PREPARING FORM 990-EZ and RELATED TOPICS

Presented by

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Topics

Handout Material

Filing requirements

W-9 – Request for Taxpayer Identification Number and Certification

Form 1099 – Miscellaneous Income

Donation receipts

Form 8282 – Donee Information Return

Individual Accounts

Disqualified Person

Donor Advised Fund

Form 990-T – Exempt Organization Business Income Tax Return (Unrelated Business Income – UBI)

Conflicts of Interest

Vehicle Donations

Booster club example

Form 990-EZ – Return of Organization Exempt from Income Tax

Schedule A – Organization Exempt Under Section 501(c)(3)

Schedule B – Schedule of Contributors

Schedule G – Supplemental Information Regarding Fundraising or Gaming Activities

Filing Requirements for IRC 503(c)(3) Organizations

Returns are due by the 15th day of the fifth month after organization's year end. For example, if yearend is June 30, 2011, return due by November 15, 2011. Form 990 and Form 990EZ can file one six month extension using Form 8868. There is no extensions for Form 990N.

Form 990N – Gross receipts normally less than \$50,001 must file online with IRS at <u>http://epostcard.form990.org</u>. There is no paper form.

Form 990N Information Organization's employer identification number Organization's legal name Any other names the organization uses Organization's mailing address Name and address of principal officer of the organization Organization's year end Verify that organization's annual gross receipts are less than \$50,001 Some indication the organization has not ceased operations or terminated

Form 990EZ – Gross receipts less than \$200,000 and total assets less than \$500,000.

Form 990 – Gross receipts greater than \$199,999 or total assets greater than or equal to \$500,000.

FAILURE TO FILE FORM 990-N, 990-EZ OR 990 FOR THREE CONSECUTIVE YEARS, THE ORGANIZATION'S STATUS AS AN EXEMPT ORGANIZATION UNDER IRC 503(C)(3) WILL AUTOMATICALLY BE REVOKED. FROM THE DATE OF REVOCATION, THE ORGANIZATION WILL BE A TAXABLE CORPORATION OR ASSOCIATION AND WILL OWE INCOME TAXES ON ITS NET INCOME. REVENUE PROCEDURE 2014-11 GIVES STEPS NECESSARY FOR ORGANIZATION TO REGAIN EXEMPT STATUS THE ORGANIZATION WILL HAVE TO RE-FILE FORM 1023 AND APPLY FOR 501(C)(3) STATUS WITHIN 15 MONTHS OF THE DATE OF REVOCATION.

Form W-9

Form W-9, Request for Taxpayer Identification Number and Certification, should be obtained from all vendors, donors of property of \$500 or more and prize winners of \$600 for more.

Form 1099-MISC

Report rents and non-employee compensation (i.e. payments to vendors) on a calendar year of \$600 or more. Report name, address and federal identification number (i.e. social security number or employer identification number) and amount paid to such person/entity. Generally payments to corporations are not reportable, payments to all other persons or entities are reportable. Exception, all payments to attorneys/law firms of \$600 or more are reportable. Form 1099 is also required for prizes of \$600 or more awarded to an individual.

Penalties for failure to file Form 1099

\$50 per Form 1099 if filed within 30 days of due date (January 31 for Form 1099-MISC, Box 7) (February 28 for other Form 1099)

\$100 per Form 1099 if filed after 30 days of due date and before August 2

\$260 per Form 1099 if filed after August 1or not filed as required

Donation Receipts

Organizations must provide written receipts to the donor for donations of property and cash.

- 1. For the purposes of acknowledging the receipt of property donations, the term "property" does <u>not</u> include services (I.R.C. section 1.170A-1(g)). As a general rule, for a "donation" to be considered a charitable contribution, the donated property must have some cost basis in the hands of the donor. Donations such as coupons for services or discounts on services or goods have no such cost basis in the hands of the donor and therefore do not qualify as a charitable contribution and should not be acknowledged as such (Rev. Rul. 79-431, 1979-2 CB 108).
 - a. Donation receipt is required for donations of \$250 or more of cash or property received during the year.
 - b. Under the quid pro quo rules the organization must provide a receipt if it receives a payment of more than \$75 that is partly for goods or services and partly a contribution.

DONATION OF CASH

(Donor Name) (Donor Address, if known)

Thank you for your contribution of \$_____ in cash on [Date]. Your gift will be devoted to our organization's objectives and we will not provide benefits or services required to be valued in consideration for this gift.

(Organization's Name)

Authorized Signature

Donations from Fundraisers

Organizations use various fundraising events (ie golf tournaments, galas, raffles, etc) to raise money during the year. In each case, except raffles, there probably is a quid pro quo element to the fundraising event. It is the organization's responsibility to determine the fair market value of the non-charitable benefits received by the participants and disclose the charitable and non-charitable portion of each fundraiser to the participants.

- 1. Use best estimate to determining the fair market value of non-charitable benefits of a fundraiser.
- 2. If donated property is auctioned or given as a prize the donor should provide a reasonable estimate of its fair market value.
- 3. No part of the purchase of a raffle ticket is considered a charitable contribution.

Quid pro Quo Donations (Payment of \$75.01 or More)

(Donor Name) (Donor Address, if known)

Thank you for your contribution of $\$ in cash and/or [Describe Property] on [Date]. We estimate the fair market value of the benefits we provided to you consideration for this donation was $\$. We are a I.R.C. section 501(c)(3) organization and you may claim a donation deduction for the difference between the cash and/or property given to the organization and the value of the benefits you received. The organization assumes no responsibility for determining the fair market value of the donated property.

(Organization's Name)

Authorized Signature

Form 8282 - Disposal of Donated Property

If the organization within <u>three</u> years of receipt, disposes of donated property (ie sells, transfers or assigns) with a fair market value of \$500 or more, the organization is required to complete Form 8282 and file the form with IRS within 125 days of the disposal of such property and send a copy to the donor.

- 1. Does not apply to marketable securities or cash.
- 2. Does not apply if the donated property is consumed or distributed in fulfilling exempt purpose. For example, athletic booster club receives donated football equipment and distributes such equipment to high school athletes.
- 3. In some cases, Form 8282 may be required for dispositions of donated property of \$500 or more.

Individual Accounts

The IRS generally does not like individual accounts within a charitable organization. An example of an individual account is Johnny sells more coupon books than the rest of the kids in the organization and for this Johnny gets a \$100 credit to his account than he can use to pay for the next field trip. This can be considered an individual receiving a personal benefit from a charitable organization, which is contrary to the general purpose of a charitable organization. Therefore, IRS does not condone "Individual Accounts" and can assess penalties on the organization for maintaining such accounts.

Disqualified Person

A disqualified person is any officer, director or trustee of the organization and any person who donates more than \$5,000 to the organization provided such donation exceeds 2% of the organization's total donations. In the example, Schedule A, Part III, Section A, line 1 total donations are \$118,020, 2% of the total donations is \$2,360. Thus a donor who donates more than \$5,000 would be a disqualified person. Family members of the aforementioned persons are also considered disqualified persons.

Donor Advised Fund

Form 990EZ, Part V, line 44a asks if the organization maintains any "donor advised funds." If the organization answers yes, it cannot file Form 990EZ but must instead file Form 990, the long form. The IRS describes "Donor Advised Fund" as a fund in which the donor has or reasonably expects to have advisory privileges in the disbursement of the fund because of the donor's status as a donor. Example, a donor donates \$500 to the organization and stipulates the organization has to buy student John football equipment with the funds. Donor advised funds do not include the following.

- Fund directed to be disbursed to a single identifiable organization or government entity ie a school
- All grants, disbursements from the fund are made on an objective and nondiscriminatory basis following procedures approved in advance by the board of directors. For example, a donor donates to be disbursed exclusively for scholarship and the organization has an established procedure for awarding such scholarship, these are not donor advised funds.
- The above two exceptions are applicable only if the donors do not control the board of directors or committee that awards or disburses such funds.

Unrelated Business Income (UBI)

UBI arises if an organization engages in a trade or business that is regularly carried on and the activity is not substantially related to the performance of the organization's exempt purpose. Unrelated business income (UBI) is subject to income taxes at the corporate tax rates and is reported on Form 990-T.

- 1. Advertising.
- 2. Travel tours (non-educational).
- 3. Sales of mailing lists.
- 4. Subscription revenue for publications (ie journals, periodicals, directories, etc).
- 5. Rental of personal property.
- 6. Rental of real property when the organization provides significant services to the lessee.
- 7. Any activity that is "regularly" carried on can potentially be considered UBI.

