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.... 990-EZ

Short Form **Return of Organization Exempt From Income Tax**

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

(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

Open to Public Inspection

OMB No 1545-1150

2012

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements A For the 2012 calendar year, or tax year beginning August 1 2012, and ending July 31 , 20 13 C Name of organization B Check if applicable. D Employer identification number Address change Rice Lake PTO 41-1443591 Name change Number and street (or P O box, if mail is not delivered to street address) Room/suite E Telephone number Initial return 13755 89th Avenue North 763-420-4220 Terminated City or town, state or country, and ZIP + 4 F Group Exemption Amended return Number ▶ Maple Grove, MN 55369-9573 Application pending G Accounting Method:

✓ Cash

Accrual Other (specify) ▶ H Check ► ☐ If the organization is not Website: ► schools.district279.org/rl/parents/pto required to attach Schedule B 527 (Form 990, 990-EZ, or 990-PF). If the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return. L Add lines 5b. 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II. line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I Check if the organization used Schedule O to respond to any question in this Part I . 263.71 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 3 Investment income 3.17 52 Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than OF MANAGEMENT 6a Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . 6b 90450.09 Less: direct expenses from gaming and fundraising events . . 6с 47571.62 Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 42611.59 Gross sales of inventory, less returns and allowances 7a Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c 8 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 42878.47 Grants and similar amounts paid (list in Schedule O) 10 42186.85 Benefits paid to or for members 11 RECEIVED 12 12 Salaries, other compensation, and employee benefits . . . 13 13 Professional fees and other payments to independent contractors Š Ō 14 Occupancy, rent, utilities, and maintenance 14 15 15 Printing, publications, postage, and shipping 381.75 16 Other expenses (describe in Schedule O) 16 332.00 17 Total expenses. Add lines 10 through 16 17 42900.60 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 (22.13)Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 end-of-year figure reported on prior year's return) 19 22687.61 20 Other changes in net assets or fund balances (explain in Schedule O) 20 21 Net assets or fund balances at end of year. Combine lines 18 through 20

Form **990-EZ** (2012)

22665.48

Part	·			[2]
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	ran	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	. 63	√
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		<u> </u>
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)?			
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	35a 35b		<u>/</u>
c	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		✓
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		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
99a	Did the organization file Form 1120-POL for this year?	37b		1
38a	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		1
ь	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	308		
39	Section 501(c)(7) organizations. Enter:	1		
а	Initiation fees and capital contributions included on line 9]		
b	Gross receipts, included on line 9, for public use of club facilities	ļ '		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶			
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		· •
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	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 ► Minnesota			
42a	The organization of the or	763-42		<u> </u>
h	Located at ► 12349 85th PI North, Maple Grove, MN ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over	553	Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		√
	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	<u> </u>	✓
43	Section 4947(a)(1) nonexempt charitable 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 43		. !	▶ □
	Did the assessment and the second final distance is 0.16 for 0.25	لــــا	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		1
c d	Did the organization receive any payments for indoor tanning services during the year?	44c		√
4Ea	explanation in Schedule O	44d 45a	\vdash	1
45a 45b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	438		-
-70	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		,
		עטדן		

	90-EZ (2012)]	Yes	Page 4
46	Did the organization engage, directly or in	ndirectly, in political o	ampaign activities on	behalf of or in oppos	ition	1	103	1.40
	to candidates for public office? If "Yes," of		, Part I		<u>. </u>	46		1
Part								
	All section 501(c)(3) organization	is must answer que	estions 47-49b and	52, and complete tl	ne table	es fo	or line	es
	50 and 51	h . d. l. O A		tota David VIII				_
	Check if the organization used Sc	nequie O to respond	to any question in t	nis Part VI	· · ·	-	Yes	. ∟ No
47	Did the organization engage in lobbying	activities or have a	section 501(h) electio	n in effect during the	tay [\dashv	res	NO
•••	year? If "Yes," complete Schedule C, Par					47		1
48	Is the organization a school as described in					48		7
49a	Did the organization make any transfers t					9a		Ż
b	If "Yes," was the related organization a se					9b		
50	Complete this table for the organization's	five highest comper	sated employees (oth	er than officers, direc	tors, tru	ıste	s an	d ke
	employees) who each received more than	1 \$100,000 of compe	nsation from the organ		ne, ente	r "N	one."	
	(a) Name and title of each employee	(b) Average hours per week	(c) Reportable	(d) Health benefits, contributions to employee	(e) Estir	nated	i amou	unt of
	paid more than \$100,000	devoted to position	compensation (Forms W-2/1099-MISC)	benefit plans, and deferred compensation	other	com	oensat	ion
		<u> </u>		Compensation			_	
					<u> </u>			
					ļ			
f	Total number of other employees paid ov	er \$100.000	L		1			
51	Complete this table for the organization			contractors who are	h raasiy	.ad .		. +6
3 1	\$100,000 of compensation from the organization	nization. If there is no	one, enter "None."	contractors who eac	ii receiv	e u i	поте	mai
(0)			1					
(a)	Name and address of each independent contractor pa	ud more than \$100,000	(b) Type of serv	ice (c	c) Compen	Isatio	n	
			-					
		.,					-	
						-		
d	Total number of other independent contra	actors each receiving	over \$100,000 I	>				
52	Did the organization complete Schedule A			and 4947(a)(1)				
	nonexempt charitable trusts must attach	a completed Schedul	<u>e A</u>	<u> </u>	<u>▶ 🗆 Y</u>	es_		No_
	enalties of perjury, I declare that I have examined this intect, and complete Declaration of preparer (other than				nowledge	and I	oelief, i	ıt ıs
. 46, 60	L Complete Declaration of prepare (other than	romoery is based on all fill	amadon of which preparer n	as any knowledge				
Sign	Signature of officer			Date				
Here	1 Any Edward	S Ta	CADLACO	12.	- 73 -	- 13	3	
	Type or print name and title					•	- -	

