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# 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Form 990 (2010)

Department of the Treasury Internal Revenue Service

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

►The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

For the 2010 calendar year, or tax year beginning 7/1/2010 and ending 6/30/2011 Name of organization D Employer Identification number LAMAR HIGH SCHOOL STUDENT ACTIVITIES COR Check if applicable Address change Doing Business As 75-2492683 Number and street (or P O box if mail is not delivered to street address) Name change E Telephone number Initial return JAMES L LIVESAY 1105 W Lamar Blvd, Ste 103 Terminated City or town, state or country, and ZiP + 4 76012 G Gross receipts \$ Amended return ARLINGTON 375,196 Name and address of principal officer Application pending H(a) Is this a group return for affiliates? Maureen Dondero, President % James Livesay, 1105 W Lamar Blvd, S H(b) Are all affiliates included? If "No," attach a list (see instructions) X 501(c)(3) 501(c) 4947(a)(1) or Tax-exempt status ) (insert no) Website: ▶ H(c) Group exemption number ▶ X Corporation K Form of organization Trust Association Other > L Year of formation 1985 M State of legal domicile TX Summarv Part I Briefly describe the organization's mission or most significant activities. To support youth sports at Lamar High School, Arlington, TX Provide facilities and support for 1,428 students involved in various sports and other activities from publications and other volunteer fund raising activities Provide equipment, awards, field maint., spirit support, training, uniforms, BELLINIZO MAR 0 8 Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b). 4 18 Total number of individuals employed in calendar year 2010 (Part V, line 2a). 5 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12. 7a Net unrelated business taxable income from Form 990-T, line 34 **Current Year** Contributions and grants (Part VIII, line 1h). 36,853 32,497 9 Program service revenue (Part VIII, line 2g) 419 13 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d). 272,622 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 300,850 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 309.894 333,360 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). Benefits paid to or for members (Part IX, column (A), line 4) 14 Salaries, other compensation, employee benefits (Part 1X-column (A), lines 5-10) 15 Professional fundraising fees (Part IX column (A) (line 11e) 16a Total fundraising expenses (Part⊕X, column (D), line 25) ▶ 🤤 XXXXXX b Other expenses (Part IX, column; (A), lines 13-11001116-240 339,537 327,532 17 327,532 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 339,537 Revenue less expenses Subtract line-18-from line-12--29,643 19 5,828 "JUNGILLIEM **Beginning of Current Year** End of Year Total assets (Part X, line 16) 177,490 183,318 20 21 Total liabilities (Part X. line 26). 177,490 22 Net assets or fund balances. Subtract line 21 from line 20 183,318 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sian Signature of office Here Type or print name and title Print/Type preparer's name Date PTIN Check X Paid self-employed 2/14/2012 JAMES L LIVESAY, CPA Preparer's Firm's name ► JAMES L LIVESAY,CP Firm's EIN **Use Only** Firm's address ► 1105 WEST LAMAR BLVD, ARLINGTON, TX 76012 Phone no 817/461-3211 X Yes May the IRS discuss this return with the preparer shown above? (see instructions) No

For Paperwork Reduction Act Notice, see the separate instructions.

(HTA)

#### Form 990 (2010) LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP 75-2492683 Checklist of Required Schedules No Yes 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions). 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . . . . . . 4 Х Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 5 Х 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes." complete Schedule D. Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III . 8 Х Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," 9 Did the organization, directly or through a related organization, hold assets in term, permanent, or If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more Х c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more Х 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Χ the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes." complete Schedule D. Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII Χ 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes." and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional. 12b Х Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.... 13 14a Did the organization maintain an office, employees, or agents outside of the United States? **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance Х to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Х 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

**b** If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note**. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)

20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

Х

Form	990 (2010) LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP	5-2492683	F	age 4
Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		1	ŀ
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<b> </b>	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J.	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			l
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			ł
	24b through 24d and complete Schedule K. If "No," go to line 25	. 24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .	. 24b	ļ	X
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			ĺ
	to defease any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization 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			l
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee,			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part	// . <u>26</u>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			١.,
	If "Yes," complete Schedule L, Part III	. 27	`	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	. ***		T.
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)		<u>*</u>	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	<u>28a</u>		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	00-		
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	29	<u></u> -	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		l
•	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31	İ	"
20	Part I	31	-	X
32	If "Yes," complete Schedule N, Part II	32		x
22	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<del>  ^</del>
33	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	- 55	<del>                                     </del>	<del>  ^</del>
34	III, IV, and V, line 1	. 34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
	Did the organization receive any payment from or engage in any transaction with a	-	_	Ĥ
a	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	Part V, line 2	No		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			1
JŪ	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			Ť
51	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	1//	37		Ιx

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.

