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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)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A F	or the	2008 ca	lendar year, or tax year beginning JUL 1, 2008 and ending	JUN 30, 2009					
В	Check if pplicable	use IRS	C Name of organization	D Employer identifi	cation number				
	Addre:	ss label or print or	Poets and Writers Inc.						
	Name change	type	Doing Business As	13-2	682 <u>4</u> 58				
	Initial	See	Number and street (or P.O. box if mail is not delivered to street address) Room/s		E Telephone number				
	Termir	Specific	90 Broad Street	· · · · · · · · · · · · · · · · · · ·)226-3586				
	Ameno		City or town, state or country, and ZIP + 4	G Gross receipts \$	6,183,395.				
	Applic	a-	New York, NY 10004	H(a) Is this a group re					
	pendir	F Nar	ne and address of principal officer Elliot Figman	for affiliates?	Yes X No				
				H(b) Are all affiliates inc					
1 1	ax-exe	mpt stati	us: X 501(c) (3) ◀ (insert no)	• • •	list (see instructions)				
			W.PW.ORG	H(c) Group exemption					
					A State of legal domicile: NY				
	art I	Summ							
_	1	Briefly de	scribe the organization's mission or most significant activities Foster t	he profession	al				
ğ			opment of poets and writers, to promote						
Г	2		s box if the organization discontinued its operations or disposed of r						
ove	3		of voting members of the governing body (Part VI, line 1a)	3	25				
Ğ	4		of independent voting members of the governing body (Part VI, line 1b)	4	24				
80	5		aber of employees (Part V, line 2a)	5	25				
ij	6		ober of volunteers (estimate if necessary)	6	0				
Ţ	7a		ss unrelated business revenue from Part VIII, line 12, column (C)	7a	1,253,367.				
2017,	ь	_	ated business taxable income from Form 990-T, line 34	7b	<23,287.>				
ಲ				Prior Year	Current Year				
	8	Contribut	ions and grants (Part VIII, line 1h)	1,742,435.	2,401,666.				
2	1		service revenue (Part VIII, line 2g) RECEIVED	2,029,567.	2,073,981.				
A&AeRu®	1		nt income (Part VIII, column (A), lines 3, 4, and 76)	90,360.	<231,072.>				
4		Other rev	enue (Part VIII, column (A), lines, 64 app9011ac, and 11e)	68,992.	65,355.				
딞	12	Total reve	enue - add lines 8 through 11 (must equal Part VIII, column (A) (A) (A)	3,931,354.	4,309,930.				
Expenses ANNED	13		id similar amounts paid (Part IX, column (A), lines 1-3)						
Z	14		paid to or for members (Part X, columba) (EA), UT						
6	15	Salaries, o	other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,412,853.	1,469,653.				
81) 16a		nal fundraising fees (Part IX, column (A), line 11e)						
g.	ь		draising expenses (Part IX, column (D), line 25) 266,847.						
ũ	17		penses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,111,380.	1,966,833.				
	1		enses Add lines 13-17 (must equal Part IX, column (A), line 25)	3,524,233.	3,436,486.				
	1		less expenses Subtract line 18 from line 12	407,121.	873,444.				
or				Beginning of Year	End of Year				
Net Assets or Fund Balances	20	Total asse	ets (Part X, line 16)	4,148,241.	5,108,901.				
t As	21	Total liabi	lities (Part X, line 26)	846,654.	952,750.				
SE	22	Net asset	s or fund balances Subtract line 21 from line 20	3,301,587.	4,156,151.				
Pa	art II	Signa	ture Block						
		Under pena	alties of perjury, I declare that I have examined this return, including accompanying schedules and statemete Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	ents, and to the best of my knowled	ge and belief, it is true, correct,				
		and comple	D	. ()					
Sig	n		cllut 2 cm	2/8/1	0				
Her	е	Sigi	nature of officer	Date					
			liot Figman, Exec. Director						
		Тур	e or print name and title						
Dair	•	Preparer'	Date	Check if Prepar	er's identifying number structions)				
Paid		signature		employed >					
	oarer's Only	Firm's nam yours if	° PUSTORINO, PUGLISI & CO., LLP	EIN ▶					
USE	Only	self-employ address, ar	^{red),} \ 515 MADISÕN AVENUE						
		ZIP + 4	NEW YORK, NY 10022	Phone no. ► 2	12-832-1110				
May	the IF	RS discus	s this return with the preparer shown above? (see instructions)		X Yes No				
			A For Privacy Act and Panorwork Reduction Act Natice and the congrete	in admirable and	Form 990 (2008)				

See Schedule O for Organization Mission Statement Continuation

Form 9901(2008) Poets and Writers Inc.
Part IV Checklist of Required Schedules

 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on lehalf of or in opposition to candidates for public office? If "Yes," organizations. Did the organization engage in lobbying activities of "Yes,", complete Schedule C, Part II Section 501(c)(3) organizations. Did the organizations is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization maintain any dorn advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV VIV, III, IV, or X as applicable Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part X, VIV, IV, IV, or X as applicable Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part X, VIV, IV, IV, or X as applicable Did the organization report one than 51, 000 or part IV, lines 11, and IV, IV, or X, IV, IV, IV, IV, IV		\	/es	No
 2 Is the organization required to complete Schedule B, Schedule of Contributors? 3 Did the organization engage in direct or indirect political campage and activities on behalf of or in opposition to candidates for public offee? If "Yes," complete Schedule C, Part II 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part III 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical areas, or historica structures? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts V, VII, VII, IX, or X as applicable 12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule P, Part II 15 Did the organization maintain an office, employees, or agents outside of the U.S.? 16 Did the organization report on Part IX, column (A), line 3, more th				
 3 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 II 4 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II 6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II b Did the organization receive or hold a conservation easement, including essentials to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III b Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit consisting, dot management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount in Part X, line 21, 13, 15, or 25? 11 "Yes," complete Schedule D, Parts VI, VI, VIII, VII, X, or X as applicable 12 Did the organization report an amount in Part X in the Statement for the year for which it is completing this return that was prepared in accordance with GAPP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 Is the organization report and amount in Part X, column (A), Ine 19	1		Х	
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 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII Is the organization as school as described in section 170(b)(1)A(n)(r) If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the U.S.? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to any organization ocated outside the United States? If "Yes," complete Schedule F, Part III Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III Did the organization have a tax			- 1	
 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	9			<u> </u>
 If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII Is the organization a school as described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the U.S.? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entit located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report more Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 on Part IX, column (A), line 1'e's," complete Schedule G, Part III Did the organization report more than \$5,000 on Part IX, column (A), line 1'e's," complete Schedule I, Parts I and III Did the organization report more than \$5,000 on Part IX, column (A), line 1'e'res," complete Schedule I, Parts I and III Did the organization report more than \$5,000 on Part IX, column (A), line 2'e' If "Yes," complete Schedule I, Parts I and III Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last	10	<u> </u>	Х	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the U.S.? 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entitiocated outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 on Part IX, column (A), line 12e? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Parts I and II 20 Did the organization report more than \$5,000 on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and III 21 Did the organization report more than \$5,000 on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and III 22 Did the organization report more than \$5,000 on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was		ł		
prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the U S.? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entit located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 on Part IX, column (A), line 10 part IX "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H Did the organization peport more than \$5,000 on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and III Did the organization report more than \$5,000 on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K II" "No", go to question 25 Did the organization maintain an escrow account other than	1	1	X	
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 Did the organization operate one or more hospitals? If "Yes," complete Schedule H Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K If "No", go to question 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial 	18			<u>X</u>
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	12	\dashv		
Constituting to the property related to the state of the	2	,		Х
			90 (2	2008)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			1
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			l
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			l
	If "Yes," complete Schedule L, Part IV	28b		_X
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			1
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
1	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
		Form	990 (

