5.... 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 private foundations)

2018

OMB No 1545-1150

Open to Public

Department of the Treasury

► Do not enter social security numbers on this form as it may be made public.

• Co to warm its gov/Form999EZ for instructions and the latest information.

Inter	nal Reve	enue Service	do to www.iis.gov/i orinissocz for insulactions and the late		YUW	
A	For the	e 2018 calen	ndar year, or tax year beginning JUL 1, 2018 and e	ending JUN	30, 2	019
B	Check if applicab	ole (C Name of organization	D I	Employer id	entification number
Г	_	ess change				
F	╕		VIENNA ELEMENTARY SCHOOL PTA		58-16	47014
\vdash	╗		Number and street (or P.O. box, if mail is not delivered to street address)	Room/suite E	Telephone r	number
一	Final		1975 CHICKASHA DRIVE		336-5	75-8047
干	= -		City or town, state or province, country, and ZIP or foreign postal code	∆2 F	Group, Exen	
F	=		PFAFFTOWN, NC 27040	114	Number >	
G		nting Method				X If the organization is
			W.VIENNAPTA.ORG			to attach Schedule B
			s (check only one) $ \times$ 501(c)(3) \longrightarrow 501(c) () \blacktriangleleft (insert no.) \longrightarrow 4947(a)(990-EZ, or 990-PF).
		of organization		.,		
		-	nd 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if to	otal assets (Part II.		
			500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$	81,839.
	ărt'l⊹		nue, Expenses, and Changes in Net Assets or Fund Balances	(see the instruction		1)
		_	the organization used Schedule O to respond to any question in this Part I	•		X
	1		ons, gifts, grants, and similar amounts received		1	40,641.
	2		ervice revenue including government fees and contracts		2	
	3	•	nip dues and assessments		3	678.
	4	Investment	ann acun	DULE O	4	1.
	5a		ount from sale of assets other than inventory 5a	,	12 L	
	Ja		or other basis and sales expenses 5b			
			oss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	6	,	nd fundraising events:		注答	
	1	-	ome from gaming (attach Schedule G if greater than			
ř	"	\$15,000)	6a		100	
Revenue	۱.		ome from fundraising events (not including \$ of contributi	ions		
æ	"		raising events reported on line 1) (attach Schedule G if the sum of such		22.3	
			ome and contributions exceeds \$15,000)	18,187	,	
		_	ct expenses from gaming and fundraising events	5,330		
	اً		e or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	12,857.
	7a		es of inventory, less returns and allowances	21,632		
	· b		of goods sold SEE SCHEDULE O 7b	13,288		
	"		fit or (loss) from sales of inventory (Subtract line 7b from line 7a)	* -	7c	8,344.
	8	-	nue (describe in Schedule 0) SEE SCHE	DULE O	8	700.
	9		nue Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	1	▶ 9	63,221.
	10		d similar amounts paid (list in Schedule 0) SEE SCHE	DULE O	10	69,385.
	111		aid to or for members		11	
ιn	12		other compensation, and employee benefits		12	
se	13		nal fees and other payments to independent contractors		13	
Expenses	14		y, rent, utilities, and maintenance		14	
Ä	15		publications, postage, and shipping		15	1,580.
	16		enses (describe in Schedule 0) SEE SCHE	DULE O	16	3,749.
	17		enses. Add lines 10 through 16	1	▶ 17	74,714.
-	18		(deficit) for the year (Subtract line 17 from line 9)		18	-11,493.
ets	19		s or fund balances at beginning of year (from line 27, column (A))		16.	
\ss("		ee with end-of-year figure reported on prior year's return)		19	25,100.
Net Assets	20	• -	nges in net assets or fund balances (explain in Schedule O)		20	0.
Ž	21		s or fund balances at end of year. Combine lines 18 through 20		21	13,607.
ĪΗ			Reduction Act Notice, see the separate instructions.	LCLIVED.		Form 990-EZ (2018)
		apointin	(Treduction Act Notice, see the separate instructions.		ا%[(22.0)
			l l han	V 1 2020	NS	0