Form 990 (2010) LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			X
-			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	]		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<b></b> _
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		_X_
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			İ
	account)?	4a		x
b	If "Yes," enter the name of the foreign country.	74		<del>  ^-</del>
-	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			2 4
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).	ľ		3 -
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	45		اخكا
	and services provided to the payor?	7a		<u> </u>
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<del> </del>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			v
a	required to file Form 8282?	7c	· 0%:	X
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	13.83	. 323	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			¥ 9 9
	organization, have excess business holdings at any time during the year?	8		Χ
9	Sponsoring organizations maintaining donor advised funds.	< 3,4	<u>**</u>	<u> </u>
а	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			*
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter.  Gross income from members or shareholders			ľ
a	Gross income from other sources (Do not net amounts due or paid to other sources	1		
b	against amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			<del>                                     </del>
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	900	(0017)
		rom	<b>コゴリ</b> (	(2010)

Part VI. Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

•	Check if Schedule O contains a response to any question in this Part VI			X
Soot			<u> </u>	<u> </u>
Sect	ion A. Governing Body and Management		Yes	No
40	Enter the number of voting members of the governing body at the end of the tax year . 18		168	NO
1a b	Enter the number of voting members included in line 1a, above, who are independent.  1b 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		X
2	Did the organization delegate control over management duties customarily performed by or under the direct			^
3	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		$\hat{\mathbf{x}}$
4		5		$\hat{\mathbf{x}}$
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		$\frac{\hat{x}}{x}$
70	Does the organization have members or stockholders?	0	$\vdash$	
7a		7-		v
_	of the governing body?	7a 7b		X
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	70		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following.			l
a	The governing body?	8a		X
b	Each committee with authority to act on behalf of the governing body? .	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			v
<del></del>	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	1	<u> </u>
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	Jue.)	Vac	Na
40-	Don't have a second a bound of the state of	40-	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		<u> </u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	405		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		<u> </u>
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	44-		_
	form?	11a		<u>X</u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	420		<u>.:</u>
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13.	12a		
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	406		v
	rise to conflicts?	12b		<u> </u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40-	1	
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		<del></del>
14	Does the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45		
a	The organization's CEO, Executive Director, or top management official	15a		<u>_x</u> _
þ	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	40-		
_	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	466		
	the organization's exempt status with respect to such arrangements?	16b		<u></u>
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► TX	 b.v		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s on	ıy <i>)</i>		
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interes	it		
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	•		
	organization: ▶ James Livesay,CPA 817-461-321	1		
	1105 W Lamar Blvd, Arlington, TX 76012			

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
	Employees, and Independent Contractors	
	Check if Schedule O contains a response to any question in this Part VII	
<u>-</u>		 

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

  List persons in the following order. Individual trustees or directors; institutional trustees, officers, key employees; highest compensated employees, and former such persons.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A)	(B)	(C) (D)							(E) (F)			
Name and Title	Name and Title  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)				a Key employee			Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations		
(1) Maureen Dondero Pres	10											
(2) Becky Berry VP	10.											
(3) Andy Berry Sec/Treas	10.											
(4)												
(5)												
(6)		_										
(7)												
(8)												
(9)												
(10)												
(11)												
(12)										-		
(13)												
(14)												
(15)												
(16)												

