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Department of the Treasury Internal Revenue Service

Short Form

Return of Organization Exempt From Income Tax

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

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file

Form 990 (see instructions). All other organizations with gross receipts less than \$200,000

and total assets less than \$500,000 at the end of the year may use this form.

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

OMB No 1545-1150

A	For the 2011 calendar year, or tax year beginning Aug 1 , 2011, and ending Jul 31	, 2012
<u>B_</u>	Check if applicable C Name of organization D Emp	ployer identification number
	Address change EVERGREEN SCHOOL PARENTS & TEACHERS ASSOCIATION PTAY 22	2-6069113
		phone number
Н	Initial return 2280 EVERGREEN AVENUE (9	908) _889-6800
\vdash	City or town, state or country, and ZIP + 4	
Н	Amended return F Gro Application pending Scotch Plains NJ 07076-1999 Nur	oup Exemption
	'	mber -
G		If the organization is not ittach Schedule B (Form
١.	990 990-F7	or 990-PF).
	1 ax - exempt status (ck only one) — [A] 501(c)(3) [] 501(c) () 494/(a)(1) or [] 52/	· · · · · · · · · · · · · · · · · · ·
ĸ	Check Lift the organization is not a section 509(a)(3) supporting organization or a section 527 organization	
	normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-poster instructions). But if the organization chooses to file a return, be sure to file a complete return.	ard) may be required (see
_	Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts, if gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ.	►\$ 83,861.
P	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instruction	
-	Check if the organization used Schedule O to respond to any question in this Part J	X
	1 Contributions offe grants and similar amounts received	1 26.
	2 Program service revenue including government fees of outracts VED	2 30,981.
	3 Membership dues and assessments	
	· · · · · · · · · · · · · · · · · · ·	
	4 Investment income	4
	ACCOINT MANAGERE	2.00
	OGDEN	RECEIVED
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	9c
_	6 Gaming and fundraising events	5 0 2015 Q
E	a Gross income from gaming (attach Schedule G if greater than \$15,000)	DEC 2 8 2015
3 E	b Gross income from fundraising events (not including\$	10 VE
to in pad Ath. Deed Gocton	from fundraising events reported on line 1) (attach Schedule 1) (a	OGDEN, UT
2	of such gross income and contributions exceeds \$1,549.	
7	c Less direct expenses from gaming and fundrial exercise 6c 20,041.	4
ð	d Net income or (loss) from gaming and fundraising events that the baland 6b and subtract line 6c).	<u> </u>
<u>_</u>	6b and subtract line 6c).	6d 31,508.
T.	7a Gross sales of inventory, less returns and allowances.	[30]
4	b Less: cost of goods sold	•
م	c Gross profit or (loss) from sales of inventory (Submature 7b from line 7a)	7c
ž K	8 Other revenue (describe in Schedule O)	8
<u> </u>	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9 63,820.
	10 Grants and similar amounts paid (list in Schedule O).	10 3,375.
	11 Benefits paid to or for members	11
Ę	12 Salaries, other compensation, and employee benefits	12
E X P E N	12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance	13 625.
	14 Occupancy, rent, utilities, and maintenance	14
Ę	DEDEALITE	
S	146 Other annual of the control of th	15
	16 Other expenses (describe in Schedule O) See Earl 990 EZ Paul Line 16 Other Expenses 17 Total expenses. Add lines 10 through 16	16 46, 196.
		50,196.
_		13,624.
N S	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year	
N S E S T E	iligure reported on prior year's return)	19 21,501.
5	20 Other changes in net assets or fund balances (explain in Schedule O)	20
_	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21 35,125.
BA	A For Paperwork Reduction Act Notice, see the separate instructions.	Form 990-EZ (2011)