	The Control of the Co				
	•			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter -0- if not applicable	1a 104			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming			
	(gambling) winnings to prize winners?	1 1	1c		
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 25			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns		2b_		X
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see		_	77	
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered to the organization have unrelated business gross income of \$1,000 or more during the year covered to the organization have unrelated business gross income of \$1,000 or more during the year covered to the organization have unrelated business gross income of \$1,000 or more during the year covered to the organization have unrelated business gross income of \$1,000 or more during the year covered to the organization have unrelated business gross income of \$1,000 or more during the year covered to the organization have unrelated business gross income of \$1,000 or more during the year covered to the organization have unrelated business gross income of \$1,000 or more during the year covered to the organization have unrelated business gross income of \$1,000 or more during the year covered to the organization have unrelated business gross income of \$1,000 or more during the year covered to the organization have unrelated business gross income of \$1,000 or more during the year covered to the organization have unrelated business gross income of \$1,000 or more during the year covered to the organization have unrelated business gross gro	ed by this return?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	•	_		.
	financial account in a foreign country (such as a bank account, securities account, or other financial.	account	4a_		X
D	If "Yes," enter the name of the foreign country	Dank and			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Financial Accounts	ванк апо			
50	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year.	action?	5b		X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity		30_		-22
Ū	Tax Shelter Transaction?	riegarding riombited	5c		
6a	Did the organization solicit any contributions that were not tax deductible?		6a		Х
	If "Yes," did the organization include with every solicitation an express statement that such contribut	tions or aifts			
	were not tax deductible?	3	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	e than \$75?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?		7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	personal			
	benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti	ract?	7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	?	7g		Х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0		7h		Х
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec				
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or	ganization, have			
_	excess business holdings at any time during the year?		8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter N/A	100			
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b		i	
b 11	Section 501(c)(12) organizations. Enter: N/A	[100]		i	
11	Gross income from members or shareholders	11a			
a h	Gross income from other sources (Do not net amounts due or paid to other sources against	110			
U	amounts due or received from them)	11b		·	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b	,_u		
	21/22	<u> </u>	Form	990	(2008)
				- 1	/

Form 990 (2008) Poets and Writers Inc. 13-2682458 Pa

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

Sec	tion A. Governing Body and Management		r	
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O See instructions			
1a	Enter the number of voting members of the governing body 1a 2	5		
b	Enter the number of voting members that are independent	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2_	X	<u></u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3	<u> </u>	_X_
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	ļ	X
6	Does the organization have members or stockholders?	6	<u> </u>	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	_7a		_X_
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following		ļ	
а	The governing body?	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	_9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X
Sec	tion B. Policies		1	
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise		1	
	to conflicts?	12b		<u>X</u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c		X
13	Does the organization have a written whistleblower policy?	13	<u> </u>	X
14	Does the organization have a written document retention and destruction policy?	14_		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			ĺ
а	The organization's CEO, Executive Director, or top management official?	15a		X
b	Other officers or key employees of the organization?	15b	ļ	X
	Describe the process in Schedule O (see instructions)			ĺ
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a	<u> </u>	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	L	Ц
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►NY, CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available.	le for		
	public inspection. Indicate how you make these available Check all that apply. Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ancial	
. •	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	zation:	•	
	Mr William Hayes Controller - 212-226-3963			
	90 Broad Street, New York, NY 10012			
83200 12-18-	3	Form	990	(2008)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee, or key employee

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Chock this box if the diganization did not t		. ,				,		T	/E\	(E)
(A) Name and Title	(B)	(C) Position			(D)	(E)	(F)			
Name and Title	Average hours	1,0				app	dy)	Reportable compensation	Reportable compensation	Estimated amount of
	per	⊢	T	T	I	I	,,y, 	from	from related	other
	week	ndividual trustee or director		ł				the	organizations	compensation
		io d	99			sated		organization	(W-2/1099-MISC)	from the
		rustee	l trust		ag	ubeu	j	(W-2/1099-MISC)		organization
		dualt	institutional trustee	_	nplo)	st co	<u></u>			and related
		Indiv	Instit	Officer	Key employee	Highest compensated employee	Ē			organizations
CELIA H. CURRIN			-		 	 				
PRESIDENT	0.50	x		x				0.	0.	0.
KARIN GRAFSTROM										
TREASURER	0.50	Х		Х				0.	0.	0.
JAY FINE									,	
SECRETARY	0.50	Х		X				0.	0.	0.
ALLISON J. DAVIS										
BOARD MEMBER	0.50	X						0.	0.	0.
MAUREEN MAHON EGEN										
BOARD MEMBER	0.50	X	<u> </u>					0.	0.	0.
JANE FRIEDMAN										
BOARD MEMBER	0.50	X	<u> </u>	<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
LYNN GOLDBERG										_
BOARD MEMBER	0.50	X	<u> </u>	<u> </u>	_		ļ	0.	0.	0.
KARIN GRAFSTROM		ĺ								
BOARD MEMBER	0.50	X	┡	-	├	<u> </u>	ļ	0.	0.	0.
JOHN HOLMAN				1						
BOARD MEMBER	0.50	X	 		├—	├-		0.	0.	0.
SUSAN JACKSON	1			ŀ						
BOARD MEMBER	0.50	X	<u> </u>	₩	┢	├	 	0.	0.	0.
ELLEN JOSEPH	0.50			ŀ						
BOARD MEMBER	0.50	X	-	<u> </u>	-	├	₩	0.	0.	0.
JOANNE LEEDOM-ACKERMAN	0.50	.,	Ì							_
BOARD MEMBER	0.50	X	-	1	<u> </u>	-	-	0.	0.	0.
SUSAN MCCLANAHAN	0.50	.							_	_
BOARD MEMBER	0.50	X	\vdash	\vdash	├-	├	├	0.	0.	0.
ROBIN SMITH	0.50								_	
BOARD MEMBER	0.50	1	-	\vdash	├	┼	├	0.	0.	, O.
MICHOLAS VERGOTH	0.50	-						0.	0.	_
BOARD MEMBER PAUL VIDICH	0.50	^	-		-	-	┢	<u> </u>	0.	0.
BOARD MEMBER	0.50	v						0.	0.	0.
GALEN WILLIAMS	0.30	1	\vdash	-	1	\vdash	┢╌	·		•
BOARD MEMBER	0.50	x]	0.	0.	0.
BOARD HEMDER	, 0.50	- 43				Ь		<u> </u>	<u>U •</u>	Form 990 (2008)