P	Section A. Officers, Directors, Ti	rustees, Key Er	nploy	yee	s, a	nd	High	est	Compensated	Employe	es (coi	ntinue	(d)	
	(A)	(B) (C) Average Position (check all that ap							(D)	(E)	,   , ,			
	Name and title	Average hours per week (describe hours for related organizations in Schedule O)	or director				Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	ompensation compens from from reli the organization (W-2/1099		com fr orga	timated nount of other pensatio om the anizatio direlated inization	f on on d
(17)														
(18)														
<u>(19)</u>												•		
(20)														
(21)							:							
(22)														
(23)														
(24)														
(25)														
(26)														
(27)														
(28)														
1b c d	Sub-total	Section A						<b>→ →</b>						
2	Total number of individuals (including but not reportable compensation from the organizatio	limited to those	listed	d ab	ove	e) w	ho re	ceiv	ved more than \$	100,000 ir	1			
3	Did the organization list any <b>former</b> officer, di employee on line 1a? <i>If</i> "Yes," complete Sche	rector or trustee				yee	, or h	ighe	est compensate	d		3	Yes	No X
4	For any individual listed on line 1a, is the sum the organization and related organizations greated individual.	of reportable coeater than \$150,	ompe ,000?	ensa ? <i>If "</i> 	atior 'Yes	n an s, " c	nd oth compl 	er o	compensation fr Schedule J for a	om s <i>uch</i> · ·		4		X
5	Did any person listed on line 1a receive or act for services rendered to the organization? If "	crue compensat Yes," complete	tion fr Sche	rom dule	any	y un for s	relate such j	ed o	organization or i	ndividual 		5_		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest comp compensation from the organization.	pensated indepe	ender	nt co	ontra	acto	ors the	at r	eceived more th	an \$100,0	00 of			
	(A) Name and business add	tress							(B) Description of se	vices	С	(C) ompen		
	NONE													
												_		
2	Total number of independent contractors (inc		nited	to 1	hos	e li	sted a	abo	ve) who receive	d	i.	**		

Form **990** (2010)

Part	t VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
grants	1a	Federated campaigns	1a				
tributions, gifts, grants other similar amounts	b	Membership dues	<b>1b</b> 32,497				
S, S	С	Fundraising events	1c				
gifts, lar am	d	Related organizations	1d				
S, E	е	Government grants (contributions)	1e				
ioi	f	All other contributions, gifts, grants, and			*		
but E		similar amounts not included above	1f				
i o		Noncash contributions included in lines 1a-1f.	S				
Contributions, and other simi	h	Total. Add lines 1a-1f		32,497			
			Business Code	92,107			
žuč	2a						
Ş6V6	b		-				
93	ء ا						
Ž	يّ ا	•					
u Si	٦	•••••					
Program Service Revenue		All other program service revenue	} <del></del>				
ē.		Total. Add lines 2a–2f	<b></b>		<b>V.</b>	· 7000	9. 1
	3 4 5	Investment income (including dividends, interestment income (including dividends, interestment similar amounts)  Income from investment of tax-exempt bond Royalties	▶	13			
		(i) Reai	(II) Personal	74 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10 TO 10	K/ \$ 32	· Allers	<b>*\$</b>
	6a	Gross Rents	· · · · · · · · · · · · · · · · · · ·			N N	
	ь	Less: rental expenses		7.	·		\$ 4
	c	Rental income or (loss) .		,	<b>}.</b>	4,	
	d	Net rental income or (loss)					
	7a	Gross amount from sales of (i) Securite	<del>· · · · · · · · · · · · · · · · · · · </del>	1 September 1 -	3 % 3		S 8 8 8 8 8 8 8 8
	'a	assets other than inventory .	(1) 01101	28			
	ь	Less. cost or other basis		1		2,3%	
	"	and sales expenses		ŕ	Ĭ.		
	_			A S. A		,	
	C	Gain or (loss)					<u> </u>
m	d	Net gain or (loss)		***		*744	, ,
Other Revenue	8a	Gross income from fundraising	1		Ì		f *
Ş		events (not including \$		<u>.</u>			
æ		of contributions reported on line 1c).		*	51/A		* 255 + SE
Ē		See Part IV, line 18	a	,#*	\$ 2 <sup>3</sup> 5 <b>%</b>	400	<u> </u>
8	b	Less. direct expenses .	b	ļf 1	*		\$ <u>}                                   </u>
	С	Net income or (loss) from fundraising events	s. <u> ▶</u>		·		
	9a	Gross income from gaming activities. See Part IV, line 19.	a				
	١ ,	Less: direct expenses	b		;	.4	
		Net income or (loss) from gaming activities					
	I						<del></del>
	10a	Gross sales of inventory, less	40.750				
	١.	returns and allowances	a 43,750	1 1			
			b 41,836				
	<u> </u>	Net income or (loss) from sales of inventory		1,914	, y	14 W.	
	44	Miscellaneous Revenue	Business Code	E4 040	E4 040		
		Program Advertising, Program Sales,	_ <del>                                    </del>	54,842	54,842 149,007		
		Fund Raising Events, Admission Ticket Sale		148,907	148,907		
	I .	Food/drink concession, Meal reimburse, Oth	·	95,187	95,187		
	d	All other revenue	L	600.000			<del> </del>
	е	Total. Add lines 11a–11d		298,936			<del> </del>
	112	Total revenue. See instructions	. •	333,360	298,936		I