Form	990-EZ (2011) EVERGREEN SCHOO	L PARENTS & TEACH	ERS ASSOCIATI	ON 22	-606	59113 Page 2
Rai	Check if the organization used Sche	tructions for Part II.)	estion in this Part II			П
	Check if the organization used Schi	cause o to respond to any qu	estion in this rait in	(A) Beginning of ye	ar l	(B) End of year
22	Cash, savings, and investments			21,501		35,125.
23	Land and buildings			0		0.
24	Other assets (describe in Schedule O)		[0	. 24	0.
25	Total assets		[21,501	. 25	35,125.
26	Total liabilities (describe in Schedule O)			0	. 26	0.
27	Net assets or fund balances (line 27 of	column (B) must agree with I	ine 21)	21,501	. 27	35,125.
Pai	到於 Statement of Program Sen					Expenses
	Check if the organization used Sc		question in this Part	<u> , </u>	(Req	uired for section c)(3) and 501(c)(4)
What	s the organization's primary exempt purpose? ST	UDENT ENRICHMENT	Te three largest proc	1/2m conuces as	orgai	nizations and section
mea	s the organization's primary exemply publics: SI in the the organization's program service a sured by expenses. In a clear and concistited, and other relevant information for e	e manner, describe the service	ces provided, the nu	mber of persons		(a)(1) trusts; optional thers.)
	fited, and other relevant information for e	each program title			101 0	lileis.)
28	STUDENT ENRICHMENT INCLU					
	SCHOLARSHIPS, READING INC	CENTIARS WAD STODE	N.T			17
	RECOGNITION			<u>-</u>	20-	0.660
20	(Grants \$ 0.) if the	is amount includes foreign g	rants, check here	<u></u>	28 a	9,662.
29					ì	
					1	
	(Grants \$) If th	is amount includes foreign g	rants check here		29 a	
30	(Clairs V	as arroant metades foreign g	ianta, check here	<u> </u>	230	
		~ -				
	(Grants \$) If th	is amount includes foreign g	rants, check here		30 a	
31	Other program services (describe in Sch					
		is amount includes foreign g	rants, check here	▶ 🗂	31 a	
32	Total program service expenses (add lin	nes 28a through 31a)		<u></u>		9,662.
Pai	List of Officers, Directors,	Trustees, and Key Emp	loyees. List each one	e even if not compensated	(see ti	ne instructions for Part (V.)
	Check if the organization used Sc	chedule O to respond to any	question in this Part	IV		
	(a) Nimma and address	(b) Title and average hours per week	(c) Reportable compensar (Form W 2/1099-MISC	uon (d) Health benefi		(a) Estimated amount of other compensation
	(a) Name and address	devoted to position	(If not paid, enter -0-)	contributions to embenefit plans, a		. outer compensation
				deferred compens	ation	
	HELLE WYRWA	DDDG TDDWG (
	TCH PLAINS NJ07076	PRESIDENT'	. ;		_	_
	TCH PLAINS NJ07076 ET FIRSCIA	10.00		0.	0.	0.
	COOK AVENUE	TREASURER	•			
	TCH PLAINS NJ 07076	10.00	}	0.	۸	
	RRI CAVALLARO	, , , , , , , , , , , , , , , , , , , ,		<u> </u>	0.	0.
	5 BIRCHWOOD COURT	CHAIR				
		10.00		0.	0.	
	'H WALSH	10.00	†·		<u> </u>	0,
	MONTAGUE AVENUE	V.P.				
	TCH PLAINS NJ 07076			0.	Ο.	
	A KENNEDY			<u> </u>		0.
	7 NICHOLL AVNUE	2D V.P.				
	TCH PLAINS NJ 07076	10.00		0.	0.	0.
KAF	EN NOBILE					<u>·</u>
	WILLIAM STREET	REC. SEC.				
SCC	TCH PLAINS NJ 07076	10.00		0.	Ο.	0.
MEA	GHAN SACCENTO					<u> </u>
433	VICTOR STREET	2ND V.P.				
SCC	TCH PLAINS NJ07076	10.00		0.	0.	0.
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BAA		TEEA0812	02/14/12			Form 990-EZ (2011)