Preparer's signature

Print/Type preparer's name

Firm's address

May the IRS discuss this return with the preparer shown above? See instructions

Firm's name

Paid

Preparer Use Only

▶ ☐ Yes ☐ No

Check I if self-employed

Firm's EIN ▶

Phone no

Date

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

or section 509(a)(2).

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 Inspection

Name of the organization **Employer identification number** P The

æ	Lake PTO	41-1443591
aı	rt I Reason for Public Charity Status (All organizations must complete this p	part.) See instructions.
е	organization is not a private foundation because it is: (For lines 1 through 11, check only or	ne box.)
1	A church, convention of churches, or association of churches described in section 17	70(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).
1	A medical research organization operated in conjunction with a hospital described in shospital's name, city, and state:	section 170(b)(1)(A)(iii). Enter the
5	An organization operated for the benefit of a college or university owned or operate section 170(b)(1)(A)(iv). (Complete Part II.)	ed by a governmental unit described in
6	☐ 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 gover described in section 170(b)(1)(A)(vi). (Complete Part II.)	rnmental unit or from the general public
3	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)	
9	An organization that normally receives: (1) more than 331/3% of its support from con receipts from activities related to its exempt functions—subject to certain exceptio support from gross investment income and unrelated business taxable income (I acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Page 1)	ons, and (2) no more than 331/3% of its less section 511 tax) from businesses
0	☐ An organization organized and operated exclusively to test for public safety. See sect	tion 509(a)(4).
1	An organization organized and operated exclusively for the benefit of, to perform purposes of one or more publicly supported organizations described in section 509 509(a)(3). Check the box that describes the type of supporting organization and comp	9(a)(1) or section 509(a)(2). See section
	a Type I h Type II a Type III Functionally integrated d	Type III_Non-functionally integrated

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)

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting

following pers		the organization acce	pieu any	girt or co	ontributio	ni irom a	riy Oi trie	3		
	•	indirectly controls, eit		-		•				es No
(ii) A family m	nember of a pers	son described in (ı) abo	ove?						11g(ii)	
		a person described in a person described in a tion about the support							11g(iii)	
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (ii) li	organization sted in your document?	the orgai	rou notify nization in of your port?	organizat (i) organi	Is the tion in col ized in the S ?	(vii) Amount of suppo	
		(,	Yes	No	Yes	No	Yes	No		
(A)Rice Lake Elementary School	41-6001421	6	1		1		/			
(B)										
(C)										
(D)										
(E)										
Total										

					17416	4500 1417417	
Part	Support Schedule for Organiza (Complete only if you checked the						
	Part III. If the organization fails to						any under
Secti	on A. Public Support	y quamy and	<u></u>	stod Bolow, p	iodeo compi	3.0 · u. · · · · · · ·	
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and	(1)	(2) = 3 3 3	(0, 10.0	(4, 50)	10,20	
-	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the	<u> </u>				_	
	organization's benefit and either paid						İ
	to or expended on its behalf	į					
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3					1	
5	The portion of total contributions by			ļ			
•	each person (other than a						
	governmental unit or publicly						
	supported organization) included on]		
	line 1 that exceeds 2% of the amount					İ	
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.		,				
Secti	on B. Total Support						
Caler	dar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends,					1	
	payments received on securities loans,		1			1	
	rents, royalties and income from similar			Ì			
	sources		1				
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	(aaa inatrusti		l <u>.</u>	[40	<u> </u>
12 13	Gross receipts from related activities, etc First five years. If the Form 990 is for the	*	,			12	- FO1/a\/0\
13	organization, check this box and stop he	-			•		, , , ,
Socti	on C. Computation of Public Suppor				• • • • •		· · · ·
14	Public support percentage for 2012 (line 6		•	1 column (fl)	-	14	%
15	Public support percentage from 2011 Sch					15	
16a	331/3% support test—2012. If the organization						
100	box and stop here. The organization qua						
ь	331/3% support test-2011. If the organ			-			
_	check this box and stop here. The organ						
17a	10%-facts-and-circumstances test—20	012. If the ora:	anization did n	ot check a box	on line 13 16	a or 16h and	
170	10% or more, and if the organization me						
	Part IV how the organization meets the "f						
	organization			_	•		. ▶ □
ь	10%-facts-and-circumstances test—20						
~	15 is 10% or more, and if the organization	_			•		•
	Explain in Part IV how the organization m						
	supported organization				-	•	•
18	Private foundation. If the organization di						
	instructions						

