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## Form **990**

Department of the Treasury Internal Revenue Service

#### **Return of Organization Exempt From Income Tax**

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

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

2012
Open to Public Inspection

JUL 1, 2012 and ending JUN 30, 2013 A For the 2012 calendar year, or tax year beginning D Employer identification number Check if C Name of organization LITTLETON PUBLIC SCHOOLS PARENT TEACHER ORGANIZATION Name Ichange 90-0265283 Doing Business As Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-347 - 3300(303)5776 S CROCKER ST Amende return 1,959,153. G Gross receipts \$ City, town, or post office, state, and ZIP code Applica-STMT 1 LITTLETON, CO 80120 H(a) Is this a group return pendina F Name and address of principal officer: KIM HARJA X Yes No for affiliates? H(b) Are all affiliates included? Yes X No 5776 S CROCKER ST, LITTLETON, 80120 I Tax-exempt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or If "No," attach a list (see instructions) J Website: ► N/A H(c) Group exemption number ▶ 3457 Corporation Trust X Association K Form of organization: L Year of formation: M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: PROVIDE PROGRAMS TO ENCOURAGE Activities & Governance COMMUNICATION BETWEEN SCHOOLS AND PARENTS. PROVIDE FUNDS FOR If the organization discontinued its operations or disposed of more than 25% of its net assets. 15400 Number of voting members of the governing body (Part VI, line 1a) 15400 Number of independent voting members of the governing body (Part VI, line 1b) 4 Ō 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 0 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), Ine 12 EIVED b Net unrelated business taxable income from Form 990-T, line 34 Ō. OSO **Prior Year Current Year** တ 369,753 519,803. Contributions and grants (Part VIII, line 1h) FEB 1 1 2014 **5** 0. 0. Program service revenue (Part VIII, line 2g) 1,180. 779. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) N, UT 908,341 892,993. ,279,274 413,575. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,074,878 904,936. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. Ō. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 5,710. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 265,804 412,471. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 317,407. 1,346,392. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) <67,118. 96,168. Revenue less expenses. Subtract line 18 from line 12 5 **Beginning of Current Year End of Year** 1,127,796. 1,223,964. 20 Total assets (Part X, line 16) 0. 0. 21 Total liabilities (Part X. line 26) 1.127.7961,223,964. 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of breparer (other than officer) is based on all information of which preparer has any knowledge. Sign KIM HARJA. PRESIDENT Here Type or print name and title Print/Type preparer's name Preparer Paid BRYAN D. MOGG P00237137 Firm's name MOGG & ASSOCIATES Preparer Firm's EIN 26-0735604 Firm's address 68 INVERNESS LN E, Use Only STE Phone no. (720) 468-0282 ENGLEWOOD, CO 80112 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

LHA For Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form **990** (2012)

	•	t x	•
	LITTLETON PUBLIC SCHOOLS .		
Form	m 990 (2012) PARENT TEACHER ORGANIZATION	90-0265283	Page 2
	art III   Statement of Program Service Accomplishments	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	rage =
	Check if Schedule O contains a response to any question in this Part !!!		
1	Briefly describe the organization's mission:		
	PROVIDE PROGRAMS TO ENCOURAGE COMMUNICATION E	SETWEEN SCHOOLS AND	
	PARENTS. PROVIDE FUNDS FOR EDUCATIONAL PROGR	RAMS BASED ON COMMUNIT	Ϋ́
	IDENTIFIED NEEDS.		
2	Did the organization undertake any significant program services during the year which well	re not listed on	
	the pnor Form 990 or 990-EZ?	Y	es 🗶 No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, ai	ny program services?	es 🗓 No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest	program services, as measured by expen	ses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants a	and allocations to others, the total expense	es, and
	revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$ 1,311,292. including grants of \$ 90	04,936. ) (Revenue \$	)
	PROVIDE EDUCATIONAL MATERIALS AND OPPORTUNITI	ES BASED ON COMMUNITY	<u> </u>
	IDENTIFIED NEEDS.		
	· · · · · · · · · · · · · · · · · · ·		
		<u> </u>	
		· · · · · · · · · · · · · · · · · · ·	
		····	
4b	(Code) (Expenses \$ including grants of \$	) (Revenue \$	
			·
	**************************************		
		<del></del>	
		<del></del>	
		<del></del>	
		<del></del>	
	· · · · · · · · · · · · · · · · · · ·		
4c	(Code ) (Expenses \$ including grants of \$	) (Revenue \$	<del></del> ;
70	/ Coope		
		•	
		<del></del>	

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of the Total program service expenses ► 1,31

) (Revenue \$

including grants of \$ 1,311,292.