832171 12-11-18

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11220421 759507 11510

FORM 990-EZ (2018) VIENNA ELEMENTARI SCHOOLI	FIA		50-	104/0	14 lage 2
Part II Balance Sheets (see the instructions for Part II)		in Abia David II			
Check if the organization used Schedule O to resp		A) Beginning of year	-	/D) E	nd of year
On Cook assumes and investments	- "	25,100	. 22	(6)	13,607.
22 Cash, savings, and investments		25,100	23	•	13,007.
23 Land and buildings			24		
24 Other assets (describe in Schedule 0)		25,100			13,607.
25 Total assets		23,100	26		0.
Total liabilities (describe in Schedule 0)		25,100			13,607.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21) Part III Statement of Program Service Accomplishmen	ts (see the instruction		121		genses
Check if the organization used Schedule O to resp	•	•	$\overline{\mathbf{x}}$		for section
What is the organization's primary exempt purpose? EDUCATIONAL/CH.		michio i dicin			and 501(c)(4)
Describe the organization's program service accomplishments for each of its three largest program service.	· _	in a clear and concess		organizati	ons; optional for
manner, describe the services provided, the number of persons benefited, and other relevant informat		in a clear and concise		,	
28 CLASSROOM SUPPORT MATERIALS - LIBRAR	RY BOOKS, ART	MATERIALS			
& SUPPLIES, CLASSROOM SOFTWARE, KINI			_		
INITIATIVES					
(Grants \$ 14,371.) If this amount includes foreign g	rants check here	•	$\overline{\Box}$	28a	14,371.
29 SCHOOL TECHNOLOGY - CLASSROOM TECHNO	OLOGY SOLUTION	NS.			
COMPUTER SUPPLIES					
(Grants \$ 30,386.) If this amount includes foreign g	rants, check here	•	\Box	29a	30,386.
30 TEACHER SUPPORT - TRAINING, HOSPITAT	TLITY, CLASSRO	OOM	1		
SUPPLIES	· · · · ·				
(Grants \$ 21,097.) If this amount includes foreign g	rants, check here	>	\Box	30a	21,097.
31 Other program services (describe in Schedule O) SEE SCHE	DULE O				
(Grants \$ 3,531.) If this amount includes foreign g		•	\Box	31a	3,531.
32 Total program service expenses (add lines 28a through 31a)		 		32	69,385.
Part IV List of Officers, Directors, Trustees, and Key Er	mployees (list each one e	even if not compensated - s	ee the ii	nstructions fo	r Part IV)
Check if the organization used Schedule O to resp	ond to any question	in this Part IV			
	(b) Average hours	(C) Reportable		alth benefits,	(e) Estimated
(a) Name and title	per week devoted to	compensation (Forms W-2/1099-MISC)	emplo	ibutions to iyee benefit	amount of other
,	position	(if not paid, enter -0-)		and deferred pensation	compensation
ASHLEY HORN					
PRESIDENT	20.00	0.		0.	0.
RICH MARTIN					
TREASURER (7/1/18-10/15/18)	15.00	0.		0.	0.
ERIN AMRICH				·	
SECRETARY	10.00	0.		0.	0.
ASHLEY DUNLAP					
VICE PRESIDENT (7/1/18-3/1/19)	10.00	0.		0.	0.
STACY CROCKETT					
VICE PRESIDENT (3/1/19-6/30/19)	10.00	0.		0.	0.
CHAD BRINKLEY					
TREASURER (10/15/18-6/30/19)	15.00	0.		0.	0.
	1	1			
	1				
832172 12-11-18				Form	990-EZ (2018)