IRC Section 513 defines "unrelated trade or business" but states unrelated trade or business income does not included income "in which substantially all the work in carrying on such trade or business is performed by the organization without compensation."

This most common issue in this area is advertising revenue received in publishing sports programs or yearbooks. If the organization hires a third party to solicit advertising for its yearbook and/or sport programs, this would probably make this advertising revenue "unrelated business income" subject to income taxes.

Local booster clubs and PTO's generally do not have income that can be considered unrelated business income from fundraisers for example because the officers and members are not paid compensation. Thus the selling of programs, concessions, school supplies, etc is not unrelated business income as no one the organization receives compensation.

Conflicts of Interest

Officers, directors and large contributors are generally considered "disqualified" persons and any transactions or business dealings with these individuals, their family members or their related entities are subject to disclosure and scrutiny by the IRS.

- 1. Compensation and benefits.
- 2. Purchase of assets.
- 3. Leasing transactions.
- 4. Payments for goods or services.
- 5. Grants or scholarships.

Vehicle Donations

Special rules apply beginning after December 31, 2004 regarding the donation of vehicles to charitable organizations if the vehicle has a fair market value of more than \$500 or is sold for more than \$500.

- 1. Generally the donation amount is limited to the sales price of the vehicle by the organization, not its "fair market value."
- 2. The organization must file Form 8282 if the vehicle is disposed of within three years.
- 3. Organization must provide the donor Form 1098-C within 30 days of the disposal of the vehicle and with the IRS by February 28 of the next year.

School Booster Club Balance Sheet As of June 30, 2019

Checking Account	\$ 3,250	
Savings Account	 15,250	
	_	18,500
LIABILITIES & FUND BALANCE		
Fund Balance 06/30/2018	\$ 7,400	
Net Income 06/30/2019	 11,100	
	_	18,500

School Booster Club Income Statement For the Fiscal Year Ended June 30, 2019

		Program		Investment		
INCOME	Total	Revenue	Fundraisers	Income	Donations	Note
Catalog Fundraiser	13,600		13,600			
Other Fundraiser	5,100		5,100			
Golf Tournament	17,500		5,000		12,500	Note (1)
Raffle (at golf tournament)	500		500			
Donated Texans Football Tickets for Raffle	100				100	Note (2)
Donation - Cash	5,000				5,000	
Interest	10			10		
Membership Dues (50 members @ \$20)	1,000				1,000	Note (3)
Educational Trip Income (from students)	10,425	10,425				-
Total Income	53,235	10,425	24,200	10	18,600	
Form 990-EZ / 990		Line 2	Line 6a	Line 4	Line 1	

	Program			Admin
EXPENSES	Total	Expenses	Fundraisers	Expenses
Catalog Fundraiser	6,800		6,800	
Other Fundraiser	3,300		3,300	
Golf Tournament Costs	3,500		3,500	
Donated Texans Football Tickets for Raffle	100		100	
Scholarship	3,000	3,000		
School Donation	11,000	11,000		
Professional fees	500			500
Supplies	680	300		380
Bank Service Charges	80			80
Telephone	350	250		100
Travel	400	300		100
Educational Trip	12,425	12,425		
Total Expenses	42,135	27,275	13,700	1,160
_		Line 17	Line 6b	Line 17
NET INCOME (LOSS)	11,100			

Note (1): Assumed 50 players and FMV of round of golf \$100 which is the net fundraising revenue

Note (2): Based on fair market value on date of donation

Note (3): Assumed members receive no benefit for their membership dues

For		90-EZ			OMB No. 1545-0047
			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private found	ations)	Open to Public
		- C 41	Do not enter social security numbers on this form, as it may be made public.		Inspection
Dep Inter	artment nal Rev	of the Treasury enue Service	Go to www.irs.gov/Form990EZ for instructions and the latest information.		inspection
A	For the	e 2019 calenda	ar year, or tax year beginning $07/01/19$, and ending $06/30/20$		
		applicable:	C Name of organization	D Emp	oloyer identification number
	Address	change			
	Name ch	ange	SCHOOL BOOSTER CLUB	76	6-1234567
	Initial ret	urn	Number and street (or P.O. box, if mail is not delivered to street address) Room/suite	E Tele	phone number
	Final retu	urn/terminated	123 MAIN STREET		
	Amendeo	d return	City or town, state or province, country, and ZIP or foreign postal code	F Gro	up Exemption
	Application	on pending	Houston TX 77018	Nur	nber 🕨
G	Accoui	nting Method:	Cash X Accrual Other (specify) ► H Che	ck 🕨 🗌	if the organization is not
	Websi				ttach Schedule B
J	Tax-ex	empt status (che		m 990, 9	90-EZ, or 990-PF).
		of organization:	X Corporation Trust Association Other		
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets		
			500,000 or more, file Form 990 instead of Form 990-EZ		· /
P	art I		e, Expenses, and Changes in Net Assets or Fund Balances (see the instru		
			the organization used Schedule O to respond to any question in this Part I		<u> </u>
	1		fts, grants, and similar amounts received	. 1	18,600
	2	Program serv	ce revenue including government fees and contracts	. 2	10,425
	3		lues and assessments		10
	4			4	10
	5a	Gross amoun	t from sale of assets other than inventory 5a		
	b	Less: cost or	other basis and sales expenses 5b		
	c		om sale of assets other than inventory (subtract line 5b from line 5a)	<u>5c</u>	
	6	-	undraising events: from gaming (attach Schedule G if greater than		
P	а				
Revenue	b	Gross income	from fundraising events (not including \$ 12,500 of contributions		
Sev		from fundraisi	ng events reported on line 1) (attach Schedule G if the		
_		sum of such g	ross income and contributions exceeds \$15,000) 6b 24,2	00	
	с		xpenses from gaming and fundraising events 6c 13, 7	00	
	d		(loss) from gaming and fundraising events (add lines 6a and 6b and subtract		
		line 6c)	······································	. 6d	10,500
	7a	Gross sales o	f inventory, less returns and allowances 7a		
	b	Less: cost of	goods sold7b		
	С	Gross profit o	r (loss) from sales of inventory (subtract line 7b from line 7a)		
	8	Other revenue	e (describe in Schedule O)	. 8	
	9	Total revenu	e. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	► 9	39,535
	10		nilar amounts paid (list in Schedule O)		14,000
	11		to or for members	. 11	+
ses	12	Salaries, othe	r compensation, and employee benefits	. 12	
Expenses	13		ees and other payments to independent contractors	. 13	
цхр	14 15	Printing public	ent, utilities, and maintenance	14	
	15	Other expense	cations, postage, and shipping	15	10.005
	10	Total expense	es (describe in Schedule O) es. Add lines 10 through 16	▶ <u>10</u>	
	18		ficit) for the year (subtract line 17 from line 9)		11,100
ets	19		fund balances at beginning of year (from line 27, column (A)) (must agree with		
Net Assets			gure reported on prior year's return)	19	7,400
et⊿	20		s in net assets or fund balances (explain in Schedule O)		
Ź	21		fund balances at end of year. Combine lines 18 through 20	► <u>21</u>	

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2019)

