

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047 2011 Open to Public

Ā	For the	2011 calendar year, or tax year beginning $06/01/11$, and ending $05/31/1$.2							
В	Check if at	O Name of accounts	_	D Employ	yer identification number					
$\tilde{\Box}$	Address cl									
\exists		Doing Business As		62-	1864995					
닏	Name cha	Number and street (or P O box if mail is not delivered to street address)	Room/suite		one number					
	Initial retur	9755 WOLF RIVER BLVD		901	218-9453					
	Terminate									
$\overline{\sqcap}$	Amended	return GERMANTOWN TN 38139		G Gross rece	eipts\$ 292,218					
\exists		F Name and address of principal officer	1	G Gloss lead						
Ш	Application	pending	H(a) Is this a g	roup return for a	affiliates? Yes X No					
			H(b) Are all af	filiates include	d? Yes No					
					(see instructions)					
-	Tay ayaa	ppt status	7							
<u>+</u>	Tax-exen Website.	THE TAXABLE COL	H(a) Crows an	omation averb	N					
<u>, , , , , , , , , , , , , , , , , , , </u>			H(c) Group ex	emption numb						
	Form of or	ganization X Corporation Trust Association Other ► L Y Summary	ear of formation	1	M State of legal domicile					
<u>F</u>	1									
2	1 E	Inefly describe the organization's mission or most significant activities SEE SCHEDULE O								
ဦ		SEE SCREDULE O								
Ē										
Activities & Governance	1	No. 1 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1	0/ -5-44							
တိ		Check this box if the organization discontinued its operations or disposed of more than 25	% of its net ass	1 1	10					
ර	1	lumber of voting members of the governing body (Part VI, line 1a)		3	12					
ij		lumber of independent voting members of the governing body (Part VI, line 1b)		4	12					
<u>₹</u>		otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5						
₹ ₹		otal number of volunteers (estimate if necessary)		6	100					
3		otal unrelated business revenue from Part VIII, column (C), line 12		7a	0					
} —	Dr	let unrelated business taxable income from Form 990-T, line 34	Prior Yea	7b	Current Year					
)	8 0	Contributions and grants (Part VIII, line 1h)		7,663	28,620					
Revenue	9 F	Program service revenue (Part VIII, line 2g)		3,884	169,368					
N N	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		0	0					
å	11 0	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6	3,105	64,668					
		otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		9,652	262,656					
_	1	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0	0					
		enefits paid to or for members (Part-IX, column (A), line 4)		Ö						
ø	15 5	salaries, other compensation, employee penelits (Part IX, column (A), lines 5–10)		0	0					
enses	1 169	rntessional fundraising tees (Part IXTrollemo.(A) June 11e)	Sinnal fundraising tees (Part IXTrollemo-(A) June 11e)							
per	ьт	otal fundraising exgenses (Fart IX, column (D), life 25) ▶ 0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			0					
Exp	17 (Other expenses (PartiX, column (A) lines 11a-11d 11f-24e)	25:	2,880	256,599					
	18 7	otal expenses Add lines 13=17-(must-equal-Partix), column (A), line 25)		2,880	256,599					
		Revenue less expenses Subtract line 18 from line 12		5,772	6,057					
5	ß		Beginning of Cur	rent Year	End of Year					
Net Assets or	20 7	otal assets (Part X, line 16)	11:	1,388	117,445					
Z As	21 7	otal liabilities (Part X, line 26)		0	0					
ž	22 N	let assets or fund balances Subtract line 21 from line 20	11:	1,388	117,445					
F	art II	Signature Block								
		alties of perjury, I declare that I have examined this return, including accompanying schedules and stateme			owledge and belief, it is					
tr	ue, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer h	as any knowledg	e	<u> </u>					
		×								
Sig		Signature of officer		Date	1.1.					
He	ere	GREG CROSBY TREAST	JRER	4	1/3/6					
_		Type or print name and title								
D-1	ام!	Print/Type preparer's name Preparer's signature	Date	Check	If PTIN					
Pai		LEE E. HOOD	04/06	/13 self-em						
	parer	Firm's name WHITEHORN TANKERSTEY & DAVIS, PLLC	F	ırm's EIN	62-1039882					
US	e Only	670 OAKLEAF OFFICE LANE								
		Firm's address MEMPHIS, TN 38117-4811	P	hone no	901-767-5080					
_		S discuss this return with the preparer shown above? (see instructions)			X Yes No					
Fo:		work Reduction Act Notice, see the separate instructions.	41-	1	Form 990 (2011)					
			917-1	ď	1					
			\sim $^{\circ}$,						

