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Short Form Return of Organization Exempt From Income Tax

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

2013

OMB No. 1545-1150

Department of the Treasury

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

		ide da vice		
A	For the	2013 calendar year, or tax year beginning August , 2013, and ending	Juli	131,2014
В	Check if ap	oplicable: C Name of organization		identification number
	Address c		£2−∶	4953097
닖	Name cha		Telephone	number
H	Initial retui Terminate			
Ħ	Amended	City or town state or province Nountry and ZIP or foreign postal code	Group Ex	cemption
	Application		Number	188
G	Account	ing Method: Cash ☐ Accrual Other (specify) ► H Che	ck 🕨 🔀	(if the organization is not
_	Website	req. req.		ttach Schedule B
J 1	ax-exen	npt status (check only one) — ≥ 501(c)(3)	m 990, 9	90-EZ, or 990-PF).
K	Form of	organization: Corporation Trust Association Cother Educa-	Fior	
		s 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total as	sets	
(Pa	rt II, col	umn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	. ▶	\$ 141,355
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the ins	truction	ns for Part I)
	_	Check if the organization used Schedule O to respond to any question in this Part I.		<u> 🔀</u>
	1	Contributions, gifts, grants, and similar amounts received	. 1	12.119
LC)	2	Program service revenue including government fees and contracts	. 2	6,300
2015	3	Membership dues and assessments	. 3	4,950
	4	Investment income	. 4	Ø
©	5a	Gross amount from sale of assets other than inventory 5a 5		
	b	Less: cost or other basis and sales expenses		
Æ	С	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	. <u>5c</u>	Ø
	6	Gaming and fundraising events	}	1
POSTALORE MAR	а	Gross income from gaming (attach Schedule G if greater than \$15,000)		
	b	Gross income from fundraising events (not including \$12,119 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 2 220	,	
္က	_		<u> </u>	
	d d	Less: direct expenses from gaming and fundraising events 6c /	ot	
	"	line 6c)		2270
	7a	Gross sales of inventory, less returns and allowances	· 6d	3,340
	, a		?	+
	C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	. 7c	50930
	8	Other revenue (describe in Schedule O)	. 8	10,130
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	▶ 9	77,1069
	10	Grants and similar amounts paid (list in Schedule O)	. 10	
	115	Benefits paid to or for members	111	 - - - - -
S		Salaries other compensation, and employee benefits	. 12	
nse	f3 ³	Professional fees and other payments to independent contractorsp. 0. 9. 2313	. 13	
Expenses	14	Occupancy, rent, utilities, and maintenance	. 14	
页	14 25	Printing, publications, postage, and shipping	. 15	593
	35	Other expenses (describe in Schedule O)	. 16	
	377	Total expenses. Add lines 10 through 16	▶ 17	49,1072
<u> </u>	78 39 30 30	Excess or (deficit) for the year (Subtract line 17 from line 9)	. 18	
set	≨ 19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree wi	th	
Asi		end-of-year figure reported on prior year's return)	. 19	32,414
<u>10</u>) 20	Other changes in net assets or fund balances (explain in Schedule O)	. 20	65
Z	21	Net assets or fund balances at end of year. Combine lines 18 through 20	▶ 21	
Eas	- D	work Paduction Act Notice and the congrete instructions		5 000 E7 (00/0)