AGO 58-1647014

Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Sch. O to respond to any question in this Part V X Yes No Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each 33 Х activity in Schedule O 33 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended Х documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule 0 (see instructions) 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 N/A 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 X requirements during the year? If "Yes," complete Schedule C, Part III 35c Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," X 36 complete applicable parts of Schedule N 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions b Did the organization file Form 1120-POL for this year? 37b X 38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made X in a prior year and still outstanding at the end of the tax year covered by this return? 382 N/A b If "Yes," complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations. Enter: N/A a Initiation fees and capital contributions included on line 9 39a N/A b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: 0. **0** • ; section 4912 ▶ 0 • ; section 4955 ► section 4911 ► b Section 501(c)(3), 501(c)(4), and 501(c)(29) 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 c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on 0. organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed 0. by the organization e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed \rightarrow NC Telephone no. $\triangleright 336.403.5767$ 42 a The organization's books are in care of CHAD BRINKLEY Located at ▶ 1975 CHICKASHA DRIVE, PFAFFTOWN, ▶ 27040 b At any time during the calendar year, did the organization have an interest in or a signature or other authority Yes No over a financial account in a foreign country (such as a bank account, securities account, or other financial X 42b account)? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the tax year Yes No 44a Did the organization maintain any donor advised funds during the year? If "Yes." Form 990 must be completed instead of X Form 990-EZ 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 Did the organization receive any payments for indoor tanning services during the year? 44c d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 44d 45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions Form 990-EZ (2018)

Form 990-EZ (2018) VIENNA ELEMENTA	RY SCHOOL	PTA			58-1647	<u>014</u>		Page 4
								Yes	No
46 Did the o	organization engage, directly or indirectly, in pol	litical campaign activ	ities on behalf of or i	n opposition	to candidates for pu	blic office?		L	
	complete Schedule C, Part I						46	<u> </u>	Х
Part VI	Section 501(c)(3) Organizations	Only							,
	All section 501(c)(3) organizations must a	inswer questions 4	17-49b and 52, and	l complete t	he tables for lines	50 and 51			
	Check if the organization used Schedule	O to respond to a	ny question in this	Part VI					
								Yes	No
47 Did the	organization engage in lobbying activities or hav	ve a section 501(h) el	lection in effect durin	g the tax year	r? If "Yes," complete	Sch. C, Part II	47		X
	ganization a school as described in section 170						48		Х
	organization make any transfers to an exempt n						49a		Х
	was the related organization a section 527 orga		3				49b		
	e this table for the organization's five highest co		es (other than officer	rs. directors.	trustees, and key en	nolovees) who e		eived r	nore
	00,000 of compensation from the organization.			o, a,	,				
ιιαιτφι	(a) Name and title of each employee	11 111010 10 110110; 011101	(b) Average	hours	(C) Reportable	(d) Health benefi	s. 16	e) Estin	nated
	(a) Name and the or each employee		per week dev		compensation (Forms	contributions to employee benefit		ount of	
	NON	TE	positio		W-2/1099-MISC)	plans, and deferre	*. I	mpens	
	NON	<u> </u>	· ·			compensation	+		
			_						
			_						
							—		
				ŀ					
	mber of other employees paid over \$100,000		4			100 -6			
-	e this table for the organization's five highest co		dent contractors who	each receive	ed more than \$100,0	100 of compens	ition fro	om the	
	tion. If there is none, enter "None." NON								
(a)	Name and business address of each independe	nt contractor		(b) 1	Type of service	(c)	Comp	<u>ensatio</u>	n
		-				ł			
		<u> </u>							
						1			
d Total nu	mber of other independent contractors each rec	ceiving over \$100 00	n						
	organization complete Schedule A? Note: All se	•		12					
	ed Schedule A	otion so i(c)(o) orga	inizations indst attaci	1 4		▶ [X Y	. r	No
	es of perjury, I declare that I have examined this	rotura inaliidiaa aa	aamaaniina aabadiili		and to the hea				
•		_					ige and	bellet,	11.12
rrie, <u>correct, i</u>	and complete. Declaration of preparer (other that	an officer) is based o	n all information of w	vilich prepare	r nas any knowledge	0//0	n f	201	a
O:	algnatuke of officer					Date Date	1/0	<u> </u>	<u> </u>
Siyn 🕔 Here 🚺		4410 00							
Hele	CHAD BRINKLEY, TREA	SURER			 				
	Type or print name and title		······································	·	1				
	Print/Type preparer's name	Preparer's signatu	re	Date	Check] if PTIN			
Paid		10- 0	0++	4/23/	self- emplo	·			
Preparer	JANE R POTTER	JaneR	rolls	11201	ر می	P01	057	495	
•	Firm's name ▶ BUTLER + BUR	KE, LLP			Firm's EIN	▶ 56-11	385	30	
Use Only	Firm's address ▶ 100 CLUB OA		STE A		Phone no.				
	WINSTON-SAL				1	·			
May the IDC	discuss this return with the preparer shown abo						<u></u>	es [No
way (IIE IRS (ascuss this return with the preparer shown abo	AC . OCC III SU ACUÓUS							
							TOTAL	990-EZ	(2010)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

■ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 58-1647014 VIENNA ELEMENTARY SCHOOL PTA Reason for Public Charity Status (All organizations must complete this part) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 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 agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g ____ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. ____ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (iii) Type of organization (v) Amount of monetary (vi) Amount of other (i) Name of supported (ii) EIN (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Total

	edule A (Form 990 or 990-EZ) 2018 V	IENNA ELE	MENTARY SO	CHOOL PTA		58-164	7014 Page 2
<u>"P</u> a	Support Schedule for						
	(Complete only if you checked				n tailed to quality u	nder Part III If the	organization
	fails to qualify under the tests	ilsteo below, pleas	se complete Part i	")	<u> </u>		
	tion A. Public Support				<u> </u>		
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and					إر	
	membership fees received (Do not						
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to	:	-				
_	or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to		;	,		/	
	the organization without charge						
4	Total. Add lines 1 through 3			······································			
5	The portion of total contributions	***	STATE OF THE STATE				
	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)		12822				
	Public support. Subtract line 5 from line 4			<u> </u>			
	ction B. Total Support	,					
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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						
۵	Net income from unrelated business		/				
9	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 VI)						•
11	Total support. Add lines 7 through 10	//			\$ 1.00 PM		
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a section	501(c)(3)	
_	organization, check this box and sto						
	ction C. Computation of Publi						
	Public support percentage for 2018 (olumn (f)) .		14	<u>%</u>
	Public support percentage from 2017				44 00 4/00/	15	<u>%</u>
16a	33 1/3% support test - 2018. If the	•			14 IS 33 1/3% Or M	ore, check this box	k and ▶□
1-	stop here. The organization qualifies				line 15 to 32 1/20/	or more, check the	· · · · · · · · · · · · · · · · · · ·
D	33 1/3% support test - 2017. If the and stop here. The organization qual	_			IIII IJ IS JO 1/3%	or more, check thi	▶ □
17~	10% -facts-and-circumstances test				e 13, 16a or 16b a	ind line 14 is 10% (or more.
114	and if the organization meets the "fac						
	meets the "facts and circumstances"						▶□
b	10% -facts-and-circumstances test	•	•		-	7a, and line 15 is	10% or
_	more, and if the organization meets the						
	organization/meets the "facts-and-circ						
18	Private foundation. If the organization						· • 🗖
	7				Sche	dule A (Form 990	or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 VIENNA ELEMENTARY SCHOOL PTA
Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