	1990 (2011) HOUSTON HIGH SCHOOL BAND BOOSTERS 62-1864995		Р	age 3
Pa	art IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	- 1		
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	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
5	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,			
	Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	- <u>-</u> -		
	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	6		Х
7	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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	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,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			7.5
44	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	-	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			Ì
-	complete Schedule D, Part VI	11a		х
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	ļ		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	<u> </u>	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	ļ	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			۱
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	-	X
128	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	Ì '	
h	Schedule D, Parts XI, XII, and XIII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a	 -	X
•	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate		 	<u> </u>
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	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	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			l
4-	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	_16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	1		_•
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	 	X
10	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	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10	 ^ -	
	If "Yes," complete Schedule G, Part III	19	1	X
20a		20a		X

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20b

*******	990 (2011) HOUSTON HIGH SCHOOL BAND BOOSTERS 62-1864995		Р	age 4
_P	The Checklist of Required Schedules (continued)			r
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			.
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			٠,,
	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	i		
	employees? If "Yes," complete Schedule J	23	 	X
24a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			l <u></u>
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		_
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c	<u> </u>	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	İ	1	ا
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ļ	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			Ì
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		`	١
	If "Yes," complete Schedule L, Part I	25b	<u> </u>	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			l
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		<u> </u>	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? 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,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b	<u> </u>	X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		ļ	
	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_		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30_	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	_31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34	<u> </u>	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X

Did the organization receive any payment from or engage in any transaction with a controlled entity within the

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,

meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

related organization? If "Yes," complete Schedule R, Part V, line 2

19? Note. All Form 990 filers are required to complete Schedule O

X Form 990 (2011)

X

35a

35b

36

37

36

37

ra	t V Statements Regarding Other IRS Filings and Tax Compliance		
	Check if Schedule O contains a response to any question in this Part V		
	5	_ <u> </u>	s No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1a 10		
b C	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Lib 0 Did the organization comply with backup withholding rules for reportable payments to vendors and		
C	reportable gaming (gambling) winnings to prize winners?	1c	x
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 0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	
	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, secunties account, or other financial		
	account)?	4a	<u> </u>
b	If "Yes," enter the name of the foreign country:		
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		.
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	- ^
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	60	x
b	organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a	
	gifts were not tax deductible?	6ь	
7	Organizations that may receive deductible contributions under section 170(c).		_
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		
_	and services provided to the payor?	7a	ĺ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	1
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		
	required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
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	1 1	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		
_	organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	 -
4V	Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	9b	
10	Initiation fees and capital contributions included on Part VIII, line 12		
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	─ ┤	
11	Section 501(c)(12) organizations. Enter:		
	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources		1
	against amounts due or received from them.)		
12a	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		
13	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		 -
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
_Ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990 (2011)

Form 990 (2011) HOUSTON HIGH SCHOOL BAND BOOSTERS 62-1864995 Page 6 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 Section A. Governing Body and Management No Yes Enter the number of voting members of the governing body at the end of the tax year 12 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 12 Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 14 Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b 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 with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure TN 17 List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: GREGORY CROSBY P. O. BOX 381433

TN 38183

GERMANTOWN

(F)

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

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.