#### LITTLETON PUBLIC SCHOOLS PARENT TEACHER ORGANIZATION

Form 990 (2012) PARENT TEACH
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			3.7
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		Х
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
••	as applicable.			
а			İ	
_	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			Х
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-		Х
_	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	_	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	-43	
13	complete Schedule G, Part III	19	х	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		F	ggn	(2012)

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#### LITTLETON PUBLIC SCHOOLS PARENT TEACHER ORGANIZATION

Form 990 (2012) PARENT TEACHER ORG
Part IV 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 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
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		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		•	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
240	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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
·	•	24c		
4	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	2-74		-
25a	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
L	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	ZJa		
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		25b		х
00	Schedule L, Part I  Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	230		
26	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	i '		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	<del></del> -		
20	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		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
-	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			-
٠.	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
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		Х
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	L
		Form	990	(2012)

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LITTLETON PUBLIC SCHOOLS . PARENT TEACHER ORGANIZATION

01111 330	(2014)	
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	I						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	į						
	(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							
ь	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)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х				
b	If "Yes," enter the name of the foreign country:							
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			•				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
С	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 organization solicit							
	any contributions that were not tax deductible as charitable contributions?	6a		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		i					
	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х				
þ	b If "Yes," did the organization notify the donor of the value of the goods or services provided?							
С	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?							
đ	If "Yes," indicate the number of Forms 8282 filed during the year							
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g_						
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting							
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.	0-						
а	Did the organization make any taxable distributions under section 4966?	9a 9b						
	Did the organization make a distribution to a donor, donor advisor, or related person?	90	-	<u> </u>				
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12							
a	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b							
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders							
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)							
120	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?	13a						
а	Note. See the instructions for additional information the organization must report on Schedule O.	.Ja						
h	Enter the amount of reserves the organization is required to maintain by the states in which the							
U	organization is licensed to issue qualified health plans							
r	Enter the amount of reserves on hand							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
	the second secon							

#### LITTLETON PUBLIC SCHOOLS PARENT TEACHER ORGANIZATION

90-0265283

Form 990 (2012) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.

	Check if Schedule O contains a response to any question in this Part VI					<u>L&amp;J</u>			
Sec	tion 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	15400						
	If there are material differences in voting rights among members of the governing body, or if the governing					1			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
b	Enter the number of voting members included in line 1a, above, who are independent	1b	15400						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	p with	any other			х			
	officer, director, trustee, or key employee?								
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	t 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 wa	is filed?	4		Х			
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		Х			
6	Did the organization have members or stockholders?			6_	X	<b> </b>			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or						
	more members of the governing body?			7a	_X_				
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or			•			
	persons other than the governing body?			7b	X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e tollowing:		37				
	The governing body?			8a	X	├──			
b	Each committee with authority to act on behalf of the governing body?			8b	Х	ļ			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the	_					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х			
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	evenu	e Code )			<del> </del>			
				40	Yes	No			
	Did the organization have local chapters, branches, or affiliates?			10a		<del> </del>			
þ	If "Yes," did the organization have written policies and procedures governing the activities of such of	napter	s, aπiliates,	10b	Х				
	and branches to ensure their operations are consistent with the organization's exempt purposes?								
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	зу ветс	re ming the form?	11a	Х	-			
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
ıza b	Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give risi	e to con	flicts?	12a 12b	X				
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			120					
Ç	in Schedule O how this was done	03, 4	Sonbo	12c	х				
13	Did the organization have a written whistleblower policy?			13	X	<u> </u>			
14	Did the organization have a written document retention and destruction policy?			14	Х				
15	Did the process for determining compensation of the following persons include a review and approve	al by ir	ndependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-		ľ					
а	The organization's CEO, Executive Director, or top management official			15a		Х			
	Other officers or key employees of the organization			15b		Х			
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a						
	taxable entity during the year?			16a		Х			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its j	participation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	ınızatıc	n's						
	exempt status with respect to such arrangements?								
Sec.	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶CO								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	ion 501(c)(3)s only) a	availab	le				
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain		•						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c	onflict	of interest policy, an	d finar	ncial				
	statements available to the public during the tax year.								
20	State the name, physical address, and telephone number of the person who possesses the books a	and rec	ords of the organiza	tion:	_	_			
	THE ORGANIZATION - (303) 347-3300 5776 S CROCKER ST, LITTLETON, CO 80120								
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## LITTLETON PUBLIC SCHOOLS . PARENT TEACHER ORGANIZATION

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Form 990 (2012) PARENT TEACHER ORGANIZATION 90-02

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

X Check this box if neither the organization r	or any related	orga	anıza	ation	cor	mpe	nsat	ed any current officer, o		
(A) Name and Title	(B) Average hours per week	r Ibox. u		(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				( <b>D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) SEE ATTACHED LIST	0.00							0.	0.	0
	_									
		Н	Н							
							$\vdash$			

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) Position Average Reportable Estimated Name and title Reportable (do not check more than one box, unless person is both an compensation hours per compensation amount of officer and a director/trustee) week from from related other (list any compensation organizations the hours for (W-2/1099-MISC) organization from the ndividual trustee or related (W-2/1099-MISC) organization organizations and related below organizations line) Ô. Ō. 1b Sub-total 0. 0. c Total from continuation sheets to Part VII, Section A 0. 0. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable 0 compensation from the organization Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on Х 3 line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization Х and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes," complete Schedule J for such person **Section B. Independent Contractors** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (C) (A) Name and business address Description of services Compensation NONE Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Form 990 (2012)

90-0265283

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Form 990 (2012)