	qualify under the tests listed be	elow, please comp	ete Part II)				
Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")	24,682.	25,633.	36,536.	41,217.	41,319.	169,387.
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	52,505.	52,820.	42,395.	39,131.	39,819.	226,670.
3	Gross receipts from activities that are not an unrelated trade or business under section 513					:	
4			·				
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf	i					
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	77,187.	78,453.	78,931.	80,348.	81,138.	396,057.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		:		,		0.
c	Add lines 7a and 7b				n .		0.
8	Public support. (Subtract line 7c (rom line 6)			i ameta			396,057.
Sec	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	77,187.	78,453.	78,931.	80,348.	81,138.	396,057.
10 <i>a</i>	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2.	2.		1.	1.	6.
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	2.	2.		1.	1.	6.
	Net income from unrelated business activities not included in line 10b,			2,100.	1,152.	700.	3,952.
12 13	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12)	77,189.	78,455.	81,031.	1,152. 81,501.	700. 81,839.	3,952. 400,015.
12 13	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	77,189.	78,455.	81,031.	1,152. 81,501.	700. 81,839.	3,952. 400,015.
12 13 14	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	77,189.	78,455.	81,031.	1,152. 81,501.	700. 81,839.	3,952. 400,015.
12 13 14 Se c	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public	77,189. r the organization's	78,455. first, second, third	81,031.	1,152. 81,501.	700. 81,839.	3,952. 400,015. ation,
12 13 14 Se c	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	77,189. r the organization's	78,455. first, second, third	81,031.	1,152. 81,501.	700. 81,839.	3,952. 400,015. ation, 99.01 %
12 13 14 Se : 15 16	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage for 2018 (I	77,189. The organization's C Support Per Ine 8, column (f), d Schedule A, Part	78,455. if first, second, third centage rivided by line 13, c	81,031.	1,152. 81,501.	700. 81,839. 501(c)(3) organiza	3,952. 400,015. ation,
12 13 14 Se : 15 16	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public	77,189. The organization's C Support Per Ine 8, column (f), d Schedule A, Part	78,455. if first, second, third centage rivided by line 13, c	81,031.	1,152. 81,501.	700. 81,839. 501(c)(3) organiza	3,952. 400,015. ation, 99.01 % 99.15 %
12 13 14 Sec 15 16 Sec 17	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage for 2018 (I Public support percentage from 2017 ction D. Computation of Investing Investment income percentage for 2018 (Investment Inc	77,189. r the organization's c Support Per ine 8, column (f), d Schedule A, Part stment Income 18 (line 10c, colum	78,455. if first, second, third centage ivided by line 13, co lill, line 15 e Percentage inn (f), divided by line	81,031.	1,152. 81,501.	700. 81,839. 501(c)(3) organiza	3,952. 400,015. ation, 99.01 % 99.15 %
12 13 14 Sec 15 16 Sec 17 18	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage for 2018 (Investment income percentage for 2011)	77,189. r the organization's c Support Per ine 8, column (f), d Schedule A, Part stment Income 018 (line 10c, colur 2017 Schedule A,	78,455. s first, second, third centage ivided by line 13, c III, line 15 e Percentage inn (f), divided by line Part III, line 17	81,031. If, fourth, or fifth tax column (f))	1,152. 81,501. x year as a section	700. 81,839. 501(c)(3) organiza	3,952. 400,015. ation, 99.01 % 99.15 % .00 % %
12 13 14 Sec 15 16 Sec 17 18	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage for 2018 (I Public support percentage from 2017 ction D. Computation of Investing Investment income percentage from a 33 1/3% support tests - 2018. If the	77,189. r the organization's c Support Per line 8, column (f), d Schedule A, Part strment Income 018 (line 10c, colur 2017 Schedule A, organization did r	78,455. ifirst, second, third centage livided by line 13, c ill, line 15 e Percentage nn (f), divided by line Part III, line 17 lot check the box c	81,031. If, fourth, or fifth tax column (f)) The 13, column (f)) on line 14, and line	1,152. 81,501. x year as a section	700. 81,839. 1501(c)(3) organiza 15 16	3,952. 400,015. ation, 99.01 % 99.15 % .00 % %
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12 13 14 Sec 15 16 Sec 17 18 19	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage for 2018 (I Public support percentage from 2017 ction D. Computation of Investment income percentage from a 33 1/3% support tests - 2018. If the more than 33 1/3%, check this box are a 33 1/3% support tests - 2017. If the	77,189. The organization's C Support Per Ine 8, column (f), d Schedule A, Part Strment Income 18 (line 10c, colur) 2017 Schedule A, organization did r nd stop here. The	78,455. if first, second, third centage ivided by line 13, co ill, line 15 e Percentage inn (f), divided by line Part Ill, line 17 iot check the box co organization qualified check a box on	81,031. If, fourth, or fifth tax column (f)) The 13, column (f)) In line 14, and line fies as a publicly su line 14 or line 19a,	1,152. 81,501. x year as a section 15 is more than 3 ipported organizar and line 16 is mo	700. 81,839. 1501(c)(3) organiza 15 16 17 18 3 1/3%, and line 13 tion re than 33 1/3%, a	3,952. 400,015. ation, 99.01 % 99.15 % .00 % %
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Schedule A (Form 990 or 990-EZ) 2018