832007 12-18-08

Form **990** (2008)

Part VII Section A. Officers, Directors, Tru (A)	(B)	(C)						(D)	(E)	(E)		(F)	_
Name and title	Average hours	ر (Posi			L.A	Reportable	Reportable compensation			stimate	
	per week	individual trustee or director	Institutional trustee			Highest compensated E		compensation from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	d IS	corr fi org an	other opensar rom the janizati d relate anizatio	tion e ion ed
VIRGINIA BARBER	0.50												
BOARD MEMBER AMY BERKOWER	0.50	X	┢			-		0.		0.			0.
BOARD MEMBER	0.50	v						0.		0.			0.
BARBARA THOMPSON DAVIS					-			- 0.		<u> </u>			<u> </u>
BOARD MEMBER	0.50	x						0.		0.			0.
AMANDA GIMBLE													
BOARD MEMBER	0.50	Х				_	_	0.		0.			0.
SUSAN ISAACS	0 50				ŀ					_			_
BOARD MEMBER J. ALAN KAHN	0.50	X				-		0.		0.			0.
BOARD MEMBER	0.50	x						0.		0.			0.
HELEN MACIOCE					-					<u> </u>			<u> </u>
BOARD MEMBER	0.50	Х						0.		0.			0.
THEODORE ROGERS								_					
BOARD MEMBER	0.50	X	<u> </u>			-		0.		0.			0.
ELLIOT FIGMAN EXEC. DIRECTOR	35.00			х		х		176,022.		0.			0.
1b Total			L		_			176,022.		0.			0.
2 Total number of individuals (including those	ın 1a) who re	ceiv	ed n	ore	tha	n \$1	00,0						
compensation from the organization										<u> </u>		Yes	<u>1</u> No
3 Did the organization list any former officer,	director or tru	ctoc	, ko	, om	nlo	· · · · · ·	or b	aughost componented or	anlovos on			res	NO
line 1a? If "Yes," complete Schedule J for s		Stee	, Ke	y en	ibio	yee,	OI I	ngnest compensated en	ipioyee on		3		x
4 For any individual listed on line 1a, is the su		le co	omp	ensa	ation	and	d otl	her compensation from t	the organization				
and related organizations greater than \$150									_		4	х	
5 Did any person listed on line 1a receive or a				rom	any	unr	elat	ed organization for servi	ces rendered to				
the organization? If "Yes," complete Sched	ule J for such	pers	on							-	5		X
Section B. Independent Contractors 1 Complete this table for your five highest co	mnensated in	dene	ande	nt c	onti	racto	re t	hat received more than	\$100 000 of con	none	ation	from	
the organization NONE	mpondatod int	аср	Jilac		OHL	acic	/I Ç L	riat received more than	ψ100,000 01 con	ipens	allon	110111	
(A)							Ī	(B)			(0))	
Name and business	address						_	Description of s	ervices		ompe	nsatior	n
	_						-						
			•										
							_						
			-	-			+						,
2 Total number of independent contractors (iii)	_	n '	1) wł	no re	cei	ved	mor	e than \$100,000 in com	pensation				
from the organization	0								1				

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	and 501(c)(4) organizat lete column (A) but are			(D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	176,022.		176,022.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 000 100	004 040		
7	Other salaries and wages	1,032,102.	821,919.	57,430.	152,753.
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)	261,529.	173,500.	56,446.	21 502
9 10	Other employee benefits Payroll taxes	201,329.	1/3,500.	50,440.	31,583.
11	Fees for services (non-employees)				
''	Management				
b	Legal				
	Accounting	22,000.		22,000.	
d	*	== / 0 0 0 0			
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	284,787.	246,653.	34,509.	3,625.
12	Advertising and promotion	276,114.	273,070.	61.	2,983.
13	Office expenses	27,215.	16,968.	7,556.	2,691.
14	Information technology	20,073.	14,777.	1,299.	3,997.
15	Royalties				
16	Occupancy	297,513.	198,090.	51,997.	47,426.
17	Travel	41,083.	35,957.	4,211.	915.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			-	
20	Interest Payments to affiliates				
21 22	Depreciation, depletion, and amortization	22,677.	14,023.	5,104.	3,550.
23	Insurance	22,011.	14,023.	3,104.	3,350.
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Printing and Production	366,155.	362,774.	0.	3,381.
b	Reading Workshop Writer	246,420.	246,420.		
С	Distribution	164,316.	164,316.		
d	Writers and Organizatio	52,250.	51,750.	400.	100.
e	Bad Debts	36,575.	36,575.		
f	All other expenses	109,655.	80,053.	15,759.	13,843.
25	Total functional expenses. Add lines 1 through 24f	3,436,486.	2,736,845.	432,794.	<u> 266,847.</u>
26	Joint Costs. Check here ▶ ☐ If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				5 000 (222)

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Form **990** (2008)

