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Form **990-EZ**

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)

(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

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

2012

Open to Public Inspection

	A F	or the	2012 calenda	ar year, or ta	x year beginn	ing	July 1	, 2012,	and endir	ıg	June 3	0,20	13	
	Вс	heck if ap	plicable	C Name of or	ganization					D En	nployer ic	lentification num	ber	
[[[[Address ct	hange	Sam Housto	n Elementary	PTA					7	5 1927108		
	ַ טַ	Name cha	nge	Number and s	street (or P O. bo	x, if mail is not dela	vered to street address)		Room/suit	te E Te	E Telephone number			
	=	nıtial retur		3100 Teasle	y Lane					1	94	10-369-2900		
	=	Terminated Amended i	i	City or town,	state or country,	and ZIP + 4				F G	roup Exe	mption		
	=	Application		Denton, TX	76205-8024						umber	•		
			ing Method:	✓ Cash	Accrual	Other (specify)	•			H Chec	k ▶ 🗸	if the organizati	on is not	
		Vebsit	_	_	_					I		ach Schedule E		
	J Ta	ax-exem	pt status (che	eck only one) -	501(c)(3)	501(c) () ◀ (insert no) ☐ 494	7(a)(1) or	527	(Form	1 990, 99	0-EZ, or 990-PF	7).	
	K (heck ►	- ☐ if the	e organization	is not a section	·	orting organization or a		527 organ	zation and	d its gros	s receipts are n	ormally	
							required though Form							
						to file a complet								
	L A	dd lines	5b, 6c, and 7	7b, to line 9 to	determine gros	s receipts. If gross	s receipts are \$200,000	or more,	or if total a	ssets (Part	II,			
	lır	ne 25, co	olumn (B) belo	ow) are \$500,0	00 or more, file	Form 990 instead	of Form 990-EZ .				▶ 9	3		
	P	art I	Revenu	le, Expens	es, and Ch	anges in Net	Assets or Fund	Balanc	es (see	the instr	uctions	s for Part I)		
							respond to any qu						. 🗆	
		1					eceived						10673	
		2					es and contracts							
		3									3			
		4	Investmen	-							4			
		5a	Gross amo	ount from sa	le of assets	other than inve	ntory	5a						
(AS)		Ь						5b		•				
SCANNED JAN		C	Gain or (lo	ss) from sale	e of assets of	ther than inven	tory (Subtract line 5	b from li	ine 5a) .		5c			
		6		nd fundraisir			•							
急		а	Gross inc	come from	gaming (att	ach Schedule	G if greater that	n			İ			
M	Pe		\$15,000)					6a						
	Revenue	Ь	Gross inco	ome from fur	ndraising eve	ents (not includ	ing \$	01	f contribu	itions				
٦	ě						ch Schedule G if the	e .						
=	_		sum of suc	ch gross inc	ome and cor	ntributions exce	eeds \$15,000)	6b		644	55			
9		С				and fundraisir		6c		370				
ø		d		ne or (loss) t	from gaming	and fundraisir	ng events (add lines	s 6a and	d 6b and	subtrac	t			
2			line 6c)								6d		27388	
2014	,	7a	Gross sale	es of invento	ry, less retur	ns and allowan	ces	7a			_			
-		b		t of goods so				7b						
		С	Gross pro	fit or (loss) fi	om sales of	inventory (Subt	ract line 7b from lin	e 7a) .			7c			
		8	Other reve	enue (descrit	oe in Schedu	le O) բ		<u></u> .			8			
		9	Total reve	enue. Add lii	nes 1, 2, 3, 4	<u>, 5c, 6d, 7c, aดู้</u>	de RECEIV		<u> </u>	<u> </u>	9		38061	
		10	Grants and	d sımılar am	ounts paid (li	st in Schedule	0) 10	— ·			10	<u> </u>		
		11	Benefits p	aid to or for	members .	13	S		181 · ·		11			
	es	12	Salaries, c	other compe	nsation, and	employee behi	Sits DEC. 1.6.2	2013	S-08C		12			
	Expenses	13					dent contractors .		SSI · ·		13	<u> </u>		
	×	14	-	-	ies, and maii		OGDEN,	117	=1 · ·		14		4700	
	Ш	15	• • •		postage, and			U I ·	1		15		1723	
		16	•	•	ribe in Sched				- J		16		37965	
		17			lines 10 thro				·	<u>P</u>	17	<u> </u>	39688	
	ţ	18				otract line 17 fro					18		-1627	
	3 S8	19				eginning of yea or year's return)	ur (from line 27, col						17122	
	Ä									• • •	19	-	17133	
	Net Assets	20					plain in Schedule O)				20		15506	
		21					one lines 18 through		No. 40045			Form 990-E		
	For	· Paper	work Heauc	LION ACT NOT	ce, see the se	eparate instructi	บหร.	Cat.	. No 10642	i		FORM 330-L	(2012)	