Form 990-EZ (2011) EVERGREEN SCHOOL PARENTS & TEACHERS ASSOCIATION	22-6069113	3	Pa	ge 3
Part V Other Information (Note the Schedule A and personal benefit contract statement requirement the instructions for Part V) Check if the organization used Schedule O to respond to any or	irements in juestion in this Part V		_	П
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' provide each activity in Schedule 0		33	Yes	No X
Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the am a change to the organization's name. Otherwise, explain the change on Schedule 0 (see instructions)	ended documents if they reflect	34		x
35a Did the organization have unrelated business gross income of \$1,000 or more during the year f (such as those reported on lines 2, 6a, and 7a, among others)?		35 a		x
b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an ex	planation in Schedule O.	35 b		
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section reporting, and proxy tax requirements during the year? If Yes, complete Schedule C, Part III	6033(e) notice; · · · · ·	35 с		<u>X</u>
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of year? If 'Yes,' complete applicable parts of Schedule N	net assets during the	36_		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions b Did the organization fileForm 1120-POL for this year?	7a 0.	37b		لن <u>.</u> x
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key er	nploveer were			
any such loans made in a prior year and still outstanding at the end of the tax year covered by	this return?	38 a	<u> </u>	X
b if 'Yes,' complete Schedule L, Part II and enter the total amount involved	8b		2.00	- -
39 Section 501(c)(7) organizations Enter				-
	9a	3.9		
E cross research, merced on mile of the product of	9b	EAST S	ROAL	2
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the y section 4911 >				25.5
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 transaction during the year or did it engage in an excess benefit transaction in a prior year that on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	excess benefit	100 E	***	
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.		40b		X
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization	>		12) - -
e All organizations. At any time during the tax year, was the organization a party to a prohibited	tax	13		` `
shelter transaction? If 'Yes,' complete Form 8886-T		40 e	1	<u> </u>
The case states with which a copy of this return is liked				
•				
42 a The organization's books are in care of - AMY FERRONE	Telephone on a /000)	000	_ 5 0 5	: 0
books are in care of AMY FERRONE Located at 2312 COLES AVENUE SCOTCH PLAINS	Telephone no ► (908) NJ ZIP + 4 ► 07076			
b At any time during the calendar year, did the organization have an interest in or a signature or financial account in a foreign country (such as a bank account, securities account, or other fin	other authority over a ancial account)?	42b	Yes	No X
If 'Yes,' enter the name of the foreign country►	,	.3	3	
				,
		1		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financ	ial Accounts.		F7 : " #	-
c At any time during the calendar year, did the organization maintain an office outside of the U.	S. ²	42c		Х
if 'Yes,' enter the name of the foreign country				
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in fieu oForm 1041 - Chec	k here		► □	
and enter the amount of tax-exempt interest received or accrued during the tax year		•	Ш	
			Yes	
44a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 mu of Form 990-EZ	st be completed instead	44 a	1	X
b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 instead of Form 990-EZ	must be completed		12:00	
c Did the organization receive any payments for indoor tanning services during the year?	•• • • • • • • •	44 6		$\frac{x}{x}$
d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? "Wa ' organization	ade an evaluation in	13		
Schedule O		44 0	<u> </u>	
b Did the organization receipe any payment from or engage in any transaction with a controlled with the desired to		45 a		X
Tom 330 and Schedule it high need to be completed histead of Form 950-EZ (see instructions)	<u></u>	45b		X
TEEA0812 02/14/12	F	orm 99	0-EZ	(2011)

