	4947(a)(1) nonexer	•			-	stions
46 Dı	d the organization engage in direct	or indirect political camp	aign activities on beh	alf of or in opp	osition to		Yes	No
са	ndidates for public office? If "Yes,"	complete Schedule C, P	art I			46		No
47 DI	d the organization engage in lobbyir	ng activities? If "Yes," co	omplete Schedule C, P	art II 📆		47	Yes	
48 Is	the organization a school described	d in section 170(b)(1)(A)(II)? If "Yes," complete	e Schedule E		48		No
49a Dı	d the organization make any transfe	rs to an exempt non-cha	arıtable related organız	zation?		49a		No
b If	"Yes," was the related organization	a section 527 organizat	ion?			49b		
	omplete this table for the organization onployees) who each received more t	•						
	me and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Con employee	tributions to benefit plans & compensation	(e	e) Expe ccount er allowa	and
NONE								
of	omplete this table for the organization compensation from the organization Name and address of each independent	If there is none, enter '	"None "		each received m		ompen	
NONE								
51(d)	Fotal number of other independent c	ontractors each receivin	g over \$100,000 .					
	Under penalties of perjury, I declare t and belief, it is true, correct, and com	hat I have examined this retui plete Declaration of preparer	rn, including accompanying (other than officer) is base	schedules and st d on all information	atements, and to thon on of which prepare	ne best er has a	of my kn ny knowle	owledge edge
Please Sign	***** Signature of officer			2010- Date	11-08			
Here	KENDALL TAYLOR TREASURER Type or print name and title			- Dute				
Paid	Preparer's signature PHILLIP C BABER CPA	D	9	Check If self- empolyed •	Preparer's identify (See instructions)		mber	
Prepare Use Onl	ıf self-employed),	ASON CPASPS			EIN 🕨			
USC UIII	address, and ZIP + 4 7525 SE 24	TH STREET SUITE 360			Phone no 1 (20	206) 236-0734		
M = +b =	IRS discuss this return with the pre	LAND, WA 98040	unstructions		<u> </u>			- No

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization MERCER ISLAND HIGH SCHOOL PTSA 2950

Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section Department of the Treasury 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ. See separate instructions.

Public Charity Status and Public Support

Inspection **Employer identification number**

			instructions))	Yes		Yes	No	Yes	No	
			instructions))	res	140	res	NO	Tes	No	
			ınstructions))	res	110	res	NO	res	No	
									l Na	
(i) Name suppor organiza	ted EIN (described on lines 1- 9 above or IRC section (see		on in ed in ming	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) A mount of support?		
h			g information about t							
	(ii) a fan	nıly membe	r of a person describ ed entity of a person	ed ın (ı) abov	e?				11g(ii) 11g(iii)	
			ectly or indirectly co loverning body of the	•			ersons desc	ribed in (II)	11g(i)	Yes No
g	Since Au following	ugust 17, 20 persons?	006, has the organiz	•	, ,					,
f	section .	509(a)(2) ganızatıon r	eceived a written de							
еГ	By chec	-	b Type II x, I certify that the o in managers and othe	rganization is	s not contro	•	rindirectly	•	•	d persons
11 F	one or m	nore publicly that describ	anized and operated supported organizates the type of suppo	tions describ orting organiz	ed in sectio ation and co	n 509(a)(1) c mplete lines	or section 50 11e through	09(a)(2) See	section 509(a)(3). Check
10 <u> </u>			anization after June 3 anized and operated	•			•	•		
	ıts supp	ort from gro	ss investment incom	ne and unrela	ted business	s taxable inco	ome (less se	ection 511 tax		
9			t normally receives ties related to its ex							
8			described in section							
7	describe	ed in	t normally receives a		part of its si	upport from a	governmen	tal unit or fron	n the general	public
6		. , , , ,	ocal government or	•	l unıt descrı	bed in sectio i	n 170(b)(1)	(A)(v).		
5	_	-	rated for the benefit (Complete Pa	_	or university	owned or ope	erated by a	governmental	unit describe	ed in
4		al research 's name, cit	organızatıon operate y, and state	ed in conjunct	tion with a h	ospital descri	ibed in sect i	ion 170(b)(1)	(A)(iii). Ente	r the
3	-	•	erative hospital serv	_						
2 _			ın section 170(b)(1)			•				
1 	A church	h, conventio	n of churches, or as:	sociation of c	hurches se	ction 170(b)(1)(A)(i).			
			foundation because							
Part I	Reaso	n for Pub	olic Charity Stat	us (All orga	anizations i	nust comple	ete this pa	rt.) See inst	ructions	