Cat. No. 106421



Par	Balance Sheets (see the instructions f	or Part II)				
	Check if the organization used Schedule	O to respond to ar	y question in this			<u> </u>
			ļ.	(A) Beginning of year		B) End of year
22	Cash, savings, and investments				22 23	60,411
23 24	Land and buildings				23	
2 4 25	Total assets				25 25	7
26	Total liabilities (describe in Schedule O)				26	Ø
27	Net assets or fund balances (line 27 of column	(B) must agree with	line 21)		27	60,411
Par				Part III)		Expenses
	Check if the organization used Schedule				(Requ	ured for section
What	is the organization's primary exempt purpose?	udent+Poren	t Education	+ Involvemen	01(c)(3) and 501(c)(4) nizations and section
as m	ibe the organization's program service accompli- easured by expenses. In a clear and concise mand benefited, and other relevant information for ea	anner, describe the	f its three largest per services provide	orogram services, d, the number of	4947	(a)(1) trusts, optional hers.)
28	Grants to School-S	ee Schedi	ile O			
	(Grants \$) If this amount	includes foreign gra	nts check here		28a	25 971
29	Programs - see scho					- 0, 1, 1,
	2013 ensured					
						12076
		includes foreign gra		▶ □	29 a	23,278
30	PTA Boord training ted			luring Aug		
	2013 ensured senior oldical					_
	<u>Mad contacts to accompli</u> (Grants \$) If this amount	includes foreign gra	MIZOHON W	NOISE	30a	427
31	Other program services (describe in Schedule O)	includes loreign gra			ooa	, , ,
٠.		includes foreign gra		▶ □	31a	Ø
32 Total program service expenses (add lines 28a through 31a)						49.672
Par	List of Officers, Directors, Trustees, and Key Check if the organization used Schedule			•	struc	tions for Part IV)
		(b) Average hours per week	(c) Reportable compensation	(d) Health benefits, contributions to employe	e (e)	Estimated amount of
_	(a) Name and title	devoted to position	(Forms W-2/1099-MISO (if not paid, enter -0-			ther compensation
Co	urthey Doyle-president	30	Ø	Ø		Ø
Kr	Stinu Shade - V P Membership	10	Ø	+ / / /		AS
	0 11 0 11 110	10	Ψ	Ψ		Ψ
	ua Beth Bentley - VP	30	R		İ	Ø
6	J Volunteers abriela Pino - VP Fundraising		Ψ	+ +	+	AC .
	<u> </u>	70	φ	ϕ		Ψ
<u> YVI</u>	mi Madrid - VP Programs	20	Ø	Ø		Ø
Ti	ffoni Louton - Secretary	10	Ø	Ø		Ø
M	egan Whitemore-freasurer	40	Ø	4		
	<u>J</u>	70	Ψ	Ψ	-	<u> </u>
		-				
					\dashv	
		-1				
					\top	

Part	Other Information (Note the Schedule A and personal benefit contract statement requirement instructions for Part V) Check if the organization used Schedule O to respond to any question in this			<u> </u>
	instructions for hart vy offects if the organization used schedule of to respond to any question in this	1 ait		
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	Yes	X
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		X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		×
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	-	
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		X
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		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a Ø			
b	Did the organization file Form 1120-POL for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:	1		1
а	Initiation fees and capital contributions included on line 9	ŀ		-
b	Gross receipts, included on line 9, for public use of club facilities	1		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► ; section 4912 ► ; section 4955 ►			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
С	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		X
41	List the states with which a copy of this return is filed ▶		-	
42a	The organization's books are in care of ▶ Megan whitemore Telephone no. ▶ 28	31-2	234	-210
b		749		
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	42b		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
C	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		×
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	• •	. 1	▶ □
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	Yes	No X
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		_~
c d	Did the organization receive any payments for indoor tanning services during the year?	44c		交
	explanation in Schedule O	44d		
45a 45b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		4
	Form 990-EZ (see instructions)	45b		V

Form 990)-EZ (20	13)					Page 4
46	Did th	e organization engage, directly or indidates for public office? If "Yes," o	ndirectly, in political c	ampaign activities o	n behalf of o	r in opposit	Yes No tion 46
Part \	/1	Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51.	s only s must answer que	stions 47–49b and	1 52, and co		
		Check if the organization used Sci	hedule O to respond	to any question in	this Part VI	· · ·	<u> </u>
		ne organization engage in lobbying If "Yes," complete Schedule C, Par		section 501(h) electi		during the	tax . 47 X
49a b	Did the If "Ye Comp	organization a school as described in the organization make any transfers the s," was the related organization a se- tolete this table for the organization's toletes) who each received more than	o an exempt non-cha ection 527 organizations five highest compens	ritable related organ on? sated employees (o	nization?	cers, direct	. 48 X . 49a X . 49b cors, trustees and key
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC	contributions benefit plans	n benefits, s to employee , and deferred insation	(e) Estimated amount of other compensation
	Y	lone					
					-		
f 51	Comp	number of other employees paid ovolete this table for the organization 000 of compensation from the orga	's five highest comp	ensated independer	nt contractor	Τ	
	(a)	Name and business address of each independ	dent contractor	(b) Type of se	ervice	(c)) Compensation
		JONE					
d 52		number of other independent contra			. ►	a)(1)	
	none	kempt charitable trusts must attach	a completed Schedu	le A	· · · · · · · · ·	<u> </u>	► XYes □ No
		of penury, I declare that I have examined this d complete Declaration of preparer (other that					nowledge and belief, it is
Sign Here		Signature of Officer Punity Type or print name and title	swne, R	resident	Da	te 2-2	5-15
Paid		Print/Type preparer's name	Preparer's signature		Date	Check self-emplo] rf PTIN
Preparent		Firm's name ▶		·	Fir	m's EIN ▶	700
		Firm's address ▶ discuss this return with the prepare	r shown above? See	instructions	Ph	one no.	▶ ☐ Yes ☐ No
iviay II	ie ino	discuss this return with the prepare	SHOWER ADDAGE OGG			<u> </u>	Form 990-EZ (2013)