Form 990-EZ (2019) SCHOOL BOOSTER CLUB		76-12	34567		Page 2
Part II Balance Sheets (see the instructions for F	,				
Check if the organization used Schedule O t	o respond to any			<u></u>	
			ginning of year		(B) End of year
22 Cash, savings, and investments			7,400	22	18,500
23 Land and buildings			0	23	
24 Other assets (describe in Schedule O)			0	24	10 500
25 Total assets			7,400	25	18,500
			0	26	
27 Net assets or fund balances (line 27 of column (B) must age			7,400	27	18,500
Part III Statement of Program Service Accom Check if the organization used Schedule O t	•		·		Expenses
	o respond to any		" ∟	(Po	•
What is the organization's primary exempt purpose?					quired for section
EDUCATION OR AMATEUR ATHLETICS Describe the organization's program service accomplishments for	oach of its thros la	raact program convisoo			(c)(3) and 501(c)(4) anizations; optional for
as measured by expenses. In a clear and concise manner, describ				0	
persons benefited, and other relevant information for each program	•	vided, the number of		othe	ers.)
28 PROMOTE AND IMPROVE THE EDUCATIONAL EXPERIEN					
HOUSTON, TEXAS, AND PROVIDE ACADEMIC SCHOLAF	SHIPS TO STUD	ENTS.			
(Grants \$ 14,000) If this amount includes	fanalan ananta aha			202	27,275
				28a	21,213
29					
				202	
(Grants \$) If this amount includes				29a	
30					
				20-	
(Grants \$) If this amount includes				30a	
31 Other program services (describe in Schedule O)				24.	
(Grants \$) If this amount includes				31a 32	27,275
32 Total program service expenses (add lines 28a through 31a Part IV List of Officers, Directors, Trustees, and Key E	Timplovees (list ear	ch one even if not compe	ensated — see th		
Check if the organization used Schedule O to resp	oond to any question	on in this Part IV	<u></u>		
(a) Name and title	(b) Average hours per week	(c) Reportable compensation	(d) Health ben contributions to e	mnlovee	(e) Estimated amount of
(a) Name and the	devoted to position	(Forms W-2/1099-MISC) (if not paid, enter -0-)	benefit plans, deferred comper	and	other compensation
SHERYL JONES		(in not paid, enter -0-)		Isation	-
PRESIDENT	2.00	0		0	0
ROBERT JOHNSON	2.00	Ŭ			
VICE PRESIDENT	2.00	0		0	0
BETTY BAKER	2.00	Ŭ			
TREASURER	2.00	0		0	0
NANCY ANDERSON	2.00	Ŭ			
SECRETARY	2.00	0		0	0
	2.00	ŭ			
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<u>.</u>					

Form	990-EZ (2019) SCHOOL BOOSTER CLUB 76-1234567		Р	age 3
Pa	Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V.			
			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		Х
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		Х
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		X
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		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			v
07	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	-		v
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	38a		х
b	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? If "Yes," complete Schedule L, Part II, and enter the total amount involved [38b]	304		А
39	Section 501(c)(7) organizations. Enter:	-		
a	Initiation force and contributions included on line 0			
b	Gross receipts, included on line 9, for public use of club facilities 39b	-		
	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), 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	40b		Х
с	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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), 501(c)(4), and 501(c)(29) 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		Х
41	List the states with which a copy of this return is filed None			
42a	The organization's books are in care of ► BETTY BAKER Telephone no. ►			
	Located at ► HOUSTON TX ZIP + 4 ► 77	065		
b		005	Vee	Na
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No X
	If "Yes," enter the name of the foreign country	420		Λ
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).			
с	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		Х
	If "Yes," enter the name of the foreign country ►			
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			
			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		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		X
С	Did the organization receive any payments for indoor tanning services during the year?	44c		Х
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		Х
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			

45b

Х

Form 990-EZ. See instructions

Form 990-	-EZ (2019) SCHOOL BOOSTER CLUB			76-12	34567			F	age 4
46 Dic	the organization engage, directly or indirectly, in political	campaign activitie	s on behalf	of or in oppo	eition			Yes	No
	candidates for public office? If "Yes," complete Schedule (46		х
Part V	/I Section 501(c)(3) Organizations Only							•	
	All section $501(c)(3)$ organizations must answ 50 and 51.	wer questions 47	–49b and	52, and cor	nplete the ta	bles for lir	nes		
	Check if the organization used Schedule O to	o respond to any	question	in this Part	VI				
17 Dic	t the organization engage in lobbying activities or have a	postion EQ1(b) alog	tion in offer	at during the	toy.			Yes	No
				-			47		x
∎ 8 lst	the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," co	omplete Scl	hedule E			48		Х
19a Dic	d the organization make any transfers to an exempt non-c	haritable related or	ganization	?			49a		X
	Yes," was the related organization a section 527 organiza						49b		
	mplete this table for the organization's five highest compendation of the highest compension of compension of the state of		-			-			
em		(b) Average	-	portable	(d) Health I				
	(a) Name and title of each employee	hours per week devoted to position	cómp	ensation 2/1099-MISC)	contributions t benefit pla deferred com	o employee	(e) Estimat other cor		
None	•								
	tal number of other employees paid over \$100,000			►	<u> </u>				
51 Co \$1(mplete this table for the organization's five highest compe 00,000 of compensation from the organization. If there is r	ensated independe none, enter "None.	nt contracto "	ors who each	received mor	e than			
	(a) Name and business address of each independent con			(b) Тур	e of service		(c) Compe	ensation	I
None									
	tal number of other independent contractors each receivir the organization complete Schedule A? Note: All sectior	• •	ations mus	t attach a					
	mpleted Schedule A					►	X Yes	s	No
Jnder per rue, corre	nalties of perjury, I declare that I have examined this return, inclu ect, and complete. Declaration of preparer (other than officer) is b	ding accompanying s based on all informati	schedules an on of which (d statements, preparer has a	and to the best ny knowledge.	of my knowle	edge and be	lief, it is	
. .									
Sign	Signature of officer SHERYL JONES		וס						
lere	Type or print name and title		E1		**				
Paid	Print/Type preparer's name Pre	parer's signature			Date	Check self-em	if PTI	N	
Prepare	Firm's name This tax return					rm's EIN	F.0,00		
Use On									
	non-paid preparer				P	hone no.			
May the	IRS discuss this return with the preparer shown above? S	See instructions			<u></u>			′es	No
									(2010

Form **990-EZ** (2019)

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.

Attach to Form 990 or Form 990-EZ.

9 Open to Public

OMB No. 1545-0047

		of the Treasury		Attach to Form 9	Open to Public									
Interr	al Rev	enue Service	► Go to	www.irs.gov/Form990 for instructions and the latest information.					Inspection					
Name	e of th	e organization	SCHOOL BOOSI	ER CLUB	CLUB Employer identifica									
P	art I	Reas	on for Public Charity	Status (All organizations	s must c	omplete	e this part.) See instru	ctions						
The	orga	nization is not	a private foundation becau	se it is: (For lines 1 through 12,	check onl	y one box	(.)							
1		A church, cor	nvention of churches, or ass	sociation of churches described	in sectio	n 170(b)(1)(A)(i).							
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)												
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).													
4		A medical res	•	ed in conjunction with a hospital	described	l in sectio	on 170(b)(1)(A)(iii). Enter f	he hosp	bital's name,					
5		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.)													
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).													
7		-	ion that normally receives a section 170(b)(1)(A)(vi). (C	substantial part of its support fr Complete Part II.)	rom a gove	ernmenta	l unit or from the general p	ublic						
8		A community	trust described in section	170(b)(1)(A)(vi). (Complete Par	rt II.)									
9		-	-	scribed in section 170(b)(1)(A) of agriculture (see instructions)				-						
10	X	An organizati receipts from support from	activities related to its exer gross investment income a	1) more than 33 1/3% of its sup npt functions—subject to certain nd unrelated business taxable i 30, 1975. See section 509(a)(2	n exceptio ncome (le	ns, and (2 ss sectior	2) no more than 33 1/3% o n 511 tax) from businesses	f its						
11		. ,	•	exclusively to test for public sa	<i>,</i> , ,		,							
12		•	•	exclusively for the benefit of, to	•			urposes						
		•	•	zations described in section 50	•									
		Check the bo	ox in lines 12a through 12d t	hat describes the type of suppo	orting orga	nization a	ind complete lines 12e, 12	f, and 12	2g.					
	а			perated, supervised, or controlle	•		• • • • •	' giving						
			• • • •	wer to regularly appoint or elect		y of the di	rectors or trustees of the							
	h			complete Part IV, Sections A a upervised or controlled in conne		ite europe	orted organization(a) by be	wina						
	b	control or	r management of the suppo	rting organization vested in the Part IV, Sections A and C.			• • • •	•						
	с	Type III f	functionally integrated. A	supporting organization operate structions). You must complet				ed with,						
	d			d. A supporting organization op				ization(s	3)					
				e organization generally must s					,					
			· /	must complete Part IV, Section		-								
	е	Check thi	is box if the organization red	ceived a written determination fr	rom the IR	S that it is	s a Type I, Type II, Type III	I						
	f		nber of supported organizat	n-functionally integrated suppor	rung organ	lization.								
	g			he supported organization(s).										
		e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the d	organization	(v) Amount of monetary		(vi) Amount of					
``		ganization		(described on lines 1–10	listed in you	ur governing	support (see		other support (see					
				above (see instructions))		ment?	instructions)		instructions)					
					Yes	No								
(A)														
(B)														
								\square						
(C)														
(D)														
(E)								+						
								+						