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

Name and Title Average Position Reportable Reportable Estimated compensation hours per (do not check more than one compensation from amount of box, unless person is both an from related other compensation (describe officer and a director/trustee) the organizations (W-2/1099-MISC) hours for organization from the Individual or director nstitutional trustee Highest (W-2/1099-MISC) related organization oloyee and related organizations employee in Schedule compensated organizations trustee 0) (1) CARRIE BOSWELL SECRETARY 2.00 X X 0 0 0 (2) LEE CARPENTER 2.00 X DIRECTOR 0 0 0 (3) GREG CROSBY 2.00 X TREASURER X 0 0 0 (4) MONTY CROSBY 2.00 X 0 0 DIRECTOR 0 (5) DAVID & CINDY KNOX X 2.00 X 0 0 PRESIDENT 0 (6) MICHELLE MOORE 2.00 X 0 0 DIRECTOR 0 (7) SPENCER NESVICK DIRECTOR 2.00 X 0 0 0 (8) KELLY O. RICHERT 2.00 DIR STUDENT ACCTS. X 0 0 0 (9) AMY SMITH DIRECTOR 2.00 X 0 0 0 (10) JIM SMITH 2.00 X 0 0 BAND DIRECTOR 0 (11) MICHELLE TAYLOR DIRECTOR 2.00 X 0 0 0 (12) KAREN WEESNER DIRECTOR 2.00 X 0 0 0 (13)

Form 990 (2011)

(14)

(A)

Pa	t VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	and Highest Compensated	Employees (continued)				
	(A) Name and title	(B) Average hours per week (describe hours for	bo	k, unte		rson ı	s both	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estima amoun othe compens	ted t of r ation	
		related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(N-2 1095-MISC)	ì	from the organization and relations organization	ition ated	
(15)														
(16)												-		
(17)						-								
(18)				<u>-</u>	-	-	 					.		
(19)														
(20)			-			_							_	
(21)														
(22)														
(23)								-			,			
(24)														
(25)													_	
1b c	Sub-total Total from continuation she	ote to Part VII 1	Soct	ion	^		•	>						
d_	Total (add lines 1b and 1c)	ets to Fait VII, t	Ject	1011 /				<u> </u>						
2	Total number of individuals (in reportable compensation from				thos	se lis	ted a	abov	ve) who received more than	\$100,000 in			_	
3	Did the organization list any fo								oloyee, or highest compens	ated			Yes	No
4	employee on line 1a? If "Yes," For any individual listed on lin organization and related organ	e 1a, is the sum	of re	port	able	com	npen	satio				3		<u>X</u>
5	individual Did any person listed on line 1	· ·						•	•			4		X
Sec	for services rendered to the or tion B. Independent Contract	rganization? If "\										5	[Х
1	Complete this table for your fi compensation from the organi	ve highest comp											-	
	Name and	(A) I business address								(B) phon of services	<u> </u>	Co	(C) mpensat	on
								<u> </u>						
							_	<u> </u>						
			_					1	- -					
	·													·····
2	Total number of independent received more than \$100,000	•		_					•	0				

rt V		nent of Reve		<u> CHOO</u>		BOOSIERS	02-1864995		Pag
			,			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1a	Federated car	npaigns	1a			,,			
b	Membership d	ues	_1b			,		,	
C	Fundraising e	ents/	1c				1		i i
	Related organ		1d				,	,	
	Government grants		1e			· ·	·		,
_	All other contribution	'					,	,	
•	and similar amounts	not included above	1f		28,620				*
_					20,020		,		
_	Noncash contributio		ा ३	\$.	20, 200	· · ·		
<u>_n</u>	Total. Add line	s 1a-11	-		P	28,620			
					Busn. Code	,			
2a	BAND CA	MP			<u> </u>	149,192	149,192		
b	SPRING '	TRIP				11,801	11,801		
C	ALL WES	F AND ALL ST	ATE		L	7,286	7,286		
d	WINTER	GUARD PROGRA	M			1,089	1,089		
е								· · · · · · · · · · · · · · · · · · ·	
f	All other progr	am service reve	nue					·	-
	Total. Add line				•	169,368		***************************************	
	Investment inc		dwidon	de intere		203/300	<u></u>	 	
•			uivideii	ius, iiileie	·St,				İ
	and other simi	•							
4		vestment of tax	-exem	pt bond p	roceeds P				
5	Royalties				•				
		(ı) Real		(n) F	Personal				
6a	Gross rents								
b	Less rental exps								
С	Rental inc or (loss)					1			
d	Net rental inco	me or (loss)	•	_	•	İ	Ī		
7a	Gross amount from	(i) Securities		(n)	Other		· · · · · · · · · · · · · · · · · · ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·
	sales of assets other than inventory			\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>		l			· /
h	Less cost or other					1	1		
U									
	basis & sales exps								
	Gain or (loss)	-							
d	Net gain or (lo	•	_		<u> </u>				
8a	Gross income fro	m fundraising eve	nts			1			
	(not including \$					l			4
	of contributions r	eported on line 1c)	1				,		
	See Part IV, line	18	a		50,091	į	1		
ь	Less. direct ex	penses	ьГ		29,562		1		
С	Net income or	(loss) from fund	raising	events	•	20,529			İ
	Gross income fro			0.0					n
-	See Part IV, line				·	İ	1		
L	Less direct ex		a			1	1		
			ь[ŀ	1		
	Net income or		ing act	tivities	P	- , ,,,,,	131-77		
10a	Gross sales of	=							
	returns and all		a						
b	Less. cost of g	oods sold	ь				1		
С	Net income or	(loss) from sale	s of inv	entory	•		Ī		
		ellaneous Revenue			Busn Code			······································	
11a	FOOTBALL	CONCESSION				31,082	†		31,0
b		S TRIP FEES				5,795			
c	STUDENT A				 	3,566	· · · · · · · · · · · · · · · · · · ·		5,7
	All other reven				 				3,50
					L	3,696			3,69
е 12	Total. Add line	s 11a–11d . See instructior				44,139 262,656		······································	
	LOTAL POMOBILO	See instruction					169,368		0 44,13

