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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form
Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

► Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form.

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

OMB No 1545-1150

2007**Open to Public
Inspection****A For the 2007 calendar year, or tax year beginning****, 2007, and ending****, 20****B Check if applicable**

- ☐ Address change
☐ Name change
☒ Initial return
☐ Termination
☐ Amended return
☐ Application pending

Please
use IRS
label or
print or
type.
See
Specific
Instruc-
tions.**C Name of organization****The Phoenix Benefit Club of Birmingham, Inc.**

Number and street (or P O box, if mail is not delivered to street address)

216 Summit Boulevard

Room/suite

300

City or town, state or country, and ZIP + 4

Birmingham, AL 35243**D Employer identification number****20 1654584****E Telephone number****(205) 278-0233****F Group Exemption**Number ► **none**• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).****G Accounting method:** ☐ Cash ☒ Accrual
Other (specify) ►**I Website:** ► **birminghamphoenixclub.com****H Check** ► ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**J Organization type** (check only one)—☒ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**K Check** ► ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally **not** more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file Form 990 instead of Form 990-EZ.** ► \$ **30,087****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 55 of the instructions.)

		Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received	1	-0-	10	Grants and similar amounts paid (attach schedule)	10	8,750
2	Program service revenue including government fees and contracts	2	-0-	11	Benefits paid to or for members	11	-0-
3	Membership dues and assessments	3	9,353	12	Salaries, other compensation, and employee benefits	12	-0-
4	Investment income	4	22	13	Professional fees and other payments to independent contractors	13	2,000
5a	Gross amount from sale of assets other than inventory	5a	-0-	14	Occupancy, rent, utilities, and maintenance	14	-0-
b	Less: cost or other basis and sales expenses	5b	-0-	15	Printing, publications, postage, and shipping	15	88
c	Gain or (loss) from sale of assets other than inventory. Subtract line 5b from line 5a (attach schedule)	5c	-0-	16	Other expenses (describe ► Meeting expenses and bank charges)	16	10,018
6	Special events and activities (attach schedule). If any amount is from gaming, check here ► <input type="checkbox"/>			17	Total expenses. Add lines 10 through 16	17	20,856
a	Gross revenue (not including \$ -0- of contributions reported on line 1)	6a	20,712				
b	Less: direct expenses other than fundraising expenses	6b	9,133				
c	Net income or (loss) from special events and activities. Subtract line 6b from line 6a	6c	11,579				
7a	Gross sales of inventory, less returns and allowances	7a	-0-				
b	Less: cost of goods sold	7b	-0-				
c	Gross profit or (loss) from sales of inventory. Subtract line 7b from line 7a	7c	-0-				
8	Other revenue (describe ► none)	8	-0-				
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	20,954				
18	Excess or (deficit) for the year. Subtract line 17 from line 9	18	98				
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	10,007				
20	Other changes in net assets or fund balances (attach explanation)	20	-0-				
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	10,105				

Part II Balance Sheets—If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

(See page 60 of the instructions.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	10,007	10,105
23 Land and buildings	-0-	-0-
24 Other assets (describe ► none)	-0-	-0-
25 Total assets	10,007	10,105
26 Total liabilities (describe ► none)	-0-	-0-
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	10,007	10,105

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2007)

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Part III Statement of Program Service Accomplishments (See page 60 of the instructions.)What is the organization's primary exempt purpose? **See Attachment**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

28 Contributed a monetary donation of \$8,750 to The Boys & Girls Club of Central Alabama, Inc. All individuals associated with BGCCA were indirectly benefited.(Grants \$ **8,750**) If this amount includes foreign grants, check here ☐**28a 8,750****29 None**(Grants \$ **-0-**) If this amount includes foreign grants, check here ☐**29a -0-****30 None**(Grants \$ **-0-**) If this amount includes foreign grants, check here ☐**30a -0-****31 Other program services** (attach schedule)(Grants \$ **-0-**) If this amount includes foreign grants, check here ☐**31a -0-****32 Total program service expenses.** Add lines 28a through 31a**32 8,750****Part IV List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated. See page 61 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
See Attachment				

Part V Other Information (Note the statement requirement in General Instruction V.)

