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DLN: 93493353002042

Form **990**

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)

2011

OMB No 1545-0047

Open to Public Inspection

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

A Fo	r the 2	2011 ca	lendar year, or tax year beginning 07-01	-2011 and ending 06-30-201	2			
		pplicable	C Name of organization Naperville North High School Booster Club			D Employer	identification number	
☐ Add	dress ch	ange	•			36-3029		
┌ Na	me char	nge	Doing Business As			E Telephone		
┌ Init	tıal retur	rn	Number and street (or P O box if mail is not o	delivered to street address) Room/su	ıte .	(630)378		
Г Те	rmınated	d	899 N Mill			G Gross receip	ots \$ 296,689	
┌ Am	nended r	return	City or town, state or country, and ZIP + 4		_			
Гар	plication	pending	Naperville, IL 60563					
			F Name and address of principal of	ficer	H(a) Ic th	c a group rot	urn for	
			Patrick McCue		affilia	s a group ret tes?	urn for	
			899 N Mill Naperville,IL 60563					
			Mapertinic,12 coses			l affiliates incl	uded? Yes No st (see instructions)	
I Ta	ıx-exem	pt status	▼ 501(c)(3)	☐ 4947(a)(1) or ☐ 527		p exemption		
J W	ebsite	:⊨ ww	w nnhsboosters org		11(0)	,		
K For	m of ord	anızatıon	Corporation Trust Association Other	r ►	L Year of fo	rmation 1979	M State of legal domicile IL	
	rt I		mary					
			escribe the organization's mission or mo	st significant activities				
			ort competetive, school-approved athlet					
<u>≥</u>	-							
<u> </u>	-							
₹	2 7	Check th	nis box 🛏 if the organization discontinu	ed its operations or disposed o	of more than 2	5% of its net	assets	
ŝ			of voting members of the governing body			3 % 01 113 1160	1	
Activities & Governance			of independent voting members of the go			_		
ĕ			mber of individuals employed in calendar			5		
\$			mber of volunteers (estimate if necessar			6		
¥c			related business revenue from Part VIII		7a			
			lated business taxable income from Forr		71:			
	 			<u> </u>	Prio	r Year	Current Year	
	8	Contri	butions and grants (Part VIII, line 1h)		1	22,320		
활	9		m service revenue (Part VIII, line 2g)		83,692			
Reven	10	_	ment income (Part VIII, column (A), line			520	719	
æ	11		revenue (Part VIII, column (A), lines 5,			104,294	92,871	
	12		revenue—add lines 8 through 11 (must e		e		527512	
	ļ		<u> </u>			210,826	206,087	
	13	Grants	s and similar amounts paid (Part IX, colu	mn (A), lines 1-3)		4,000	4,000	
	14		ts paid to or for members (Part IX, colun			0	0	
Ø	15	Saları 5–10	es, other compensation, employee benef	its (Part IX, column (A), lines		0		
Expenses	16a		sional fundraising fees (Part IX, column	(A), line 11e)		0	0	
¥	Ь		ndraising expenses (Part IX, column (D), line 25)					
ш	17		expenses (Part IX, column (A), lines 11			184,098	173,893	
	18		expenses Add lines 13-17 (must equal			188,098		
	19		ue less expenses Subtract line 18 from			22,728		
Net Assets or Fund Balances						of Current ear	End of Year	
age g	20	Total	assets (Part X, line 16)		<u>'</u>	152,856	181,050	
ZAS dB	21		iabilities (Part X, line 26)					
a E	22		sets or fund balances Subtract line 21			152,856		
Pai	t III		ature Block			,		
Unde know	r penal	ties of p	erjury, I declare that I have examined this re f, it is true, correct, and complete. Declarat					
	ledge.							
	ledge.	****	**		20	12-11-28		
Sigr			** ature of officer			12-11-28 ate		
Sigr Her	1	Signa Pam	ature of officer Hynes Treasurer					
_	1	Signa Pam	ature of officer					
_	1	Signa Pam	Hynes Treasurer or print name and title		Da Check if	Preparer's tax	spayer identification number	
_	1	Signa Pam Type	Hynes Treasurer or print name and title	2012-11-28	Da Check If self-	ate		
Her Paid	n e	Pam Type Preparer signatur	Hynes Treasurer or print name and title Ys Hugh J Ahern CPA	2012-11-28	Da Check if	Preparer's tax		
Her Paid	n e arer's	Pam Type Preparer signatur Firm's nor	Hynes Treasurer or print name and title 's Hugh J Ahern CPA ame (or yours Desmond & Ahern Ltd inployed),	2012-11-28	Da Check If self-	Preparer's tax	ons)	
Paid Preparent	n e arer's	Pam Type Preparer signatur Firm's nor	Hynes Treasurer or print name and title 's Hugh J Ahern CPA The Company of the C	2012-11-28	Da Check If self-	Preparer's tax (see instruction P00010788	ons)	