Part IX Statement of Functional Expenses

Form 990 (2011)

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).

	Check if Schedule O contains a response	e to any question in this Par	rt IX		
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and			•	,
_	organizations in the U.S. See Part IV, line 21	·		······································	·
2	Grants and other assistance to individuals in			<i>t</i> • •	
_	the U.S. See Part IV, line 22				***************************************
3	Grants and other assistance to governments,]			
	organizations, and individuals outside the		İ		ĺ (
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				ļ
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal	1 450	1 450		
C	Accounting	1,450	1,450		<u> </u>
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	0 156	0.156		ļ
13	Office expenses	2,156	2,156		
14	Information technology				
15	Royalties		_		
16	Occupancy	40 074	40 054		
17	Travel	42,974	42,974		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	410	410		
19		410	410		
20	Interest			<u> </u>	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2 620	2 (2)		
23	Insurance	2,628	2,628		
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)	FA 010	EÁ 010	:	<u> </u>
a	EQUIPMENT PURCHASES	54,019	54,019		
b	INSTRUCTION FEES	46,479	46,479		
C	FOOTBALL CONCESSIONS	16,292	16,292		
ď	BANDWEAR COSTS	12,418	12,418		
e 25	All other expenses	77,773	77,773		
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	256,599	256,599	0	0
20	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

		(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing		1	117,445
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			,
	employees, and highest compensated employees. Complete Part II of			
ļ	Schedule L	1	5	
6	Receivables from other disqualified persons (as defined under section			- , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
1	employers and sponsoring organizations of section 501(c)(9) voluntary	!		
σ.	employees' beneficiary organizations (see instructions)	1	6	
Assets	Notes and loans receivable, net		7	
8 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
1 -	Land, buildings, and equipment cost or			
	other basis. Complete Part VI of Schedule D	, [
ь	Less: accumulated depreciation 10b		10c	
11	Investments—publicly traded securities		11	
12	Investments—other securities See Part IV, line 11		12	
13	Investments—program-related. See Part IV, line 11		13	
14	Intangible assets		14	-
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	111,388	16	117,445
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	·
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
l	Payables to current and former officers, directors, trustees, key			
Liabilities	employees, highest compensated employees, and disqualified persons.	1		
ig	Complete Part II of Schedule L	1 :	22	
⊐ ₂₃			23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X	1	1	
	of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0	26	0
	Organizations that follow SFAS 117, check here ▶X and complete			
8	lines 27 through 29, and lines 33 and 34.	1		
E 27	Unrestricted net assets	111,388	27	117,445
Balances 27 28	Temporarily restricted net assets		28	
일 29	Permanently restricted net assets		29	
교	Organizations that do not follow SFAS 117, check here ▶ and			
٥	complete lines 30 through 34.			
Assets or Fund 30 31	Capital stock or trust principal, or current funds	[30	
8 31	Paid-in or capital surplus, or land, building, or equipment fund		31	~
ğ 32	Retained earnings, endowment, accumulated income, or other funds		32	
2 33	Total net assets or fund balances		33	117,445
34	Total liabilities and net assets/fund balances	111,388	34	117,445