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Page 2

Form 990-EZ (2012)
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Pai	· ·		-			
	Check if the organization used Schedule	O to respond to a	ny question in this		<u> </u>	<u> 🗅</u>
•				(A) Beginning of year	L_	(B) End of year
22	Cash, savings, and investments			17133		15506
23	Land and buildings			none	-	none
24	Other assets (describe in Schedule O)			none	1=:1	none
25	Total assets			17133		15506
26	Total liabilities (describe in Schedule O)			none	26	none
27	Net assets or fund balances (line 27 of column	(B) must agree with	n line 21)	17133	27	15506
Par	<u> </u>			•		Expenses
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part III	(Rec	uired for section
What	is the organization's primary exempt purpose?			·		c)(3) and 501(c)(4)
Desc	ribe the organization's program service accomplis	shments for each o	f its three largest i	program services.		inizations and section 7(a)(1) trusts, optional
as m	leasured by expenses. In a clear and concise mons benefited, and other relevant information for ea	anner, describe the	e services provide	d, the number of		others)
	Provide new Curriculum, lectures & support material		on experiences. Equ	ipment used to		1
20	upgrade all classrooms and school to improve effeci					
	Benefits all students by providing unique educationa					
		includes foreign gra	nts check here	▶ □	28a	2498
29	Interactive software for classrooms and all grade lev			new math		
25	concept workbooks and software in prep for the STA					
	grants for classroom use, literacy library, outdoor cla					
		includes foreign gra		 -	29a	8772
30	Provide Science Fair, Environmental program, arts in				2.00	+
30	Field trips, Field Day, Volunteer Support as well as he				İ	
	unique educational expierence	ospitality. Delicitis al	is students by provid	g 8		
		ıncludes foreign gra	onte chack hara		30a	26695
04					Sua	20093
31	Other program services (describe in Schedule O)				 31a	
20	(Grants \$) If this amount Total program service expenses (add lines 28a t	includes foreign gra	ints, check here .		32	37965
_						
Par	Check if the organization used Schedule				struc	
	Check if the organization used Scheddle	1	(c) Reportable	(d) Health benefits,	Ť	<u> , , , , </u>
	(a) Name and title	(b) Average hours per week	compensation	contributions to employ		
	(0)	devoted to position	(Forms W-2/1099-MISC (if not paid, enter -0-			other compensation
Lype	o Payeon	President/20 hrs			\dashv	
Lyni	e Rayson	1 103/00/10/20 18/3		٥	ما	0
1 01/5	en Safranek	Vice President/20		<u> </u>	╧	
Laui		hrs		ام	اا	n
Viete	ais Lamb	Treasurer/20 hrs		<u> </u>	╨	
VICE	ria Lamb	116030161201113		0	ا	0
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Part				
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
33	detailed description of each activity in Schedule O	33		✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		√
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		1
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		√
	If "Yes," complete Schedule L, Part II and enter the total amount involved	1		
39	Section 501(c)(7) organizations. Enter:			
a b	Initiation fees and capital contributions included on line 9	1		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	1		
	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			<u>`</u> -
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ▶			
42a	The organization of both die in date of	940-38		7
h	Located at ► 3220 Saint Claire Drive Denton, TX ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over	762	Yes	No
J	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	103	7
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		✓
43	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		.)	- 🗆
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		<u>.</u>
C	Did the organization receive any payments for indoor tanning services during the year?	44c		✓
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		✓
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ (see instructions)	45b		✓