75-2492683

**Statement of Functional Expenses** 

#### LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (A) (D) Do not include amounts reported on lines 6b. Fundraising Total expenses Program service Management and 7b. 8b. 9b. and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . Grants and other assistance to governments. organizations, and individuals outside the U.S. See Part IV, lines 15 and 16. 5 Compensation of current officers, directors, Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)... Other salaries and wages . . . . 7 Pension plan contributions (include section 401(k) 8 and section 403(b) employer contributions). 9 Other employee benefits . . . . . . . . . . . . . 10 Payroll taxes . . . . 11 Fees for services (non-employees): Management . . . . а b Legal . . Accounting . . C Lobbying . . d Professional fundraising services See Part IV, line 17... e f Other . . . . . . . a 12 Advertising and promotion 13 Office expenses . . Information technology . . . . 14 Royalties . . . . 15 16 Occupancy Travel . 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 19 Conferences, conventions, and meetings. 20 21 Payments to affiliates . . . . 22 Depreciation, depletion, and amortization . . . . 23 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) 24.023 24.023 Printing & Publications 4,978 4,978 b Administrative expenses 38.095 38,095 c Fundraising expenses 260,436 260,436 d Program Services All other expenses 327,532 4,978 284,459 38,095 25 Total functional expenses. Add lines 1 through 24f. Joint costs. Check here ▶ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

75-2492683

2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D b Less. accumulated depreciation. 10b 10c 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Intangible assets 16 Accounts receivable, net 17 18 January descriptions 18 January descriptions 19 January descriptions 10 January descriptions 11 January descriptions 11 January descriptions 11 January descriptions 12 January descriptions 13 January descriptions 14 January descriptions 15 Other assets. See Part IV, line 11 16 January descriptions 17 January descriptions 18 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 2 January descriptions 3 January descriptions 3 January descriptions 3 January descriptions 3 January descriptions 3 January descriptions 3 January descriptions 3 January descriptions 3 January descriptions 3 January descriptions 3 January descrip	ear 183,318
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12   Investments—other securities. See Part IV, line 11   13   14   15   15   15   15   16   17   16   17   17   18   19   19   19   19   19   19   19	
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21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties 24 25 26 27 28 29 29 29 29 29 29 29 29 29 29 29 29 29	
Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	
23 Secured mortgages and notes payable to unrelated third parties 23	
23 Secured mortgages and notes payable to unrelated third parties 23	
23 Secured mortgages and notes payable to unrelated third parties 23	
24 Unsecured notes and loans payable to unrelated third parties . 24	
25 Other liabilities Complete Part X of Schedule D	
26 Total liabilities. Add lines 17 through 25	
Organizations that follow SFAS 117, check here ► X and	
complete lines 27 through 29, and lines 33 and 34.	
27 Unrestricted net assets	183,318
28 Temporarily restricted net assets	
P 29 Permanently restricted net assets	
Organizations that do not follow SFAS 117, check here ▶	7 "
complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117, check here and complete lines 30 through 34.  Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds  Total net assets or fund balances	r .
30 Capital stock or trust principal, or current funds	
31 Paid-in or capital surplus, or land, building, or equipment fund	
32 Retained earnings, endowment, accumulated income, or other funds	
33 Total net assets or fund balances	183,318
	183,318