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Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes." and If you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule:L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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			The Transfer of the Control of the C
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to		
	emergency temporary reduction (see instructions)	6_	
7	Check here if the current year is the organization's first as a non-functionally in	ntegra	ated Type III supporting organization (see
	instructions)		

Schedule A (Form 990 or 990-EZ) 2018

Par	Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Secti	on D - Distributions			Current Year			
1_	Amounts paid to supported organizations to accomplish exer	mpt purposes					
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported	_= ·				
	organizations, in excess of income from activity			<del></del>			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations					
4	Amounts paid to acquire exempt use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI) See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which the						
	(provide details in Part VI) See instructions						
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by line 9 amount						
`		(i)	(ii)	(iii)			
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018			
1	Distributable amount for 2018 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2018 (reason-		SECOND CONTRACTOR CONT				
_	able cause required- explain in Part VI) See instructions						
3	Excess distributions carryover, if any, to 2018						
	From 2013						
	From 2014						
	From 2015						
	From 2016						
	From 2017		7.				
	Total of lines 3a through e	DOLLAR SECTION OF THE PROPERTY					
	Applied to underdistributions of prior yéars						
	Applied to 2018 distributable amount			A 31 Mart 1 Mouth a S 1 M N Hawking HAY 1 May			
i	Carryover from 2013 not applied (see instructions)						
i	Remainder Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2018 from Section D,						
·	line 7 \$						
а	Applied to underdistributions of prior years						
	Applied to 2018 distributable amount						
	Remainder Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2018, if						
	any Subtract lines 3g and 4a from line 2 For result greater						
	than zero, explain in Part VI. See instructions.						
6	Remaining underdistributions for 2018 Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in						
	Part VI See instructions.						
7	Excess distributions carryover to 2019. Add lines 3j						
	and 4c.	•					
8	Breakdown of line 7						
а	Excess from 2014						
b	Excess from 2015						
С	Excess from 2016						
d	Excess from 2017						
_	Excess from 2018						

Schedule A (Form 990 or 990-EZ) 2018

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

Department of the Treasury Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization **Employer identification number** 58-1647014 VIENNA ELEMENTARY SCHOOL PTA Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or No No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col (i) contributions 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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2018

Pa			e organization answered	"Yes" on Form 990, Part	IV, line 18, or reported	
		of fundraising event contributions and gre	<del>,</del> -			ts greater than \$5,000
			(a) Event #1 FALL	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			FESTIVAL			col (c))
ę l			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	13,415.			13,415.
	2	Less Contributions				
			12.415			12 415
$\dashv$	3	Gross income (line 1 minus line 2)	13,415.			13,415.
	4	Cash prizes				
i						
ű	5	Noncash prizes				
beuse	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
힉	8	Entertainment				
	9	Other direct expenses	2,479.			2,479.
	10	Direct expense summary Add lines 4 through	, ,		<b>&gt;</b>	2,479.
	11			000 Partily Land 10 and		10,936.
Pa	rt i	<b>II Gaming.</b> Complete if the organization \$15,000 on Form 990-EZ, line 6a	answered "Yes" on Form	1990, Part IV, line 19, or re	eported more than	
		\$10,000 ON 1 ONN 000 EE, 11110 OU	(a) Pingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other garning	col. (a) through col (c))
366						
$\dashv$	_1_	Gross revenue , , , ,	-			<u> </u>
ses	2	Cash prizes			ı	
ect Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
				☐ Yes %	Yes %	
	6	Volunteer labor	No No	No	No No	
	7	Direct expense summary. Add lines 2 through	n 5 ın column (d)		•	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>.</b>	
					•••	
		ter the state(s) in which the organization condu		0		
		he organization licensed to conduct gaming a No," explain		states?		Yes No
	_					
		ere any of the organization's gaming licenses re			ear?	Yes No
	_					
	_		<u> </u>			
		)-03-18			Schedule G /Eo	rm 990 or 990-EZ) 2018

