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Form **990**

Return of Organization Exempt From Income Tax

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection

<u>A</u>			endar year, or tax year b	eginning	7/1/:	20 <u>11</u>	, and ei	nding		<u>/2012</u>	
В	Check if ap	plicable	C Name of organization	LAMAR HIG	H SCHOOL S	STUDENT	ACTIVITIES	COR	D Employer i	identifi	cation number
	Address ch	ange	Doing Business As						75-2492683		
	Name char	nge	Number and street (or P C	box if mail is no	t delivered to stre	et address)	Room/suite		E Telephone		r
\equiv	Initial return	-	IAMEGIIIVEGAV	1105 \\/ 0	mar Dlud		103				
=	Terminated		JAMES L LIVESAY City or town, state or coun		IIIai bivu		1103				
=				uy, anu zn · +		TV	76012		G Gross rece	inte S	244.020
\equiv	Amended r		ARLINGTON			TX	76012				344,020
Ш	Application		F Name and address of prin	-					his a group retur		
			STAN LEWIECKI, Pre	<u>sident % Jan</u>	ies Livesay, 1	105 W La	<u>mar Blvd, Sl</u>	H(b) Are	all affiliates inc	luded?	X Yes No
1 7	Tax-exemp	t status	X 501(c)(3) 501(c)	() <	(insert no)	4947(a)(1)	or 527	If "	No," attach a list	(see i	nstructions)
	 Vebsite:	► NA		- ` ´ -				H(c) Cro	oup exemption n	umbor	_
									<u> </u>		
_	orm of org	anızatıon	X Corporation Tr	ust Associ	ation Other	•	L Yea	r of forma	ation 1985_	MS	tate of legal domicile TX
F	art i	Sur	nmary								
	1	Briefly d	escribe the organizatio	n's mission o	r most signific	cant activit	ies: To si	upport y	youth sports	at La	mar High
		-	Arlington, TX. Provide		_						
9	-		sports and other activit								
lan	, -		s. Provide equipment, a								
Activities & Governance	1 *										
Ś			nis box ▶ if the orga		•	•		ın 25% o	t its net assets	. 1	
હ			of voting members of							3	
jes	4	Number	of independent voting	members of	the governing	body (Par	t VI, line 1b))	[_4	18
₹	5	Total nu	mber of individuals em	ployed in cale	endar year 20	11 (Part V	, line 2a)		[5	0
Act			mber of volunteers (es	• •	•					6	600
~ ~			related business reven			(C) line 12			· · · ·	7a	0
2013	1		elated business taxable				• • •		' '	7b	0
4	 	vet unit	siated business taxable	income non	11 01111 990-1,	mic 54.	· · ·		Prior Year	'''	Current Year
ra		^ 4-ib.	diana and made (Dad	\//II : 4 \						407	
e 9			itions and grants (Part						32	,497	24,365
ق عم		_	n service revenue (Part						 -	_ 0	0
MAR 0 Revenue	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)							6			
≥ -	11	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . 300,850							269,840		
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . 33							333	,360	294,211	
Щ			and similar amounts pa							0	0
=	14	14 Benefits paid to or for members (Part IX, column (A), line 4)								0	0
	15	Salaries	other compensation, em	plovee benefit	(Part IX cou)	nn (A) lines	s 5–10)			0	0
38	16a	Drofacci	ional fundraising fees (Pat Marin	ner @AN line chi		00 10, .			 	
Ø §	100	Tatal f:::	descent command (De		(D) 1: 053	-	41 476	ar i	ARON A	.Sai - 1 - 1	
SCANNED Expenses	b	Total lui	ndraising expenses (Ra openses (Part IX, colum	nt IX, column	(D), line 29)		41,476	- **.			
	17	Other ex	kpenses (Part IX, colun		1a=11a-111	-24e)				,532	313,895
			penses. Add lines 13-			umn (A), lı	ne 25) .			,532	313,895
	19	Revenu	e less expenses. Subtr	act line 18 fro	om line 12		<u>.</u>			,828	-19,684
Assets or	5							Beginn	ing of Current	Year	End of Year
Beta	20	Total as	sets (Part X, line 16).						183	,318	163,634
8	21	Total lia	bilities (Part X, line 26)							0	0
ž	- 1		ets or fund balances. S	Subtract line 2	1 from line 20)			183	,318	163,634
	art II		nature Block							<u></u>	
			y, I declare that I have examin	ed this return in	cluding accompan	vina schedule	s and statemen	nts and to	the hest of my	knowle	dne
			ect, and complete Declaration								
			Mana	1.06.	1					27	
Sig	gn		- Cure	in the						<u>~</u>	.5 05
He	еге		Signature of officer	7 1.	<u>ا</u>				Date		
			1 Vac t	rescent	J					_	<u> </u>
			Type or print name and title				_//_				
_		Prin	t/Type preparer's name		Preparer's signa	ature	eq	Dat	e	r	Ţ , PTIN
Pa	id	1	AEO L LIVEOAN ORA		LANGE		(Area)			neck	_
Pr	eparer	JAN	MES L LIVESAY, CPA		JAMES L LI	ESAY, CF	~ <i>J</i>	2/	· • · · · · · · · · · · · · · · · · · ·	elf-empl	
	e Only	Firm	i's name ► JAMES L L	IVESAY,CPA					Firm's EIN	<u> 26-19</u>	950323
-	· · · · · · ·	Firm	n's address ► 1105 WES	T LAMAR BL	VD. ARLINGT	TON, TX 76	3012		Phone no	817/4	61-3211
N 4 -	w the ID										
IVIE	iy ine iR		ss this return with the p			e instruction	ліs) . —	•	<u> </u>		
East	- Dana		untion Ant Motion con th		.4						Form 990 (2011)