	•		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	403,507.	1	618,218.
	2	Savings and temporary cash investments	364,844.	2	118,253.
	3	Pledges and grants receivable, net	645,610.	3	427,500.
	4	Accounts receivable, net	167,880.	4	211,887.
	5	Receivables from current and former officers, directors, trustees, key		7	22270071
		employees, or other related parties Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
	-	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
		Part II of Schedule L		6	
Ś	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ĕ	9	Prepaid expenses and deferred charges		9	19,635.
	10a	Land, buildings, and equipment cost basis 10a 521,506.			
	l .	Less accumulated depreciation. Complete			
		Part VI of Schedule D 10b 391,056.	141,628.	10c	130,450.
	11	Investments - publicly traded securities	2,324,219.	11	3,475,453.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	100,553.	15	107,505.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,148,241.	16	5,108,901.
	17	Accounts payable and accrued expenses	213,297.	17	350,522.
	18	Grants payable		18	
	19	Deferred revenue	633,357.	19	602,228.
	20	Tax-exempt bond liabilities		20	
S	21	Escrow account liability Complete Part IV of Schedule D		21	
Ė	22	Payables to current and former one confers, directors, trustees, key employees,			
Liabilities		highest compensated employees, and disqualified persons. Complete Part II			
_		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	846,654.	26	952,750.
		Organizations that follow SFAS 117, check here X and complete			
ces		lines 27 through 29, and lines 33 and 34.	1 004 150	1	0.14 4.60
<u>a</u>	27	Unrestricted net assets	1,004,172.	27	<u>841,160.</u>
Ba	28	Temporarily restricted net assets	1,114,124.	28	2,103,000.
pu	29	Permanently restricted net assets	1,183,291.	29	1,211,991.
Net Assets or Fund Baland		Organizations that do not follow SFAS 117, check here			
S		complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds	2 201 507	32	A 15C 151
_	33	Total net assets or fund balances	3,301,587. 4,148,241.	33	<u>4,156,151.</u>
Par	rt XI	Total liabilities and net assets/fund balances Financial Statements and Reporting	4,140,241.	34	5,108,901.
	741	Tindilolal otatements and reporting			Yes No
1	Acco	ounting method used to prepare the Form 990 Cash X Accrual	Other		
2a		the organization's financial statements compiled or reviewed by an independent a			2a X
		the organization's financial statements audited by an independent accountant?			2b X
		es" to lines 2a or 2b, does the organization have a committee that assumes respon	sibility for oversight of the	audıt.	
		w, or compilation of its financial statements and selection of an independent accou		•	2c X
За	As a	result of a federal award, was the organization required to undergo an audit or aud	its as set forth in the Sing	le Aud	ıt
	Act a	and OMB Circular A-133?			3a X
<u>b</u>	If "Ye	es," did the organization undergo the required audit or audits?			3b
0000-					Earm 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support To be completed by all section 501(c)(3) organizations and section 4947(a)(1)

nonexempt charitable trusts.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

	T	Poets a	nd Writers I	nc.					1	<u>3-2682458</u>	
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	te this par) (see ins	tructions)			
The organ	nization is not a	a private foundation	because it is (Please ch	eck only o	ne organiz	zation)					
1 🖳	A church, co	nvention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)).			
2 🖳	A school des	scribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E)							
з 🔛	A hospital or	a cooperative hosp	tal service organization	described	n section	170(b)(1)	(A) (iii). (At	tach Sche	dule H)		
4 🔲	A medical res	search organization	operated in conjunction	with a hos	pıtal desci	nbed in se	ction 170	(b)(1)(A)(ii	ii). Enter t	he hospital's name,	
	city, and stat	te									
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). (Compl	ete Part II)								
6 🔛	A federal, sta	ate, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(1	I)(A)(v).				
7 X	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ntal unit c	or from the	general p	oublic described in	
	section 170((b)(1)(A)(vi). (Comple	te Part II)								
8 🖳	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II)						
9 📖	An organizat	ion that normally red	eives (1) more than 33	1/3% of its	support f	rom contri	butions, n	nembershi	p fees, ar	nd gross receipts fro	m
	activities rela	ited to its exempt fu	nctions - subject to certa	aın exceptı	ons, and (2	2) no more	than 33 1	1/3% of its	support	from gross investme	ent
	income and i	unrelated business t	axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	inization a	after June 30, 1975	
		509(a)(2). (Complete	•								
10			perated exclusively to te					-			
11 📖	-	-	perated exclusively for the						-	• •	
			ations described in secti				?) See se o	ction 509(a)(3). Che	ck the box that	
			organization and compl		-					1	
	a Type		•			tionally int	_		d ∟	Type III - Other	
e	-	-	at the organization is not				•				
			han one or more publicly						9(a)(1) or s	section 509(a)(2).	
f	_		ten determination from	the IRS tha	atitisa Iy	pe I, Type	II, or Type	∌ III		Г	\neg
		rganization, check th				•			•	Ĺ	
g	_		organization accepted ar			-		٠.		F. T.	
			lirectly controls, either al	ione or tog	etner with	persons c	iescribea i	ın (II) and (III) Delow,		lo_
	_	• •	upported organization?	1						11g(ı)	
			n described in (i) above?		<u>.</u> ^					11g(ii)	
h		· · · · · · · · · · · · · · · · ·	person described in (i) (` '		- norto				11g(iii)	—
h	Flovide tile i	ollowing information	about the organizations	ine organ	ization sup	pports					
41. NI		(11) 5141	(iii) Type of	(IV) Is the c	raanization	(v) Did you	notify the	(vi) Is	the		
	e of supported janization	(ii) EIN	organization		sted in your	organizat		lorganizátio	on in col.	(vii) Amount of	
org	Janization		(described on lines 1-9 above or IRC section	governing		(i) of your	support?	(i) organiz U.S	.?	support	
			(see instructions))	Yes	No	Yes	No	Yes	No		
_							-				_
					_						
				ļ					igsquare		
				ļ							
Total		<u> </u>	<u> </u>	<u> </u>							