Form 990 (2012) Part VIII

232009 12-10-12

Statement of Revenue

LITTLETON PUBLIC SCHOOLS PARENT TEACHER ORGANIZATION

Check if Schedule O contains a response to any question in this Part VIII Revenue excluded from tax under sections 512, 513, or 514 (B) Unrelated Related or Total revenue business exempt function revenue revenue Contributions, Giffs, Grants and Other Similar Amounts 1 a Federated campaigns 86,360. **b** Membership dues 1b 1c c Fundraising events 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 433,443 g Noncash contributions included in lines 1a-1f \$ 519,803 h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 779 779 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (ı) Securities (II) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See 1,398,894 Part IV, line 18 541,165 b Less: direct expenses 857,729. 857,729. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See 29,567 Part IV, line 19 4,413 b Less: direct expenses 25,154. 25,154. c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a ADVERTISING 511190 10,110 10,110. b C d All other revenue 10,110. e Total. Add lines 11a-11d ٥. 868,618. 25,154. 1,413,575. Total revenue. See instructions.

LITTLETON PUBLIC SCHOOLS . Form 990 (2012) PARENT TEACHER ORGANIZATION

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respor		is Part IX	721	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	900,482.	900,482.		
2	Grants and other assistance to individuals in			ļ	
	the United States See Part IV, line 22	4,454.	4,454.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				<del></del>
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				····
b	Legal	2 525		2 525	
C	Accounting	2,535.		2,535.	
d	, ,				<del> </del>
e	Professional fundraising services. See Part IV, line 17		· · · · · · · · · · · · · · · · · · ·		****
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	45.	45.		
12	Advertising and promotion	40.			
13	Office expenses Information technology				
14 15	Royalties				
	•	193.	193.	- <u> </u>	
16 17	Occupancy Travel	53,846.	53,846.		
18	Payments of travel or entertainment expenses	33,010.			
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	19,507.	19,507.		
20	Interest	,,			
21	Payments to affiliates	-			· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization				···
23	Insurance		-		
24	Other expenses. Itemize expenses not covered				
-	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	OTHER EXPENSES	233,548.	233,548.		
b	SUPPLIES	44,322.	44,322.		
С	EQUIPMENT RENTAL AND MA	29,203.	29,203.		
d	PRINTING AND PUBLICATIO	25,692.	25,692.		
e	All other expenses	3,580.		3,580.	•
25	Total functional expenses. Add lines 1 through 24e	1,317,407.	1,311,292.	6,115.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.		ļ		
	Check here If following SOP 98-2 (ASC 958-720)				

#### LITTLETON PUBLIC SCHOOLS , PARENT TEACHER ORGANIZATION

Form 990 (2012)
Part X Balance Sheet

		Check if Schedule O contains a response to any	question in this Part X			
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		548,121.	1	581,601.
	2	Savings and temporary cash investments	574,878.	2	631,910.	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		4		
	5	Loans and other receivables from current and for				
		trustees, key employees, and highest compensation				
		Part II of Schedule L			5	
	6	Loans and other receivables from other disquali	fied persons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sect	ion 501(c)(9) voluntary			
s	İ	employees' beneficiary organizations (see instr).	Complete Part II of Sch L		_6_	
Assets	7	Notes and loans receivable, net		4 505	7	40.450
As	8	Inventories for sale or use		4,797.	_8	10,453.
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis Complete Part VI of Schedule D	10a			
	l .	•	10b		10c	
	11	Investments - publicly traded securities		1	11	
	12	Investments - other securities. See Part IV, line 1			12	
	13	Investments - program-related. See Part IV, line	11		13	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		1,127,796.	15	1,223,964.
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	1,127,790.	16	1,223,304.
	17	Accounts payable and accrued expenses		17		
	18 19	Grants payable Deferred revenue			18	
	20				19	
<b>'</b> A	21	Tax-exempt bond liabilities	Part IV of Schodulo D		20 21	
Liabilities	22	Escrow or custodial account liability. Complete I Loans and other payables to current and former			21	
iii	22	key employees, highest compensated employee				
Lia		Complete Part II of Schedule L	s, and disqualified persons.		22	
	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	•		24	<u> </u>
	25	Other liabilities (including federal income tax, pa	·			
		parties, and other liabilities not included on lines				
	•	Schedule D	//		25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
		Organizations that follow SFAS 117 (ASC 958	, check here X and			-
S		complete lines 27 through 29, and lines 33 an				
Juc.	27	Unrestricted net assets		1,127,796.	27	1,223,964.
Bala	28	Temporarily restricted net assets			28	
id E	29	Permanently restricted net assets			29	
F		Organizations that do not follow SFAS 117 (A	SC 958), check here 🕨 🗔			<del>-</del>
ō		and complete lines 30 through 34.				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30	
Ass	31	Paid-in or capital surplus, or land, building, or eq	uipment fund		31	
et,	32	Retained earnings, endowment, accumulated in	come, or other funds		32	
2	33	Total net assets or fund balances		1,127,796.	33	1,223,964.
	34	Total liabilities and net assets/fund balances		1,127,796.	34	1,223,964.