Total

ınstructions

	Support Schedule (Complete only if y	e for Organiza	tions Describ	ed in IRC 170 7. or 8 of Part)(b)(1)(A)(iv) I.)	and 17	′0(b)(:	1)(A)(vi)	
S	ection A. Public Support			. ,	/				
	endar year (or fiscal year beginning	(-) 200F	(1) 2006	(-) 2007	(4) 2000	(-) 2		(5) T. I	_ 1
	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	2009	(f) ⊤ot	aı
1	Gifts, grants, contributions, and								
	membership fees received (Do not	:							
	ınclude any "unusual								
	grants ")								
2	Tax revenues levied for the								
	organızatıon's benefit and either								
	paid to or expended on its								
	behalf								
3	The value of services or facilities								
	furnished by a governmental unit to)							
_	the organization without charge			+					
4	Total. Add lines 1 through 3								
5	The portion of total contributions b	У							
	each person (other than a								
	governmental unit or publicly								
	supported organization) included o	n							
	line 1 that exceeds 2% of the								
	amount shown on line 11, column								
_	(f)	_							
6	Public Support. Subtract line 5 from line 4	1							0
	ection B. Total Support							1	
	ection B. Total Support endar year (or fiscal year beginning		1	I					
Cai	, , , , , ,	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	009	(f) Tota	al
-	in)								
7	A mounts from line 4								
8	Gross income from interest,								
	dividends, payments received on								0
	securities loans, rents, royalties and income from similar								· ·
	sources								
9	Net income from unrelated								
9	business activities, whether or								
	not the business is regularly								
	carried on								
10	Other income (Explain in Part								
10	IV) Do not include gain or loss								
	from the sale of capital assets								
11	Total support (Add lines 7								
	through 10)								
12	Gross receipts from related activit	ies, etc (See ins	tructions)	•	•	12			
13	First Five Years If the Form 990 is	for the organizat	ion's first second	I third fourth or	fifth tay year as a		3) organ	ızatıon	
13	check this box and stop here	ior the organizat	ion's mist, second	i, tillia, louitii, oi	ilitii tax yeal as a	301(0)(.)) organi	▶ □	
	check this box and stop here							-,	
	ection C. Computation of Pu	blic Support I	Percentage						
14	Public Support Percentage for 200			11 column (f))		14			0 %
	-	•		11 column (1))					0 70
15	Public Support Percentage for 200	18 Schedule A, Pa	irt II, line 14			15			
16a	33 1/3% support test—2009. If the	e organızatıon dıd	not check the bo	x on line 13, and	line 14 is 33 1/39	% or more	, check	this box	
	and stop here. The organization qu	alıfıes as a public	ly supported orga	anızatıon				► □	
b	33 1/3% support test—2008. If the	e organızatıon dıd	not check the bo	x on line 13 or 10	6a, and line 15 is	33 1/3%	or more	, check this	
	box and stop here. The organization	n qualifies as a p	ublicly supported	organızatıon				▶ -	
17a	10%-facts-and-circumstances test	_							
	is 10% or more, and if the organiza			•		-	•		
	ın Part IV how the organization me	ets the "facts and	d cırcumstances"	test The organiz	zatıon qualıfıes as	a publicl	y suppo		
	organization							► □	
b	10%-facts-and-circumstances test	_							
	15 is 10% or more, and if the orga			•		-			
	Explain in Part IV how the organiza	ation meets the "1	acts and circums	tances" test The	e organızatıon qua	lifies as	a publicl		
	supported organization							▶ □	
18	Private Foundation If the organiza	tion did not check	ca box on line 13	, 16a, 16b, 17a c	or 17b, check this	box and	see		