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

Schedule A (Form 990 or 990-EZ) 2019

Total

Sched		OOL BOOS				<u>5-12345</u>		Page
Pa	rt II Support Schedule for O							
	(Complete only if you che							y under
	Part III. If the organization	fails to qualif	y under the tes	ts listed below,	please compl	ete Part III.	.)	
	ion A. Public Support			1				
Calen	dar year (or fiscal year beginning in) 🛛 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	9	(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							
	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)							
	Public support. Subtract line 5 from line 4							
	ion B. Total Support		1	1				
Calen	dar year (or fiscal year beginning in) 🛛 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	9	(f) Total
	Amounts from line 4							
	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 VI.)							
	Total support. Add lines 7 through 10							
12	Gross receipts from related activities, etc.	(see instructions)			l	12	
	First five years. If the Form 990 is for the	-		•				
<u> Saat</u>	organization, check this box and stop her	e	<u></u>					<u></u>
	ion C. Computation of Public Su						44	
	Public support percentage for 2019 (line 6						14	%
	Public support percentage from 2018 Sch			10. and line 11 is			15	%
	33 1/3% support test—2019. If the organ			-4:				
	box and stop here. The organization qual				45 :- 00 4/00/			► L
	33 1/3% support test—2018. If the organ							
	this box and stop here. The organization 10%-facts-and-circumstances test—20							····· •
	10% or more, and if the organization meet							
	Part VI how the organization meets the "fa				• •			
	-							
	organization 10%-facts-and-circumstances test—20							····· 📕
		-						
	15 is 10% or more, and if the organization Explain in Part VI how the organization me				-			
		ers me lacts_an	o-coconsiances" tr	-su uue ordanizati	on onallities as a r	n n n n n CIV		
				-		-		► 1
								►

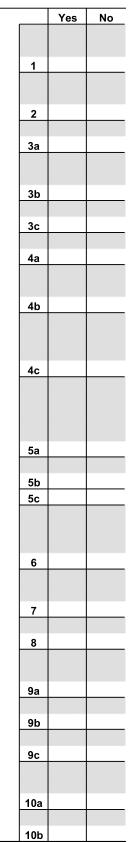
Sche	dule A (Form 990 or 990-EZ) 2019 SCH	IOOL BOOSI	ER CLUB		76-	-1234567	Page 3
Pa	art III Support Schedule for O						
	(Complete only if you che						r Part II.
	If the organization fails to	qualify under t	he tests listed b	pelow, please c	omplete Part I	l.)	
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🛛 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	26,000	26,500	24,920	22,000	18,600	118,020
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	39,500	37,000	35,380	35,000	29,135	176,015
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	65,500	63,500	60,300	57,000	47,735	294,035
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons					5,450	5,450
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						
С	Add lines 7a and 7b					5,450	5,450
8	Public support. (Subtract line 7c from line 6.)						288,585
Sec	tion B. Total Support						, ,
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	65,500		60,300	57,000	47,735	294,035
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties, and income from similar sources	10	10	10	10		40
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с	Add lines 10a and 10b	10	10	10	10		40
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					900	900
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	65,510	63,510	60,310	57,010	48,635	294,975
14	First five years. If the Form 990 is for the organization, check this box and stop her	organization's firs	t, second, third, fou	irth, or fifth tax yea	r as a section 501	(c)(3)	
Sec	tion C. Computation of Public Su	ipport Percen	tage				····· 🕨 🛄
<u>15</u>	Public support percentage for 2019 (line 8			un (f))		15	97.83%
16	Public support percentage from 2018 Scho						<u> </u>
	tion D. Computation of Investme						,,,
17	Investment income percentage for 2019 (li			, column (f))		17	%
18	Investment income percentage from 2018	Schedule A, Part	III, line 17			18	%
19a	33 1/3% support tests—2019. If the orga						
b	17 is not more than 33 1/3%, check this bo 33 1/3% support tests—2018. If the orga	ox and stop here .	The organization q	ualifies as a public	ly supported orgai	nization	> X
~	line 18 is not more than 33 1/3%, check th						▶□
20	Private foundation. If the organization did	=				-	

Schedule A (Form 990 or 990-EZ) 2019 SCHOOL BOOSTER CLUB

(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.)



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	Ile A (Form 990 or 990-EZ) 2019 SCHOOL BOOSTER CLUB 7 t IV Supporting Organizations (continued)	6-1234567		Page 5
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	. 11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
ect	on C. Type II Supporting Organizations			
	Ware a maintiful of the experimentary's directors or tructure during the tax upor also a maintiful of the directors		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	ion D. All Type III Supporting Organizations	I		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		1.00	
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior	tax		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	A/		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
ecti	ion E. Type III Functionally-Integrated Supporting Organizations	5		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (so	e instructions)		
'a	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
c	The organization supported a governmental entity. <i>Describe in Part VI how you supported a government e</i>	ntity (see instructions)		
U			•	
2 /	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	2b		
2	activities but for the organization's involvement.	20		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	3-		
	trustees of each of the supported organizations? Provide details in Part VI.	<u>3a</u>		I

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	Organizati	ons	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization			
ection A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
ection C - Distributable Amount			Current Year
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			

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

V Type III Non-Functionally Integrated 509(a)(on D - Distributions Amounts paid to supported organizations to accomplish exempt purported organizations to			•
			Current Year
	irposes		
Amounts paid to periorn activity that directly furthers exempt purpt			
organizations, in excess of income from activity			
Administrative expenses paid to accomplish exempt purposes of su	upported organizations		
Amounts paid to acquire exempt-use assets	···		
Qualified set-aside amounts (prior IRS approval required)			
Other distributions (describe in Part VI). See instructions.			
Total annual distributions. Add lines 1 through 6.			
Distributions to attentive supported organizations to which the orga	nization is responsive		
(provide details in Part VI). See instructions.			
Distributable amount for 2019 from Section C, line 6			
Line 8 amount divided by line 9 amount			
	(i)	(ii)	(iii)
Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
Distributable amount for 2019 from Section C, line 6			
Underdistributions, if any, for years prior to 2019			
× ·			
C C			
	Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the orga (provide details in Part VI). See instructions. Distributable amount for 2019 from Section C, line 6 Line 8 amount divided by line 9 amount Section E - Distribution Allocations (see instructions) Distributable amount for 2019 from Section C, line 6	Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2019 from Section C, line 6 Line 8 amount divided by line 9 amount (I) Section E - Distribution Allocations (see instructions) Distributable amount for 2019 from Section C, line 6 Underdistributions, if any, for years prior to 2019 (reasonable cause required-explain in Part VI). See instructions. Excess distributions carryover, if any, to 2019 From 2015. From 2016 From 2017. From 2018 Total of lines 3a through e Applied to underdistributions of prior years Applied to 2019 distributable amount Carryover from 2014 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2019 from Section D, line 7: \$ Applied to underdistributions of prior years Applied to 2019 distributable amount Remainder. Subtract lines 3a and 3i from 3f. Distributions for 2019 from Section D, line 7: <td< td=""><td>Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. (i) Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. (ii) (iii) Section E - Distribution Allocations (see instructions) If is cases Distributions (iii) (iiii) Distributions any, for years prior to 2019 (reasonable case required-explain in Part VI). See instructions. If is cases distributions any for years prior to 2019 From 2015 If cases distributions carryover, if any, to 2019 If is cases distributions carryover, if any, to 2019 From 2016 If cases distributions of prior years If is cases distributions of prior years Applied to underdistributions of prior years Applied to 2019 distributable amount If is case distributions of prior years Applied to 2019 distributable amount If is case distributions of prior years If is case distributions of prior years Applied to 2019 distributable amount If is case distributions of prior years If is case distributions of prior years Applied to 2019 distributable amount If is case distributions of prior years If is case distributions of prior years</td></td<>	Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. (i) Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. (ii) (iii) Section E - Distribution Allocations (see instructions) If is cases Distributions (iii) (iiii) Distributions any, for years prior to 2019 (reasonable case required-explain in Part VI). See instructions. If is cases distributions any for years prior to 2019 From 2015 If cases distributions carryover, if any, to 2019 If is cases distributions carryover, if any, to 2019 From 2016 If cases distributions of prior years If is cases distributions of prior years Applied to underdistributions of prior years Applied to 2019 distributable amount If is case distributions of prior years Applied to 2019 distributable amount If is case distributions of prior years If is case distributions of prior years Applied to 2019 distributable amount If is case distributions of prior years If is case distributions of prior years Applied to 2019 distributable amount If is case distributions of prior years If is case distributions of prior years