LITTLETON PUBLIC SCHOOLS PARE

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ENT	TEACHER	ORGANIZATION	90-0265283	Page 12
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	1990 (2012) PARENT TEACHER ORGANIZATION	90-	<u> 0265283</u>	_Pa	ge <b>12</b>			
Pa	rt XI Reconciliation of Net Assets				_			
	Check if Schedule O contains a response to any question in this Part XI				ᆜ			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,41	3,5	75.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,31	7,4	68.			
3								
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,12	<u>, , , , , , , , , , , , , , , , , , , </u>	96.			
5	Net unrealized gains (losses) on investments	5						
6	Donated services and use of facilities	6						
7	Investment expenses	7		_				
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	10	1,22	<b>२</b>	64			
Pai	column (B)) rt XIII Financial Statements and Reporting	LIUT	1,22	<i>3</i> , <i>3</i>	04.			
<u>. u</u>	Check if Schedule O contains a response to any question in this Part XII							
	Check it Schedule O contains a response to any question in this Part XII			Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_ 🗂					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			<b>.</b>			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis				. v			
b	Were the organization's financial statements audited by an independent accountant?		2b		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis	,					
	consolidated basis, or both Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt	,		1			
	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 Sch	edule C	).					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit					
	Act and OMB Circular A-133?		3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired au	dıt					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	_	<u> </u>			
			Form	990	(2012)			

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

#### **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

Open to Public

Employer identification number Name of the organization LITTLETON PUBLIC SCHOOLS 90-0265283 PARENT TEACHER ORGANIZATION Part I 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). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 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 organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 11 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. d \_\_\_\_ Type III - Non-functionally integrated b \_\_\_ Type II c \_\_\_\_ Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No 11g(i) the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (v) Did you notify the (vi) Is the (iv) Is the organization (vii) Amount of monetary (i) Name of supported (ii) EIN (iii) Type of organization organization in col. (i) organized in the in col. (i) listed in your organization in col. organization (described on lines 1-9) support governing document? (i) of your support? above or IRC section (see instructions)) Yes Nο Yes No Yes

#### Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants.")						
2	Tax revenues levied for the organ-		·				
	ızatıon's benefit and either paid to					i	
	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						
	ction B. Total Support		•				
Cale	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest,				Ī		
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
-	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instructi	ons)	,		12	
	First five years. If the Form 990 is for			rd. fourth. or fifth t	ax vear as a section	on 501(c)(3)	
_	organization, check this box and stop	=	, .				<u> </u>
Se	ction C. Computation of Publ		rcentage				
14	Public support percentage for 2012 (I	ine 6, column (f) d	ıvıded by line 11,	column (f))		14	%
15	Public support percentage from 2011	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2012. If the c	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or	more, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organizatioi	า			▶□
b	33 1/3% support test - 2011. If the o	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/39	% or more, check tl	nis box
	and stop here. The organization quali	ifies as a publicly:	supported organiz	ation			▶□
17a	10% -facts-and-circumstances tes	t - <b>2012.</b> If the org	anization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check t	his box and stop I	here. Explain in Pa	art IV how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	ition qualifies as a	publicly supporte	d organization		
b	10% -facts-and-circumstances test	t - <b>2011.</b> If the org	anization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th	ne "facts-and-circu	ımstances" test, c	heck this box and	stop here. Explai	n in Part IV how the	·
	organization meets the "facts-and-circ						▶□
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	ia, 16b, 17a, or 17	b, check this box	and see instruction	s D
			·		Sah	edule A (Form 990	or 990-E7\ 2012

#### Schedule A (Form 990 or 990-EZ) 2012 PARENT TEACHER ORGANIZATION

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.) Section A. Public Support Calendar year (or fiscal year beginning in) (f) Total (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 1 Gifts, grants, contributions, and membership fees received. (Do not 313,946. 314,995. 360,126. 369,753. 519,803 1,878,623. include any "unusual grants.") Gross receipts from admissions. merchandise sold or services performed, or facilities furnished in any activity that is related to the 2.154.674 1,894,055 1,669,615 1,610,411 1,428,461 8,757,216. organization's tax-exempt purpose 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 2,468,620 2,209,050. 2,029,741 1,980,164 1,948,264 10 635 839. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 0. 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 0. amount on line 13 for the year 0. c Add lines 7a and 7b 10,635,839. 8 Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2008 (e) 2012 (f) Total (b) 2009 (c) 2010 (d) 2011 2,468,620, 2,209,050, 2,029,741 1,980,164 1,948,264 10,635,839. 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties 7,279 2,506 779 15,649. 3,905 1,180 and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 7.279 3,905. 2,506. 1,180. 779 15,649. c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carned on Other income. Do not include gain or loss from the sale of capital 7,588. 7,035. 8,341. 10,110 33,074. assets (Explain in Part IV.) 2,220,543. 2,039,282. 1,989,685. 10,684,562. 2,475,899. 1,959,153 Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 99.54 15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) % 15 99.53 16 Public support percentage from 2011 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage .15 17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) 17 % .32 18 % 18 Investment income percentage from 2011 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not ightharpoons Xmore than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

#### SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

OMB No 1545-0047

Open To Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

LITTLETON PUBLIC SCHOOLS

Employer identification number

90-0265283 PARENT TEACHER ORGANIZATION Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants а Solicitation of government grants b Internet and email solicitations Phone solicitations Special fundraising events C In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or ☐ No \_ Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid (iii) Did (vi) Amount paid (iv) Gross receipts (i) Name and address of individual to (or retained by) to (or retained by) have custody or control of contributions? (ii) Activity fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No **Total** 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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LITTLETON PUBLIC SCHOOLS 90~0265283 Page 2 Schedule G (Form 990 or 990 EZ) 2012 PARENT TEACHER ORGANIZATION Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 (c) Other events (b) Event #2 (a) Event #1 (d) Total events LAURA WILDERLOIS LENSKI (add col. (a) through 29 ELEMENTARY ELEMENTARY F col (c)) (event type) (event type) (total number) 180,587. 1,036,394. 1,398,894. 181,913. Gross receipts Less: Contributions 1,036,394. 1,398,894. 181,913. 180,587. 3 Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses Rent/facility costs Food and beverages Entertainment 541,165. 37,037. 55,650. 448,478 Other direct expenses 541,165 10 Direct expense summary. Add lines 4 through 9 in column (d) 857,729 11 Net income summary. Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes **Direct Expenses** Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes % 6 Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities CO X Yes a is the organization licensed to operate gaming activities in each of these states?

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

Yes X No

b If "No," explain:

b If "Yes," explain:

#### LITTLETON PUBLIC SCHOOLS Schedule G (Form 990 or 990 EZ) 2012 PARENT TEACHER ORGANIZATION 90-0265283 Page 3 X Yes 11 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed Yes X No to administer charitable gaming? 13 Indicate the percentage of gaming activity operated in: a The organization's facility 13b 100.00 b An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name ► SEE ATTACHED LIST Address ▶ 5776 S CROCKER ST - LITTLETON, CO 80120 Yes X No 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party > \$ c If "Yes," enter name and address of the third party: 16 Gaming manager information: Name ► SEE ATTACHED LIST Gaming manager compensation > \$ Description of services provided MAINTAIN LICENSE, DESIGN AND UTILIZE PROCEDURES REQUIRED BY COLORADO, MAINTAIN BOOKS AND RECORDS, AND FILE APPLICABLE FORMS WITH COLORADO. X Director/officer 」 Employee Independent contractor 17 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to X Yes No retain the state gaming license? 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 > \$ 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 complete this part to provide any additional information (see instructions).

**2 Employer identification number** 90-0265283 OMB No 1545-0047 Open to Public PPORTUNITIES BASED ON Inspection (h) Purpose of grant COMMUNITY IDENTIFIED ROVIDE EDUCATIONAL or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any MATERIALS AND Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of 900,482 cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section PARENT TEACHER ORGANIZATION if applicable LITTLETON PUBLIC SCHOOLS Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization LITTLETON PUBLIC SCHOOLS or government Name of the organization LITTLETON, CO 80120 5776 S CROCKER ST Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part Part

Schedule I (Form 990) (2012)

90-0265283

Schedule I (Form 990) (2012)

(f) Description of non-cash assistance Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed THE NEEDS PART I, LINE 2: EACH SCHOOL PARENT TEACHER ORGANIZATION WORKS THE APPROVED THE PARENTS AND TEACHERS ARE CLOSELY WITH ITS SCHOOL THROUGH PARENT AND TEACHER INTERACTION. (d) Amount of non-cash assistance OF THE SCHOOL ARE DETERMINED BY THE PARENTS AND TEACHERS. (c) Amount of cash grant (b) Number of recipients FUNDING IS VOTED ON BY THE ORGANIZATION. (a) Type of grant or assistance H SCHEDULE Part III

COLUMN (H): PART II, LINE 1,

ACTIVE PARTICIPANTS IN THE USE OF THE FUNDS

NAME OF ORGANIZATION OR GOVERNMENT: LITTLETON PUBLIC SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: PROVIDE EDUCATIONAL MATERIALS AND

Schedule I (Form 990) (2012)

Cabadula I	(Form 000)	]	LITT DARI	LETON PUBI	LIC SCHOOLS R ORGANIZAT	TON	90-0265283	Page 2
Part IV	(Form 990) Supplement	ntal Infor	matic	on TEMOTIES	CONGRATIZATI	1011	70 0200200	raye z
OPPOR'	TUNITIES	BASED	ON	COMMUNITY	IDENTIFIED	NEEDS.		
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232291 05-01-12 Schedule I (Form 990)

#### **SCHEDULE M** (Form 990)

Department of the Treasury Internal Revenue Service

#### **Noncash Contributions**

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047

Open to Public . Inspection

Name of the organization

LITTLETON PUBLIC SCHOOLS PARENT TEACHER ORGANIZATION **Employer identification number** 90-0265283