►□

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section B. Total Support	Se	ection A. Public Support							
1. Gifs, grants, contributions, and membership flow received (10 net membership flow received (10 net membership flow received (10 net membership flow received from admissions, performed, or facilities furnished in any activity that is raised to the organization's tax-exempt purpose	Cale		g (a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	009	(f) Total
2 Gross receipts from admissions, merchandies sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt or separated to the organization's tax-exempt or separated trade or business under section 513 4 Tax revenues levied for the organization's branef and either page for expanded on its form the organization without charge for Total. Add lines 1 through 5 5 The value of services or facilities furnished by a povernmental unit to the organization without charge for Total. Add lines 1 through 5 6 Total. Add lines 1 through 5 96,100 115,300 130,100 130,000 3,000 3,000 3,000 3,000 1 h Amounts nucluded on lines 2, 2, and 3 received from disqualified and secretary of 5,000 or 1% of the amount on line 13 for the year caved from other than disqualified persons that exceed the greater of 5,000 or 1% of the amount on line 13 for the year caved from interest. The year of 3 through 5 Section B. Total Support Calculator year (or first lyear beginning (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total and the year caved on securities loans, entire, royalities and income from interest, dividends, payments received on securities loans, entire, royalities and income from interest, dividends, payments received on securities loans, entire, royalities and income from interest, dividends, payments received on securities loans, entire, royalities and income from interest. In the common transities of the page of the pa	1	Gifts, grants, contributions, and membership fees received (Do n	ot 43,315	14,129	15,702	14,506		84,691	172,343
3 Gross receipts from activities that are not an unrelated trade or business under section 513 decimals are not an unrelated trade or business under section 513 decimals are not an unrelated trade or business under section 513 decimals are not an unrelated trade or business under section 513 decimals are not an unrelated trade or business to decimal to the organization without charge for the organization of the organizatio	2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished any activity that is related to the	JZ,/94	101,253	117,405	121,551		69,452	462,455
business under section 5.1.3 Tax revenues lever for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge (property of the paid to or expended on the paid to organization without charge (property of the paid to property of the paid t	3	Gross receipts from activities tha	at						
organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7 A Mounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7 and 70 for year Add lines 10 and year (or facel year beginning and income from interest, disconsistent of year of yea	_	business under section 513							
### Cross in come from interest, or computation of public Support (eas section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrelated business stazable income (less section D. 11 tasks) ### Unrela	4	organization's benefit and either paid to or expended on its behalf							
Total. Add lines 1 through 5 96,100 115,382 133,107 136,057 154,143 63 73 Amounts included on lines 1 and 3 received from disqualified persons	5	furnished by a governmental unit							
and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7 and 7 b 8 Public Support (Subtract line 7 c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business is regularly carried on 120 Other income Do not included in line 10b, whether or not the business is regularly carried on 121 Other income Do not included gain or loss from the sale of capital assets (Explain in Part III, line 17 Section C. Computation of Public Support Percentage 7 Investment income percentage froz 2009 (line 8 column (f) divided by line 13 column (f)) 15 Section D. Computation of Investment Income Percentage 7 Investment income percentage froz 2009 (line 10 column (f) divided by line 13 column (f)) 15 Section D. Computation of Investment Income Percentage 7 Investment income percentage froz 2009 (line 10 column (f) divided by line 13 column (f)) 16 Public support percentage froz 2009 (line 10 column (f) divided by line 13 column (f)) 17 One support (Add lines 20 and 2008 Schedule A, Part IIII, line 17	6	-	96,109	115,382	133,107	136,057		154,143	634,798
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C Add lines 7a and 7b Section B. Total Support (Subtract line 7c from line 6) Section B. Total Support (Subtract line 7c from line 6) Section B. Total Support (Subtract line 7c from line 6) Section B. Total Support (Subtract line 7c from line 6 Section B. Total Support (Subtract line 7c from line 6 Section B. Total year beginning line 10 Support Percentage Section B. Computation of Public Support Percentage Section B. Computation of Investment Income Percentage To Investment Income percentage from 2008 Schedule A, Part III, line 17 O 23 Section B. Total year beginning line 10 Section B. Column (f) divided by line 13 column (f) Section B. Column (f) line 10 Section B. Column (f) lin	b	Amounts included on lines 2 and received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the							
Section B. Total Support Calendar year (or fiscal year beginning (n)	c		3,000	3,000	3,000	3,000		3,000	15,000
Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total year beginning in) (d) 2008 (e) 2009 (f) Total year beginning in) (d) 2008 (e) 2009 (f) Total year beginning in) (d) 2008 (e) 2009 (f) Total year beginning in) (f) 708	8								619,798
In) 9 Amounts from line 6 96,109 115,382 133,107 136,057 154,143 63 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business taxefvities not included in line 10b, whether or not the business activities not included gain or loss from the sale of capital assets (Explain in Part IIV) 13 Total support (Add lines 9, 10c, 11 and 12) 14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public Support Percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2008 Schedule A, Part III, line 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17	Se	•						I	
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b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10 a and 10 b 58 11 718 554 119 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 2004 from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11 and 12) 14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f)) Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2008 Schedule A, Part III, line 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 O 23	10a	dividends, payments received on securities loans, rents, royalties and income from similar		11	718	554		119	1,460
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Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 0 26					L3 column (f))		15		97 410 %
17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))170 2318Investment income percentage from 2008 Schedule A, Part III, line 17180 26	16	Public support percentage from 2	008 Schedule A, Pa	rt III, line 15			16		97 120 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 0 26	Se	-							
		· · · · · · · · ·	•			(f))	17		0 230 %
IN $3.3.17$ SUBDOCT TESTS—71119 ITTO OCCUPITATION AIR NOT CHOCK THO HOV ON LING 1.7 and line 1.5 is more than $3.3.1720\%$ and line 1.7 is n						line 15 is more +		/3% and	0 260 %