	90 (2011) LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP	75-2492683	Page 2
Pa	rt III Statement of Program Service Accomplishments		_
	Check if Schedule O contains a response to any question in this Part III		
1	Bnefly describe the organization's mission:		
	To support youth sports at Lamar High School, Arlington, TX. Provide facilities and support		
	for approximately 1400 students involved in various sports and other activities from		
	publications and other volunteer fund raising activities. Provided equipment, awards,		
	field maint., spirit support, training, uniforms, scholarships, and other support to		
2	Did the organization undertake any significant program services during the year which were not listed on		
-	the prior Form 990 or 990-EZ?		X No
	If "Yes," describe these new services on Schedule O.	163	<u> </u>
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	<u> </u>	
	services?	· · L Yes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program service		
	expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to re		f
	grants and allocations to others, the total expenses, and revenue, if any, for each program service report	ed.	
4a	(Code:) (Expenses \$ 266,471 including grants of \$ 0) (Revenue	ie \$ 264	.205)
	from publications and other volunteer fund raising activities Provide equipment, awards, field		
	maintenance, spirit support, training, uniforms, scholarships, and other support to maintain a		
	Cusesseful apart function at Lower High Cahael Adjusters Toyon		
	successful sport function at Lamar High School, Arlington, Texas		
	••••••		
	•••••••••••••••••••••••••••••••••••••••		

		·	
4b	(Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue	ie \$	0.)
	•••••••••••••••••••••••••••••••••••••••		

	•••••••••••••••••••••••••••••••••••••••		
	•••••••••••••••••••••••••••••••••••••••		
	•••••••••••••••••••••••••••••••••••••••		
40	(Code:) (Expenses \$ 0 including grants of \$ 0) (Revenu		
4c	(Code.) (Expenses \$ 0 including grants of \$ 0) (Nevent	ie ф	0_)
	•••••••••••••••••••••••••••••••••••••••		
	•••••••••••••••••••••••••••••••••••••••		
	•••••••••••••••••••••••••••••••••••••••		
		·	
		·	
4d	Other program services. (Describe in Schedule O)		~
74	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
4e	Total program service expenses ► 266,471		
70	read program out too expenses		

Form 990 (2011) LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP 75-2492683 Page 3 Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Х 2 Χ Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Х Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 5 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 Х Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 Х the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 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," 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 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 a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 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... 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional. 12b 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.... 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a **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 Х foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV . . . 15 Х 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 United States? If "Yes," complete Schedule F, Parts III and IV Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions). 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

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

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

19

20a

Par	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
22	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
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		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	122		 ^
_0	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		х
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 lines]		
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u></u>
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>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
zoa	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	25a		 ^-
	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		х
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			j
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	1		١.,
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	22	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	£.,		- 1
а	Part IV instructions for applicable filing thresholds, conditions, and exceptions): 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? <i>If "Yes," complete</i>	ZUG		 ^
-	Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	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	L	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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		×
32	Part I	131		┝
J 2	If "Yes," complete Schedule N, Part II	32		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		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		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	-
þ	Did the organization receive any payment from or engage in any transaction with a controlled entity within	256		ł
26	the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	-	\vdash
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		 ^` -
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	_37_	<u>L</u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	102 Note: All Form 900 filers are required to complete Schedule O	38	1	Ιv

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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
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	ĝį.	ار آئے ہ	
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
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	T T		
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		х
b	If "Yes," enter the name of the foreign country ▶	~		
•	See instructions for filling 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		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
Va	organization solicit any contributions that were not tax deductible?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- T		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	٠,	s.	
́а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	× 13	ľ	
a	and services provided to the payor?	7a	·	X
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			\vdash
C	required to file Form 8282?	7c		Ιx
d	If "Yes," indicate the number of Forms 8282 filed during the year	1		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Х
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	- 9	p -	
O	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		
۵	Sponsoring organizations maintaining donor advised funds.			
9 a	Did the organization make any taxable distributions under section 4966?	9a	1	1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	Į		1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter:	1		
'' a	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
D	against amounts due or received from them.) .	, `*		
420	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<u> </u>		1
b	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
13	Is the organization licensed to issue qualified health plans in more than one state?	13a	1	1
а	Note. See the instructions for additional information the organization must report on Schedule O	1.50		1
L	Enter the amount of reserves the organization is required to maintain by the states in which	1 3	1	1
b	the organization is licensed to issue qualified health plans	"	ĺ	
_	Enter the amount of reserves on hand	1	1	
C 140	Did the organization receive any payments for indoor tanning services during the tax year?	14a	1	X
14a	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		† † †
<u>b</u>	II 165, Has It lieu a I OHH 120 to report these payments: II 140, provide an explanation in concasts o			(2011)