Form 99	0-EZ (20							-	′age 🕶
46		ne organization engage, directly or in adidates for public office? If "Yes," (Yes	No
Part \	_ ,	Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51		estions 47-49b and	d 52, and co	mplete th	e tables f	or lin	es
		Check if the organization used Sc	hedule O to respond	to any question in	this Part VI		<u> </u>		
		·				_•		Yes	No
47	year?	ne organization engage in lobbying If "Yes," complete Schedule C, Pai	tll				. 47		1
48		organization a school as described i							✓
49a		ie organization make any transfers t		_				+	✓
b		s," was the related organization a s							<u> </u>
50		olete this table for the organization's oyees) who each received more that							
		Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC	(d) Health contributions benefit plans	n benefits, to employee , and deferred nsation	(e) Estimate	ed amo	unt of
					- 				
f 51	Comp	number of other employees paid ovolete this table for the organization 000 of compensation from the organization from the organizati	's five highest comp	ensated independer	nt contractor	s who each	n received	more	than
(a)	Name a	nd address of each independent contractor pa	aid more than \$100,000	(b) Type of se	ervice	(c) Compensat	ion	
				1					
				-					
				-					
									·
	Total	number of other independent contr	actors each receiving	over \$100.000	. ▶	l			
52	Did th	ne organization complete Schedule empt chalitable trusts prust attach	A? Note: All section 5	501(c)(3) organization	ns and 4947(► □ Yes	· 🗆	No
Under p	enalties	of perjury, I declare that I have examined this d complete. Declaration of preparer (other than	return, including accompar	rving schedules and state	ments, and to the has any knowle	e best of my k	nowledge an	d belief,	ıt ıs
		WI THE THANK							
Sign Here		Signature of officer	Lamb -	treasurer	Da	te AJ/	413		
		Type of print name and title							
Paid	arer	Print/Type preparer's name	Preparer's signature		Date	Check Self-emplo	-		
Prep		Firm's name ▶			Fır	m's EIN ▶			
	-	Firm's address >	s chawa abaya? Caa	Instructions	Ph	one no	► FTV.		
мay th	ie IHS	discuss this return with the prepare	a snown above? See	instructions	<u> </u>	<u>.</u>	► ☐ Yes	<u>. []</u>	No

Form **990-EZ** (2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047
2012

Open to Public Inspection

Name of the organization **Employer identification number** PTA Texas Congree 2846 Sam Houston Elentary 75-192710 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). [7] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated d Type III-Non-functionally integrated a ☐ Type I **b** ☐ Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes Nο 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (iii) Type of organization (iv) is the organization (ii) EIN (v) Did you notify (vi) is the (vii) Amount of monetary in col. (i) listed in your (described on lines 1-9 the organization in organization in col support organization (i) organized in the US? governing document? col (i) of your above or IRC section support? (see instructions)) Yes Yes Yes No No No (A) **(B)** (C) (D) (E)