	Yes	No
33 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change		✓
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		✓
35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		✓
b If "Yes," has it filed a tax return on Form 990-T for this year?		
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement.		✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. 37a -0-		
b Did the organization file Form 1120-POL for this year?		✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		✓
b If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved 38b -0-		
39 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39a -0-		
b Gross receipts, included on line 9, for public use of club facilities 39b -0-		

Part V Other Information (Note the statement requirement in General Instruction V.) (Continued)**40a** 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:section 4911 ▶ -0- ; section 4912 ▶ -0- ; section 4955 ▶ -0-**b** 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation . . .

	Yes	No
40b		✓
40c		
40e		✓

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . ▶ -0-**d** Enter amount of tax on line 40c reimbursed by the organization . . . ▶ -0-**e** All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? . . .**41** List the states with which a copy of this return is filed. ▶ none**42a** The books are in care of ▶ Justin Heberling Telephone no. ▶ (205) 278-0233
Located at ▶ 216 Summit Boulevard, Suite 300, Birmingham, AL ZIP + 4 ▶ 35243**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)? . . .

	Yes	No
42b		✓
42c		✓

If "Yes," enter the name of the foreign country: ▶ noneSee the instructions for exceptions and filing requirements for **Form TD F 90-22.1**.**c** At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . .If "Yes," enter the name of the foreign country: ▶ none**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 -0-**Please
Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer

Date

John David Chambless, President

Type or print name and title

**Paid
Preparer's
Use Only**Preparer's
signature ▶

Date

Check if
self-
employed ▶ ☐

Preparer's SSN or PTIN (See Gen. Inst. X)

Firm's name (or yours
if self-employed),
address, and ZIP + 4 ▶

EIN ▶

Phone no ▶ ()

THE PHOENIX BENEFIT CLUB OF BIRMINGHAM, INC.
EIN: 20-1654584

Part III—Organization's Primary Exempt Purpose

The Phoenix Benefit Club of Birmingham, Inc. (Club) is organized exclusively for religious, charitable, scientific, literary and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986 (Code) or the corresponding provision of any future United States Internal Revenue Law, and may carry on any activity contemplated by such Section. Without limiting the generality of the foregoing, the Club is organized to provide financial aid, personal services and to promote fellowship in support of The Boys & Girls Club of Central Alabama, Inc.(BGCCA), and such other purposes as are consistent with the provisions of this paragraph. the Club shall have the authority to encourage, solicit, receive and administer gifts, donations and benefactions, and to solicit and receive contributions from the general public. In furtherance of the above charitable purposes, the Club shall annually distribute the net proceeds of its fund raising activities to or for the benefit of BGCCA for so long as said beneficiary is an organization described in Section 509(a)(1) of the Code or the corresponding provision of any future United States Internal Revenue law. The Club shall have any may exercise any and all powers of a nonprofit corporation under the Act.

THE PHOENIX BENEFIT CLUB OF BIRMINGHAM, INC.**EIN: 20-1654584****Part IV—List of Officers, Directors, Trustees, and Key Employees**

(A) Name and Address	(B) Title and average hours per week devoted to position	(C) Compensation	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowance
John David Chambliss 129 Woodside Drive Birmingham, AL 35210	President 5 hours per week	-0-	-0-	-0-
Brad Hawley 1086 Columbiana Road Birmingham, AL 35209	VP of Membership 3 hours per week	-0-	-0-	-0-
Tom Chapman 821 77th Way South Birmingham, AL 35206	Asst to VPs of Membership and Programs 3 hours per week	-0-	-0-	-0-
Wes Quattlebaum 1011 Irving Road Birmingham, AL 35209	Treasurer 3 hours per week	-0-	-0-	-0-
Tyler O'Connor 64 Norman Drive Birmingham, AL 35213	VP of Programs 3 hours per week	-0-	-0-	-0-
JT Thurnbury 400 Cliff Place Homewood, AL 35209	VP of Communications 3 hours per week	-0-	-0-	-0-
Barrett Oakley 2909 Central Avenue, Unit 113 Homewood, AL 35209	Co-VP of Events 3 hours per week	-0-	-0-	-0-
Tyler Kime 1923 Old Orchard Road Birmingham, AL 35216	Co-VP of Events 3 hours per week	-0-	-0-	-0-
Richard Kohn 136 Dixon Avenue Birmingham, AL 35209	Sergeant-in-Arms 3 hours per week	-0-	-0-	-0-