Form 9		<u>492683</u>		2age 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for	or a "No	o"	
_	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See in	struct	ions.
	Check if Schedule O contains a response to any question in this Part VI			
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	18	1 m	e. 17.7
	If there are material differences in voting rights among members of the governing body, or			* 4.4
	if the governing body delegated broad authority to an executive committee or similar	7	1	-
	committee, explain in Schedule O.		**************************************	2.
b		18	1. 28	* ' ' ' ' '
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			,
-	any other officer, director, trustee, or key employee?	2	<u> </u>	X
3	Did the organization delegate control over management duties customarily performed by or under the direct	1	 	<u> </u>
•	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		x_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	\vdash	$\frac{\hat{x}}{x}$
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x_
_		6	+	x
6 7-	Did the organization have members or stockholders?	-	┼	 ^-
7a	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		<u> </u>
D	Are any governance decisions of the organization reserved to (or subject to approval by) members,	l		
	stockholders, or persons other than the governing body?	7b	Same Lin	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:		<u>, </u>	-
a	The governing body?	8a	├	X
b	Each committee with authority to act on behalf of the governing body?	8b	<u> </u>	X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			١.,
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code.,	_	
		[40]	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	┼	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	1		١.,
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? .	10b		X
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	P	1975	10.11
12a		12a		X_
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts'	? 12b	<u>'</u> -	X
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1.		
	describe in Schedule O how this was done	12c	_	ļ
13	Did the organization have a written whistleblower policy?	13	_	X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by	12]
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	142	100	
a	The organization's CEO, Executive Director, or top management official.	15a	<u> </u>	<u> </u>
þ	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).) L		
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	: 40		(Fr.,)
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard		S 1200 1] ,
	the organization's exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► TX			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 50	1(c)(3)	s only)
. •	available for public inspection Indicate how you made these available Check all that apply	\-/\ - /\		•
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of inter-	est		
. •	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of	the		
	organization: ► James Livesay,CPA 817-461-3			
	1105 W Lamar Blvd, Arlington, TX 76012	:577,		
	1100 11 Carrier Dira, Francisco, 177 100 (6			

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I AMAR HIGH SLHULL	SILLIENI ACTIVILES COR	~

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 employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	box, office	unies er and	s pe	ition more	n of signature of the second o	an	(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 organizations
(1) STAN LEWIECKI								<u></u>		
Pres	10.00	X	_					0	0	0
(2) SARA BLOCK VP	10.00	x		į				0	0	0
(3) NANCY BUECHELE		<u> </u>			-					
Sec/Treas	10 00	Х		L				0	0	0
(4)										
(5)										
(6)										
. (7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

	(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule	(do r box, office	not ch unles	Pos eck s pe	ition more rson	n of standard Highest compensated	one :	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organization (W-2/1099-Mis	on d is SC)	(F) Estimated amount of other compensation from the organization and related organizations
(15)		0)	e	tee			sated				_	
(16)												
<u>(18)</u>												
(19)				-								
(20)		,										
(21)												
(22)												
(23)												
(24)												
(25)												
1b									0		0	0
c d	Total from continuation sheets to Part VII, Total (add lines 1b and 1c)							•	0		0	<u>0</u>
2	Total number of individuals (including but not reportable compensation from the organization	limited to those						ceiv	ed more than \$	100,000 of		
3	Did the organization list any former officer, di employee on line 1a? If "Yes," complete Sche							ngh	est compensate	ed		Yes No
4	For any individual listed on line 1a, is the sum the organization and related organizations greindividual	of reportable c	ompe	ensa	atior	n an	d oth					4 X
5	Did any person listed on line 1a receive or act for services rendered to the organization? If "											5 X
Sec	tion B. Independent Contractors											
1	Complete this table for your five highest comp compensation from the organization. Report of year.											s tax
	(A) Name and business add	Iress							(B) Description of se	rvices	Con	(C) npensation
_	NONE											0
								\vdash		-		0 0
												0
												0
2	Total number of independent contractors (include more than \$100,000 of compensation from the	_	nited ►	to t	hos	e lis	sted a	abo	ve) who receive	d		

Form **990** (2011)

