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CISy FR 918V
Form 990-EZShort Form
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 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

0904
2008Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

<input checked="" type="checkbox"/> Check if applicable. <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization WOMANS DEPARTMENT CLUB OF INDPLS C/O THE NATIONAL BANK OF INDPLS		D Employer identification number 35-0766530		
	Number and street (or P O box, if mail is not delivered to street address) 107 N. PENNSYLVANIA STREET		Room/suite 500	E Telephone number 317-261-9206	
	City or town, state or country, and ZIP + 4 INDIANAPOLIS IN 46204		F Group Exemption Number ►		
	• 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. <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►
					H Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ► **N/A**

J Organization type (check only one) 501(c) (4) (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 \$1,000,000 or more, file Form 990 instead of Form 990-EZ ► \$ **189,754**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue 1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach sch.) SEE STMT 2 6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/> a Gross revenue (not including \$ _____ of contributions reported on line 1) b Less: direct expenses other than fundraising expenses c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 7a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 8 Other revenue (describe ►) 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ► IRS Rcvd 12-21-09	1	
	2	
	3	2,050
	4	37,561
	5a	150,143
	5b	160,738
	5c	-10,595
	6a	
	6b	
	6c	
	7a	
	7b	
	7c	
	8	
	9	29,016
	10	10,700
	11	
	12	
13		
14		
15		
16	17,214	
17	27,914	
18	1,102	
19	880,978	
20		
21	882,080	

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

22 Cash, savings, and investments 23 Land and buildings 24 Other assets (describe ►) 25 Total assets	(A) Beginning of year 880,978	(B) End of year 22 882,080
	23	
	24	
	25	880,978
	26	0
	27	880,978
		27 882,080

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

DAA

Form 990-EZ (2008)

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Part V Other Information (Note the statement requirements in the instructions for Part VI.)

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity 33

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 34

35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T. SEE STATEMENT 5

a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements? 35a

b If "Yes," has it filed a tax return on Form 990-T for this year? 35b

36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N 36

37a Enter amount of political expenditures, direct or indirect, as described in the instr. ► 37a 0

b Did the organization file Form 1120-POL for this year? 37b

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? 38a

b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b

39 Section 501(c)(7) organizations Enter:

a Initiation fees and capital contributions included on line 9 39a

b Gross receipts, included on line 9, for public use of club facilities 39b

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ► section 4912 ► section 4955 ►

b Section 501(c)(3) and (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," complete Schedule L, Part I 40b

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 40c 0

d Enter amount of tax on line 40c reimbursed by the organization 40d 0

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 40e

41 List the states with which a copy of this return is filed ► IN42a The books are in care of ► THE NATIONAL BANK OF INDI Telephone no. ► 317-261-9206
107 N. PENNSYLVANIA ST.

Located at ► INDIANAPOLIS, IN

ZIP + 4 ► 46204

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)?

If "Yes," enter the name of the foreign country: ►

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

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: ►

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here 43
and enter the amount of tax-exempt interest received or accrued during the tax year44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 44 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45

	Yes	No
33		X
34		X
35a		X
35b		
36		X
37b		X
38a		X
38b		
39a		
39b		
40b		X
40c		
40d		
40e		X

	Yes	No
42b		X
42c		X

	Yes	No
44		X
45		X

Form 990-EZ (2008) WOMANS DEPARTMENT CLUB OF INDPLS 35-0766530

35-0766530

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Part VI: Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46–49 and complete the tables for lines 50 and 51.

46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II

48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

 b If "Yes," was the related organization(s) a section 527 organization?

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

	Yes	No
46		
47		
48		
49a		
49b		

(a) Name and address of each employee paid more than \$100,000	(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 allowances
.....
.....
.....
.....
.....

Total number of other employees paid over \$100,000

61 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Total number of other independent contractors each receiving over \$100,000

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

Sign Here  12/9/09
Signature of officer  Date
Type or print name and title.