Pai	rt I	Types of Property									
			(a) Check if	(b) Number of	(c) Noncash contr		Me	( <b>d)</b> ethod of det	ermın	ıng	
			applicable	contributions or items contributed	amounts repor Form 990, Part V		nonca	sh contribut	ion an	nounts	s 
1	Art -	Works of art									
2	Art ·	Historical treasures									
3	Art ·	Fractional interests									
4	Воо	ks and publications				-	-				
5		ning and household goods									-
6		and other vehicles									
7	Boa	ts and planes									
8		lectual property		i							
9		unties - Publicly traded					-				
10	Sec	unties - Closely held stock									
11		unties - Partnership, LLC, or									
	trust	interests									
12	Sec	unties - Miscellaneous									
13	Qua	ified conservation contribution -									
	Histo	onc structures									
14	Qua	ified conservation contribution - Other		_							
15	Real	estate - Residential									
16	Real	estate - Commercial									
17	Real	estate - Other	·								
18	Colle	ectibles									
19	Food	d inventory									
20	Drug	s and medical supplies									
21	Taxi	dermy									
22	Histo	orical artifacts									
23	Scie	ntific specimens									
24	Arch	eological artifacts		_							
25	Othe	er > (SILENT AUCTIO)		0		0.	DONOR	PROVI	<u>DED</u>	VA	LUE
26	Othe	er 🕨 ()									
27	Othe	er 🕨 ()									
28	Othe										
29		ber of Forms 8283 received by the organia		• •							
	for v	hich the organization completed Form 828	83, Part IV, I	Donee Acknowled	gement	29					
								. г		Yes	No
30a		ng the year, did the organization receive by							ľ		
		ast three years from the date of the initial o	contribution	, and which is not	required to be use	d for exem	npt purpose	s for			v
		entire holding period?						}	30a		<u>X</u> _
b		es," describe the arrangement in Part II.							l		v
31		s the organization have a gift acceptance p	-	•	•				31		<u>X</u>
32a		s the organization hire or use third parties	or related or	rganizations to sol	cit, process, or se	II noncash			_		v
		ributions?						}	32a		Х
		es," describe in Part II.				, ,					
33		e organization did not report an amount in	column (c) f	or a type of prope	rty for which colur	nn (a) is ch	ecked,				
	desc	ribe in Part II.							1		i

### LITTLETON PUBLIC SCHOOLS

Schedule M (Form 990) (2012) PARENT TEACHER ORGANIZATION 90-0265283 Page 2 Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both Also complete this part for any additional information SCHEDULE M, LINE 33: ORGANIZATIONS DID NOT REPORT THE VALUE OF THEIR NON-CASH CONTRIBUTIONS AS GROSS RECEIPTS. ORGANIZATIONS ONLY REPORTED THE CASH RECEIPTS FROM THE EVENTS.

#### **SCHEDULE 0** (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Department of the Treasury Internal Revenue Service

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

LITTLETON PUBLIC SCHOOLS PARENT TEACHER ORGANIZATION **Employer identification number** 90-0265283

FARENT TEACHER ORGANIZATION 50 0203203
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EDUCATIONAL PROGRAMS BASED ON COMMUNITY IDENTIFIED NEEDS.
FORM 990, PART VI, SECTION A, LINE 6: EACH PARENT OF EACH STUDENT IS A
VOTING MEMBER OF THE BOARD.
FORM 990, PART VI, SECTION A, LINE 7A: THE OFFICERS OF THE BOARD ARE
ELECTED BY THE PARENTS OF THE STUDENTS.
FORM 990, PART VI, SECTION A, LINE 7B: THE PARENTS OF THE STUDENTS VOTE ON
ACTIONS TAKEN BY THE BOARD.
FORM 990, PART VI, SECTION B, LINE 11: GOVERNING BODY CONSISTS OF
PRESIDENT, VICE-PRESIDENT, AND TREASURER. THE TREASURER WORKS WITH THE TAX
PREPARER TO COMPLETE FORM 990 AND THE APPLICABLE SCHEDULES. AFTER
COMPLETION, THE FORM 990 IS PRESENTED TO THE PRESIDENT FOR THEIR REVIEW AND
SIGNATURE WITHOUT A FORMAL MEETING.
FORM 990, PART VI, SECTION B, LINE 12C: PTO PRESIDENT REVIEWS AND SIGNS
CONFLICT OF INTEREST POLICY AND ENSURES TREASURER AND ANY COMMITTEES WITH
AUTHORITY TO SPEND MONEY ARE AWARE OF AND FOLLOW THE POLICY.
FORM 990, PART VI, SECTION C, LINE 19: COPIES OF THE BOARD MINUTES ARE
MAINTAINED AT EACH SCHOOL OFFICE AND ARE AVAILABLE UPON REQUEST. GOVERNING
DOCUMENTS ARE MAINTAINED AT THE SCHOOL DISTRICT OFFICE AND ARE AVAILABLE
UPON REQUEST.