Form	990 (2010) LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP	75-2492	683	Pa	ge <b>12</b>
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		333	3,360
2		2			7,532
3		3			5,828
4	·	4			7,490
5		5	_		.,
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
-		6		183	3,318
Part	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
		-		Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other			-	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		, , ,		,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	[	2a		X
b	Were the organization's financial statements audited by an independent accountant?	. [	2b		Х
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	f			
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .	. L	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in		Ų		1.9,3
	Schedule O.		c	4 19	: 4
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		•	1.2	7
	issued on a separate basis, consolidated basis, or both:		13 E 25	Lagina's	
	Separate basis Consolidated basis Both consolidated and separate basis		,		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		manifest of ma	- a	] # . <del>***</del> ** ** * * * * * * * * * * * * * *
	the Single Audit Act and OMB Circular A-133?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	Γ			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	<u> </u>	
			Form	990	(2010)

### **SCHEDULE A** (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Complete If the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Inspection Employer identification number

				TIVITIES CORP			<del></del> ,		<u> </u>		92683		
Pai				arity Status (All org						struction	IS		
	organ			ation because it is: (Fo									
1	$\square$	•		ches, or association o			ed in sec	tion 170(	(b)(1)(A)(i	).			
2	Ц			on 170(b)(1)(A)(ii). (At									
3	닏	•	•	ospital service organiz									
4	Ш		search organiza me, city, and sta	ition operated in conju ate.	nction wit	h a hospi	tal descril	oed in se	ction 170	(b)(1)(A)	(iii). En	ter the	
5		•	•	the benefit of a collect (Complete Part II)	ge or univ	ersity owr	ned or ope	erated by	a govern	mental ur	nit desc	ribed	
6		A federal, sta	ate, or local gove	ernment or governmer	ntal unit d	escribed i	n section	170(b)(	1)(A)(v).				
7		•		y receives a substantia (1)(A)(vi). (Complete F	•	its suppor	t from a g	overnme	ntal unit o	or from the	e gene	ral pub	lic
8		A community	trust described	in section 170(b)(1)(	<b>A)(vi)</b> . (C	omplete F	Part II)						
9	X	receipts from support from	n activities relate gross investme	y receives. (1) more the ed to its exempt function ent income and unrelate after June 30, 1975.	ons—subj ted busine	ect to cer ess taxabl	tain exce <sub>l</sub> e income	otions, an (less sec	nd (2) no r ction 511 t	nore than	33 1/3	% of it	
10		An organizat	ion organized a	nd operated exclusive	ly to test f	for public	safety. Se	ee <b>sect</b> io	n 509(a)(	4).			
11		purposes of	one or more put	nd operated exclusive plicly supported organ at describes the type o	zations d	escribed i	in section	509(a)(1	) or section	on 509(a)	(2). Se		on
		а 🔲 Туре	1 b 🗌	Type II c	Туре	III–Fund	tionally in	tegrated		d 🔲 T	ype III	-Othe	r
е		persons other		y that the organization on managers and othe 2).									ion
f				a written determinatior	n from the	IRS that	ıt ıs a Typ	e I, Type	II, ог Тур	e III supp	orting		_
		-	, check this box								•		
g		•		the organization acce	pted any s	gift or con	tribution 1	rom any	of the				
		following per		or indirectly controls,	either alor	ne or tode	ther with	nersons (	described	ın (iı)		Yes	No
				erning body of the su				persons v		()	11g(i)		
				person described in (i)							11g(ii)		
			•	y of a person describe		(ii) above	? .				11g(iii)		
h				ation about the suppor									
(f)		and disapported   (iii) type or organization   (iv) to the disapported   (iv) to the disapported   (iv) to the disapported					) Amoun support						
					Yes	No	Yes	No	Yes	No			
(A)													
(B)									_				
(C)													
(D)	_												
(E)													
						ing (Time	3 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	; , , , , , , , , , , , , , , , , , , ,					

Schedule A (Form 990 or 990-EZ) 2010 LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP Page 2 Part II . Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.) **Section A. Public Support** (a) 2006 (e) 2010 Calendar year (or fiscal year beginning in) **(b)** 2007 (c) 2008(d) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants"). . . 2 Tax revenues levied 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 Total. Add lines 1 through 3 . . . . The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) . . . . Public support. Subtract line 5 from line 4 Section B. Total Support (a) 2006 (c) 2008 (d) 2009 (e) 2010 (f) Total Calendar year (or fiscal year beginning in) (b) 2007 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . . . Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV). 11 Total support. Add lines 7 through 10. 12 Gross receipts from related activities, etc. (see instructions). 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here . . . . Section C. Computation of Public Support Percentage Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)). 14 15 Public support percentage from 2009 Schedule A, Part II, line 14. 15 33 1/3% support test-2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