19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported

organization

33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93492313018380

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Political Campaign and Lobbying Activities

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

Se Se	e organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 ection 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part I ection 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, lin	l-A Do not Part II-B D	complet o not co	te Part II-B Implete Part	: II-A
	ection 501(c)(4), (5), or (6) organizations Complete Part III	(3		,	,,
Na	ime of the organization	mployerio	dentifica	ation numbe	er
ME	RCER ISLAND HIGH SCHOOL PTSA 2950	1-12538	- 2		
Par	t I-A Complete if the organization is exempt under section 501(c) or is a s			anizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities in Part				
2	Political expenditures	F	\$		
3	V olunteer hours		_		
Par	t I-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955	•	· \$_		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	Þ	\$ <u>_</u>		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	┌ No
4a	Was a correction made?			☐ Yes	∏ No
ь	If "Yes," describe in Part IV				
Par	rt I-C Complete if the organization is exempt under section 501(c) except s	ection 5	01(c)	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function act	ıvıtıes 🕨	\$		
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5	27			
	exempt funtion activities	>	\$		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	7b ►	\$		
4	Did the filing organization file Form 1120-POL for this year?		Ψ_	┌ Yes	┌ No
5	State the names, addresses and employer identification number (EIN) of all section 527 political	-			

were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18					
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f					
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,			000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,000,000				
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

		(a)		(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo		
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
e	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV	Yes		659	
j	Total lines 1c through 1i			659	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
Ь	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		ļ		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	·	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		
	political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i

Also, complete this part for any additional information

Dues, assessments and similar amounts from members

Ident if ier	Return Reference	Explanation
Pt II-B Line 1:		MERCER ISLAND HIGH SCHOOL PTSA 2 9 50 SPENT \$659
		TO SUPPORT A LOCAL LEVY FOR

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93492313018380

TY 2009 Grants and Similar Amounts Paid Schedule

Name: MERCER ISLAND HIGH SCHOOL PTSA 2950

EIN: 91-1253853

Item No.	1
Class of Activity	STUDENT/TEACHER ENRICHMENT
Donee's Name	MECER ISLAND HIGH SCHOOL
Donee's Address	9100 SE 42ND STREET MERCER ISLAND, WA 98040
Amount (FMV)	37,425
Purpose of Payment to Affiliate	STUDENT/TEACHER ENRICHMENT
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	2
Class of Activity	SCHOLARSHIP
Donee's Name	STEVE ROWE
Donee's Address	
Amount (FMV)	450
Purpose of Payment to Affiliate	STUDENT/TEACHER ENRICHMENT
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	3
Class of Activity	SCHOLARSHIP
Donee's Name	DAVID KUHN
Donee's Address	
Amount (FMV)	450
Purpose of Payment to Affiliate	STUDENT/TEACHER ENRICHMENT
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	4
Class of Activity	SCHOLARSHIP
Donee's Name	EMMA THOMSON
Donee's Address	
Amount (FMV)	450
Purpose of Payment to Affiliate	STUDENT/TEACHER ENRICHMENT
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	
How BV Determined How FMV Determined	