Schedule A (Fo	orm 990 or 990-EZ) 2019	SCHOOL	BOOSTER CL	UB		76-1234567	Page 8
Part VI	Supplemental In III, line 12; Part IV B, lines 1 and 2; I	formation. Pro /, Section A, lin Part IV, Section /, line 1; Part V	vide the explana es 1, 2, 3b, 3c, 4 C, line 1; Part IV , Section B, line	tions required lb, 4c, 5a, 6, 9 V, Section D, I 1e; Part V, Se	9a, 9b, 9c, 11a, 1 ines 2 and 3; Pa ection D, lines 5,	0; Part II, line 17a or 1b, and 11c; Part IV, rt IV, Section E, lines 6, and 8; and Part V,	17b; Part Section 1c, 2a, 2b,
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Schedule B

(Form	990,	990-EZ
or 990	-PF)	

Department of the Treasury Internal Revenue Service

Name of the organiz

SCHOOL BO

Organization type

		·
zation		
OOSTE	ER CLUB	
(check o	one):	

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Schedule of Contributors Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the
regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line
13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1)
\$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

▶ \$

DAA

OMB No. 1545-0047

Employer identification number

76-1234567

Name of or	(Form 990, 990-EZ, or 990-PF) (2019) rganization OL BOOSTER CLUB	Er	e 1 of 1 Page 2 nployer identification number 6-1234567
Part I	Contributors (see instructions). Use duplicate copies of P	art I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.1	DAVID JOHNSON 1000 CEDAR DRIVE HOUSTON TX 77007	\$ <u>5,000</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	·	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

SCHEDULE G	Supplemental Inforn						OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if the organizat organizatio	tion answered "Yes on entered more that	s" on F an \$15	orm 9 ,000 o	90, Part IV, line 17, 18, o n Form 990-EZ, line 6a.	r 19, or if the	2019
Department of the Treasury Internal Revenue Service	Go to www.ii	Attach to Form rs gov/Form990 for			m 990-EZ. s and the latest informati	on	Open to Public Inspection
Name of the organization	HOOL BOOSTER CLU					Employer identifica	tion number
	ing Activities. Complete if		on ar	nswe	red "Yes" on Form		
Form 990	-EZ filers are not required	to complete thi	is pai	rt.			
1 Indicate whether the o	rganization raised funds through	any of the followin	ig activ	vities.	Check all that apply.		
a 🔄 Mail solicitations		e 🔄 Solicitation	n of no	n-gov	ernment grants		
b Internet and email	solicitations	f Solicitation	n of go	vernn	nent grants		
c Phone solicitations	3	g 🗌 Special fur	ndraisi	ng ev	ents		
d 🗌 In-person solicitati	ons						
2a Did the organization ha	ave a written or oral agreement w	rith any individual ((incluc	ling o	fficers, directors, trustee	es,	
	d in Form 990, Part VII) or entity i nest paid individuals or entities (fu		•		•		Yes No
	\$5,000 by the organization.	indraisers) pursua		-	ments under which the		
	address of individual y (fundraiser)	(ii) Activity	raise custo cont	id fund- r have ody or rol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization
			Yes	1		col. (i)	
1			103				
2							
3							
5							
4							
5							
5							
6							
7							
1							
8							
9							
3							
10							
Total		1	1	•			
	the organization is registered or I g.			ution	s or has been notified it	is exempt from	
• • • • • • • • • • • • • • • • • • • •			· · · · · · · ·				••••••

che	edule G (Form 990 or 990-EZ)			76-123	
Pa		vents. Complete if the organ			
		f fundraising event contributi greater than \$5,000.	ions and gross income on F	orm 990-EZ, lines 1 and	d 6b. List events wi
	gioss receipts c	(a) Event #1	(b) Event #2	(c) Other events	
		GOLF TOURNAMENT	CATALOG SALES	1	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. (c))
	1 Gross receipts	18,000	13,600	5,100	36,700
-	2 Less: Contributions	12,500			12,500
_	3 Gross income (line 1 minus line 2)	5,500	13,600	5,100	24,200
	4 Cash prizes				
	5 Noncash prizes	100			100
2222	6 Rent/facility costs	3,500			3,500
הווכתו באהמווסמס	7 Food and beverages				
) 	8 Entertainment				
	9 Other direct expenses		6,800	3,300	10,100
	10 Direct expense summary	Add lines 4 through 9 in column (c	4)		13,700
		. Add lines 4 through 9 in column (o btract line 10 from line 3, column (o			
P	11 Net income summary. Su art III Gaming. Com	<u>btract line 10 from line 3, column (o</u> plete if the organization answ	d)	🕨 📔	10,500
P	11 Net income summary. Su art III Gaming. Com	btract line 10 from line 3, column (o	d) wered "Yes" on Form 990, F	🕨 📔	10,500 ted more than
	11 Net income summary. Su art III Gaming. Com	<u>btract line 10 from line 3, column (o</u> plete if the organization answ	d)	🕨 📔	10,500
	11 Net income summary. Su art III Gaming. Com	btract line 10 from line 3, column (plete if the organization ans rm 990-EZ, line 6a.	d) wered "Yes" on Form 990, F (b) Pull tabs/instant	Part IV, line 19, or repor	10,50(ted more than (d) Total gaming (add
	11 Net income summary. Su art III Gaming. Com	btract line 10 from line 3, column (plete if the organization ans rm 990-EZ, line 6a.	d) wered "Yes" on Form 990, F (b) Pull tabs/instant	Part IV, line 19, or repor	10,500 ted more than (d) Total gaming (add
000	11 Net income summary. Su art III Gaming. Com \$15,000 on Fo	btract line 10 from line 3, column (plete if the organization answ rm 990-EZ, line 6a. (a) Bingo	d) wered "Yes" on Form 990, F (b) Pull tabs/instant	Part IV, line 19, or repor	10,50(ted more than (d) Total gaming (add
	11 Net income summary. Su art III Gaming. Com \$15,000 on Fo 1 Gross revenue	btract line 10 from line 3, column (plete if the organization answ rm 990-EZ, line 6a. (a) Bingo	d) wered "Yes" on Form 990, F (b) Pull tabs/instant	Part IV, line 19, or repor	10,500 ted more than (d) Total gaming (add
	11 Net income summary. Su art III Gaming. Com \$15,000 on Fo 1 Gross revenue 2 Cash prizes	btract line 10 from line 3, column (plete if the organization answ rm 990-EZ, line 6a. (a) Bingo	d) wered "Yes" on Form 990, F (b) Pull tabs/instant	Part IV, line 19, or repor	10,50(ted more than (d) Total gaming (add
	11 Net income summary. Su art III Gaming. Com \$15,000 on Fo 1 Gross revenue 2 Cash prizes 3 Noncash prizes	btract line 10 from line 3, column (plete if the organization answ rm 990-EZ, line 6a. (a) Bingo	d) wered "Yes" on Form 990, F (b) Pull tabs/instant	Part IV, line 19, or repor	10,500 ted more than (d) Total gaming (add
	11 Net income summary. Su art III Gaming. Com \$15,000 on Fo 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs	btract line 10 from line 3, column (plete if the organization answ rm 990-EZ, line 6a. (a) Bingo	d) wered "Yes" on Form 990, F (b) Pull tabs/instant	Part IV, line 19, or repor	10,500 ted more than (d) Total gaming (add
	11 Net income summary. Su art III Gaming. Com \$15,000 on Fo 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor	btract line 10 from line 3, column (a plete if the organization answ rm 990-EZ, line 6a. (a) Bingo	d) wered "Yes" on Form 990, F (b) Pull tabs/instant bingo/progressive bingo	Part IV, line 19, or repor	10,50(ted more than (d) Total gaming (add
Direct Expenses Revenue	11 Net income summary. Su art III Gaming. Com \$15,000 on Fo 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor	btract line 10 from line 3, column (a plete if the organization answ rm 990-EZ, line 6a. (a) Bingo	d) wered "Yes" on Form 990, F (b) Pull tabs/instant bingo/progressive bingo	Part IV, line 19, or repor	10,500 ted more than (d) Total gaming (add
es Revenue	11 Net income summary. Su art III Gaming. Com \$15,000 on Fo 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary.	btract line 10 from line 3, column (a plete if the organization answ rm 990-EZ, line 6a. (a) Bingo	d) wered "Yes" on Form 990, F (b) Pull tabs/instant bingo/progressive bingo	Part IV, line 19, or repor (c) Other gaming (c) Other gaming Yes% No	10,50(ted more than (d) Total gaming (add
	11 Net income summary. Su art III Gaming. Com \$15,000 on Fo 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. 8 Net gaming income summ	btract line 10 from line 3, column (or plete if the organization answ rm 990-EZ, line 6a. (a) Bingo (a) Bingo Yes	d) wered "Yes" on Form 990, F	Part IV, line 19, or repor	10,50(ted more than (d) Total gaming (add col. (a) through col. (c))
	11 Net income summary. Sum	btract line 10 from line 3, column (or plete if the organization answirm 990-EZ, line 6a. (a) Bingo (a) Bingo Yes No Add lines 2 through 5 in column (or plate if the organization answirm 990-EZ, line 6a.	d) wered "Yes" on Form 990, F	Part IV, line 19, or repor	10,50(ted more than (d) Total gaming (add col. (a) through col. (c))
	11 Net income summary. Sum	btract line 10 from line 3, column (or plete if the organization answirm 990-EZ, line 6a. (a) Bingo (a) Bingo (a) Bingo (a) Bingo (b) Constant of the organization answirm 990-EZ, line 6a. (a) Bingo (b) Constant of the organization answirm 990-EZ, line 6a. (a) Bingo (b) Constant of the organization answirm 990-EZ, line 6a. (a) Bingo (b) Constant of the organization answirm 990-EZ, line 6a. (a) Bingo (b) Constant of the organization answirm 990-EZ, line 6a. (a) Bingo (b) Constant of the organization answirm 990-EZ, line 6a. (a) Bingo (b) Constant of the organization answirm 990-EZ, line 6a. (c) Constant of the organization answirm 990-EZ, line 6a. (c) Constant of the organization conducts gaming activities in each organization conducts gaming activities in each organization and constant of the organization answirm 900-EZ, line 6a.	d) wered "Yes" on Form 990, F (b) Pull tabs/instant bingo/progressive bingo Yes	Part IV, line 19, or repor	10,500 ted more than (d) Total gaming (add col. (a) through col. (c))
d b G Direct Expenses Revenue	11 Net income summary. Sumart III Gaming. Com \$15,000 on Fo 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. 8 Net gaming income summ Enter the state(s) in which the ls the organization licensed to off "No," explain:	btract line 10 from line 3, column (or plete if the organization answ rm 990-EZ, line 6a. (a) Bingo (a) Bingo Yes	d) wered "Yes" on Form 990, F	Part IV, line 19, or repor (c) Other gaming (c) Other gaming Yes% No ▶	(d) Total gaming (add col. (a) through col. (c))
	11 Net income summary. Sumart III Gaming. Com \$15,000 on Fo 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. 8 Net gaming income summ Enter the state(s) in which the ls the organization licensed to off "No," explain:	btract line 10 from line 3, column (or plete if the organization answirm 990-EZ, line 6a. (a) Bingo (a) Bingo (a) Bingo (a) Bingo (b) Provide the organization and the organization and the organization conducts gaming activities in each or conduct gaming activities in	d) wered "Yes" on Form 990, F	Part IV, line 19, or repor (c) Other gaming (c) Other gaming Yes% No ▶	10,500 ted more than (d) Total gaming (add col. (a) through col. (c))