orm	1 990 (2011) HOUSTON HIGH SCHOOL BAND BOOSTERS 62-1864995			Pa	ge 12				
Pa	Reconciliation of Net Assets								
	Check if Schedule O contains a response to any question in this Part XI				\Box				
	Tatal and a second part of Day (A) (as a seco	1.1	2	- -	c E c				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>656</u> 599				
2	Total expenses (must equal Part IX, column (A), line 25)								
3	Revenue less expenses Subtract line 2 from line 1	3			057				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u> </u>	II,	<u> 388</u>				
5	Other changes in net assets or fund balances (explain in Schedule O)	5							
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,								
	column (B))	6	1	<u> 17, </u>	445				
Pa	Ht 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		Х				
b	Were the organization's financial statements audited by an independent accountant?		2b		X				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight								
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c						
	If the organization changed either its oversight process or selection process during the tax year, explain in		,, ,,						
	Schedule O.				1				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were								
	issued on a separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in								
va	the Single Audit Act and OMB Circular A-133?		3a		ľ				
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		Ja		\vdash				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b						
	Toquired addit of addits, explain why in Scriedule C and describe any steps taken to dideigo such addits			000	0 (2011)				
			For	m サゴリ	J (2011)				

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.

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

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

HOUSTON HIGH SCHOOL BAND BOOSTERS

Employer identification number 62 - 1864995

P _i	art I	Reaso	on for Public Charity	Status (All organizations	must co	mplete	this pa	rt.) Se	e inst	ruction	18.		
The	orga			e it is: (For lines 1 through 11, o									
1	\prod	A church, cor	nvention of churches, or asso	ociation of churches described i	n section	170(b)(1)(A)(i).						
2	\sqcap	A school des	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E)									
3	\prod	A hospital or	a cooperative hospital service	e organization described in sec	tion 170	b)(1)(A)(i	ii).						
4	Ħ	A medical res	search organization operated	in conjunction with a hospital of	described	in sectio	n 170(b)(1)(A)(ii	i). Ente	er the ho	ospital's name	€,	
		city, and state	e :								•		
5		An organizatı	on operated for the benefit o	f a college or university owned	or operate	ed by a go	overnme	ntal unit	descri	bed in			
	_	section 170(b)(1)(A)(iv). (Complete Part	II.)	•								
6	\Box	A federal, sta	ite, or local government or go	overnmental unit described in s	ection 17	0(b)(1)(A)(v).						
7	П		•	substantial part of its support fro				rom the	genera	l public			
		described in s	section 170(b)(1)(A)(vi). (Co	omplete Part II.)	•				-	·			
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part	: 11.)								
9	X	An organizati	on that normally receives: (1) more than 33 1/3% of its supp	ort from	contributio	ons, mei	mbershij	fees,	and gro	ss		
		_		pt functions—subject to certain									
	support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses												
	acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)												
10		An organizati	on organized and operated e	exclusively to test for public safe	ety See s	ection 50)9(a)(4).						
11		An organizati	on organized and operated e	exclusively for the benefit of, to	perform th	ne functio	ns of, or	to carry	out the	е			
		purposes of c	one or more publicly supporte	ed organizations described in se	ection 509	(a)(1) or	section	509(a)(2). See :	section	1		
		509(a)(3). Ch	eck the box that describes the	ne type of supporting organizati	on and co	mplete lir	nes 11e	through	11h				
	a Type I b Type II c Type III—Functionally integrated d Type III—Other												
e		By checking t	this box, I certify that the orga	anization is not controlled direc	tly or ındır	ectly by c	ne or m	ore disq	ualified	person	s		
		other than for	undation managers and othe	r than one or more publicly sup	ported or	ganızatıor	is descr	ıbed in s	ection	509(a)(1	1)		
		or section 50	9(a)(2)										
f		If the organiz	ation received a written dete	rmination from the IRS that it is	a Type I,	Type II, o	or Type	III suppo	rting				
		organization,	check this box										
g		Since August	t 17, 2006, has the organizat	ion accepted any gift or contrib	ution from	any of th	ie						
		following per	sons?										
		(i) A persor	n who directly or indirectly co	ntrols, either alone or together	with perso	ons descr	ıbed ın (ıı) and				Yes	No
		(iII) belov	w, the governing body of the	supported organization?							11g(i)	↓	<u> </u>
			member of a person describ	• • • • • • • • • • • • • • • • • • • •							11g(ii)	—	<u> </u>
		• •	controlled entity of a person of	., .,							11g(iii)	<u>L_</u> _
<u>h</u>		Provide the t	following information about the	ne supported organization(s)	т								
(-	e of supported	(ii) EIN	(iii) Type of organization	1 ' '	organization		ou notify	(vi) organizat	is the	(vii) Am		
	Ori	ganization		(described on lines 1–9 above or IRC section		sted in your document?		of your	(i) organı	zed in the	Supp	on	
				(see Instructions))	<u> </u>			port?	<u> </u>	S?			
					Yes	No	Yes	No	Yes	No			
(A)					1	<u> </u>		1	l				
(B)	_				┼	 			-				
(P)					İ								
(C)					1				<u> </u>		<u> </u>		
						<u> </u>							
(D)													
(E)					†	<u> </u>		<u> </u>					
			<u> </u>		 	 -	<u> </u>	ļ	ļ				
Tota	a I												
100	21		L,	L	<u></u>	1	ŧ	<u> </u>	ŧ	<u></u>	l		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