	0 (2011				Т			Т		13-24	1		ray	<u> </u>
Part	VIII	Statement of Revenue	Т	(A) otal revenue		e: fu	(B) lated or xempt inction		Un bu	(C) related siness venue			r section	ons
ts st	1a	Federated campaigns	이		- 1						ı			
Grants		Membership dues	5											1
اع ق		Fundraising events 1c	7								ı			-
# <u>₹</u>		Related organizations	히											
의 픨	•	Government grants (contributions) 1e	히		1								8	
SE 등	f	All other contributions, gifts, grants, and	Ť											4
黃声	•	7	اه		1			- 1			- 1			
문항	_	Noncash contributions included in lines 1a-1f: \$	퓠					-		,	,		,	4 }
Contributions, Gifts, Grants and Other Similar Amounts	_		<u>-</u>	24,3	65			-						
	<u> n</u>	Total. Add lines 1a–1f Business Code			4	,5		. 					*	wig:
휠	2-		┪┈┈		o			寸						
\$	_				ö	_	_	\dashv			\dashv			_
œ	b		+-		ö			-+			-			—
울	C.				히			┰			一			—
s	d		+-	_	히			-+			\dashv	_		—
Program Service Revenue	е		-}	_	分			\dashv						
§	f	All other program service revenue	_		ᇷ		A:	\dashv	3	56				
	g	Total. Add lines 2a-21	+		쒸	*7	A	31		- Miles		44,	<u>-À+ ^</u>	
	3 4 5	Investment income (including dividends, interest, and other similar amounts)			6									<u> </u>
	3	(i) Real (ii) Personal	-				dut.		Éx		6.4			
	6-		\dashv	h (b. 2)	Ğt.	1	****	3.	100	,	K1.3	**************************************	,	`^*
	6a	Gross rents	\dashv	k st	- 1			.	á		بغد	Į	8	c de
	b	Less. rental expenses	7	<i>1177</i> ·	•	Sector	<u>*</u>		*	•	.38ts	: 		
ļ	С	1.011.01.11.01.11.01.11.01.11.01.11.01.11.01.11.01.11.01.11.01.11.01.11.01.11.01.11.01.11.01.11.01.11.01.11.01			0			_						
	_d	Net rental income or (loss)			쒸			_						
	7a	Gloss amount nom sales of	ᅱ	,	å.	-elfo	.3	ř.	**	s ¥,	98 *		*	#} w
ļ		assets other than inventory . 0	씍			98		- 1						
	b	Less cost or other basis	A 45	. N	٠	. ,	3	4	~ *	*		*år	X	
		and sales expenses 0	의		1							ĺ	•	
	С	Gain or (loss)	<u> </u>	·	<u>-</u>	<u> </u>		<u> </u>			#			
	d	Net gain or (loss)	-		이	χ.		-						
Other Revenue	8a	Gross income from fundraising	***	5* v.		% -	***	ŗ.	**		·2		`	يأتليذ
Š		events (not including \$0			*	~		.			*	ĺ		
ř		of contributions reported on line 1c)				,						Ì		
Je.		See Part IV, line 18	의											
ᅙ	b	Less direct expenses b	0		_							ļ		
	C	Net income or (loss) from fundraising events	-		_0									
	9a	Gross income from gaming activities.	ŝ		ı			á			•		2.	
		See Part IV, line 19	의											
		Less: direct expenses b	0 °		_							 		
	С	Net income or (loss) from gaming activities	>		0							<u> </u>		
	10a	Gross sales of inventory, less		,	٠ '							İ		
	ł	returns and allowances a50,0	11									ļ		
	Ь	Less: cost of goods sold b 49,8	09									<u> </u>		
			>		202							<u> </u>		
		Miscellaneous Revenue Business Cod	le						ļ			<u> </u>		
	11a	Program Advertising, Program Sales,		35,	<u>555</u>		35,5	<u>555</u>				↓		
		Fund Raising Events, Admission Ticket Sale		134,0	626		134,6	<u> 326</u>	L			<u> </u>		
		Food/drink concession, Meal reimburse, Oth		99,4	457		95,1	187						
		All other revenue												
		Total. Add lines 11a–11d	▶	269,	638					**			,	ě
	12	Total revenue. See instructions		294,	211		26 <u>5,</u> 3	368				<u></u>		c

Form 990 (2011) LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP Part IX Statement of Functional Expenses

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						
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses		
1	Grants and other assistance to governments and		_		**		
	organizations in the United States See Part IV, line 21	0		·	,		
2	Grants and other assistance to individuals in the			1.5%			
	United States. See Part IV, line 22	0		×	<u> </u>		
3	Grants and other assistance to governments,						
	organizations, and individuals outside the				,		
	United States. See Part IV, lines 15 and 16	0		× ×			
4	Benefits paid to or for members	0					
5	Compensation of current officers, directors,	ا	o	o	0		
_	trustees, and key employees	0					
6	Compensation not included above, to disqualified						
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	o	o	ol	0		
7	Other salaries and wages	- 0	0	0	0		
8	Pension plan accruals and contributions (include				-		
•	section 401(k) and 403(b) employer contributions)	o					
9	Other employee benefits	0		· <u>-</u>			
10	Payroll taxes	Ō	**	-			
11	Fees for services (non-employees):		•				
а	Management	o					
b	Legal	0					
С	Accounting	0					
d	Lobbying	0					
е	Professional fundraising services See Part IV, line 17.	0	· ye office or a				
f	Investment management fees	0					
g	Other	. 0	<u> </u>				
12	Advertising and promotion	0					
13	Office expenses	0		-			
14	Information technology	0					
15	Royalties	0					
16 47	Occupancy	0	-				
17 18	Travel	<u>-</u>		-			
10	for any federal, state, or local public officials	l ol					
19	Conferences, conventions, and meetings	0					
20	Interest	0					
21	Payments to affiliates	0					
22	Depreciation, depletion, and amortization	0	. 0	0	0		
23	Insurance	0					
24	Other expenses. Itemize expenses not covered	.,,		, , , , , t			
	above (List miscellaneous expenses in line 24e. If	**************************************	1		, ,		
	line 24e amount exceeds 10% of line 25, column		, , , , ,		. "		
	(A) amount, list line 24e expenses on Schedule O.)			* * * * * * * * * * * * * * * * * * * *			
а	Printing & Publications	20,119					
þ	Administrative expenses	5,948		5,948			
C	Fundraising expenses	41,476		 	41,476		
d	Program Services	246,352	246,352		-		
	All other expenses	313 905	266 471	5,948	41,476		
25	Total functional expenses. Add lines 1 through 24e.	313,895	266,471	5, 54 0	41,470		
26	Joint costs. Complete this line only if the						
	organization reported in column (B) joint costs from a combined educational campaign and						
	fundraising solicitation Check here						
	following SOP 98-2 (ASC 958-720)]			
	TOROTHING OUT OUT (MOU DOUT 120)	<u></u>	<u> </u>		F 990 (2044)		