criedule G (I	Form 990 or 990-EZ) 2019 SCHOOL BOOST	ER CLUB	76-1234567	P	age 3
1 Does th	ne organization conduct gaming activities with nonmembers	rs?		Yes	No
2 Is the o	rganization a grantor, beneficiary or trustee of a trust, or a	a member of a partnership or other entit	у		
	to administer charitable gaming?			Yes	No
	e the percentage of gaming activity conducted in:				
a The org	ganization's facility		13a		<u>%</u>
b An outs	side facility		13b		%
4 Enter th records	ne name and address of the person who prepares the orga ::	anization's gaming/special events book	s and		
Name I	•				
Address	s ▶				
	ne organization have a contract with a third party from who		Г	Vac	
revenue b If "Yes.'	e? " enter the amount of gaming revenue received by the orga	anization 🕨 🕈	and the	Yes	No No
amount	t of gaming revenue retained by the third party \blacktriangleright \$	anizauon ► φ			
c If "Yes,'	" enter name and address of the third party:				
Name	•				
Address	s ▶				
6 Gaming	g manager information:				
Name	•				
Gaming	g manager compensation ► \$				
Descrip	tion of services provided ►				
Dir	rector/officer Employee Inde	ependent contractor			
7 Mandai	tony distributions:				
	tory distributions: rganization required under state law to make charitable dis	intributions from the gaming proceeds t			
	he state gaming license?	is inductors from the gaining proceeds to	5	Yes	🗌 No
	ne amount of distributions required under state law to be di	listributed to other exempt organization	sor	163	
	n the organization's own exempt activities during the tax ye				
Part IV	Supplemental Information. Provide the exp Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17 See instructions.	planations required by Part I, lir			

SCHEDULE O	Supplemental	Information f	o Form 990 or 99	0-EZ	OMB No. 1545-0047
(Form 990 or 990-EZ)				2019	
Department of the Treasury Internal Revenue Service	►	Attach to Form 99	-		Open to Public Inspection
Name of the organization			of the latest mormation.	Employer ident	ification number
SC	HOOL BOOSTER CLUB			76-1234	567
Form 990-EZ,	Part I, Line 10 -	Grants/Si	milar Amts Pa	id to Organ	nizations
Name: LOCAL H	IIGH SCHOOL				
Address: 5656	5 SPRING DRIVE				
Hous	ston, TX 77001				
Cash contribu	ition: 11,000				
Form 990-EZ,	Part I, Line 16 -	Other Exp	enses		
Description			Amount		
Expenses					
SUPPLIES		\$	680		
EDUCATIONA	AL TRIP	\$	12,425		
BANK SERVI	ICE CHARGES	\$	80		
TELEPHONE		\$	350		
TRAVEL		\$	400		
		Total \$	13,935		
• • • • • • • • • • • • • • • • • • • •					

Form **990**

Event Income and Deduction Worksheet Description GOLF TOURNAMENT

Taxpayer Identification Number 76-1234567

Name SCHOOL BOOSTER CLUB

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:		
1. Gross receipts or sales	1	5,500
2. Advertising income	2	
3. Circulation income		
4. Other income		
5. Returns and allowances		
6. Contributions received	6	12,500
7. Total revenue. Add lines 1 through 6		18,000
8. Cost of Goods Sold	8	
9. Employment Expense	. 9	
10. Fees for services		
11. Indirect Expense		
12. Depreciation Expense		
13. Exempt Activity Expense	13	
14. Fundraising Expense		3,600
15. Total expenses. Add lines 8 through 1		3,600
16. Net Income/Loss. Line 7 minus Line 1	5 16.	14,400

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fees for Services:

Management
Legal
Accounting
Lobbying
Professional fundraising
Investment management
Other
Total Fees for Services

Information is indicated for use on Form 990-T schedule:

Schedule E
Schedule F
Schedule G
Schedule I
Schedule J

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Exempt Activity Expense:

Repairs and Maintenance
Bad debts
Taxes/licenses
Charitable contributions
Dividend recd deductions
Readership costs
Other expenses
Total Exempt Activity Expense

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	100
Rent and facility costs	3,500
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	3,600

Allocation of Expense to Program Service Accomplishments:

irst	_
econd	_
'hird	
ll other	

Form **990**

Event Income and Deduction Worksheet Description CATALOG SALES

Taxpayer Identification Number 76-1234567

Name SCHOOL BOOSTER CLUB

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:		
1. Gross receipts or sales	1	13,600
2. Advertising income	2	
3. Circulation income		
4. Other income		
5. Returns and allowances	5	
6. Contributions received	6	
7. Total revenue. Add lines 1 through 6	7	13,600
8. Cost of Goods Sold	8	6,800
9. Employment Expense		
10. Fees for services		
11. Indirect Expense	11	
12. Depreciation Expense		
13. Exempt Activity Expense	13	
14. Fundraising Expense	14	
15. Total expenses. Add lines 8 through 1415.		6,800
16. Net Income/Loss. Line 7 minus Line 1	5 16.	6,800

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	6,800
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	6,800

Expense Details - Employment Expense:

Expense Details - Fees for Services:

Management
Legal
Accounting
Lobbying
Professional fundraising
Investment management
Other
Total Fees for Services

Information is indicated for use on Form 990-T schedule:

Schedule E
Schedule F
Schedule G
Schedule I
Schedule J

Expense Details - Indirect Expense:

Expense Details - maneet Expense.	
Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	
Expense Details - Depreciation Expense:	
On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	
Expense Details - Exempt Activity Expense:	
Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	
Expense Details - Fundraising Expense:	
Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	

Allocation of Expense to Program Service Accomplishments:

First
Second
Third
All other

Form **990**

Event Income and Deduction WorksheetDescriptionOTHERFUNDRAISER

Name

Taxpayer Identification Number 76-1234567

SCHOOL BOOSTER CLUB

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:		
1. Gross receipts or sales	1.	5,100
2. Advertising income		
3. Circulation income		
4. Other income		
5. Returns and allowances		
6. Contributions received	6.	
7. Total revenue. Add lines 1 through 6		5,100
8. Cost of Goods Sold	8.	3,300
9. Employment Expense		
10. Fees for services		
11. Indirect Expense		
12. Depreciation Expense		
13. Exempt Activity Expense		
14. Fundraising Expense		
15. Total expenses. Add lines 8 through 2		3,300
16. Net Income/Loss. Line 7 minus Line 7	15 16 .	1,800

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	3,300
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	3,300

Expense Details - Employment Expense:

Expense Details - Fees for Services:

Management
Legal
Accounting
Lobbying
Professional fundraising
Investment management
Other
Total Fees for Services

Information is indicated for use on Form 990-T schedule:

Schedule E
Schedule F
Schedule G
Schedule I
Schedule J

Expense Details - Indirect Expense:

Expense Details - maneot Expense.	
Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Total Indirect Expense	
Expense Details - Depreciation Expense:	
On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	
Expense Details - Exempt Activity Expense:	
Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	
Expense Details - Fundraising Expense:	
Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	

Allocation of Expense to Program Service Accomplishments:

-irst
Second
Third
All other

		EDULE G	F	undraising	Other Ever	nts			
		m 990 or 🛛			2019				
9	90	-EZ)	For calendar year 2019, or tax yea	r beginning	07/01/19	9 , and ending	<u> </u>	/30/20	
Nan	ne							Employer Ic	lentification Number
s	CH	IOOL BOOSTE	ER CLUB					76-123	4567
			(a) Other event	(b) Oth	er event	(c) Other e	event		
			OTHER FUNDRAISE						(d) Total other events(add col. (a) through
e			(event type)	(event t	ype)	(event typ	be)		col. (c))
Revenue	1	Gross receipts	5,100						5,100
Ľ	2	Less: Charitable							
	2	contributions Gross income							
	5	(line 1 minus line 2)	5,100						5,100
			,						, ,
	4	Cash prizes							
	5	Noncash prizes							
ses	6	Rent/facility costs							
Direct Expenses	7	Food/beverages							
SCT E	•	· · · · · · · · · · · · · · · · · · · ·							
Dire	8	Entertainment							
	9	Other expenses	3,300						3,300

BOOSTER999 SCHOOL BOOSTER 76-1234567 FYE: 6/30/2020	CLUB	Federal S	statemen	ts			8/	13/20	20 3:01 PM
	:	<u>Schedule A, F</u>	Part III, Line	<u>1(e)</u>					
	Description					A	mount		
CONTRIBUTIONS GOLF TOURNAMENT						\$	6,100		
Cash Contribution							12,500		
Total						\$	18,600		
		Schedule A, F	Part III, Line	<u>2(e)</u>					
	Description					Д	Mount		
Taxable Interest on Savings an CATALOG SALES OTHER FUNDRAISER Total Scl	nedule A, Part I			Disqua	alified Perso	\$ <u>ns</u>	10 13,600 5,100 29,135		
Donor Name		2015	2016		2017		2018		2019
DAVID JOHNSON BETTY BAKER SHERYL JONES	\$	\$		\$		\$		\$	5,000 100 350
Total	\$	0\$		0\$	0	\$	0	\$	5,450
		Schedule A,	Part III, Line	11					
	Description					А	mount		
GOLF TOURNAMENT Less: Deductions						\$	1,900 -1,000		
Total						\$	900		

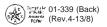


Texas Sales and Use Tax Resale Certificate

Name of purchaser, firm or agency as shown on permit	Phone (Area code and number)
Address (Street & number, P.O. Box or Route number)	
City, State, ZIP code	
Texas Sales and Use Tax Permit Number (must contain 11 digits)	
Out-of-state retailer's registration number or Federal Taxpayers Registry (RFC) number for retailers based in Mexico	
(Retailers based in Mexico must also provide a co	by of their Mexico registration form to the seller.)

I, the purchaser named above, claim the right to make items described below or on the attached order or invol		kable
Seller:		
Street address:		
City, State, ZIP code:		
Description of items to be purchased on the attached orde	r or invoice:	
Description of the type of business activity generally engage	ged in or type of items normally sold by the purcl	haser:
The taxable items described above, or on the attached geographical limits of the United States of America, its te Mexican States, in their present form or attached to other ta	rritories and possessions or within the geograph	
I understand that if I make any use of the items other than rete I must pay sales tax on the items at the time of use base period of time used.		
I understand that it is a criminal offense to give a resale ce are purchased for use rather than for the purpose of resale, may range from a Class C misdemeanor to a felony of the	, lease or rental, and depending on the amount of	
sign Purchaser	Title	Date

This certificate should be furnished to the supplier. Do <u>not</u> send the completed certificate to the Comptroller of Public Accounts.



Texas Sales and Use Tax Exemption Certification *This certificate does not require a number to be valid.*

Name of purchaser, firm or agency		
Address (Street & number, P.O. Box or Route number)		Phone (Area code and number)
City, State, ZIP code		
I, the purchaser named above, claim an exemption fro items described below or on the attached order or invo		se taxes (for the purchase of taxable
Seller:		
Street address:	City, State, ZIP	code:
Description of items to be purchased or on the attached or	der or invoice:	
Purchaser claims this exemption for the following reason:		
I understand that I will be liable for payment of all state and the provisions of the Tax Code and/or all applicable law.	local sales or use taxes which	n may become due for failure to comply with
l understand that it is a criminal offense to give an exemption ce will be used in a manner other than that expressed in this certifi from a Class C misdemeanor to a felony of the second deg	cate, and depending on the amo	
Purchaser here	Title	Date
NOTE: This certificate cannot be issued for THIS CERTIFICATE DOES NOT REQUIRE		tal of a motor vehicle.
Sales and Use Tax "Exemption Numbers" of		not exist.

This certificate should be furnished to the supplier. Do not send the completed certificate to the Comptroller of Public Accounts.

Texas Sales and Use Tax Return - Short Form

Who May File the Short Form - You may file the short form if you meet all of the following criteria:

- your business has a single location in Texas;
- you report applicable local taxes only to the entities (city, transit authority, county or special purpose district) in which your business is located:
- you do not prepay your state and local taxes;
- you do not have a credit, including bad debt credit, to reduce your tax due on this return:
- · you do not have customs broker refunds to report; and
- you are not a remote seller or marketplace provider.

You must file the long form (Form 01-114) if any of these statements do not apply to your business. You must file a long form if you are responsible for out-of-state use tax and have no in-state locations.

If you have a credit for taxes you paid or customs broker refunds to report, you are required to complete Form 01-114 Sales and Use Tax Return and Form 01-148 Texas Sales and Use Tax Return Credits and Customs Broker Schedule. If you are claiming bad debt credit, you must file electronically at https://comptroller.texas.gov/taxes/file-pay/.

When to File - Returns must be filed or postmarked on or before the 20th day of the month following the end of each reporting period. If the due date falls on a Saturday, Sunday or legal holiday, the next business day will be the due date.

Business Changes - If you are out of business or if your mailing or outlet address has changed, you can make these changes online at

- · Please do not write in shaded areas. • If any preprinted information on this return is incorrect, OR if you do not qualify to file this return, contact the Comptroller's office.
- Do not leave Items 1, 2, 3 or 4 blank. Enter "0" if the amount is zero.

web file

Online Tax Filing

- You must file a return even if you had no sales.
- If any amounts entered are negative, bracket them as follows: <XX,XXX.XX>.

www.comptroller.texas.gov/taxes/sales/, "Registering and Reporting Texas Sales and Use Tax," or blacken the box to the right of the signature line on If you are a Remote Seller, use form 01-798, Remote Sellers this return. Intent to Terminate Use Tax Responsibilities, to end your tax responsibility.