Form 990-E	Z (2011) EVERGREEN SCHOOL P.	ARENTS & TEACH	<u>ERS ASSO</u>	CIATION		22-60	69113	Page 4
			_					Yes No
46 Did th	he organization engage, directly or indire idates for public office? If 'Yes,' complete	ctly, in political campai	gn activities	on behalf of	or in op	position to		200
candi	idates for public office? If 'Yes,' complete	e Schedule C, Part I .	<u> </u>	<u> </u>	<u> </u>		46	X
Partition	Section 501(c)(3) organizations	s and section 4947	(a)(1) none	exempt ch	naritab	le trusts o	nly. All se	ction
	501(c)(3) organizations and sec	ction 4947(a)(1) no	nexempt c	haritable t	trusts r	nust answ	er questioi	าร
	47-49b and 52, and complete the	ne tables for lines t	ou and 51.					
	Check if the organization used Schedu	le O to respond to any	question in t	his Part VI				
								Yes No
47 Did th	he organization engage in lobbying activi liete Schedule C, Part II	ties or have a section 5	01(h) electio	on in effect d	furing th	e tax year? I	f 'Yes,'	
comp	olete Schedule C, Part II			• •••	• • • • •		47	×
48 Is the	e organization a school as described in s	ection 170(b)(1)(A)(II)?	If 'Yes,' com	iplete Sched	lule E		48	<u>X</u>
49 a Did th	he organization make any transfers to ar	exempt non-charitable	related orga	anization?			49a	X
ь if 'Ye	s,' was the related organization a section	n 527 organization?					49Ь	
50 Comp	plete this table for the organization's five	highest compensated (employees (d	other than of	ficers, d	rectors, trus	tees and key	,
empl	oyees) who each received more than \$10	00,000 of compensation	from the or	ganization li	f there is	none, enter	'None '	
	4.3.No and address of and sometimes	(b) Title and average hours per week	(c) Reportable (Forms W-2/	compensation		alth benefits,		ed amount of npensation
	(a) Name and address of each employee paid more than \$100,000	devoted to position	(Forms W-2	1039-MISC)		ons to employee it plans, and	Oprei con	npensation
						compensation		
NONE	NONE]					
			}					
			1	i				
							·	
			1					
			†					
			 -				- 	
		 	1					
- Tatal	and a second sec	100.000	L					
	number of other employees paid over \$							
51 Comp	plete this table for the organization's five pensation from the organization. If there	highest compensated i	independent	contractors	who eac	h received m	nore than \$10)0,000 of
	Name and address of each independent contractor pair			(b) Type o				pensation
							1 (4,55	
NONE		-					i	
							- -	
			1				ļ	
			··	· 				
_ 			1				i	
]				1	
								
			1					
e Total	number of other independent contractor	s each receiving over \$	100.000				-	
	he organization complete Schedule A?Ne	•	•	ons and 4947	7(a)(1) n	onevemni		
	table trusts must attach a completed Sci		, organizatio			Olicachipi	. ► X Ye	s 🗆 No
Under penaltie	es of perjury, I declare that I have examined this return	, including accompanying sche	dules and statem	ents, and to the	pest of my	knowledge and	belief, it is	
true, correct, a	and complete Declaration of preparer (other than offic		or wroch preparer	nas any knowle	7	7.6 (1.0		
	Signalure of officer				Date	16/12		
Sign	'•							
Here	JANET FRISCIA Type or print name and title			·	TREAS	URER		
	***************************************	Dranner's succession		Data				
	Print/Type preparer's name	Preparer's signature		Date		Check X d	PTIN	
Paid	DAVID W. CIARROCCA	14	<u> </u>	11/15/1	2	self-employed	P0125149	3 7
Preparer	Firm's name David W. Ciarro	occa, C.P.A., 1	LC					
Use Only	Firm's address > 1930 Wood Road					Firm's EIN	_26~377	3752
	Scotch Plains		NJ	07076-2	634	Phone no. (7	32) 591-	-2300
May the IR	Scotch Plains RS discuss this return with the preparer s	hown above? See instr		07076-2	634	Phone no. (7	32) 591- X Ye	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2011