Part X **Balance Sheet** (A) (B) Beginning of year End of year 183.318 163,634 Cash—non-interest-bearing 2 2 ol 0 3 3 0 0 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key 5 employees, and highest compensated employees. Complete Part II of Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instructions) 7 8 8 Prepaid expenses and deferred charges . 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 0 b Less accumulated depreciation | 10b | Ol 10c 0 ol 11 Investments—publicly traded securities . 11 ol 12 0 12 Investments—other securities. See Part IV, line 11. ol 0 Investments—program-related. See Part IV, line 11 . . . 13 13 0 ol 14 14 ol 15 15 183.318 16 163,634 Total assets. Add lines 1 through 15 (must equal line 34) . 16 17 17 18 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities . . . 21 21 Escrow or custodial account liability Complete Part IV of Schedule D. . . Payables to current and former officers, directors, trustees, key Liabilities employees, highest compensated employees, and disqualified 22 ol 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete 0 25 0 ol 26 Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117, check here ► X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 183,318 27 163,634 Unrestricted net assets 27 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets . . . Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds . . . 183.318 33 163,634 33 163.634 Total liabilities and net assets/fund balances 183,318

roim s	1990 (2011) LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP	75	-2492003	Page	e IZ
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		<u> </u>	[<u></u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		294,	211
2	Total expenses (must equal Part IX, column (A), line 25)	2		313,	
3	Revenue less expenses Subtract line 2 from line 1	3			,684
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		183,	
5	Other changes in net assets or fund balances (explain in Schedule O)	5		100,	,510
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,	<u> </u>			
•	column (B))	6		163,	634
Part					
	Check if Schedule O contains a response to any question in this Part XII			. [\neg
				Yes	No 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		Χ
b	Were the organization's financial statements audited by an independent accountant?		2b	-1	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			kāru.
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	100	. 43
	issued on a separate basis, consolidated basis, or both.			-33	
	Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		. 3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		1 _ [ŀ	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
			Form	990 (2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2011

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service 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.

Inspection
Employer identification number

		organization							Employer	identificati		er	
				TIVITIES CORP				41-1	\ 0		92683		
Par				arity Status (All org						struction	<u>IS.</u>		
1	ngar 			ation because it is: (For ches, or association o						١.			
2	Ħ			on 170(b)(1)(A)(ii). (At					~/(- /(- /(- /	,,			
3	Ħ			ospital service organi			section '	170(b)(1)	(A)(iii).				
4	Ħ	•	·	ition operated in conju						(b)(1)(A)	(iii). Ent	er the	
	_		me, city, and sta	-		· 					· ,		
5		-	•	the benefit of a collection (Complete Part II)	ge or univ	ersity owr	ed or ope	erated by	a governr	mental ur	it descr	ibed	
6		A federal, sta	ate, or local gove	ernment or governme	ntal unit d	escribed i	in sectior	170(b)(1	l)(A)(v).				
7		_		y receives a substanti (1)(A)(vi). (Complete l	•	its suppor	t from a g	jovernme	ntal unit o	r from the	e genera	al publ	ic
8		A community	trust described	in section 170(b)(1)((A)(vi) . (C	omplete F	Part II.)						
9	X	An organization that normally receives (1) more than 33 1/3% 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 33 1/3% 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 organizat	ion organized a	nd operated exclusive	ly to test	for public	safety. Se	ee sectio	n 509(a)(4	4).			
e f g		purposes of 509(a)(3). Company and the organization Since August following persons of the organization organization and (ii) A family following persons and (iii) A family following persons and (iii) A family following persons and (iii)	one or more pul- heck the box that I b this box, I certifier than foundation section 509(a)(2 zation received a , check this box at 17, 2006, has rsons? son who directly i) below, the gov ly member of a	a written determination the organization acce or indirectly controls, verning body of the su person described in (i	izations dof supportion Type is not coer than on from the cupted any either alo pported o above?	lescribed ing organice III—Function III—Function III—Function IIII—IIII—IIII—IIIII—IIIII—IIIIII—IIIIII	in section an tionally in publicly stit is a Typ. tribution to tribution to the ther with on?	509(a)(1) d complete tegrated indirectly supported to e. Type from any or persons of the complete terms of the	or section or section te lines 11 or organization or Type of the described	on 509(a) le throug d	(2) See h 11h. Type III— qualified cribed in	section Other	
		(iii) A 35%	controlled entit	y of a person describe	ed in (i) or	(ii) above	?				11g(iii)		
<u>h</u>		Provide the		ation about the suppor	rted orgar	nization(s)							
(1)		e of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) l⊪	organization sted in your document?	the organ	you notify nization in of your port?	organizat (i) organi	s the uon in col zed in the S ?		Amoun support	l of
					Yes	No	Yes	No	Yes	No	ļ	_	
(A)									Ì				0
(B)	_												0
(C)													0
(D)													0
(E)													0
	,		******			Server H	.						<u>_</u>

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)