May the IRS discuss this return with the preparer shown above? (see instructions)

	, ,				
Par		ent of Program Servic Schedule O contains a respo		Part III	
1	Briefly describe	the organization's mission			
Supp and a	ort students of Na activities and thei	aperville North High School t r support groups, and to con	through its funding, recogniti tribute to facilities and/or ac	on and appreciation of competeti tivities that benefit the student b	ve, school-approved athletic ody at large
2	_	tion undertake any significai 90 or 990-EZ?		he year which were not listed on	┌ Yes ┌ No
	If "Yes," describ	e these new services on Sch	edule O		
3	_	tion cease conducting, or ma		· · · · · · · · · · · · · · · · · · ·	┌ Yes ┌ No
	If "Yes," describ	e these changes on Schedul	e O		
4	expenses Section	on 501(c)(3) and 501(c)(4)	organizations and section 4:	of its three largest program servic 947(a)(1) trusts are required to r for each program service reporte	eport the amount of
4a	(Code) (Expenses \$	170,729 including grants	of \$) (Revenue \$	84,144)
				wities including but not limited to basketl band, chess, dance, cheerleading, pep o	
4b	(Code) (Expenses \$	4,000 including grants	of \$ 4,000) (Revenue \$,))
	Scholarships - teac year ended 6/30/1		scholarships based on leadership,	citizenship and school spirit Eight \$500 s	scholarships were awarded in the
4c	(Code) (Expenses \$	ıncludıng grants o	of \$) (Revenue \$)
	Other program	services (Describe in Sche	dule O)		
	(Expenses \$	· ·	ding grants of \$) (Revenue \$)
4e	Total program s	service expenses►\$	174.729		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	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		Νo
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		Νο
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a		No
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		No
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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		N o
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI , XII , and $XIII$	12a		No
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	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	17		No
18	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		No
19	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	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

1 01111	990 (2011)			Page •
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
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 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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? If "Yes," complete Schedule L, Part III	27		No
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			i
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		Νo
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line $2 \cdot \cdot \cdot$.	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
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	38	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	· · · · · · · ·			
_	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c		
а	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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 or securities	40		
	account)?	4a		Νo
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			
3	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νo
_	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	. .		NI -
	file Form 8282?	7c		Νo
a	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	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	, 9		
•	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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		
_	Sponsoring organizations maintaining donor advised funds.	0-		
	Did the organization make any taxable distributions under section 4966?	9a 9b		
D D	Did the organization make a distribution to a donor, donor advisor, or related person?	90		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
_	facilities			
L	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources 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]			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	12=		
_	allocated to each state	13a		
b	Enter the aggregate 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 aggregate amount of reserves on hand			
_	13c			
l a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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

Se	ection A. Governing Body and Management					
		_	_	Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax					
Ia	year	28				
b	Enter the number of voting members included in line 1a, above, who are independent	28				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with a other officer, director, trustee, or key employee?	any 2	<u>,</u>	Yes		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	. 3	3		No	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			No	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	5		Νo	
6	Did the organization have members or stockholders?	. 6	,		Νo	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint on more members of the governing body?	e or 7	a		No	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockhol or persons other than the governing body?	ders, 7	b		No	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	ıe				
а	The governing body?	. 8	а	Yes		
b	Each committee with authority to act on behalf of the governing body?	8	b	Yes		
9	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					
	ection B. Policies (This Section B requests information about policies not required by the Inter	nal				
Re	evenue Code.)			v	NI-	
100	Did the organization have local chapters, branches, or affiliates?	10	\dashv	Yes	No No	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,)a		NO	
U	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10	ь			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before the form?	filing 11	la	Yes		
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12	2a		Νo	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	ve 12	2b			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," design Schedule O how this was done	scribe 12	2c			
13	Did the organization have a written whistleblower policy?	. 1	3		Νo	
14	Did the organization have a written document retention and destruction policy?	. 1	4		Νo	
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 decis	ıon?				
а	The organization's CEO, Executive Director, or top management official	. 15	ā		Νo	
b	Other officers or key employees of the organization	. 15	5b		No	
	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 w taxable entity during the year?		ia		No	
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?		5b			
Se	ection C. Disclosure		-			
17	List the States with which a copy of this Form 990 is required to be filed►IL					
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply	(c)				