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

Schedule A (Form 990 or 990-EZ) 2008

13-268<u>2458 Page 2</u> Schedule A (Form 990 or 990 EZ) 2008 Poets and Writers Inc Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not 1305284. 1380541. 1530071. include any "unusual grants") 2508442. 2401666. 9126004. 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 2508442. 1305284. 1380541. 1530071. 2401666. 9126004. 4 Total. Add lines 1 - 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 2573683. 6 Public Support. Subtract line 5 from line 4 6552321. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 2508442 1305284 1380541. 1530071. 2401666. 9126004. 7 Amounts from line 4 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties and income from similar sources 45,537 77,287 62,254. 43,170. 84,306. 312,554. 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 84,483. 76,261 68,491 54,163. 65,355. assets (Explain in Part IV) 348,753. 11 Total support. Add lines 7 through 10 9787311. 9,957,909. 12 Gross receipts from related activities, etc (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 66.95 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 % 80.21 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 % 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization $\triangleright X$ b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008

b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

á	assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization'	s first, second, th	ıırd, fourth, or fıft	h tax year as a se	ection 501(c)(3) or	ganization,
(check this box and stop here						▶□
Sect	tion C. Computation of Publ	ic Support Pe	rcentage				
15 F	15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))					15	%
16 F	Public support percentage from 2007		16	%			
Sect	tion D. Computation of Inve	stment Incom	e Percentage	е			
17	Investment income percentage for 20	008 (line 10c, colu	mn (f) divided by	line 13, column (f))	17	%
18	Investment income percentage from	2007 Schedule A,	Part IV-A, line 27	h		18	%
19a 3	33 1/3% support tests - 2008. If the	organization did r	not check the box	k on line 14, and	line 15 is more th	nan 33 1/3%, and f	line 17 is not
r	more than 33 1/3%, check this box a	nd stop here. The	e organization qua	alıfies as a public	ly supported org	anızatıon	ightharpoons
b S	33 1/3% support tests - 2007. If the	organization did r	not check a box o	on line 14 or line	19a, and line 16 i	s more than 33 1/3	3%, and
1	line 18 is not more than 33 1/3%, che	eck this box and s	top here. The org	ganızatıon qualıfı	es as a publicly s	upported organiza	ation
20 [Private foundation If the organization	n did not check a	hox on line 14 1	9a or 19h chec	k this how and ea	a inetrictione	

Schedule A (Form 990 or 990-EZ) 2008

or loss from the sale of capital

Schedule D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

Employer identification number

	Poets and Writers	Inc.	13-2682458						
Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Fu	nds or Accounts. Complete if the						
	organization answered "Yes" to Form 990, Part IV, Iin	e 6							
		(a) Donor advised funds	(b) Funds and other accounts						
1	Total number at end of year								
2	Aggregate contributions to (during year)								
3	Aggregate grants from (during year)								
4	Aggregate value at end of year								
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor a	dvised funds						
Ŭ	are the organization's property, subject to the organization's		Yes No						
6	Did the organization inform all grantees, donors, and donor a								
J	for charitable purposes and not for the benefit of the donor of								
Pai									
1	Purpose(s) of conservation easements held by the organizat	- '	0,1 41.14, 111.07						
•	Preservation of land for public use (e.g., recreation or p	· · · · · · · · · · · · · · · · · · ·	historically important land area						
	Protection of natural habitat		ertified historic structure						
	Preservation of open space	Fleseivation of Ce	atilied historic structure						
2	· ·	aniation contribution in the form of a	conservation economist on the last day						
2	Complete lines 2a-2d if the organization held a qualified cons of the tax year	servation contribution in the form of a	conservation easement on the last day						
	of the tax year		Hold at the Ford of the Year						
_	Total number of conservation easements		Held at the End of the Year						
a			2a						
b	Total acreage restricted by conservation easements	and an inches	2b						
C.	Number of conservation easements on a certified historic str	' '	2c						
d	Number of conservation easements included in (c) acquired		2d						
3									
	year >								
4	Number of states where property subject to conservation ea								
5	Does the organization have a written policy regarding the pe	nodic monitoring, inspection, violation							
	enforcement of the conservation easements it holds?	ad anfarana agamenta duma the ve	Yes No						
6	Staff or volunteer hours devoted to monitoring, inspecting, a Amount of expenses incurred in monitoring, inspecting, and								
7 8	Does each conservation easement reported on line 2(d) above								
0	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section	Yes No						
9	In Part XIV, describe how the organization reports conservat	ion occoments in its revenue and expe							
3	include, if applicable, the text of the footnote to the organization								
	conservation easements	tion's intancial statements that descri	bes the organization's accounting for						
Pa	rt III Organizations Maintaining Collections o	f Art. Historical Treasures. o	r Other Similar Assets.						
	Complete if the organization answered "Yes" to Form	•							
			· · · · · · · · · · · · · · · · · · ·						
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement ar	d balance sheet works of art, historical						
	treasures, or other similar assets held for public exhibition, e								
	the footnote to its financial statements that describes these		, parameter, provides, min a ntinus, min tom o						
b	If the organization elected, as permitted under SFAS 116, to		alance sheet works of art, historical treasures.						
_	or other similar assets held for public exhibition, education, of								
	these items:	r redearer in fartherance of public der	vice, provide the following amounts relating to						
			•						
	(i) Hevenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		► \$ ► \$						
0	If the organization received or held works of art, historical tre	geurge or other similar casets for fine							
2			nciai yaiti, provide						
_	the following amounts required to be reported under SFAS 1	to relating to these items	▶ ¢						
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$						
b	Assets included in Form 990, Part X		> \$						
	For Privacy Act and Paperwork Reduction Act Notice, see	the Instructions for Form 990	Schedule D (Form 990) 2008						
\Box \Box \Box	For Frivacy Act and Faperwork neduction Act NOTICE, Set	are mou actions for Porm 990.	Schedule D (Form 990) 2008						