Sect	on A. Public Support					· · ·	
Caler	idar 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.")					_	0
2	Tax revenues levied for the organization's	<u> </u>					·
	benefit and either paid to or expended on						
	its behalf						0
3	The value of services or facilities]			
	furnished by a governmental unit to the						
	organization without charge						0
4	Total. Add lines 1 through 3	0	0	0	0	0	0
5	The portion of total contributions by each			**************************************			
	person (other than a governmental unit	13.64.1.4	ž., ž.	4 4			
	or publicly supported organization)						
	included on line 1 that exceeds 2%						
	of the amount shown on line 11,		الله الله الله الله الله الله الله الله		* * *		
_	column (f)				2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
6	Public support. Subtract line 5 from line 4.						0
	ion B. Total Support		4 2 2000	() 0000	(4) 2040	(-) 2044	/O Total
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	0	0	0	0	0	0
8	Gross income from interest, dividends,				1		
	payments received on securities loans,						
	rents, royalties and income from similar						0
	sources						
9	Net income from unrelated business						
	activities, whether or not the business is						0
10	regularly carried on	-	-	·			
10	loss from the sale of capital assets	[1		
	(Explain in Part IV.)	1		1			0
11	Total support. Add lines 7 through 10			المراجع المراجع	CHE PAR STANCE		0
12	Gross receipts from related activities, etc. (s					12	
13	First five years. If the Form 990 is for the o	organization's f	rst, second, thi	ird, fourth, or fi	fth tax year as	a section 501(c	:)(3)
	organization, check this box and stop here						▶□
Sect	ion C. Computation of Public Support	Percentage					
14	Public support percentage for 2011 (line 6.	column (f) divi	ded by line 11,	column (f)).		14	0 00%
15	Public support percentage from 2010 Sche	dule A, Part II,	line 14			15	0 00%
16a	33 1/3% support test-2011. If the organiz	ation did not c	heck the box o	n line 13, and l	ine 14 is 33 1/3	3% or more, ch	eck this box
	and stop here. The organization qualifies a	s a publicly su	pported organi	zation			▶[]
b	33 1/3% support test-2010. If the organiz	ation did not c	heck a box on t	line 13 or 16a,	and line 15 is	33 1/3% or mor	e, check this
	box and stop here. The organization qualif	ies as a publicl	y supported or	ganization			▶∟
17a	10%-facts-and-circumstances test—2011 is 10% or more, and if the organization med	I. If the organiz	ation did not cl	heck a box on	line 13, 16a, or	r 16b, and line f	14 Iain in
	Part IV how the organization meets the "fac	ets the lacts-a	stances" test. T	he organizatio	n auslifies as s	a nublicly suppo	nted
							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
.	organization						line
b	15 is 10% or more, and if the organization is	meets the "fact	s-and-circumst	ances" test. ch	neck this box a	nd stop here.	Explain in
	Part IV how the organization meets the "fac	ts-and-circum	stances" test T	he organizatio	n qualifies as a	a publicly	•
	supported organization			J. garnzano			▶□
40	Private foundation. If the organization did			6a 16b 17a 4	or 17h, check ti	nis hoy and see	·
18	to also also ma		A OH IIIIE 13, II	ua, 100, 17a, (71 17 D, CHECK II	no box and see	` ⊾ □
	instructions		· · · <u>· · · · · · · · · · · · · · · · </u>		· · · · ·	· · · · ·	· · · - _

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 quality u	<u>naer the tests</u>	listed below,	please comp	iete Part II.)		
	tion A. Public Support						
Cale	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")	36,012	32,982	36,853	32,497		138,344
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 .	293,555	262,582	273,041	300,863		1,130,041
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6	Total. Add lines 1 through 5	329,567	295,564	309,894	333,360	_ 0	1,268,385
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons		_				0
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		<u></u>		-		0
	Add lines 7a and 7b .	0	0	0	0	0	0
8	Public support (Subtract line 7c from line 6)						1,268,385
	tion B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6 .	329,567	295,564	309,894	333,360	ol ol	1,268,385
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	!				_	0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .						0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0
13	Total support. (Add lines 9, 10c, 11, and 12)	329,567	295,564	309,894	333,360	0	1,268,385
14	First five years. If the Form 990 is for the organiz organization, check this box and stop here						▶ □
Sec	tion C. Computation of Public Support	Percentage	_				
15	Public support percentage for 2011 (line 8, column		e 13, column (f))	<u>-</u>	15	100.00%
16_	Public support percentage from 2010 Schedule A,	• • •				16	100 00%
Sec	tion D. Computation of Investment Inc		age				
17	Investment income percentage for 2011 (line 10c,			umn (f))		17	0 00%
18	Investment income percentage from 2010 Schedu	le A, Part III, line	17			18	0.00%
19a	33 1/3% support tests—2011. If the organization			and line 15 is m	ore than 33 1/3%	, and line 17 is	
b	not more than 33 1/3%, check this box and stop h 33 1/3% support tests—2010. If the organization	did not check a t	oox on line 14 or	line 19a, and line	e 16 is more that	n 33 1/3%, and	. ►X
	line 18 is not more than 33 1/3%, check this box a						▶ 📗
20	Private foundation. If the organization did not chi	eck a box on line	14, 19a, or 19b,	check this box a	ind see instruction	ons	. ▶□

Schedule A (Form	990 or 990-EZ) 2011	LAMAR HIGH SCHOO	L STUDE	NT ACTIVITIES CORF)	75-2492683	Page 4
Part IV	Supplemental	Information. Complet	e this par	t to provide the expl	anations required	by Part II, line 10	0,
		or 17b; and Part III, lir	e 12. Als	o complete this part	for any additional	information. (Se	ee
<u> </u>	instructions).						
							
••							
• • • • • • • • • • • • • • • • • • • •							
						• • • • • • • • • • • • • • • • • • • •	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

OMB No 1545-0047

ZW11

Department of the Treasury Internal Revenue Service

• Section 527 organizations Complete Part I-A only

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions.