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

"Open to Publica" Inspection

Department of the Treasury Internal Revenue Service

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

Name of	the	organızatı	on							Employer	identificati	ou unuper
EVER	RGR	EEN S	SCHOOL PA	ARENTS & TEACH	ERS ASSOCIATION	ON				<u> 22-60</u>	69113	
Pan		Reaso	on for Publ	ic Charity Status	(All organizations	must c	omple	te this	part)	See in	structi	ons.
The or	gan	uzation	is not a priva	te foundation because	e it is: (For lines 1 thro	ugh 11,	check o	nly one l	box)			
1	Π.	A churc	h, convention	of churches or assoc	iation of churches desc	cribed IIs	ection 1	70(Ь)(1)	χΑχί).			
2	7	A school	described in	section 170(b)(1)(A)	ii). (Attach Schedule E	.)				•	-	
3	П.	A hospi	tal or a coope	erative hospital service	e organization describe	d insecti	on 1700	ьхп хах	iii).			
4		•		·	in conjunction with a h		•			YIYAY	iii) Ente	r the hospital's
			city, and state	•						. N. W.		
5		An oroa	nizalion oper		a college or university	owned	or opera	ated by	a gover	nmental	unit des	scribed section
6					vernmental unit descri							
7		An orga ın secti	inization that on 170(b)(1)(i	normally receives a s A)(vi). (Complete Par	ubstantial part of its su l II.)	apport fro	om a go	vernmer	ntal unit	or from	the gen	eral public described
8	$\overline{}$		-		(b)(1)(A)(vi). (Complete		•					
9	_	from ac	tivities relate ent income a	d to its exempt function) more than 33-1/3% of ons— subject to certain s taxable income (less nplete Part III.)	exception	ins, and	(2) no i	more th	an 33-1/	3% of it	s support from gross
10		-	•		xclusively to test for pu		•					
11		more p	anization orga ublicly suppoi es the type o ype l	inized and operated e rted organizations des f supporting organizat b Type II	xclusively for the bene cribed in section 509(a ion and complete lines c Type II	fit of, to a)(1) or s alle thro I – Func	ection 5 ough 11	i09(a)(2) h.). Seese	f, or car ction 50	ry out th 9(a)(3).	ne purposes of one or Check the box that Type III - Other
e	_	. سب	• • •		anization is not control		•	-		or more	dicarrati	· ·
•	_	other th	nan foundation 509(a)(2)	n managers and other	than one or more pub	licly sup	ported o	organiza	tions de	scribed	in section	on 509(a)(1) or
f		If the o		eceived a written dete	rmination from the IRS	that-is a	Type I,	Type II	or Type	ill sup	porting (organization,
g		Since A	lugust 17, 200	06, has the organizati	on accepted any gift o	r contrib	ution fro	om any o	of the fo	llowing	persons	,
												Yes No
					ontrols, either alone or oported organization?	togethe	with pe	ersons d	escribed	іm (н) а	end (III)	11 g (i)
			-	er of a person descri					-			11 g (ii)
					described in (i) or (ii) a						•	11 g (ni)
<u>h</u>		Provide	the following	information about th	e supported organization	on(s).						
			of supported inization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	column (s the ation in) listed in verning ment?	(v) Did yo the organ column your su	ninotation in (ii) of	(vi) is organiza colum organiza U S	ation in	(vii) Amount of support
						Yes	No	Yes	No	Yes	No	
(A)				<u> </u>							1	
(B)												
<i>(</i> C)			-									
(C)				 		 		 				
(D)			٠								}	
Œ)												
				Sept Carlo Consideration	State of the state	1	200	Dear in	<u>.</u>	· · · · · · ·	;	
Total		D				推為	- 89	1,600			ř.	

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 EVERGREEN SCHOOL PARENTS & TEACHERS ASSOCIATION 22-6069113 [Part III] 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 its	ted below, please	e complete Part III	1.)		
Sec	tion A. Public Support	····		1		·	·
Cale begi	ndar year (or fiscal year nning ın) ►	(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.')			,			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.				,	-	
3	The value of services or facilities furnished by a governmental unit to the organization without charge				, 		
4	Total. Add lines 1 through 3.		2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(1.5 × 1.5 ×	10	<u>. </u>	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
e			Cont / Cont (Cont)	ATTACK OF T			
	Public support, Subtract line 5 from line 4		To be a second	THE PARTY OF THE P			
Sec	tion B. Total Support	,		· · · · · · · · · · · · · · · · · · ·			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royallies and income from similar sources	- <u>-</u>				-	
9	Net income from unrelated business activities, whether or not the business is regularly carried on				,		
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10		A COLOR			, , ,	
12	Gross receipts from related activ	vities, etc (see ins	tructions)			12	
	First five years, if the Form 990 organization, check this box and	stop here .		nd, third, fourth, o	or fifth tax year as	a section 501(c)(3)	<u>►</u> □
_	tion C. Computation of Pu						
	Public support percentage for 20 Public support percentage from					14	<u>%</u>
	,, ,	•	•			15	<u> %</u>
	33-1/3% support test - 2011 If and stop here. The organization	qualifies as a put	olicly supported o	organization.			▶∐
t	33-1/3% support test – 2010. If and stop here. The organization	the organization d qualifies as a pub	lid not check a bo blicly supported o	ox on line 13 or 16 organization	oa, and line 15 is	33-1/3% or more, c	heck this box
17 8	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fact	meets the 'facts-a	and-circumstance	es' test, check this	box andtop here	. Explain in Part IV	how
ł	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-ar	meets the 'facts-and-circumstances'	and-circumstance test. The organiz	es' test, check this ation qualifies as	box andtop here a publicly suppor	. Explain in Part IV ted organization	how the
18	Private foundation. If the organi	ization did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see inst	ructions
BAA					S	chedule A (Form 99	0 or 990.E7\ 2011

(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.)