Paid Preparer's Use Only	Preparer's signature ►	<i>Donald P. Donald, CPA</i>	Date	Check if self- employed ►	Preparer's Identifying Number (See Instr.)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ►	LA ROSA & CO., LLC 320 N MERIDIAN ST., STE 328 INDIANAPOLIS, IN 46204	12/2/09	<input checked="" type="checkbox"/>	P00137280 EIN ► 35-1416669 Phone ► 317-634-8777

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

Form 990-EZ (2008)

34980 Womans Department Club of Indpls

35-0766530

FYE: 4/30/2009

Federal Statements

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

Description	Amount
MEMBERSHIP DUES	\$ 2,050
TOTAL	\$ 2,050

34980 Womans Department Club of Indpls
35-0766530
FYE: 4/30/2009

Federal Statements

Statement 2 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Securities

<u>How Received</u>	<u>Description</u>	<u>Whom Sold</u>	<u>Date Acquired</u>	<u>Date Sold</u>	<u>Sale Price</u>	<u>Cost & Expense</u>	<u>Depreciation</u>	<u>Gain / Loss</u>
FIFTH THIRD PUBLICLY TRADED SEC. PURCHASE	VARIOUS	VARIOUS	\$ 50,852	\$ 53,282	\$ 53,282	\$ 53,282	\$ 0	\$ -2,430
FIFTH THIRD PUBLICLY TRADED SEC. PURCHASE	VARIOUS	VARIOUS	\$ 99,291	\$ 107,456	\$ 107,456	\$ 107,456	\$ 0	\$ -8,165
TOTAL			\$ 150,143	\$ 160,738	\$ 160,738	\$ 160,738	\$ 0	\$ -10,595

34980 Womans Department Club of Indpls

35-0766530

FYE: 4/30/2009

Federal Statements

Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
EXPENSES	\$
BANK SERVICE FEES	8,106
ADMINISTRATIVE EXPENSES	4,293
MISCELLANEOUS EXPENSE	332
MEETING AND SPEAKER EXP.	4,483
TOTAL	\$ 17,214

34980 Womans Department Club of Indpls

35-0766530

FYE: 4/30/2009

Federal Statements

Statement 4 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

TO ENABLE THE WOMEN OF INDIANAPOLIS BY STUDY, PRACTICAL WORK, AND UNITED EFFORT TO DO THEIR PART IN PROMOTING SPIRITUAL, ETHICAL, ARTISTIC, AND EDUCATIONAL GROWTH OF THEIR CITY AND ADVANCING GENERAL WELFARE.

34980 Womans Department Club of Indpls

35-0766530

FYE: 4/30/2009

Federal Statements

Statement 5 - Form 990-EZ, Part V, Line 35 - Income From Business Activities not Reported on Form 990-T

Description

THE ORGANIZATION HAD NO ACTIVITY REPORTABLE ON LINES 2, 6A, OR 7A OF THE FORM 990-EZ, NOR DID IT HAVE ANY OTHER ACTIVITIES WHICH CONSTITUTE UNRELATED TRADES OR BUSINESSES REPORTABLE ON FORM 990-T.

Form 8868(Rev. April 2008)
Department of the Treasury
Internal Revenue Service**Application for Extension of Time To File an
Exempt Organization Return**

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box. ►
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete **Part I only**. ►

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization WOMANS DEPARTMENT CLUB OF INDIANAPOLIS	Employer identification number 35-0766530
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 107 N PENNSYLVANIA ST, STE 500	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. INDIANAPOLIS	IN 46204

Check type of return to be filed (file a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- The books are in the care of ► **THE NATIONAL BANK OF INDIANAPOLIS, 107 N PENNSYLVANIA ST, STE 500, INDIANAPOLIS, IN 46204**

Telephone No. ► **317-261-9647** FAX No. ► **317-261-9695**
 • If the organization does not have an office or place of business in the United States, check this box. ►
 • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box. ► If it is for part of the group, check this box. ► and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **12/15/2009**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ► calendar year or
 ► tax year beginning **5/1/2008**, and ending **4/30/2009**

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3 a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.
(HTA)

Form 8868 (Rev 4-2008)

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