Open to Public Inspection

If the	organization answered "Y	es" to Form 990, Part IV, line 4, or For	m 990-EZ, Part VI,	line 47 (Lobbying A	ctivities)	, then	
• 8	Section 501(c)(3) organization	s that have filed Form 5768 (election und	ler section 501(h)).	Complete Part II-A D	o not cor	nplete Part II-B	
		s that have NOT filed Form 5768 (election					
If the	organization answered "Y	es" to Form 990, Part IV, line 5 (Proxy	Tax) or Form 990-	EZ, Part V, line 35c (Proxy Ta	ax), then	
• 5	ection 501(c)(4), (5), or (6) or	rganizations Complete Part III					
	e of organization			Įε	mployer	identification numl	ber
	IAR HIGH SCHOOL STUD	DENT ACTIVITIES CORP				75-2492683	
		he organization is exempt und				rganization.	
1		the organization's direct and indirect					
2	Political expenditures .				▶ \$.		
3	Volunteer hours				• • •		
Pa	rt I-B Complete if t	he organization is exempt und	er section 501(c)(3).			
1		excise tax incurred by the organizati			▶ \$		
2	·	excise tax incurred by organization i			▶ \$		
3	The state of the s	ed a section 4955 tax, did it file Forn	-			. Yes	No
4a	Was a correction made?	•				. Yes	■ No
b	If "Yes," describe in Part	IV.					
		he organization is exempt und	er section 501(c), except section	n 501(d	c)(3).	
1		expended by the filing organization					
	activities				. ▶ \$		
2	Enter the amount of the f	filing organization's funds contributed	d to other organiz	ations	•		
	for section 527 exempt for	unction activities			▶ \$		
3	Total exempt function ex	penditures. Add lines 1 and 2. Enter	here and on Forr	m 1120-POL,			
	line 17b				▶ \$	<u></u>	<u></u>
4	Did the filing organization	n file Form 1120-POL for this year?				Yes _	No
5		ses and employer identification num					
		ents. For each organization listed, e					
		ontributions received that were prom d fund or a political action committed					
	as a separate segregate	d fulld of a political action committee	(FAC). II additio	liai space is fieede	u, provid	de information in r	ait iv.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fr		(e) Amount of pol contributions receive	
				filing organization funds if none, ente		promptly and dire	
					ł	delivered to a sep	
						political organizati none, enter -0	
							
(1)					اه		
(2)					o		
/2\							-
(3)					0		
(4)					İ		
			-		0		
(5)		 		}	اء		,
					0		
(6)		L		1	ŀ		

Page 2

JUIL	edule C (Form 990 or 990-EZ) 2011											r age 💴
P	art II-A Complete if the organiz under section 501(h)).	ation is	s exempt	under s	section	501	(c)(3)	and fil	ed F	orm 57	68 (elec	ction
A	Check ▶ if the filing organization	n belon	ngs to an a	ffiliated	group	(and	lıst in	Part IV	each	n affiliat	ed grou	p member's
	name, address, EIN,											
В	Check ▶ if the filing organization											
_			ng Expendi				<u> </u>	-	Ť	(a) Fil	ına	(b) Affiliated
	(The term "expenditure:				r incur	ed.)			0	rganizatio	-	group totals
1a	Total lobbying expenditures to influence	ce public	c opinion (g	rass roc	ts lobby	ring)						0
b	Total lobbying expenditures to influence						•					0
С	Total lobbying expenditures (add lines	s 1a and	1b)								0	0
d	Other exempt purpose expenditures .											0
е	Total exempt purpose expenditures (a	add lines	1c and 1d)								0	0
f	Lobbying nontaxable amount. Enter the	ne amou	int from the	followin	g table i	n bo	:h					
_	columns.								, <u> </u>		0	<u> </u>
[If the amount on line 1e, column (a) or (b	o) is:	The lobbyin	g nonta	cable an	ount	is:			F *	20.00	
[Not over \$500,000		20% of the a						_ *	•		
	Over \$500,000 but not over \$1,000,000		\$100,000 plu						_			14-48 - 13. · ·
	Over \$1,000,000 but not over \$1,500,000		\$175,000 plu						41	1,		
-	Over \$1,500,000 but not over \$17,000,000		\$225,000 plu	us 5% of	the exce	SS OV	er \$1,50	0,000	-	like Salaka	rio I	
	Over \$17,000,000		\$1,000,000					-			0	0
g	Grassroots nontaxable amount (enter										0	0
h	Subtract line 1g from line 1a. If zero o								\vdash		0	0
ŀ	Subtract line 1f from line 1c. If zero or								 ∞ 472	O roport		
J	If there is an amount other than zero											Yes No
	section 4911 tax for this year?	• •	· · · · ·		• •	• •	• •		· · ·	• • •	• •	
	(Some organizations the columns be	nat made elow. Se	r Averaging e a section ee the instr Expenditure	501(h) uctions	election for line	n do es 2a	not ha throu	ve to c gh 2f o	n pag	ete all o e 4.)	f the five	e
		T										
	Calendar year (or fiscal year beginning in)	(a	a) 2008	(b) 2009		(c)	2010		(d) 2	011	(e) Total
2a	Lobbying nontaxable amount							-	0		0	0
b		T.	***		* + 3 = 4"		<u></u>	, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		, salis	\$'4 \$'5	
	(150% of line 2a, column(e))	<i>i</i> .	-i i- i-	J.		塞.	÷.				<u>\$</u>	0
	Total lobbying expenditures							_	0		0	
d	Grassroots nontaxable amount		ange brokky kalenga una an z. 2	1 to 10° c 7 . *	. 4 x8 ~			·····-	0	₩ w-*	<u> </u>	C
е —	Grassroots ceiling amount (150% of line 2d, column (e))			* .		% 4	,				, 3 i.,	
£	Creecrete lebbung evpenditures					- 1			- 1			