☐ O wn website ☐ A nother's website ☑ U pon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 Pam Hynes

899 N Mill

Naperville, IL 60563 (630)420-6480

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees**, and Independent Contractors

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, and current key employees 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, or 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

V	heck this box if neither the organiza	ition nor any re	ated organizations compensa	ted any current or f	ormer officer, direct	tor, or trustee
	(A)	(B)	(C)	(D)	(E)	(F)

(A) Name and Title	(B) Average hours per week (describe hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		11250)	organizations
(1) Patrick McCue President	2 00	х		х				0	0	0
(2) Kelly Duffey-Bassett Co-Vice President	2 00	Х		Х				0	0	0
(3) Jeff Bassett Co-Vice President	2 00	х		х				0	0	0
(4) Heidi Hookstadt Secretary	2 00	х		Х				0	0	0
(5) Pam Hynes Treasurer	2 00	х		Х				0	0	0
(6) Al Hahne Past Presient	1 00	х						0	0	0
(7) Anna Fattore Board member	1 00	Х						0	0	0
(8) Laura Cap Board member	1 00	х						0	0	0
(9) Tonı Robinson Board member	1 00	х						0	0	0
(10) Lou Bruscianelli Board member	1 00	х						0	0	0
(11) Jeff Harris Board member	1 00	х						0	0	0
(12) Keith Brown Board member	1 00	х						0	0	0
(13) Dave Carlson Board member	1 00	х						0	0	0
(14) Eileen Rico Board member	1 00	х						0	0	0
(15) Lori Morris Board member	1 00	х						0	0	0
(16) Gail Purpura Board member	1 00	х						0	0	0
(17) Karen Moreton Board member	1 00	х						0	0	0
	ı									Form 990 (2011)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title		(describe director/trustee)								(D) ortable ensation m the ration (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estima amount o compens from t organizati	ited fother sation the on and
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relati organiza	
	Debbie Kolberg member	1 00	x							1	o l	0		0
٠,	andy Higgins member	1 00	х							ı	D .	0		0
	onna Prybell member	1 00	х							ı	D .	0		0
	ındy Antonellı member	1 00	х								o l	0		0
	ulie Lomax member	1 00	х									0		0
(23) k	Karen Falkadon member	1 00	х							(0		0
(24) L	aura McDonnel member	1 00	х									0		0
(25) 1	erese Surgis member	1 00	х									0		0
(26) F	at Piekos	1 00	х							(0		0
(27) k	member Im Zugay	1 00	X							ı	0	0		0
(28) J	member anet Grzesiak	1 00	X									0		0
Board	member	1 00	^								1	\dashv		
												+		
	Sub-Total							<u> </u> ▶				4		
1b c	Total from continuation sheets t	o Part VII, Sec			<u> </u>	<u> </u>		<u>-</u>				+		
d								P		0		0		0
2	Total number of individuals (inclusion) \$100,000 of reportable compens					ted	above) who	o receive	d more th	an			
3	Did the organization list any form	ner officer, direc	tor or t	ruste	e, k	ey e	mploy	ee, c	or highes	t compen:	sated employee		Yes	No
	on line 1a? If "Yes," complete Sch					•	•	•				3		No
4	For any individual listed on line 1 organization and related organization individual											4		No
5	Did any person listed on line 1a is services rendered to the organization									anızatıon	or individual for •	5		No
Se	ction B. Independent Cont	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax yo	highest comper the organizatio												
		(A) ne and business ad	dress							Des	(B) cription of services		(C Comper	
			! '				LL	ايدا	J _ L					
	Total number of independent contr \$100,000 of compensation from t	•	-	ot III	nited	1 [0	ınose	ııste	u apove)	wno rece	ivea more than			