# LITTLETON PUBLIC SCHOOLS PTO 90-0265283

# OFFICERS FYE 2013

SCHOOL NAME	NAME - TITLE	ADDRESS	COMPENSATION	PLANS & DEFERRED COMPENSATION	OTHER ALLOWANCES
Hernage High School	Julie TenEyck = President	c/o Hentage High School	0	0	0
Powell Middle School	Jeralyn = Co-President, Sandy Schell = Co-President	c/o Powell Middle School	0	0	0
Newton Middle School	Stacy LeMay = President	do Newlon Middle School	0	0	0
Goddard Middle School	Lon Perry = Co-President, Susan Tilton = Co-President	c/o Goddard Middle School	0	0	0
Euclid Middle School	Bill Canterbury = President	c/o Euclid Middle School	0	0	0
Littleton Academy	Pam Shaw = Co-President, Denise Sanchez = Co-President	do Littleton Academy School Association	0	0	0
Littleton Academy Cub Pack 49		c/o Littleton Academy School Association	0	0	0
Highland Elementary	Julie Butscher = Co-President, Rob Cemich = Co-President	ර Highland Elementary	0	0	0
Highland Cub Scout Pack #175	Todd Fowler = Cubmaster	ර Highland Elementary	0	0	0
Frankin Elementary	Robyn Tnpp = Co-President, Kristen Winfield = Co-President	c/o Franklın Elementary	0	0	0
Frankin Elementary	Dave Sodequist ≈ Cubmaster	c/o Franklin Elementary	0	0	0
East Elementary	Tamı St. John = President	c/o East Elementary	0	0	0
Laura Engalls Wilder Elementary	Mary Dailey = Co-President, Patti Knepper = Co-President	do Laura Ingalls Wilder Elementary	0	0	0
Mark Twain Elementary	Tess Pantler = Co-President, Michele Hanna = Co-President	c/o Mark Twain Elementary	0	0	0
Twain Cub Scout Pack 632	Tonn Blarr = Cubmaster	clo Mark Twain Elementary	0	0	0
Carl Sandburg Elementary	Val Cromar = President	clo Carl Sandburg Elementary	0	0	0
Sandburg Cub Scout Pack 559	Andy Marquez = Cubmaster	ර Carl Sandburg Elementary	0	0	0
Damon Runyon Elementary	Ern Weaver = Co-President, Amanda Pfaltzgraff = Co-President	do Damon Runyon Elementary	0	0	0
Runyon Cub Scout Pack #462	Watter Amhols = Cubmaster	c/o Damon Runyon Elementary	0	0	0
Peabody Elementary	Bngitta Robinson = President	с/о Peabody Elementary	0	0	0
Peabody Elementary Cub Scout Pack #358	Jeff Williams = Cubmaster	do Peabody Elementary	0	0	0
Lenski Cub Scoul Pack #664	Tom Pnce - Cubmaster	do Lois Lenski Elementary	0	0	0
Lois Lenski Elementary	Arry Kurtz = Co-President, Nancy Seavall = Co-President	c/o Lois Lenski Elementary	0	0	0
Mark Hopkins Elementary	Sarah Connolly = President	do Mark Hopkins Elementary	0	0	0
Hopkins Cub Scout Pack #362	Sean Jeffers = Cubmaster	do Mark Hopkins Elementary	0	0	0
The Village Preschool	Kelly Lawrence = President	ଦo The Village Preschool	0	0	0
Field Elementary	Alissa Rausch = President	c/o Field Elementary	0	0	0
Ralph Moody Elementary	Lon Hatanaka =Co-President, JoEllen Nikkel = Co-President	c/o Ralph Moody Elementary	0	0	0
Centennial Elementary	Peggy Lapp = President	ර Centennial Elementary	0	0	0
Arapahoe High School	Came Warren-Gully = President	do Arapahoe High School	0	0	0
Lrttleton High School	Wendy Burbage = President	c/o Littleton High School	0	0	0

Littleton Public Schools PTOs List of Gaming Managers June 30, 2013

#### 90-0265283

Megan Kennedy

**Carl Sandburg Elementary** 

**Tod Kramer** 

**Damon Runyon Elementary** 

**Rob Cernich** 

**Highland Elementary** 

Karen Svendson

Laura Ingalls Wilder Elementary

Barbara DeSpain

Lois Lenski Elementary

FORM 990 LINE H(B) - 1 ORGANIZATIONS INC	LIST OF AFFILIATED CLUDED IN GROUP RETURN	STATEMENT 1
NAME OF ORGANIZATION	ORGANIZATION'S ADDRESS	EMPLOYER ID
HERITAGE HIGH SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501709
POWELL MIDDLE SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501712
GODDARD MIDDLE SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501717
EUCLID MIDDLE SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501718
LITTLETON ACADEMY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1354609
HIGHLAND ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501735
FRANKLIN ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501733
EAST ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501731
NEWTON MIDDLE SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501714
LAURA INGALLS WILDER ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501720
MARK TWAIN ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501722
CARL SANDBURG ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501725
	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501726
PEABODY ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501727
	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501737
MARK HOPKINS ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501736

#### LITTLETON PUBLIC SCHOOLS PARENT TEACHER

	•	
THE VILLAGE PRESCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501741
FIELD ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501732
RALPH MOODY ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501728
CENTENNIAL ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501729
ARAPAHOE HIGH SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501711
LITTLETON HIGH SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501708
DAMON RUNYON ELEMENTARY CUB SCOUT PACK 462	5776 S CROCKER ST - LITTLETON, CO 80120	45-3771765
LENSKI CUB SCOUT PACK 664	5776 S CROCKER ST - LITTLETON, CO 80120	84-1156906
MARK TWAIN CUB SCOUT PACK 632	5776 S CROCKER ST - LITTLETON, CO 80120	27-4387894
CARL SANDBURG ELEMENTARY CUB SCOUT PACK 559	5776 S CROCKER ST - LITTLETON, CO 80120	84-1040262
LITTLETON ACADEMY CUB SCOUT PACK 49	5776 S CROCKER ST - LITTLETON, CO 80120	80-0022743