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011

Pai	t II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forr	n 5768	3	
For	each "Ye	es" response to lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
		ng activity.	Yes	No	A	moun	t
1 a	legislat referen	the year, did the filing organization attempt to influence foreign, national, state or local on, including any attempt to influence public opinion on a legislative matter or dum, through the use of: ers?					
b		off or management (include compensation in expenses reported on lines 1c through 1i)?	<u> </u>			L Long	
c d	Media a	dvertisements?					
е	_	tions, or published or broadcast statements?					
f		to other organizations for lobbying purposes?					
g		ontact with legislators, their staffs, government officials, or a legislative body?					
h		demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<u> </u>	ļ			
i		ctivities?	200 - AND THE	ar a ras			
j		dd lines 1c through 1i		e i -	7 +1 8xm	I	<u> 0</u>
_		activities in line 1 cause the organization to be not described in section 501(c)(3)?	89EC *85.0	خ ئت		79 1 - 1) 	· 1986
b		denter the amount of any tax incurred under section 4912	/ -				
ч С		enter the amount of any tax incurred by organization managers under section 4912 ng organization incurred a section 4912 tax, did it file Form 4720 for this year?	Luddo's	100000	Part &		t. 19,389
	t III-A	Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)				Serve?
ı aı	t III A	501(c)(6).	(0)(0)	, 01 3			
		- σο τίσχο).				Yes	No
1	Were s	ubstantially all (90% or more) dues received nondeductible by members?			1		
2		organization make only in-house lobbying expenditures of \$2,000 or less?			2		\vdash
3		organization agree to carry over lobbying and political expenditures from the prior year?		· · ·	3		$\overline{}$
Par	t III-B	Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" (answered "Yes."					3, is
1		ssessments and similar amounts from members	•	1			
2	politica	162(e) nondeductible lobbying and political expenditures (do not include amounts of a least expenses for which the section 527(f) tax was paid).					
a		year		2a			
b		er from last year	•	2b			
C	Total .		•	2c			0
3		ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		-	
4	excess	es were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible g and political expenditure next year?		4			
5	_	amount of lobbying and political expenditures (see instructions)		5			0
Par	_	Supplemental Information	<u> </u>		L		
Com	plete this	part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; e this part for any additional information.	Part I	I-A, ar	nd Part	II-B, I	ine 1
A150	, comple						
	·						

LAM	AR HIGH SCHOOL STUDENT ACTIVITIES CORP	75-2492683
	orm 990 or 990-EZ) 2011	Page 4
Part IV	Supplemental Information (continued)	

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP 75-2492683

Scriedule O (Form 990 or 990-EZ) (2011)	·	Page Z
Name of the organization	Employer identification number 75-2492683	
LAMAR HIGH SCHOOL STUDENT ACTIVITIES CORP	13-2492003	
,		

Form 8868

(Rev January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Form **8868** (Rev 1-2012)

• If yo	u are filing for an Automatic 3-Month Extensi u are filing for an Additional (Not Automatic) complete Part II unless you have already be	3-Month E	Extension, complete only Part II (on page 2 of	this f		m 8868.			
a corpo 8868 to Return	onic filing (e-file). You can electronically file Foration required to file Form 990-T), or an additional request an extension of time to file any of the for Transfers Associated With Certain Personal ions). For more details on the electronic filing of	onal (not a forms liste al Benefit C	nutomatic) 3-month extension of time d in Part I or Part II with the exception contracts, which must be sent to the	e. You can e on of Form 8 IRS in pape	electro 8870, er forn	onicall Informat (se	ly file Form nation ee			
Part	Automatic 3-Month Extension of 1	Time. Only	y submit original (no copies need	ded).						
Part I o	oration required to file Form 990-T and request only	ing an auto	omatic 6-month extension—check the community of the commu	nis box and c	t an e	 extens	sion of			
Type o	 Name of exempt organization or other filer, se 	e instruction	is	Employer	identific	ation n	number (EIN) or			
print	LAMAR HIGH SCHOOL STUDENT ACTI			X 75-249	92683	3				
File by the					er (SSN)					
due date t filing your	JAIVIES L'ELIVESAT 1103 VV Laitiai DIVO,			<u> </u>						
return Se	e City, town or post office, state, and ZIP code	For a foreigi	n address, see instructions							
instruction	ARLINGTON			TX	760	012				
Enter th	ne Return code for the return that this application	on is for (fil	e a separate application for each re	eturn)			. 01			
Applic	ation	Return	Application				Return			
Is For		Code	is For				Code			
Form 9	990	01	Form 990-T (corporation)				07_			
Form 9	990-BL	02	Form 1041-A				08			
Form 9	990-EZ	01	Form 4720				09			
Form 9	990-PF	04	Form 5227				10			
Form 9	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11			
<u>Form 9</u>	990-T (trust other than above)	06	Form 8870				12			
Telephone No. ▶817-461-3211 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box										
	➤ X tax year beginning 7/1/2011 , and ending 6/30/2012 . 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return									
	Change in accounting period									
	f this application is for Form 990-BL, 990-PF, 9	90-T, 4720), or 6069, enter the tentative tax, le	ess any						
					\$					
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and				2 .	e					
estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using						₩				
	EFTPS (Electronic Federal Tax Payment System			y using	3с	\$	0			
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions										

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

(HTA)