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.)

Sec	Holl A. Public Support							
Caler	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20°	11	(f) Total
1	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							
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 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)	,						
6	Public support. Subtract line 5 from line 4	11111111111					*******	
Sec	tion B. Total Support				_			
Caler	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20°	11	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	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	L	<u> </u>	<u> </u>	<u> </u>	<u> </u>		
12	Gross receipts from related activities, etc.						12	
13	First five years. If the Form 990 is for the	_	st, second, third, fo	ourth, or fifth tax ye	ear as a section 50	1(c)(3)		
5-6	organization, check this box and stop her tion C. Computation of Public St		toge.					<u> </u>
				- (0)			144	
14	Public support percentage for 2011 (line 6	• • •	•	nn (t))			14	
15	Public support percentage from 2010 Sch 33 1/3% support test—2011. If the organ			12 and line 14 io	22 1/29/ or mare	ahaali thia	15	%_
16a	box and stop here. The organization gual				33 1/3% of more,	CHECK THIS		▶ □
ь	33 1/3% support test—2010. If the organ				15 is 33 1/3% or n	nore		
•	check this box and stop here. The organi			•	10 13 30 1/0 /0 01 11	1010,		▶ □
17a		•		•	l6a. or 16b. and lin	e 14 is		
	10% or more, and if the organization mee	•		•	•			
	Part IV how the organization meets the "fa				-			
	organization			•		•		▶ [
b	10%-facts-and-circumstances test—20	10. If the organiza	tion did not check	a box on line 13, 1	16a, 16b, or 17a, a	nd line		<u></u>
	15 is 10% or more, and if the organization	meets the "facts-	and-circumstance	s" test, check this	box and stop here).		
	Explain in Part IV how the organization me	eets the "facts-and	d-circumstances" t	est. The organizat	uon qualifies as a p	ublicly		
	supported organization							▶ □
18	Private foundation. If the organization di	d not check a box	on line 13, 16a, 10	6b, 17a, or 17b, ch	neck this box and s	ee		
	instructions							▶ [

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.)