Sche	dule D (Form 990) 2008 Poets a	nd Writers	Inc					13-26	82458	3 Pa	age 2
Par					easures, o	or Oth					
3	Using the organization's accession and other										_
	that apply)	•		-	_						
а	Public exhibition	d	ı 🗀 l	_oan or exc	hange progra	ams					
b	Scholarly research	e		Other	• • •						
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	ey further t	he organizati	on's exe	empt purp	ose in Par	t XIV.		
5	During the year, did the organization solicit o										
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Trust, Escrow and Custodial	Arrangements	- Comple	ete if organi	zation answ	ered "Ye	s" to Forn	n 990, Pai	t IV, line 9	, or	
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for o	contribution	s or other as	sets no	t included				
	on Form 990, Part X?		•						Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing t	able							
	•	•	•						Amount		
С	Beginning balance						1c				
	Additions during the year						1d				
	Distributions during the year						1e				
f	Ending balance						1f	_			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Yes		No
	If "Yes," explain the arrangement in Part XIV	, ,									
Par	t V Endowment Funds. Complete it	f organization answe	ered "Yes	s" to Form 9	990, Part IV,	line 10					
		(a) Current year		rior year	(c) Two yea		(d) Three	years back	(e) Four	years	back
1a	Beginning of year balance	2,241,570.		-							
b	Contributions	1,362,738.									
c	Investment earnings or losses	<192,736.									
d	Grants or scholarships										
e	Other expenditures for facilities										
_	and programs	152,000.									
f	Administrative expenses	15,000.									
g	· • • • • • • • • • • • • • • • • • • •	3,244,572.			i			•			
2	Provide the estimated percentage of the year		as				<u> </u>		<u> </u>		
-	Board designated or quasi-endowment	15.41	%								
b	Permanent endowment ► 34.42	%	—· · ·								
c		 %									
_	Are there endowment funds not in the posse	- -	ation tha	t are held a	nd administe	ered for t	the organi	zation			
	by.						3		ſ	Yes	No_
	(i) unrelated organizations								3a(i)		X
	(ii) related organizations								3a(ii)		X
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sched	lule R?					3b		
4	Describe in Part XIV the intended uses of the								<u> </u>		
Par	t VI Investments - Land, Building				, Part X, line	10					
	Description of investment	(a) Cost or o			or other		Depreciation	on	(d) Book	value	<u>——</u>
	•	basis (investr	1		(other)	(=) =]	, ,		
	Land										
	Buildings										
6	Leasehold improvements			9	1,584.		10,3	61.	8.	1.2	23.
d	Equipment				9,922.		380,6				27.
_	Other										<u></u>
	. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colu	ımn (B), i	line 10(c))		-		•	130	0.4	50.

Schedule D (Form 990) 2008

12330203 102270 25956

Schedule D (Form 990) 2008

832053 12-23-08

	edule D (Form 990) 2008 Poets and Writers Inc.		101	<u> 13-</u>	<u> 2682458</u>	Page 4
	Reconciliation of Change in Net Assets from Form 9	90 to Financia	II Statements		4 000	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		4,309	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		3,436	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		8/3	,444.
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7		.10	001
8	Other (Describe in Part XIV)		8			, 881 .:
9	Total adjustments (net) Add lines 4-8	_	9			<u>, 881 .</u> :
10 Pai	Excess or (deficit) for the year per financial statements Combine lines 3 and rt XII Reconciliation of Revenue per Audited Financial States		Revenue per F	Return	<u>854</u>	<u>,563.</u>
1	Total revenue, gains, and other support per audited financial statements	tomonto with	novende per i	1	3,405	476.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				<u> </u>	, _ , _ ,
a		2a		1 1		
b	Donated services and use of facilities	2b		1		
C	Daniel de la constant	2c		1		
d		2d		1		
е	A 4 4 4 4 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6	<u> 1</u>		7 2e		0.
3	Subtract line 2e from line 1			3	3,405	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				-, 100	<u>, </u>
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b	904,454.	1 1		
c		_ 10	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4c	904	,454.
5		2)		5	4,309	
	rt XIII Reconciliation of Expenses per Audited Financial Sta		Expenses per			,,,,,,,
1	Total expenses and losses per audited financial statements			1	3,436	.486.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				<u> </u>	
a	Donated services and use of facilities	2a				
b	Prior year adjustments	2b		1		
c	1	2c	· · · · · · · · · · · · · · · · · · ·	1		
d		2d		1		
e				2e		0.
3	Subtract line 2e from line 1			3	3,436	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				3/130	<u>, 100.</u>
т а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b		4b		1		
	Add lines 4a and 4b	 40		┥ _{4c}		0.
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line	18)		5	3,436	
	rt XIV Supplemental Information	10)			3,430	, 400.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9;	Part III, lines 1a ai	nd 4. Part IV. lines 1	1b and 2	2b. Part V. line	4: Part
	art XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	,	,,		, ,	.,
	rt V, line 4: The endowment funds are u	sed to su	stain and	exp	and the	
Rea	ading/Workshop program, preserve the Wr	<u>iters Exc</u>	hange proc	gram	, and	
unc	dertake new strategic initiatives.					
_	of MIT I does 0. Other Bildertoonte					
Par	rt XI, Line 8 - Other Adjustments:					
UNI	REALIZED GAIN (LOSS) ON INVESTMENTS					
						
83205	4			Sched	lule D (Form 9	90) 2008
12-23						

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Poets and Writers Inc.

Employer identification number 13-2682458

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision			
	of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			1
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			ĺ
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
а	Receive a severance payment or change of control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			ĺ
	contingent on the revenues of			Ì
а	The organization?	_5a		X
b	Any related organization?	_5b		X
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			Í _
	initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
LHA	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedul	le J (Form	990)	2008

832111 12-23-08

Poets and Writers Inc. Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(5)	0	(E)	Œ
					Deferred	Nontaxable	Total of columns	Compensation
(A) Name		(i) Base compensation	(II) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(O)-(I)(B)	reported in prior Form 990 or Form 990-EZ
	Ξ	176,022.	0	0	0	0	176.022.	174,125.
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	Ξ							
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Schedule J (Form 990) 2008

SCHEDULE O

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Poets and Writers Inc.

Employer identification number 13-2682458

Toets and writers ric:
Form 990, Part I, Line 1, Description of Organization Mission:
throughout the U.S. literary community, and to help create an
environment in which literature can be appreciated by the widest
possible public.
Form 990, Part III, Line 4d, Other Program Services:
Other Program Services
Expenses \$ 262096. including grants of \$ 0. Revenue \$ 0.
OTHER PROGRAM SERVICES
Form 990, Part VI, Section A, line 2: Mary Gannon(Editorial Director) and
Kevin Larimer(/Editor of /Poets & Writers Magazine) are married. These are
two key positions within the organization.
Galen Williams (Board Member) owns and operates a landscape design firm that may has business dealings with other board members.
Form 990, Part VI, Section A, line 10: A copy of Form 990 is provided to
the Controller and Executive Director of the organization for their review.
Any comments or issues with the form are answered and resolved before
filing.
Form 990, Part VI, Section C, Line 18: Copies of Forms 990 and 990-T are
made available for public inspection upon request by writing the National
Office in New York.