· ou	and stop here. The organization qualifies as a publicly supported organization
b	33 1/3% support test-2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
17a	10%-facts-and-circumstances test-2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.
b	10%-facts-and-circumstances test–2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

### Part III . Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.) If the organization fails to qualify under the tests listed below, please complete Part II.)

Seci	tion A. Public Support			<u> </u>	,		
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	37,280			36,853		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	280,058	293,555		273,041	300,863	1,410,099
3	Gross receipts from activities that are not an unrelated trade or business under section 513	333,633					
4	Tax revenues levied for the 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 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	317,338	329,567	295,564	309,894	333,360	1,585,723
	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						
8 C	Add lines 7a and 7b  Public support (Subtract line 7c from line 6)	3.					1,585,723
Sec	tion B. Total Support	***************************************	100 100 100 100 100 100 100 100 100 100	<u> </u>	26.5 AX 50.6 (V)		1,000,120
	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	317,338	329,567	295,564	309,894	333,360	1,585,723
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	317,330	329,307	250,004	303,034	333,300	1,000,720
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С 11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	317,338					1,585,723
14	First five years. If the Form 990 is for the organization, check this box and stop here	ation's first, seco	nd, third, fourth,	or fifth tax year a	s a section 501(	c)(3) 	▶□
Sec	tion C. Computation of Public Support						
15	Public support percentage for 2010 (line 8, column		e 13, column (f))	1		15	100 00%
16	Public support percentage from 2009 Schedule A,					16	100 00%
	tion D. Computation of Investment Inco			(0)	<del></del>	47	
17	Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))				18		
18	Investment income percentage from 2009 Schedule A, Part III, line 17  33 1/3% support tests-2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is					<del></del>	
19a	not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization					<b>▶</b> X	
b	33 1/3% support tests—2009. 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					- ©	
							₹
20	Private foundation. If the organization did not che	eck a box on line	14, 19a, or 19b,	check this box a	nd see instructio	ns	▶ ∟_

Schedule A (Form	1 990 or 980-EZ) 2010 LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP	75-2492683	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations requ	ured by Part II, line	10;
	Part II, line 17a or 17b; and Part III, line 12 Also complete this part for any additionstructions).	ional information. (S	iee
•••••••			
			••••
		•••••	

#### SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

OMB No 1545-0047

2010

Open to Public Inspection

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. ▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions.

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

- 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

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• S	ection 501(c)(4), (5), or (6) or	rganizations Complete Part III					
Nam	e of organization			E	Employer id	entification n	umber
LAM	LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP 75-2492683						
Pa		he organization is exempt und				anization.	
1	·	he organization's direct and ındirect					
2	Political expenditures						
3	Volunteer hours .						
Pa	rt I-B Complete if t	he organization is exempt und	er section 501(	c)(3).			
1	Enter the amount of any	excise tax incurred by the organizati	ion under section	4955	▶ \$		
2	Enter the amount of any	excise tax incurred by organization i	managers under s	ection 4955	▶ \$		
3	If the organization incurre	ed a section 4955 tax, did it file Forn	n 4720 for this yea	ar?		Yes	☐ No
4a	Was a correction made?					Yes	☐ No
þ	If "Yes," describe in Part	IV.					
Pa	rt I-C Complete if t	he organization is exempt und	er section 501(	c), except section	on 501(c)(	(3).	
1	Enter the amount directly	expended by the filing organization	for section 527 e	xempt function			
	activities				▶ \$	· • • • • • • • • • • • • • • • • • • •	
2		filing organization's funds contribute					
	•				· <b>&gt;</b> \$		
3	•	penditures. Add lines 1 and 2 Enter		n 1120-POL,			
					· ▶ \$	· · · · <del>· · · ·</del> · · · · ·	
4		n file Form 1120-POL for this year?				Yes	∐ No
5		ses and employer identification num					
		ents For each organization listed, e intributions received that were prom					
	as a separate segregated	d fund or a political action committee	e (PAC) If additio	nal space is neede	ed, provide	information in	n Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid filing organizatio		(e) Amount of contributions red	•
				funds If none, ente	er -0-	promptly and	
						delivered to a political organi	
						none, ente	r -0-
(1)							
<del>'''</del>				<u> </u>			
(2)							
(3)							
(4)				···		··	
(5)							
<del></del>						·	··
(6)					1		