Instructions for Filing an Amended Texas Sales and Use Tax Return -

You may file an amended return on paper or electronically via Webfile or Electronic Data Interchange (EDI). Additional documentation may be required to validate your request. If you choose to file a paper amended return please follow these steps:

- 1. Make a copy of the original return you filed or download a blank return from our website at www.comptroller.texas.gov/taxes/forms/.
- 2. Write "AMENDED RETURN" on the top of the form.
- 3. If you're using a copy of your original return, cross out the amounts that are wrong and write in the correct amounts. If you're using a blank return, enter the amounts as they should have appeared on the original return.
- 4. Sign and date the return.

If the amended return shows you underpaid your taxes, please send the additional tax due plus any penalties and interest that may apply.

If the amended return shows you overpaid your taxes and you are requesting a refund, you must meet all of the requirements for a refund claim. Refer to Sales Tax Refunds on the Comptroller's website at www.comptroller.texas.gov/taxes/sales/refunds/.

Whom to Contact for Assistance - If you have any questions regarding sales tax, you may contact the Texas State Comptroller's field office in your area or call 800-252-5555.

General Instructions

ONLINE TAX

• If *hand printing*, please enter all numbers within the boxes, as shown. Use black ink.

(0)	I	ź	2	3	5	Ц	1	5)	6	>	7	8	0	

 If typing, numbers may he typed consecutively

FILING AND PAYME			ohEil	~	_
be typed consecutively.	01	2345			

www.comptroller.texas.gov/taxes/file-pay/ Have this form available when you file your short form electronically using WebFile. Payment options are credit card or Web electronic check.

No-tax-due filing is also available through TeleFile at 1-888-434-5464.

	e certain rights under Chapters 552 ar ve have on file about you. Contact us a				rmation	
FORM (IVEV.3-19/39)	▼ ▼ ▼ ▼ ▼ PLEASE DETACH / EXAS SALES AND USE TAX RETURN	ннн	I. OUT OF BUSINESS DATE DO NOT ENTER UNLESS ■ no longer in business. ■ .			
a. ■ 26140 • Do not c. ■ Taxpayer number	fold, staple or paper clip • Write only in d. Filing period	white areas.		19 1 1 1 7	1& 1 W 1& 5	1939*
	g. Due date		TOTAL TEXAS SALES		DOLLAS S	CENTS
	f. Outlet no./ location		TAXABLE SALES (Whole dollars only)			
a.		3.	TAXABLE PURCHASES + (Whole dollars only)			
k. Outlet address (Do not use a	P.O. box address)		Total amount subject to tax (Item 2 plus Item 3)		ļ	6
Taxpayer name and mailing addre		5.	Tax due - Multiply Item 4 by the combined tax rate (Include state & local)	_		*
		6.	Timely filing discount (0.005)_	-		
		7.	Prior payments	-		
			Net tax due (Subtract Items 6 and 7 from Item 5.)	=		
I declare that the information in correct to the best of my knowl Sign Taxpayer or duly autho		this 9.	Penalty & interest (See instructions)	+		
Date Day	time phone a code & no.)	if out of 10. business 10. or address ∎ has changed.	. TOTAL AMOUNT DUE AND PAYABLE (Item 8 plus Item 9)	=	ļ	

Instructions for Completing Texas Sales and Use Tax Return - Short Form

(continued)

Item I. If the location indicated in Item f is no longer in business, enter the out-of-business date.

Item 1. Enter the total amount (not including tax) of ALL sales, services, leases and rentals of tangible personal property including all related charges made in Texas during the reporting period. Report whole dollars only. Enter "0" if you have no sales to report. Texas Sales are defined as all sales made from a Texas in-state location AND all sales made into Texas from an out-of-state location.

Item 2. Enter the total amount (not including tax) of all TAXABLE sales, services, leases and rentals of tangible personal property including all TAXABLE related charges made during the reporting period. Report whole dollars only and enter "0" if you have no sales to report. If you are taking a credit on the return, claim the credit in Item 2 by subtracting the sum of purchases and/or sales you paid taxes on in error or refunded to a customer, from the amount of taxable sales.

Item 3. Enter the total amount of taxable purchases that you made for your own use. Taxable purchases include items that were purchased, leased or rented for personal or business use on which sales or use tax was not paid. This includes purchases from in- or out-of-state sellers, exempt items taken out of inventory for use, items given away, and items purchased for an exempt use but actually used in a taxable manner. Taxable purchases do not include inventory items being held exclusively for resale. Report whole dollars only. Enter "0" if you have no taxable purchases to report.

Item 4. Add the totals of Item 2 (Taxable Sales) and Item 3 (Taxable Purchases) and enter on Item 4. Enter "0" if you have no amount subject to tax. DO NOT INCLUDE ITEM 1 (Total Texas Sales) IN THIS TOTAL.

Item 5. The tax rate is a combined rate of tax types indicated: state, city, transit authority, county and/or special purpose district. Please call the Comptroller's office if the rate is incorrect or if you have a question about the tax rate. Multiply Item 4 by the tax rate and enter in Item 5.

Item 6. Timely Filing Discount - If you are filing your return and paying the tax due on or before the due date, multiply the Tax Due in Item 5 by .005 and enter the result in Item 6.

Item 7. If you requested that a prior payment and/or an overpayment be designated to this specific period, the amount is preprinted in Item 7 as of the date this return was printed.

Item 9. Penalty and Interest:

- 1-30 days late: Enter penalty of 5% (.05).
- 31-60 days late: Enter penalty of 10% (.10).
- Over 60 days late: Enter penalty of 10% (.10) plus interest calculated at the rate published on Pub. 98-304, by telephone at 1-877-447-2834, or online at www.comptroller.texas.gov.

(Texas Tax Code Ann. Sec. 111.060 and 111.061)

Note: An additional \$50 late filing penalty will be assessed each time a return is filed after the due date.

Item 10. Add Item 8 plus Item 9, if applicable, and enter in Item 10.

	Mail your return and payment to:
Make total amount of Item 10 payable in one check to:	Comptroller of Public Accounts
State Comptroller	P.O. Box 149355 Austin, TX 78714-9355

DO NOT WRITE ON THE BACK OF THIS FORM

List of Common Taxable Items

The following list of items or activities have been identified as being taxable when sold or sponsored by a parent organization. This list is not all-inclusive.

- Athletic equipment and uniforms
- Balloons
- Band equipment and supplies reeds, recorders
- Books, workbooks, etc.
- Candles
- Catered dinners/banquet, if not part of fund-raiser
- Clothing T-shirts, all other clothing items
- Concessions, if not part of a fund-raiser
- Copies collections from coin or manual copiers
- Cups glass, plastic, paper, etc.
- Directories student
- Drafting supplies
- Flower sales
- Garage sales
- Gift-wrap paper
- Handicrafts
- Horticulture items
- Magazine subscriptions (< 6 months)
- Musical supplies
- Pennants
- Pictures/photographs
- Plant sales
- Pompoms
- Programs athletic, music, etc.
- Recorders musical
- Retirement plaque
- Rings school
- School Store all items sold by school stores
- Silent Auctions (if <u>not</u> part of one-day tax-free day and is for items such as free golf round, membership to a health club, other recreational-type items, etc.)
- Stationery
- Uniforms PE, cheerleader (when student property)
- Vending pencils and other non-edible supplies

List of Common Non-taxable Items

The following list of items or activities have been identified as being nontaxable when sold or sponsored by a parent organization. This list is not all-inclusive.

- Advertisements sold for school newspapers, athletic & booster club programs, etc.
- Bake/food sales
- Car wash
- Catalog sales (organization is acting as agent of seller & receives a commission-see 6.0 below)
- Concessions, if part of a fund-raiser
- Dinners when prepared by parents as part of a fund-raiser of a parent organization and not in direct competition of local vendors
- Discount cards
- Dues
- Gold-C and Entertainment coupon books
- Golf tournament entry fees
- Fees clinics and workshops
- Jog-a-thon
- Magazine subscriptions (6 months or more)
- Publications memory books, cookbooks, etc. published and distributed by parent organizations
- Raffle tickets
- Silent auctions (all if part of one-day tax-free day; if <u>not</u> part of one-day tax-free day and is for items such as gift certificates for dinner, manicure, facials, haircuts, stay at a hotel, etc.)
- Tickets for admission to athletic events, drama productions, dances, school carnivals and other similar entertainment events (including tickets sold to play a game at a booth for a prize)