Sect	ion A. Public Support						45.77.1.1
	lar year (or fiscal yr beginning in)>	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions and membership fees received (Do not include any unusual grants.')	762.	1,255.	2,327.	3,265.	1,331.	8,940.
	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	69,781.	51,043.	70,178.	67,094.	83,861.	341,957.
3	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						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5	70,543.	52,298.	72,505.	70,359.	85,192.	350,897.
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0,	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	0.	0.	0.	0.	0.	0.
	Add lines 7a and 7b	0.	0.	<u> </u>	0.	0.	0.
8	Public support (Subtract line 7c from line 6)		(<u>1774</u> (487)		<u> </u>		350,897
	tion B. Total Support				r		
	dar year (or fiscal yr beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9		70,543.	52,298.	72,505.	70,359.	85,192.	350,897.
9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents,						
9 10 a	Amounts from line 6 Gross income from interest, 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.	70,543.	52,298.	72,505.	70,359.	85,192.	350,897.
9 10 a	Amounts from line 6 Gross income from interest, 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.	70,543. 0.	52,298.	72,505.	70,359.	85,192. 0.	350,897.
9 10 a b	Amounts from line 6 Gross income from interest, 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. Net income from unrelated business activities not included in line 10b, whether or not the business is	70,543. 0.	52,298.	72,505.	70,359.	85,192. 0.	350,897.
9 10 a b	Amounts from line 6 Gross income from interest, 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. Net income from unrelated 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	70,543. 0.	52,298.	72,505.	70,359.	0.	0.
9 10 a b c 11 12	Amounts from line 6 Gross income from interest, 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. Net income from unrelated 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 tim 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	70, 543. 0. 70, 543. Is for the organizatop here	52, 298. 0. 0. 52, 298. ation's first, secon	72,505. 0. 72,505.	70,359. 0. 0.	0. 0. 85,192.	0.
9 10 a b 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, 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. Net income from unrelated 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 tim 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and time C. Computation of Pu	70,543. 0. 70,543. Is for the organizatop here blic Support F	52, 298. 0. 52, 298. ation's first, second	72,505. 0. 72,505. d, third, fourth, o	70,359. 0. 70,359. r fifth tax year as	0. 0. 85,192.	0.
9 10a 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, 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. Net income from unrelated 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 to 1, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage for 20	70, 543. 0. 70, 543. s for the organizistop here blic Support F	52,298. 0. 52,298. altion's first, secon	72,505. 0. 72,505. d, third, fourth, one 13, column (f)	70,359. 0. 70,359. r fifth tax year as	0. 0. 85,192.	0.
9 10 a 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, 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. Net income from unrelated 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 to 10, 11, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from	70, 543. 0. 70, 543. Is for the organizatop here blic Support Formula (line 8, column 2010 Schedule A	52, 298. 0. 52, 298. alion's first, secondercentage n (f) divided by lin, Part III, line 15.	72,505. 0. 72,505. d, third, fourth, one 13, column (f)	70,359. 0. 70,359. r fifth tax year as	85,192. 0. 0. 85,192. a section 501(c):	350,897. 0. 0. 350,897. (3)
9 10 a 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, 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. Net income from unrelated 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 to 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and this cupport percentage for 20 Public support percentage from tion D. Computation of Invitor of Section D. Computation of Invitorial support percentage from	70, 543. 0. 70, 543. Is for the organizistop here blic Support F 11 (line 8, column 2010 Schedule A	52, 298. 0. 52, 298. alion's first, secon Percentage n (f) divided by lir, Part III, line 15. me Percentage	72,505. 0. 72,505. d, third, fourth, one 13, column (f)	70,359. 0. 70,359. 70,359. r fifth tax year as	85, 192. 0. 0. 85, 192. a section 501(c)	350,897. 0. 0. 350,897. (3) 100.00 %