Sec	tion A. Public Support	· - · · · · · · · · · · · · · · · · · ·					
	ndar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any *unusual grants *)	42,473	49,055	38,091	37,663	28,620	195,902
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	149,899	243,776	161,277	224,887	219,459	999,298
3	Gross receipts from activities that are not an unrelated trade or business under section 513			28,293	38,973	44,139	111,405
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	Total. Add lines 1 through 5	192,372	292,831	227,661	301,523	292,218	1,306,605
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	42,473	49,055	38,091	37,663	28,620	195,902
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 7a and 7b	42,473	49,055	38,091	37,663	28,620	195,902
8	Public support (Subtract line 7c from line 6)						1,110,703
	ction B. Total Support			, 			
	ndar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	192,372	292,831	227,661	301,523	292,218	1,306,605
10a	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						
С	Add lines 10a and 10b						
11	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.)	192,372	292,831	·	301,523	292,218	1,306,605
14	First five years. If the Form 990 is for the	•	t, second, third, fo	urth, or fifth tax yea	er as a section 501	(c)(3)	
Sac	organization, check this box and stop her ction C. Computation of Public Su		lage				
15	Public support percentage for 2011 (line 8			n (f))		15	05 01 %
16	Public support percentage for 2011 (line of Public support percentage from 2010 Sch	* *	-	''' (' <i>'))</i>		16	85.01% 85.79%
_	ction D. Computation of Investme						65./9/0
17	Investment income percentage for 2011 (I			column (f))		17	
18	Investment income percentage from 2010			(1)		18	%
19a				e 14, and line 15 is	more than 33 1/39		-
b	17 is not more than 33 1/3%, check this b	ox and stop here.	The organization	qualifies as a public	cly supported orga	nızation	► X
-	line 18 is not more than 33 1/3% check th						▶ [

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

20

Schedule A (Form 990 or 990-EZ) 2011 HOUSTON HIGH SCHOOL BAND BOOSTERS 62-1864995

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

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

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

OMB No 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization

Part I

HOUSTON HIGH SCHOOL BAND BOOSTERS

Employer identification number 62-1864995

	Form 990-EZ mers are not required	o complete this	part		- · · · · · · · · · · · · · · · · · · ·		
1	Indicate whether the organization raised funds through	any of the following	activ	ities	Check all that apply		
а	Mail solicitations	e Solicitation	of no	n-gove	ernment grants		
b	Internet and email solicitations	f Solicitation	of gov	vemm	ent grants		
С	Phone solicitations	g Special fun	draisii	ng eve	ents		
d	In-person solicitations						
	Did the organization have a written or oral agreement w or key employees listed in Form 990, Part VII) or entity If "Yes," list the ten highest paid individuals or entities (compensated at least \$5,000 by the organization.	in connection with	profes int to a	siona agree	al fundraising services	?	Yes No
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did raiser custo contri contrib	have dy or	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7			:				
8							
9							
10							
Tota	ı			•			
3	List all states in which the organization is registered or	licensed to solicit of	contrib	utions	s or has been notified	it is exempt from	

registration or licensing

******		vents. Complete if the orga		Form 990, Part IV, line	18, or reported
		,000 of fundraising event col oss receipts greater than \$5,		e on Form 990-EZ, line	s 1 and 6b. List
_	overlie with give	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
ē		BBQ FUNDRAISING (event type)	COOKIE DOUGH SA (event type)	1 (total number)	(add col (a) through
Revenue	Gross receipts Less: Chantable contributions	18,060	14,517	9,896	42,473
	3 Gross income (line 1 minus line 2)	18,060	14,517	9,896	42,473
	4 Cash prizes				
	5 Noncash prizes				
enses	6 Rent/facility costs				
Direct Expenses	7 Food and beverages				
٥	8 Entertainment				
	9 Other direct expenses	9,934	9,234	8,714	27,882
		. Add lines 4 through 9 in column (opmbine line 3, column (d), and line			(27,882) 14,591
P		plete if the organization answ on Form 990-EZ, line 6a.	wered "Yes" to Form 990, Pa	art IV, line 19, or report	ed more
Revenue	T	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1 Gross revenue				
uses	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
Dire	4 Rent/facility costs				
	5 Other direct expenses	Yes %	Yes %	Yes %	
	6 Volunteer labor	No No	No		
		 Add lines 2 through 5 in column (mary. Combine line 1, column d, ar 		•	()
	Enter the state(s) in which th	e organization operates gaming ac o operate gaming activities in each	tivities.		9a 🗍 Yes 🧻 No

11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity			
	formed to administer chantable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity operated in:			
а	The organization's facility	13a		%
b	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and			
	records:			
	Name ▶			
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming			
	revenue?		Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	and the		
	amount of gaming revenue retained by the third party ▶ \$			
С	If "Yes," enter name and address of the third party:			
	Name ▶			
	Address ▶			
16	Gaming manager information:			
	Name ▶			
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or			
****	spent in the organization's own exempt activities during the tax year ▶ \$			
Par				
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as appli	cable. Also complete	e this	
	part to provide any additional information (see instructions).		· <u></u>	