SCHEDULE A (Form 990 or 990-EZ)

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.

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name	of the organization	akes.	Junior H	tigh	T	ATA		Employer id		n number 53097		
Pai	t I Reason f	or Public Cha	rity Status (All orga	nizations	s must c	omplete	this pa	rt.) See i				
The 6 1 2 3 4	A church, com A school desc A hospital or a A medical rese	vention of churc ribed in section a cooperative ho	ation because it is: (Fo hes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjunc e:	churches ch Schedi ation desc	s describe ule E.) cribed in s	ed in sec section	tion 170 170(b)(1)	(b)(1)(A)(i)(A)(iii).		(iii). Enter the		
5		on operated for ()(1)(A)(iv). (Com	the benefit of a collect plete Part II.)	ge or uni	versity ov	wned or	operated	by a go	vernmen	tal unit described	in	
6 7	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.)											
9	An organization receipts from support from	on that normally activities related gross investme	n section 170(b)(1)(A) receives: (1) more that d to its exempt funct ent income and unrel fter June 30, 1975. Se	an 331/3% ions—sul lated bus	of its subject to desiness tax	upport fro certain ex xable ind	xception come (le	s, and (2) ess section) no mor	e than 331/3% of	its	
10 11	An organization	on organized ar one or more pub	I operated exclusively nd operated exclusive plicly supported organ describes the type of	ely for th nizations	ie benefit described	t of, to p	perform ion 509(the func a)(1) or s	tions of, ection 50	9(a)(2). See sect i		
	other than fou or section 509	ındation manage (a)(2).	that the organization ers and other than one	is not co e or more	ntrolled d publicly	lirectly or support	r indirect ed orgar	ly by one nizations (or more described	l in section 509(a)	ns	
f g	organization, o	check this box	a written determination he organization accept							oe III supporting		
	following pers	ons? who directly or i	ndirectly controls, eith	her alone	or toget	her with	persons	describe	d in (ii) a		0	
h	(ii) A family m (iii) A 35% cor	nember of a persentrolled entity of	on described in (i) abo a person described in ion about the support	ove? n (i) or (ii) a	 above? .			• • • •		11g(i) 11g(ii) 11g(ii)		
	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) is the o	organization sted in your document?	(v) Did y the organ col. (i)	rou notify nization in of your port?	organiza (i) organ	is the tion in col ized in the .S.?	(vii) Amount of monet support	•	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	No	Yes	No	Yes	No			
(A)	*											
(B)								ļ				
(C)					1							
(D)												
(E)				-					-			
_		1		1	l	l		1	1			

Part	Support Schedule for Organiza	ations Descr	ibed in Sect	ions 170(b)(1)(A)(iv) and 1	170(b)(1)(A)(v	ıi)	
	(Complete only if you checked the						alify under	
	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)		
	on A. Public Support			T		T		
_	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		•					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							_
3	The value of services or facilities furnished by a governmental unit to the organization without charge	:						
4	Total. Add lines 1 through 3				<u></u>		<u> </u>	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4.					,		_
Secti	on B. Total Support							_
Calen	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	_
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc First five years. If the Form 990 is for 990 is	•	•	d. third, fourth	or fifth tax v	12 ear as a section	on 501(c)(3)	_
	organization, check this box and stop he				-			П
Secti	on C. Computation of Public Suppor							_
14	Public support percentage for 2013 (line	6, column (f) di	ivided by line 1	1, column (f))		14		%
15	Public support percentage from 2012 Scl	•	•			15		%
16a	331/a% support test—2013. If the organi box and stop here. The organization qua	lifies as a publ	licly supported	organization			▶	
b	331/3% support test – 2012. If the organ check this box and stop here. The organ					9 15 is 331/3% 	or more, ▶	
17a	10%-facts-and-circumstances test—2010% or more, and if the organization me Part IV how the organization meets the "forganization".	ets the "facts-	and-circumsta	inces" test, ch	eck this box ar	nd stop here. I	Explain in	
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization or Explain in Part IV how the organization or supported organization	tion meets the neets the "fact	facts-and-c	ircumstances" tances" test. T	test, check th	nis box and st	top here.	_
18	Private foundation. If the organization di instructions	id not check a	box on line 13	, 16a, 16b, 17a			see	