9 10a 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6 Gross income from interest, 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. Net income from unrelated 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 to 1, 10, 11, and 12) First five years. If the Form 990 organization, check this box and this cupport percentage for 20 Public support percentage from those the support income percentage from the support income percentage from those thems income percentage from the support income percentage from the suppo	70, 543. 0. 70, 543. s for the organizistop here blic Support F 011 (line 8, colum 2010 Schedule A restment Incolor2011 (line 10c,	52, 298. 0. 52, 298. alion's first, secon Percentage n (f) divided by lin, Part III, line 15. me Percentage column (f) divided	72,505. 0. 72,505. d, third, fourth, one 13, column (f)	70,359. 0. 70,359. 70,359. r fifth tax year as	85, 192. 0. 0. 85, 192. a section 501(c)	350,897. 0. 0. 350,897. (3) 100.00 %
9 10a 11 12 13 14 Sec 15 16 Sec 17 18	Amounts from line 6 Gross income from interest, 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. Net income from unrelated 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 tim 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and ition C. Computation of PuPublic support percentage from 1 investment income percentage if investment income percentage in inv	70, 543. 0. 70, 543. s for the organizatop here blic Support Form (line 8, column 2010 Schedule A vestment Incontrom (line 10c, from 2010 Schedul)	52, 298. 0. 0. 52, 298. ation's first, secondercentage n (f) divided by lir. Part III, line 15. me Percentage column (f) divided e A, Part III, line	72,505. 0. 72,505. d, third, fourth, one 13, column (f) b by line 13, column 17	70,359. 0. 70,359. 70,359. r fifth tax year as	85, 192. 0. 0. 85, 192. a section 501(c) 15 16 17 18	350,897. 0. 0. 350,897. 100.00 % 100.00 % 0.00 %
9 10a 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, 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. Net income from unrelated 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 text 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and action C. Computation of Pupublic support percentage from Investment income percentage from Investment income percentage investment income percentage in a 33-1/3% support tests – 2011. If is not more than 33-1/3%, check	70, 543. 0. 0. 70, 543. Is for the organization here blic Support Form 2010 Schedule Avestment Incomposition of the organization of this box and stop in this box and stop in the organization of	52, 298. 0. 0. 0. 22, 298. alion's first, secon ercentage n (f) divided by lir. Part III, line 15. me Percentage column (f) divided e A, Part III, line did not check the there. The organi	72,505. 0. 0. 72,505. d, third, fourth, one 13, column (f) box on line 14, azation qualifies a	70, 359. 0. 70, 359. r fifth tax year as mn (f)	85, 192. 0. 0. 0. 15 16 17 18 e than 33.1/3%, a orded organization	350,897. 0. 0. 350,897. 0. 100.00 % 100.00 % 0.00 % and line 17
9 10a 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, 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. Net income from unrelated business actives 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 to 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pupublic support percentage from the support perc	70, 543. 0. 0. 0. 10. 70, 543. Is for the organization here blic Support Form 2010 Schedule Avestment Incorporation of the organization of this box and stop the organization of th	52, 298. 0. 0. 0. 22, 298. alton's first, secondercentage n (f) divided by lin, Part III, line 15. The Percentage column (f) divided e A, Part III, line to the ck. the othere. The organic did not check a bandstop here. The	72,505. 0. 0. 72,505. d, third, fourth, one 13, column (f) be the by line 13, column (f) cation qualifies a ox on line 14, or organization qualifies ox or organization qualifies and the programization qualifies and the program	70, 359. 0. 70, 359. 70, 359. r fifth tax year as mn (f)	85, 192. 0. 0. 0. 85, 192. a section 501(c): 15 16 17 18 e than 33-1/3%, a priced organization 16 is more than 3 y supported organization 3 y supported organization 3 y supported organization 16 is more than 3 y supported organization 3 y supported organizat	350,897. 0. 0. 100.00 % 100.00 % 100.00 % 33-1/3%, and inization.