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.)

	if the organization fails to quality	under the tes	sts listed beig	w, piease co	mpiete Part i	1.)	
	on A. Public Support						
Calen	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		i				
	received (Do not include any "unusual grants")	8,285.62	1,150.00	130.00	540.00	263.71	10,369.33
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	04 702 04	00 007 00	04.054.05	400 000 40	00 450 00	400 505 00
3	Gross receipts from activities that are not an	94,793.94	93,927.80	94,354.85	109,008.40	90,450.09	482,535.08
3	unrelated trade or business under section 513			+			
_		0	0	0	0	0	0
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf	o	0	0	o	o	0
5	The value of services or facilities						
	furnished by a governmental unit to the					ŀ	
	organization without charge	o	o	o	o	ol	n
6	Total. Add lines 1 through 5	103,079.56	95,077.80	94,484.85	109,548.40	90,713.80	492,904.41
	Amounts included on lines 1, 2, and 3	100,07 3.30	33,077.00	34,404.03	103,340.40	90,713.00	492,304.41
	received from disqualified persons .					į	
_	' '	-					
b	Amounts included on lines 2 and 3						
	received from other than disqualified			j			
	persons that exceed the greater of \$5,000]			
	or 1% of the amount on line 13 for the year					_	
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from			1			
	line 6.)						492,904.41
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	103,079.56	95,077.80	94,484.85	109,548.40	90,713.80	492,904.41
10a	Gross income from interest, dividends,	,	00,077.00	5 1, 10 1100	100,010.10	30,110.00	102,00 1111
	payments received on securities loans, rents,						
	royalties and income from similar sources .	27.54	10.50	8.98	4.69	3.17	54.00
-	Unrelated business taxable income (less	27.54	10.50	0.50	4.05	3.17	54.88
b	section 511 taxes) from businesses	İ					
	acquired after June 30, 1975						
	· ·						
	Add lines 10a and 10b	27.54	10.50	8.98	4.69	3.17	54.88
11	Net income from unrelated business	ļ					
	activities not included in line 10b, whether						
	or not the business is regularly carned on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)					ł	
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	103,107.10	95,088.30	94,493.83	109,553.09	90,716.97	492,959.29
14	First five years. If the Form 990 is for th						
• •	organization, check this box and stop her	_			-		
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line 8			3 column (fl)		15	99.99 %
	Public support percentage from 2011 Sch		•			16	
16 Socti	on D. Computation of Investment Inc					10	99.98 %
				line 19 ==l	n (f)	17	
17	Investment income percentage for 2012 (.011 %
18	Investment income percentage from 2011					18	.017 %
19a	331/3% support tests—2012. If the organi						
	17 is not more than 331/3%, check this box					-	_
b	331/3% support tests—2011. If the organiz						-
	line 18 is not more than 331/3%, check this t	-	•	-			
	Drivate foundation If the organization di			40 401			tions -

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).	
••••		

Rice Lake PTO EIN: 41-1443591 Form 990EZ, Line 6 Schedule - Special Events

All Other (1) Total	9,243 27 80,074 15	9,243 27 80,074 15		
Silent Auction Fundraiser	5,114 00	5,114 00	508.67	4 605 33
Turkey Bingo Fundraiser	4,229.50	4,229.50	1,883 93	2 345 57
Fun Run Fundraiser	2,344.30	2,344 30	169 31	2 174 99
Carnival Fundraiser	7,913 00	7,913.00	4,315 74	3 597 26
C Fundraiser Fi	51,230 08	51,230.08	26,767 05	24 463 03
	Gross Receipts	Gross Revenue	Less: Direct Expenses	Net Income (Loss)

(1) All Other includes the following fundraising events: book fair, school dance, Scrip, Family Nights and other small miscellaneous events

Rice Lake PTO EIN: 41-1443591 Form 990EZ, Line 10 Schedule - Grants and Similar Amounts Paid

Class of Activity	Donee's Name Fundraiser	Donee's Address Fundraiser	Amount Fundraiser	Relationship
Electronic and computer equipment, music, field trips, student patrols, enrichment activities, classroom support, student awards, peer mediation and computer tech support and character education.	Rice Lake Elementary (part of Independent School District #279)	13755 89th Ave No (11200 93rd Ave No) Maple Grove, MN 55369	37,988.25	None
D.A.R.E Program Drug education and resistance program for students	City of Maple Grove Minnesota	12800 Arbor Lakes Pkwy Maple Grove, MN	641.25	None
Ice cream treats for students, Super kids day, staff appreciation, volunteer coordinator supplies and support and other Miscellaneous.	Many	Many	3,557 37	None