Part							
•	(Complete only if you checked th						alify under
<u> </u>	Part III. If the organization fails to	quality unde	er the tests li	sted below, p	lease comple	ete Part III.)	
	on A. Public Support	(-) 0000	(h) 0000	(-) 0010	(-1) 0011	(-) 0010	(A) Total
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		_				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.			<u> </u>	<u> </u>		<u> </u>
	on B. Total Support		г				
	dar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4			<u> </u>			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for the	-			-		
	organization, check this box and stop her			<u> </u>			· · ▶ □
	on C. Computation of Public Suppor			4 (0)		T 44 T	
14	Public support percentage for 2012 (line 6					15	<u>%</u>
15 16a	Public support percentage from 2011 Sch 331/3% support test—2012. If the organiz						
104	box and stop here. The organization qual						. ▶ □
b	331/3% support test—2011. If the organ check this box and stop here. The organi	ization did no	ot check a box	on line 13 o	r 16a, and line		
17a							
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization m supported organization	ion meets the	e "facts-and-ci	rcumstances" tances" test. T	test, check th	ns box and st	op here.
18	Private foundation. If the organization di instructions		box on line 13	, 16a, 16b, 17a			

Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

 -	11 the organization rails to quality	dilaci the tee	10 110100 0010	m, picaco co	mpioto i di ci	··/	
	on A. Public Support		·				
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 20 <u>11</u>	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	8104	5169	5716	14456	10673	44118
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	29502	29447	34429	24904	27388	145670
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	37606	34616	40145	39360	38061	189788
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
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	34					
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						189788
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	37606	34616	40145	39360	38061	189788
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .	ol	o	o	0	o	0
.	Unrelated business taxable income (less						
D	section 511 taxes) from businesses				ı		
	acquired after June 30, 1975	o	o	o	0	o	0
С	Add lines 10a and 10b						
11	Net income from unrelated business						
••	activities not included in line 10b, whether or not the business is regularly carried on	;					
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop he					ear as a section	
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line 8			3, column (fl)		15	100 %
16	Public support percentage from 2011 Sch					16	100 %
	on D. Computation of Investment In			· · · · ·		<u> </u>	
17	Investment income percentage for 2012 (v line 13 colun	on (f))	17	0 %
	Investment income percentage for 2012 (18	0 %
18	331/2% support tests—2012. If the organ						
19a	17 is not more than 331/3%, check this box						
	331/2% support tests—2011. If the organiz						
þ	line 18 is not more than 331/3%, check this						
00	Brivate foundation if the organization di	d not check a t	nov on line 14	19a or 19h o	heck this box	and see instruc	ctions > \pi

Schedule A (F	Form 990 or 990-EZ) 2012	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).	
-		
		••
		••
•••••		

2012 990-EZ

EIN 75-1927108

Part 1 – Line 6 Special Events and Activities

	Income	Expenses	Profit
Book Fair Fall	6029	3650	2379
Book Fair Spring	5997	3629	2368
Chess Club	900	300	600
Directory	810	385	425
Field Day	1551	4496	-2945
Science Fair Boards	152	0	152
Directory	810	385	425
Fall Festival	9279	6248	3031
4 th Grade Raffle	298	298	0
Fun Run	26086	2655	23431
Ready to Wear	2082	5739	-3657
School Supplies	3390	3355	35
Yearbook	6147	4884	1263
Tumbler Sales	924	1043	-119
Totals	64455	37067	27388

2012-990 EZ

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Part 1 –Line 15 Postage, Printing & Publications

Weekly Readers & Scholastics 1646

Postage and Printing 77

Total 1723

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Part 1 – Line 16 Other Expenses

Administrative	237
Bank Charges	36
Insurance	395
PTA Trainings	1007
Public Relations	35
Field trips	8570
Special Areas	4524
Art Field Trips	2590
Guided Reading	823
Outdoor Classroom	299
Science Supplies	487
Box Tops	191
PTA Council Dues	75
PTA Council Donations	35
Hospitality	400
Volunteer Expense	600
Renaissance Learning	1700
AR Store	5436
Environmental	100
Student Safety	90
Science Fair	367
Teacher Appreciation	1196

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Part 1 – Line 16 Other Expenses

Teacher Grants	1384
Study Island	3370
1 st grade Binders	446
Literacy Library Bins	977
Fast Forward Math	690
Math Warm Ups/STAAR	1273
Teacher Book	632
Total	37965