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

Schedule O (Form 990) 2008

25

9CHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of	the orga	anization	Po	ets and	Wri	ters :	Inc.				<u></u>	Employer identification numb 13-2682458
Form	990	, Part	: VI,	Section	C,	Line	19:	Finan	cial	statem	ent	s are available
												in New York.
<u> </u>	<u></u>	<u>ubiic</u>	upon	requese	. Dy	WIIC	<u> </u>	110 110	CIOIIG	II OIII	<u> </u>	III NOW TOTAL
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Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Internal Revenue	Service	File a separate application for each return.		<u> </u>
If you are	filing for an Addit	matic 3-Month Extension, complete only Part I and check this box ional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this f ess you have already been granted an automatic 3-month extension on a previously file		▶ X m 8868
Part I	Automatic	3-Month Extension of Time. Only submit original (no copies needed)		
A corporation		Form 990-T and requesting an automatic 6-month extension - check this box and comp	plete	▶ □
	porations (includii e tax returns.	ng 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	exten:	sion of time
noted below (not automa you must su	(6 months for a d tic) 3-month exter bmit the fully con	nerally, you can electronically file Form 8868 if you want a 3-month automatic extension corporation required to file Form 990-T). However, you cannot file Form 8868 electronic asion or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or completed and signed page 2 (Part II) of Form 8868. For more details on the electronic film e-file for Chanties & Nonprofits.	ally if isolida	(1) you want the additional sted Form 990-T. Instead,
Type or print	Name of Exempt	Organization	Empl	oyer identification number
•	Poets and	l Writers Inc.	1	3-2682458
File by the due date for filing your		nd room or suite no. If a P.O. box, see instructions		
instructions	City, town or pos	office, state, and ZIP code For a foreign address, see instructions NY 10004		
Check type	of return to be f	led (file a separate application for each return):		
Form	990 990-BL 990-EZ 990-PF	Form 990-T (corporation) Form 990-T (sec 401(a) or 408(a) trust) Form 990-T (trust other than above) Form 1041-A Form 88	27 69	
Telephon If the orga	e No ▶ <u>212-</u> anization does no or a Group Return	t have an office or place of business in the United States, check this box		the whole group, check this ers the extension will cover
Is for t	ebruary 1 he organization's calendar year tax year beginn	or ing or, and ending	oove.	_
2 If this	tax year is for lest	s than 12 months, check reason Initial return Final return		Change in accounting period
	application is for fundable credits	Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any See instructions.	3a	\$
		Form 990-PF or 990-T, enter any refundable credits and estimated		
tax pa	yments made Inc	clude any prior year overpayment allowed as a credit	3b	\$
c Balan	ce Due. Subtract	line 3b from line 3a Include your payment with this form, or, if required,		
	it with FTD coupo	on or, if required, by using EFTPS (Electronic Federal Tax Payment System)	20	\$N/A
		nake an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8	3c	
		Paperwork Reduction Act Notice, see Instructions.		Form 8868 (Rev. 4-2009)

823831 05-26-09

POETS AND WRITERS SCHEDULE OF FIXED ASSETS 6/30/09

FINANCIAL BASIS

BOOK		٠	•	. ,	•	•		•	•	•	•	•		•	•			•	•	•	•	•		• 1		,	•	•			٠	•	•	٠		•	•	•	•	•				•	•	٠	•	•	•		•	- 00 80E	,	11.9	87 66	110 51
ACC DEPR 06/30/09		31,455 99	28,164 19	92,790,74	9,012 94	18,817 64	7,632 82	5,400 57	1,069 98	459 00	1,335 20	4 144 30	2 681 90	3.148.00	2,197.50	2,197 50	400 70	101 73	404 82	2,997 50	243 48	352.09	28083	3,872.50	198 00	208 17	1,046 67	497 98	2,083 96	10612	84165	1,578 00	1,320 81	1,217,54	208 03	534 80	631 62	685 07	08 289	822 42	00 567,1	1,674.05	1 413 99	26. 26. 26. 26. 26. 26. 26. 26. 26. 26.	380 80	925 00	1,007 76	305 84	00 081'9	774 74	356 41	3,747,05	184881	253 93	931 29	882 95
DISPOSITIONS			•	, ,	•	•	•	i	•	i			. ,	•			•	•	•	•	•		•	•	. ,	•	·	•	•	•	•		•	•		. ,	•	•	•	•				•		•	•	•	•							,
CURRENT		•	•		•	•	,	•		•				•	•			•		٠		•					,	•	٠	•		•		,		•	•	•	•	•						•	•	0 0	. :	0 02	0000	16/34	254 77	52 13	203 79	69 861
ACC DEPR 06/30/08		31,455 99	28,164 19	9 106 90	9,012 94	18,817 64	7,632 82	5 400 57	86 690 1	459 00	1,335.20	4 144 30	2 681 90	3.148.00	2,197.50	2,197 50	400 70	101 73	404 82	2,997 50	243 48	352.09	28083	05 2/8.6 2008	00 861	208 17	1,046 67	497 98	2,083 96	10612	841 65	1,578 00	1 320 81	FY (17.1	708 OF 548 24	534 80	631 62	685 07	687 50	822 42	1,795 00	1,516.51	1413 00	3.164.36	380 80	925 00	1 007 76	305 82	6,180 00	774 72	35641	7 786 44	1 605 04	201 80	727 50	684 26
DEPRECIATION METHOD LIFE C		ĸ	s	v, v	· v.	Ś	S	S	s	s.	v, ı	vr, w	o •	, v	· v	ď	v	5	s.	v.	v, i	Α,	r. u	n v	٠.,	·	S	•	v 7	r	~	•	· ·	· ·	n 4	, vo	•	80	s	v.	. ·	•		• •	•	٧.	~	S	~	v. i	r. v	n v	, ~	•	•	S
COST DEI		31,455 99 SL		45,790.74 SL 9.106.90 SI					I 069 98 SI.				2 68 190 SL		2,197 50 SL							352.09 SL		38/75/0 SL									1,320 81 SL	1217 44 SL	100 00 SE	2 2			RS 05 L89		1,795 00 SU.		1413 00 SI						6,180 00 SL		33641 SL		1.859 81 SL			
RETIREMENT																																																								
ADDITIONS															_	_																																								
BALANCE 06/30/08		31,455 99	28,164 19	95 790 74	9,012 94	18,817 64	7,632 82	5,400 57	86 690 1	459 00	1,335 20	4,144.30	2 681 90	3.148.00	2 197 50	2,197 50	400 70	57 101	404 82	2,997 50	243 48	352.09	28082	5,872 50	00 861	208 17	1,046 67	497 98	2,083 96	11901	841 65	1 578 00	132081	1217 54	20 805	534 80	631 62	40 \$89	0	822 42	00 767,1	15 819,6	00 114 1	3 164 36	380 80	925 00	1,007	305 84	6,180 00	774 74	130 41	3,74703	1.8598.1	260 64	1,018 95	993 46
NOIL																																																								
DESCRIPTION	Computer Equipment	COMPUTERS	COMPUTERS	COMPUTERS	COMPUTERS	COMPUTERS	COMPUTERS	DELL P166	HP SSE PRINTER	HP DESKJET	LASER PRINTER	PROSCENIUM SYSTEMS	COMPAC	2 COMPUTERS	SOFTWARE, INC	SOFTWARE, INC	COMPUTERS	COMPUTERS	COMPUTERS	SPACEMASTER	COMPUTERS	COMPUIERS	COMPUTERS	SPACEMANIEK	SPACEMASTER	COMPUTERS	COMPUTERS	MAC WAREHOUSE	MAC WAREHOUSE	COMPUTERS	COMPUTERS	COMPUTERS	MICRO WAREHOUSE	MICKO WAREHOUSE	COMPUTERS	COMPUTERS	COMPUTERS	COMPUTERS	SPACEMATER	COMPUTERS	PG CALC INC	GLOBAL COMPLETED	MICRO WARFIOLISE	GLOBAL COMPLITER	GLOBAL COMPUTER	GLOBAL COMPUTER	GLOBAL COMPUTER	MICRO WAREHOUSE	GLOBAL COMPUTER	MICRO WARCHOUSE	MICKO WAKEHOUSE	MICRO WAREHOUSE	CDW DIRECT (PRINTER)	GLOBAL COMPUTER	GLOBAL COMPUTER	CDW DIRECT (PRINTER)
DATE	G	D 16/0E/9		6/30/93 C								3/24/98 P				S 86/8Z/6								S 66/2/0	_										00/8//00			12/21/99 C				00/17/00	_		Ĭ.						U6/1/02 M					04/09/04 CI