Form 9	•	,						Page 9
Part \	<u> </u>	Statement of	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
1‡3	1a	Federated cam	paigns 1a					
Contributions, gifts, grants and other similar amounts	Ь	Membership du	ıes 1b	22,325				
S, Ç	C	Fundraising ev	ents 1c					
<u>¥g</u> ⊭	d	Related organiz	zations 1d					
E, E	e	Government grant	rs (contributions) 1e					
tion sr s	f	All other contribution	ons, gifts, grants, and 1f	6,028				
ēž.	g		ibutions included in					
튵								
ပွဲခဲ့	h	Total. Add line	s 1 a - 1 f	· · · •	28,353			
<u> </u>				Business Code				
nue.	2a	Spiritwear		900099	59,618	59,618		
Æ	b	Spirit Signs		900099	16,520	16,520		
Program Service Revenue	c	Basketball tournan	nent	900099	8,006	8,006		
	d							
3	e							
Ž.	f	All other progra	am service revenue					
š	g	Total. Add lines	s 2a-2f		84,144			
	3		come (including dividen		·			
		and other sımıl	aramounts)	▶	719			719
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
	5	Royalties		▶				
	1_		(ı) Real	(II) Personal				
	6a	Gross rents Less rental						
	b	expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)	•				
	l_	C	(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other						
	Ь	than inventory Less cost or						
		other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (los	ss)	▶				
e n	8a	events (not inc	from fundraising Iluding					
Other Revenue			s reported on line 1c)					
ι. C			a	124,452				
₽ He	ь	Less direct ex	penses b					
δ	c	Net income or	(loss) from fundraising	events 🕨	62,812			62,812
	9a		from gaming activities ne 19 a					
	b		penses b					
	10a		(loss) from gaming acti	vities				
	104	returns and allo		59,021				
	ь	Less cost of g	oods sold b	28,962				
	С		(loss) from sales of inv	entory 🕨	30,059			30,059
		Miscellaneou	s Revenue	Business Code				
	11a							
	Ь							
	C							
	d		ue					
	e	Total. Add lines	s 11a-11d					
	12	Total revenue.	See Instructions .	▶	200.007	04 144	0	93,590
	1			1	206,087	84,144	U	1 93,390

Part IX Statement of Functional Expenses

combined educational campaign and fundraising solicitation

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 to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, 3 organizations, and individuals outside the United 4,000 4,000 States See Part IV, lines 15 and 16 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 10 Fees for services (non-employees) 11 Management Legal 1,461 1,461 Lobbying Professional fundraising See Part IV, line 17 . . Investment management fees g Advertising and promotion . . . 12 Office expenses 588 235 176 177 13 14 Information technology 15 Royalties . . 16 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials 19 Conferences, conventions, and meetings 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Other expenses Itemize expenses not covered above (List 24 miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) Student programs 91.825 91,825 41,144 41,144 Spiritwear Equipment & soft ball f 17,879 17,879 14,098 Spirit signs 14,098 d е All other expenses 6,898 5,548 1,350 25 Total functional expenses. Add lines 1 through 24f 177,893 174,729 1,637 1,527 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

Pa	ırt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		35,773	1	63,249
	2	Savings and temporary cash investments		117,083	2	117,801
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trustees, ke highest compensated employees Complete Part II of				
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section persons described in section $4958(c)(3)(B)$ Complete Part II of				
76		Schedule L			6	
Assets	7	Notes and loans receivable, net			7	
883	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a			
	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)		152,856	16	181,050
	17	Accounts payable and accrued expenses .			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
10	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				
ap		persons Complete Part II of Schedule L			22	
	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 (including federal income tax, payables to related to and other liabilities not included on lines 17-24) Complete Part X of D			25	
	26	Total liabilities. Add lines 17 through 25		0	26	0
		Organizations that follow SFAS 117, check here ▶	e lines 27			
У		through 29, and lines 33 and 34.				
G G	27	Unrestricted net assets		152,856	27	181,050
B3	28	Temporarily restricted net assets			28	
귤	29	Permanently restricted net assets			29	
or Fund Balance		Organizations that do not follow SFAS 117, check here ► ☐ and collines 30 through 34.	omplete			
	30	Capital stock or trust principal, or current funds			30	
sets	31	Paid-in or capital surplus, or land, building or equipment fund .			31	
AS	32	Retained earnings, endowment, accumulated income, or other funds			32	
Net	33	Total net assets or fund balances		152,856	33	181,050
_	34	Total liabilities and net assets/fund balances		152 856	34	181 050

	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		-	206,087
2	Total expenses (must equal Part IX, column (A), line 25)	2			177,893
3	Revenue less expenses Subtract line 2 from line 1	3			28,194
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		1	152,856
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	181,050
Pai	T XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b		No
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight or audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain Schedule O		2 c		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ıssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Naperville North High School Booster Club

Department of the Treasury Internal Revenue Service

h

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

Public Charity Status and Public Support

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

Employer identification number

Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its 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 organization organized and operated exclusively to test for public safety Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization,

check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (III) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support?	
		ınstructions))	Yes	No	Yes	No	Yes	No		
Total										