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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			17,766	46,393	20,439	84,598
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			(Z,099)	35,453	57,230	90,584
3	Gross receipts from activities that are not an unrelated trade or business under section 513			Ø	Ø	Ø	Ø
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			Ø	Ø	Ø	Ø
5	The value of services or facilities furnished by a governmental unit to the organization without charge			Ø	6	Ø	Ø
6	Total. Add lines 1 through 5			15,667	81,846	77,669	175,182
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .			Ø	Ø	Ø	Ø
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			Ø	Ø	Ø	Ø
С	Add lines 7a and 7b			Ø	Ø	Ø	Ø
8	Public support (Subtract line 7c from line 6.)						175,182
Secti	on B. Total Support	-					
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6			15,1007	81,846	77,669	175,182
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.			Ø	Ø	Ø	Ø
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975			Ø	Ø	Ø	Ø
C	Add lines 10a and 10b			0	4	Ø	Ø
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on			Ø	Ø	Ø	Ø
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)			Ø	Ø	Ø	Ø
13	Total support. (Add lines 9, 10c, 11, and 12.)			15,667	81,846	77,669	175,182
14	First five years. If the Form 990 is for to organization, check this box and stop he	-		nd, third, fourth	-		
Secti	on C. Computation of Public Suppo	rt Percentag	je				
15	Public support percentage for 2013 (line		•			15	%
16	Public support percentage from 2012 Sc			· · · · ·		16	%
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2013	-	• • •	-	, . ,		<u> </u>
18	Investment income percentage from 201						%
19a	331/3% support tests—2013. If the organ						
	17 is not more than 331/3%, check this box 331/3% support tests—2012. If the organi						_
b	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization of		_	•			

Schedule A (I	chedule A (Form 990 or 990-EZ) 2013					
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; a Part III, line 12. Also complete this part for any additional information. (See instructions).	nd				
•	•					
						
		·				
		·				
		·				

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

OMB No. 1545-0047 2013

Open to Public

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Name of the organization Seven Lakus Junior High PTA	Employer identification number 45 - 4953 Ø97
Part I:	
lino10: \$25,971 granted to Seventakes:	Summer High for
purchase of ocademic supplies, to and classrooms, field trip costs, reg	istration for educator
Seminars and student writing contest	
line 16: \$5,749 - Operating Costs + &	
\$2,991 - Hospitality and Event	
\$10,075 - Education Programs +1	
Saven Lakes Junior High	
\$423 - Leadership Training and	Convention
PortIII:	
Line 28: Grants paid to by SLJH PTA pr	ovided i Pads and
Cuses to library, VGA cords to connect it	Pads to projectors,
piccolo for honorband, magazine subscr	
Social Studies Students, State test in	
materials, garden for scienco departmen	
class Sield trip costs, 8th Grade wr	-
registration for ELA teacher training	
for support Classroom, Support for	
sponsored by SLJH for over 900 for	
Line 29: SLJH PTA sponsored Cybersens	
Munton La over 1400 students au	
Challenge program for over 1400 5	
which is an anti-bulling program	n, paid for an Arts-14-
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 51056	
	(con't next page)

Schedule O (Form 990 or 990-EZ) (2013)		Page 2
Name of the organization	771	Employer identification number
Deven Lakes Junior High	PIM	45-4953097
Name of the organization Seven Lakes Junior High Line 29 (continued) for Events at school	Junior F	2chievement
Franks at sahaal		
LUENTS OUT SCHOOL		
	,	
	,	