Sch	edule G (Form 990 or 990 EZ) 2018 VIENNA ELEMENTARY SCHOOL PTA	<u> 58-1</u>	647014	Page 3
11			Yes	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in	ſ		
á	The organization's facility		13a	<u>%</u>
ŧ	An outside facility	l	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	<b>;</b>		
	Name	<del></del>		
	Address >			
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
ı	of "Yes," enter the amount of gaming revenue received by the organization 🕨 💲 and the amou	ınt		
	of gaming revenue retained by the third party > \$			
•	o If "Yes," enter name and address of the third party			
	Name			
	Address >			
16	Gaming manager information			
	Name ►			
	·			
	Gaming manager compensation > \$			
	Description of services provided	<u>-</u>		
	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			
	retain the state gaming license?		Yes	☐ No
ı	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 🕨 \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (III) and (v), a	and Part	III, lines 9,	9b, 10b,
_	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
_				
_				
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		,	·	

Schedule G (Form 990 or 990-EZ) VI	ENNA ELEMENTARY	SCHOOL PTA	58-1647014 Page 4
Schedule G (Form 990 or 990-EZ) VI Part IV Supplemental Informati	on (continued)		
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#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### 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.

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2018
Open to Public

Open to Public Inspection

**Employer identification number** Name of the organization 58-1647014 VIENNA ELEMENTARY SCHOOL PTA FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT INCOME: AMOUNT: DESCRIPTION OF PROPERTY: 1. INTEREST FORM 990-EZ, PART I, LINE 7, GROSS PROFIT FROM SALES OF INVENTORY: **INCOME:** 21,632. 1. GROSS RECEIPTS 0._ RETURNS AND ALLOWANCES 21,632. 3. LINE 1 LESS LINE 2 COST OF GOODS SOLD (LINE 13) 13,288. 8,344. 5. GROSS PROFIT (LINE 3 LESS LINE 4) COST OF GOODS SOLD: INVENTORY AT BEGINNING OF YEAR 0. 13,288. 7. MERCHANDISE PURCHASED 8. COST OF LABOR 0. 9. MATERIALS AND SUPPLIES 10. OTHER COSTS 11. ADD LINES 6 THROUGH 10 13,288. 12. INVENTORY AT END OF YEAR 0. 13. COST OF GOODS SOLD (LINE 11 LESS LINE 12) 13,288. FORM 990-EZ, PART I, LINE 8, OTHER REVENUE: AMOUNT: DESCRIPTION OF OTHER REVENUE: 694. NC TAX REFUND 6. OTHER 700. TOTAL TO FORM 990-EZ, LINE 8

Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 99 Name of the organization	90-EZ) (2018)		Employer identification numbe
	VIENNA ELEMENTARY SCHOOL PTA		58-1647014
FORM 990-EZ, P	ART I, LINE 10, GRANTS AND SIMILAR AM	MOUNTS E	PAID:
ACTIVITY CLASS	IFICATION: GRANTS		
GRANTEE NAME:	VIENNA ELEMENTARY SCHOOL		
AMOUNT GIVEN:			69,385.
FORM 990-EZ, P	ART I, LINE 16, OTHER EXPENSES:		
DESCRIPTION OF	OTHER EXPENSES:		AMOUNT:
MISCELLANEOUS	EXPENSES		2,389.
SCHOOL EVENTS			1,360.
TOTAL TO FORM	990-EZ, LINE 16		3,749.
ON CAMPUS EVEN	TS EXPENSES		
FORM 990-EZ, P	ART V, INFORMATION REGARDING PERSONAL	BENEF1	T CONTRACTS:
THE ORGANIZATI	ON DID NOT, DURING THE YEAR, RECEIVE	ANY FUN	IDS, DIRECTLY,
OR INDIRECTLY,	TO PAY PREMIUMS ON A PERSONAL BENEFI	T CONTE	RACT.
THE ORGANIZATI	ON, DID NOT, DURING THE YEAR, PAY ANY	PREMIU	MS, DIRECTLY,
OR INDIRECTLY,	ON A PERSONAL BENEFIT CONTRACT.		
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