301	edule 0 (1 0111 930 01 930-EX) 20 10					raye &
Р	art II-A Complete if the organiz under section 501(h)).	ation is exempt	under section 5	01(c)(3) and filed	i Form 5768 (ele	ction
— A	Check ▶ if the filing organization	n helongs to an a	ffiliated group		· · ·	
В	Check ▶ If the filing organization			rol" provisions an	inly	
<del>-</del>	<del></del>			ioi piovioiono ap	<del></del>	4.1.4
	(The term "expenditure:	Lobbying Expendi		1	(a) Filing organization's totals	(b) Affiliated group totals
4-	Total lobbying expenditures to influence					
1a	Total lobbying expenditures to influence					<del>_</del> -
b	Total lobbying expenditures (add lines					
d	Other exempt purpose expenditures.					
e	Total exempt purpose expenditures (a			•		_
f	Lobbying nontaxable amount Enter th			noth		
•	columns	ic amount nom the	lonowing table in t	, ou ,		
1	If the amount on line 1e, column (a) or (b	) is: The lobbyin	g nontaxable amou	nt is:	* / : · · · · · · · · · · · · · · · · · ·	41 m
	Not over \$500,000	<del></del>	mount on line 1e			3
	Over \$500,000 but not over \$1,000,000		us 15% of the excess	over \$500,000		· Bright Mar
	Over \$1,000,000 but not over \$1,500,000		us 10% of the excess			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	us 5% of the excess	over \$1,500,000_		
	Over \$17,000,000	\$1,000,000				The state of the s
g	Grassroots nontaxable amount (enter	25% of line 1f) .				
h	Subtract line 1g from line 1a If zero o					
i	i Subtract line 1f from line 1c If zero or less, enter -0-					
j	If there is an amount other than zero	on either line 1h or l	line 1i, did the orga	anization file Form 4	1720 reporting	<b>_</b>
	section 4911 tax for this year?		•	•		Yes No
	(Some organizations the	4-Year Averaging at made a section elow. See the instr	Period Under Se 501(h) election d uctions for lines 2	o not have to com	plete all of the five	•
_	Lob	bying Expenditure	es During 4-Year	Averaging Period	T	
	Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	( <b>d)</b> 2010	(e) Total
2a	Lobbying nontaxable amount					
_b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount			<u> </u>		
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

Par	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	tiled	Forn	1 5768	i	
		(2	1)		(b)	
		Yes	No	A	mount	t
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?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	-	_			
C	Media advertisements?			1		
d	Mailings to members, legislators, or the public?		ľ			
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total. Add lines 1c through 11	گئستند	دُمُّنت			
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			Ψ.	·	- 33
	If "Yes," enter the amount of any tax incurred under section 4912	* *	,			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	2 25	انت	*.,		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1		> % / /	sì,	٠.
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	(C)(5),	or se	ction		
					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_	لــــــا	
	Complete if the organization is exempt under section 501(c)(4), section 501 (c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible 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		1 1 2			
	lobbying and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
	IV Supplemental Information					
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, complete this part for any additional information	and P	art II-E	I, line 1	l <b>i</b>	

LAMA	R HIGH SCHOOL STUDENT ACTIVITIES CORP	75-2492683
	m 990 or 990-EZ) 2010	Page <b>4</b>
Part IV	Supplemental Information (continued)	
•		
		••••

### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection
Employer Identification number

LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP	75-2492683
Form 990 Part VI Line 11 Return is reviewed and signed by officer of organization	
Form 990 Part V Line 19 Upon request	

Schedule O (Form 990 or 990-EZ) (2010)	Page <b>2</b>
Name of the organization	Employer identification number
LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP	75-2492683
•	
•	