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

2011 Open to Public Inspection

OMB No 1545-0047

Name of the organization

HOUSTON HIGH SCHOOL BAND BOOSTERS

Employer identification number 62-1864995

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

TO HELP PROMOTE BETTER BAND, SCHOOL AND COMMUNITY SPIRIT, TO STIMULATE

STUDENT AND COMMUNITY INTEREST IN APPRECIATION AND SUPPORT OF THE SCHOOL

MUSIC PROGRAMS, AND TO HELP ENSURE THAT THE INSTRUMENTAL MUSIC DEPARTMENT

MAINTAINS THE HIGHEST POSSIBLE DEGREE OF EFFICIENCY.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

HHSBB HAS 250 BAND MEMBERS AND THE LARGEST ACTIVITIES WE SUPPORT ARE THE

MARCHING BAND, CONCERT BAND, WINTER GUARD, AND INDOOR DRUM-LINE.

FORM 990, PART VI, LINE 8B - DOCUMENTATION BY COMMITTEE EXPLANATION UPON REQUEST

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 REVIEWED BY THE TREASURER AND PRESENTED TO THE PRESIDENT AND BOARD FOR DISCUSSION.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY SIGNED DISCLOSURE STATEMENTS ARE REQUIRED EACH YEAR.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION UPON REQUEST.

FORM 990, PART IX, LINE 24E - OTHER EXPENSES

DESCRIPTION AMOUNT

Name of the organization HOUSTON HIGH SCHOOL BA	AND BOOS	TERS	Employer identification number 62-1864995
PROGRAM EXPENSE	\$	11,203	
BAND CAMP	\$	9,067	
UNIFORMS	\$	8,035	
AWARDS AND GIFTS	\$	6,806	
OTHER EXPENSES	\$	6,400	
OTHER EXPENSES	\$	6,083	
MUSIC ARRANGEMENTS	\$	4,319	
COMPETITION FEES	\$	4,070	
UNIFORM MAINTENANCE	\$	3,986	
REPAIRS & MAINTENANCE	\$	3,609	
BAND DIRECTOR GIFT	\$	3,450	
GENERAL BAND	\$	3,184	
INSTRUMENT PURCHASES	\$	2,949	
TRACTOR EXPENSE	\$	1,631	
OTHER EXPENSES	\$	1,210	
SCHOLARSHIPS	\$	1,000	
AUDITION JUDGING	\$	600	
WEB-SITE	\$	150	
BANK CHARGES	\$	21	

	CHEDULE G	F	undraising Other Eve	ents	 	;
	Form 990 or 990-EZ)	For colondary and 2044 and town and	06/01/	11	/21/10	2011
Nan		For calendar year 2011, or tax year	ir beginning 06/01/.	11 , and ending 05,	/31/12	ntification Number
н	OUSTON HIG	H SCHOOL BAND BOOS	TERS		62-1864	
		(a) Other event	(b) Other event	(c) Other event		
		MUSTANG MOOLA				l) Total other events add col (a) through
e e		(event type)	(event type)	(event type)		col (c))
Revenue	1 Gross receipts 2 Less: Chantable	9,896				9,896
	contributions 3 Gross income (line 1 minus line 2	9,896				9,896
	4 Cash prizes					
	5 Noncash prizes					
Sesu	6 Rent/facility cost	ts				
Direct Expenses	7 Food/beverages					
Direc	8 Entertainment					
	9 Other expenses	8,714				8,714

62-1864995	L L	ederal Statements	emen	ts			·
	Form 990, Pa	Form 990, Part IX, Line 24e - All Other Expenses	- All Ot	her Expenses			•
Description	Û	Total Expenses	П 97	Program Service	Management & General	Fund Raising	
EXPEN P ND GI PENSE PENSE ION F ION F ECTOR ECTOR BAND NY PUI EXPEN HIPS	w.	11,203 8,067 6,806 6,806 6,400 3,986 1,210 1,210 600 600	w.	11,203 8,0067 6,806 6,806 6,083 3,086 1,000 1,631 1,210 1,000	v	₩.	
WEB-SITE BANK CHARGES TOTAL	w 	150 21 77,773	w	150 21 77,773	\[\cdot \]	w w	