FORM 8868 LIST OF ORGANIZATIONS INC	F AFFILIATED CLUDED IN GROUP RETURN	STATEMENT 2
NAME OF ORGANIZATION	ORGANIZATION'S ADDRESS	EMPLOYER ID
HERITAGE HIGH SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501709
POWELL MIDDLE SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501712
GODDARD MIDDLE SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501717
EUCLID MIDDLE SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501718
LITTLETON ACADEMY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1354609
HIGHLAND ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501735
FRANKLIN ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501733
EAST ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501731
NEWTON MIDDLE SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501714
LAURA INGALLS WILDER ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501720
MARK TWAIN ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501722
CARL SANDBURG ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501725
DAMON RUNYON ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501726
PEABODY ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501727
LOIS LENSKI ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501737
MARK HOPKINS ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501736

#### LITTLETON PUBLIC SCHOOLS PARENT TEACHER

	•	
THE VILLAGE PRESCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501741
FIELD ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501732
RALPH MOODY ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501728
CENTENNIAL ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501729
ARAPAHOE HIGH SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501711
LITTLETON HIGH SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501708
DAMON RUNYON ELEMENTARY CUB SCOUT PACK 462	5776 S CROCKER ST - LITTLETON, CO 80120	45-3771765
LENSKI CUB SCOUT PACK 664	5776 S CROCKER ST - LITTLETON, CO 80120	84-1156906
MARK TWAIN CUB SCOUT PACK 632	5776 S CROCKER ST - LITTLETON, CO 80120	27-4387894
CARL SANDBURG ELEMENTARY CUB SCOUT PACK 559	5776 S CROCKER ST - LITTLETON, CO 80120	84-1040262
LITTLETON ACADEMY CUB SCOUT PACK 49	5776 S CROCKER ST - LITTLETON, CO 80120	80-0022743

#### Form **8868**

(Rev January 2013) 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.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

OMB No. 1545-1709

ightharpoons

Form 8868 (Rev. 1-2013)

Do not c	omplete Part II unless you have already been granted a ic filing (e-file). You can electronically file Form 8868 if y	in automa ou need a	itic 3-month extension on a previous a 3-month automatic extension of tim	ly filed For ne to file (6	rm 8868 3 months for a corp	ooration
reaured	to file Form 990-T), or an additional (not automatic) 3-mol	nth extens	sion of time. You can electronically fi	le Form 88	368 to request an	extension
	o file any of the forms listed in Part I or Part II with the exc					
	Benefit Contracts, which must be sent to the IRS in pap					
	v.irs gov/efile and click on e-file for Charities & Nonprofits		(366 mandetions). For more details c	)	Aromo ming or amo	,
Part I			ubmit original (no copies nee	eded).		
A corpoi	ation required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete		
Part I on	ly				•	<b>▶</b>
	corporations (including 1120-C filers), partnerships, REM come tax returns.	ICs, and ti	rusts must use Form 7004 to reques	t an exten	sion of time	
Type or	Name of exempt organization or other filer, see instru	ctions.		Employer	identification num	ıber (EIN) or
print	LITTLETON PUBLIC SCHOOLS					
	PARENT TEACHER ORGANIZATION 90-026  Number, street, and room or suite no. If a P.O. box, see instructions Social security number					83
File by the due date fo filing your						
return See	5776 S CROCKER ST					
instructions	City, town or post office, state, and ZIP code. For a for LITTLETON, CO 80120	reign add	ress, see instructions.	_		
Enter the Return code for the return that this application is for (file a separate application for each return)						0 1
Applicat	i	Return	Application			Return
Applicat Is For	ion		Is For			Code
	0 5 000 57	Code			<del>-</del>	07
	0 or Form 990-EZ	01	Form 990-T (corporation)			<del></del>
Form 99		02	Form 1041-A		<del> </del>	08
	20 (Individual)	03	Form 4720			09
Form 99	0-PF	04	Form 5227		<del></del>	10
Form 99	0-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
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	THE ORGANIZATION					
<ul><li>The b</li></ul>	ooks are in the care of ▶ 5776 S CROCKER	ST -	LITTLETON, CO 801	20		
Telep	hone No. ► (303) 347-3300		FAX No		<del></del>	_
	organization does not have an office or place of business				•	▶ ∐
<ul><li>If this</li></ul>	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) $3457$ . I	f this is fo	r the whole group,	check this
box 🕨	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	f all memb	ers the extens <u>ion</u>	ıs for
1   re	equest an automatic 3-month (6 months for a corporation FEBRUARY 15, 2014, to file the exemp				The extension	
	for the organization's return for:	3				
	calendar year or					
-	X tax year beginning JUL 1, 2012	, an	dending JUN 30, 2013		•	
			-		_	
2 If t	he tax year entered in line 1 is for less than 12 months, c  Change in accounting period	heck reas	on: Initial return	Fınal retur	n	1
3a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any		<del> </del>	
	nrefundable credits. See instructions.			3a	\$	0.
b If t	his application is for Form 990-PF, 990-T, 4720, or 6069,					
	timated tax payments made. Include any prior year overp			3b	\$	0.
	lance due. Subtract line 3b from line 3a. Include your pa				_	0.
bv	using EFTPS (Electronic Federal Tax Payment System).	See ınstru	ctions.	3c	<b>3</b> 5	<u> </u>

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.