POETS AND WRITERS SCHEDULE OF FIXED ASSETS 6/30/09

FINANCIAL BASIS

DESCRIPTION	BALANCE 06/30/08	ADDITIONS	RETIREMENT	COST 06/30/09	DEPRECIATION METHOD LIFI	Z II C	ACC DEPR 06/30/08	CURRENT	DISPOSITIONS	ACC DEPR 06/30/09	BOOK VALUE
	830 35			830 35	SF	v, u	530 97	166 07		697 04	133.31
	214 84			214 84	SL	o vo	158 92	42 97		201 89	12.95
RYAN TRANQUILLA (Computer)	2,667 45			2,667 45	SL	S	1,948 33	533 49	•	2,481 82	185 63
CDW DIRECT (New File Server)	1,950 87			1,950 87	Sľ	v. i	1,283 83	390 17	•	1,674 01	276 86
	5,000 24			5,000 24	S.F.	n v	200 14	600 03		2,403.48	596 76
	686 02			686 02	SL SL	· v	285 84	137 20		423 05	262 97
	8,947 61			8,947 61	SL	·	3,728 17	1 789 52	•	\$ 517 69	3,429 92
	3,946 89			3,946 89	SL	v,	1 644 54	789 38	•	2,433 92	1,512.97
	2,376 85			2 376 85	SL	~	911 13	475 37	•	1,386 50	990 35
	3 136 92			3,136 92	SL	S	993 36	627 38	•	1 620 74	1,516 18
	13,129 94			13,129 94	SL	v,	2,625 99	2,625 99	•	5 251 98	7,877 96
	2,345 70			2,345 70	SL	v	390 95	469 14	•	860 09	1,485 61
	589 17			21 688	SI	so i	19 64	11783	•	137.47	451 70
	644 43			644 43	SL	'n	10 74	128 89	•	139 63	204 80
TOTAL COMPUTER EQUIPMENT	277,837 84	,	,	277,837 84			246 519 85	27 610,111		257,539 59	20,298 25
furniture & equipment 14-2											
	76,296 26			76,296 26	SL	7	76,296 26	•	•	76,296 26	
	4,674 00			4,674 00	SL	7	4 674 00	•	•	4,674 00	
	749 26			1 749 26	SL	7	1,749 26	•	1	1,749 26	
	11,560 00			11,560 00	SL		11,560 00	•		11,560 00	
	475.00			475 00	3F	- 1	475.00			475.00	
	1.565 14			1.565 14	Sr.		1.565 14	. ,	•	1.565 14	. ,
	2 841 45			2 841 45	SL	7	2,841 45	•	•	2,841 45	٠
	1 432 00			1 432 00	SL	7	1,432 00	٠	•	1,432 00	•
	2,135 42			2 135 42	SL	7	1,842 65	292 77	•	2,135 42	•
	679 26			679 26	ST	7	98 08	97 04		177 90	501 36
	34,470.00			34 470 00	TS T		3,693.21	4,924 29		8,617.50	25,852 50
	0,500,5			04 (200,0	35	`	/Acic	/0 L I C		+1 0c0'l	+C C/L'7
FOTAL FURNITURE & EQUIPMENT	152,084 27	•		152,084 27		İ	117,325 91	5,829 16	•	123,155 07	28,929 20
	00 009 6			00 009'6	SL	15	640 00	640 00		1.280 00	8,320 00
	19,925 00			19 925 00	SL	<u>~</u>	1,328 33	1,328 33	٠	2,656 67	17,268 33
	14,950 00			14,950 00	SL	<u>~</u>	91361	69 966	•	1 910 28	13,039 72
	11,500 00			11,500 00	SL	5	638 86	166 67		1,405 56	10,094 44
	18 810 00			18,810 00	SF	<u>~</u>	836 00	1 254 00		2,090 00	16,720 00
	5,300 00			5,300 00	SL	2	176 67	353 33	•	530 00	4 770 00
	•		4600 10	1,500 00	SL	13		00 001	•	100 00	1,400 00
	•	00 666 6	4800 20	00 666'6	SL	15	•	388 85	•	388 85	9,610 15
TOTAL LEASEHOLD & IMPROVEMENTS	80 08 4 00	11,499 00	,	91 584 00			4,533 50	5,827.85	,	10,361 35	81,222 65
						1		9			
TOTAL	510,007 11	11,499 00	,	521 506 11		į	368,379.25	22,676 76	,	391.056 01	130,450 10
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