Schedule A (Form 990 or 990-EZ) 2011 Page 2 Part II Support Schedule for Organizations Described in IRC 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 Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) 1 Gifts, grants, contributions, and membership fees received (Do not 17,280 31,595 36,157 22,320 28,628 135,980 include any "unusual grants ") 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 17,280 31,595 36,157 22,320 28,628 135,980 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 Public Support. Subtract line 5 from 135,980 line 4 Section B. Total Support Calendar year (or fiscal year beginning (f) Total (a) 2007 **(b)** 2008 **(c)** 2009 (d) 2010 (e) 2011 in) 17,280 31,595 36,157 22,320 28,628 135,980 Amounts from line 4 Gross income from interest, dividends, payments received on 4,230 520 719 9,432 securities loans, rents, royalties 2,620 1,343 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets 11 Total support (Add lines 7 145,412 through 10) Gross receipts from related activities, etc (See instructions) 12 12 1,279,572 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, 13 check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f)) 14 14 93 510 % Public Support Percentage for 2010 Schedule A, Part II, line 14 15 **15** 90 020 % 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2010. If the organization did not check the 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 - 2011. 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—2010. 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 gualifies as a publicly

Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see

supported organization

instructions

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 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 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. 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

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

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

Schedule A (Form 990 or 990-EZ) 2011

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493353002042

OMB No 1545-0047

2011

Open to Public Inspection

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,
Department of the Treasury
Internal Revenue Service

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.

Name of the organization
Naperville North High School Booster Club

Employer identification number 36-3029113

						36-3029113	
Pa	rt I Fundraising Ac	tivities. Complete	e if the d	organizat	tion answered "Yes"	to Form 990, Part IV	, line 17.
1 a b c d	or key employees listed in	olicitations s a written or oral agre Form 990, Part VII st paid individuals or	ement wi or entity entities	e f g th any ind / in conne (fundraise	Solicitation of noi Solicitation of gov Special fundraisir Iividual (including office ction with professional ers) pursuant to agreem	n-government grants vernment grants ng events ers, directors, trustees fundraising services? ents under which the fur	
Tota	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
3	List all states in which the licensing	organization is regis	tered or	licensed t	o solicit funds or has be	I een notified it is exempt	I from registration or

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1 Huskie saver card (event type)	(b) Event #2 Golf Outing (event type)	(c) Other Events 2 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 2	Gross receipts Less Charitable contributions	55,052	40,978	25,557	121,587
<u></u>	3	Gross income (line 1 minus line 2)	55,052	40,978	25,557	121,587
	4	Cash prizes				
မှာ	5	Non-cash prizes		200		200
euse	6	Rent/facility costs				
Expenses	7	Food and beverages		8,985	9,299	18,284
Direct	8	Entertainment		10,248	100	10,348
ā	9	Other direct expenses .	31,581	. 510	513	32,604
	10	Direct expense summary Add line	es 4 through 9 ın column	(d)	🛌	(61,436)
	11	Net income summary Combine lir	nes 3 and 10 ın column (d)	•	60,151
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
s Seg	2	Cash prizes				
xpenses	3	Non-cash prizes				
ш	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	┌ Yes ┌ No	┌ Yes	│ Yes │ No	
	7	Direct expense summary Add lines	s 2 through 5 ın column (d)		()
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)	<u> ► </u>	
9 a b	Ist	er the state(s) in which the organiza the organization licensed to operate No," Explain	gaming activities in eac	h of these states?		
		re any of the organization's gaming l Yes," Explain	icenses revoked, susper	nded or terminated during	the tax year?	

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3			
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No			
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity					
	formed to administer charitable (gamıng?		· · · · F Yes F	- No			
13	Indicate the percentage of gamii	ag activity operated in		1 1				
a				13a				
b								
14		f the person who prepares the organiza						
	Name ►							
	Address ►							
	revenue?	ntract with a third party from whom the			- No			
		ed by the third party 🟲 \$						
С	If "Yes," enter name and address							
	Name 🟲							
	Address ►							
16	Gaming manager information							
	Name 🟲							
	Gaming manager compensation I	\$ \$						
	Description of services provided	>						
17 a		Employee er state law to make charitable distribu		· · ·	- No			
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent							
_		activities during the tax year > \$		hadala C /				
Par	t IV Complete this part to proceed instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see				
	Identifier	ReturnReference	Explana	tion				
		•	•					

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Inspection

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization
Naperville North High School Booster Club

Employer identification number

36-3029113

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section A, line 2	Jeff Bassett and Kelly Duffy-Bassett are Co-Vice Presidents and are husband and wife
	Form 990, Part VI, Section B, line 11	The 990 was initially reviewed by the Executive Board It was provided to the entire board via email prior to filing
	Form 990, Part VI, Section C, line 19	Governing documents and financial statements are available upon request

Additional Data

Software ID: Software Version:

EIN: 36-3029113

Name: Naperville North High School Booster Club

Form 990, Special Condition Description:

Special Condition Description