Schedule A (Form 990 or 990-EZ) 2011 EVERGREEN SCHOOL PARENTS & TEACHERS ASSOCIATION 22-6069113 Page 4 [Part. IV.] Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
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Schedule A (Form 990 or 990-EZ) 2011

BAA

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Fundraising or Gaming Activities

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

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

OMB No 1545-0047

2011

Open to Public.

Employer identification number

			of contr	dy or control	from activity	(or retained by) fundraiser listed in column (i)	(or retained by) organization
			Yes	No			
	,		r 1		-		
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	,						
	`v *\3	: ' .	, -		,		
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al	h the organiz	tation is registe	red or lice	ensed to so	plicit contributions or ha	as been notified it is ex	empt from registrat

		G (Form 990 or 990-EZ) 2011 EVERGRE Fundraising Events. Complete if more than \$15,000 of fundraising	the organization ar event contributions	swered 'Yes' to Fo	rm 990, Part IV, lir	ne 18, or reported
RE		List events with gross receipts gre	eater than \$5,000. (a) Event #I BAGS/CALENDARS (event type)	(b) Event #2 SOCIAL (event type)	(c) Other events 9 (total number)	(d) Total events (add column (a) through column (c))
REVEZUE	1	Gross receipts	9,376.	13,401.	28,772.	51,549.
£	2	Less: Charitable contributions				
	3	Gross income (line 1 minus line 2)	9,376.	13,401.	28,772.	51,549.
	4	Cash prizes				
D	5	Noncash prizes				
DIRECT	6	Rent/facility costs .			`-	
	7	Food and beverages				
XP	8	Entertainment .				
EXPERSES	9	Other direct expenses	5,682.	2,675.	11,684.	20,041.
S	10		• • • • • • • • • • • • • • • • • • • •		·	20,041.
Pai	ा भंजाा	Net income summary. Combine line 3, co Gaming. Complete if the organization			t IV line 19 or rer	31,508.
<u> </u>		\$15,000 on Form 990-EZ, line 6a.	·		Civ, line 15, or rep	
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Ë	1	Gross revenue				
Е	2	Cash prizes				
PRE	3	Non-cash prizes	-	<u> </u>		
D P E N S E S	4	Rent/facility costs				
	5	Other direct expenses	·			
	6	Volunteer labor	Yes %	Yes %	Yes %	The state of the s
	7	Direct expense summary Add lines 2 thr	rough 5 in column (d).			
	8	Net gaming income summary Combine I	lines 1, column (d) and	line 7	. <u> </u>	
ě	is ti	er the state(s) in which the organization of the organization licensed to operate gaming No,' explain	g activities in each of th	nese states?		
		re any of the organization's gaming license ('es,' explain.				
BAA			TEEA3702 (orm 990 or 990-EZ) 2011

	dule G (Form 990 or 990-EZ) 2011 EVERGREEN SCHOOL PARENTS & TEACHERS ASSOCIATION 22-6069113	Page 3
11,	Does the organization operate gaming activities with nonmembers?	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	No
13	Indicate the percentage of gaming activity operated in	
	The organization's facility	8
	An outside facility	8
	Enter the name and address of the person who prepares the organization's gaming/special events books and records	
		·
	Address >	
15 a	Does the organization have a contact with a third party from whom the organization receives gaming revenue? Yes	□No
	of Yes, enter the amount of gaming revenue received by the organization \$ and the amount	
_	of garning revenue retained by the third party \$	
С	If 'Yes,' enter name and address of the third party:	
	Name •	
	,	
	Address ►	
16	Gaming manager information	
	Name •	
	·	
	Gaming manager compensation ► \$	
	Description of services provided >	
	☐ Director/officer ☐ Employee ☐ Independent contractor	
17	Mandatory distributions	
	is the organization required under state law to make charitable distributions from the gaming proceeds to retain the	
•	state gaming license?	□No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	_
	organization's own exempt activities during the tax year ► \$	
Pār	Supplemental Information. Complete this part to provide the explanations required by Part I, line	2b,
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also comp this part to provide any additional information (see instructions).	olete
	the part to provide any additional anormation (see instructions).	
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	· · · · · · · · · · · · · · · · · · ·	
		
		
BAA	TEEA3703 05/20/11 Schedule G (Form 990 or 99	0-EZ) 2011

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service 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.

Name of the organization		Employer identification number
EVERGREEN SCHOOL PARENTS & TEACHERS ASSOCIATION	. 1	22-6069113
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