Item No.	5
Class of Activity	SCHOLARSHIP
Donee's Name	CHARLES JORDAN
Donee's Address	
Amount (FMV)	450
Purpose of Payment to Affiliate	STUDENT/TEACHER ENRICHMENT
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	6
Class of Activity	SCHOLARSHIP
Donee's Name	JACKSON SCALZO
Donee's Address	
Amount (FMV)	450
Purpose of Payment to Affiliate	STUDENT/TEACHER ENRICHMENT
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	7
Class of Activity	DONATION
Donee's Name	MERCER ISLAND PTA COUNCIL
Donee's Address	2003 65TH AVE WEST TACOMA, WA 98466
Amount (FMV)	200
Purpose of Payment to Affiliate	STUDENT/TEACHER ENRICHMENT
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	8			
Class of Activity	DONATION			
Donee's Name	MERCER ISLAND YOUTH AND FAMILY SERVICES			
Donee's Address	2040 80TH AVE SE MERCER ISLAND, WA 98040			
Amount (FMV)	500			
Purpose of Payment to Affiliate	STUDENT/TEACHER ENRICHMENT			
Relationship	NONE			
Description				
Book Value				
How BV Determined				
How FMV Determined				
Date of Gift				

Item No.	9			
Class of Activity	PARENT EDUCATION			
Donee's Name	PROACTIVE COACHING LLC			
Donee's Address	3699 S EAST CAMANO DRIVE CAMANO ISLAND, WA 98282			
Amount (FMV)	750			
Purpose of Payment to Affiliate	PARENT INVOLVEMENT AND COMMUNICATION			
Relationship	NONE			
Description				
Book Value				
How BV Determined				
How FMV Determined				
Date of Gift				

Item No.	10			
Class of Activity	PARENT EDUCATION			
Donee's Name	DR JOHN RATEY			
Donee's Address				
Amount (FMV)	1,750			
Purpose of Payment to Affiliate	PARENT INVOLVEMENT AND COMMUNICATION			
Relationship				
Description				
Book Value				
How BV Determined				
How FMV Determined				
Date of Gift				

Item No.	11			
Class of Activity	PARENTS PEER GROUP			
Donee's Name	SUE BENNETT			
Donee's Address				
Amount (FMV)	900			
Purpose of Payment to Affiliate	PARENT INVOLVEMENT AND COMMUNICATION			
Relationship				
Description				
Book Value				
How BV Determined				
How FMV Determined				
Date of Gift				

TY 2009 Other Expenses Schedule

Name: MERCER ISLAND HIGH SCHOOL PTSA 2950

EIN: 91-1253853

Description	
OFFICE EXPENSE	80
STUDENT/TEACHER ENRICHMENT EXPENSE	68,331
PARENT INVOLVEMENT AND COMMUNICATION EXPENSES	5,345
STATE PTA MEMBERSHIP DUES	8,287
MISCELLANEOUS	7
INSURANCE	455
AWARDS	360
PTA LEGISLATIVE EXPENDITURES	659

Additional Data

Software ID: Software Version:

EIN: 91-1253853

Name: MERCER ISLAND HIGH SCHOOL PTSA 2950

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
BETH PICARDO 4721 FOREST AVE SE MERCER ISLAND, WA 98040	PRESIDENT 5 00	0		
TOBY SUHM 7819 SE 22ND PLACE MERCER ISLAND, WA 98040	PRESIDENT ELECT 5 00	0		
CHERYL ROODMAN 9231 SE 46TH ST MERCER ISLAND, WA 98040	CO-VICE PRES 2 00	0		
JILL SEIDEL 6012 SE 32ND PLACE MERCER ISLAND, WA 98040	CO-VICE PRES 2 00	0		
LIZ BUTO WICZ 9335 SE 68TH ST MERCER ISLAND, WA 98040	CO-VICE PRES 2 00	0		
CLAUDIA ROBBS 9250 SE 33RD PLACE MERCER ISLAND, WA 98040	VP-ADVOCACY 2 00	0		
JUDY CHASE 4476 FOREST AVE SE MERCER ISLAND, WA 98040	SECRETARY 2 00	0		
DARBY YOUNG 4116 85TH AVE SE MERCER ISLAND, WA 98040	TREASURER 8 00	0		
LESLIE FERREL 6290 W MERCER WAY MERCER ISLAND, WA 98040	SR PARTY TREASURER 2 00	0		