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Form **990-EZ**

Department of the Treasury Internal Revenue Service

DAA

Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Sponsoring organizations 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 tax year beginning 7/01/08, and ending 6/30/09

OMB No 1545-1150

Open to Public Inspection

Α	For th	e 2008 calend	<u>dar year</u>	, or tax year beginning	: //U1/U8 ,aı	nd ending_	_ 6/	30/0	<u> </u>			
В	Check	ıf applıcable	Piease	C Name of organization	on					D	Emp	loyer identification number
L	Addres	s change	use IRS label or									
<u> </u>	Name	change	print or	ARLINGTON	WOMAN'S CLUE	3					<u>75</u>	-1158137
\perp	Initial re	eturn	type.		(or P O box, if mail is not de	livered to stree	et addre	ess)	Room/suite	E		phone number
_	Termin	ation	See Specific	1515 W ABR	AM ST							7-277-7666
<u> </u>	Amend	ed return	Instruc-	·	or country, and ZIP + 4		_			F	Grou	up Exemption
L		tion pending	tions.	ARLINGTON		<u>X 7601</u>					Num	nber •
	Sec	ction 501(c)(3			nonexempt charitable	trusts must	tattac	h	G Accountin			Cash Accrual
				npleted Schedule A (F								DIFIED CASH
I				LINGTONWOMA					H Check ►	o attac	if the	e organization is not nedule B (Form 990,
J				y one)— X 501(c) (3) ◀ (insert no)	4947(a)(1)		527				
K		_					_		pts are normal	iy no	t moi	re than \$25,000 A return
_			~		e a return, be sure to file							051 000
느					ts, if \$1,000,000 or more, file						<u>▶</u> \$	
	Part I				nges in Net Assets	or Fund	Bala	nces (೪	see the insti	ructi		
	1		•	nts, and similar amounts re						⊢	1	102,992
	2	•		• •	nent fees and contracts	a .				F	2	19,760
	3	•		nd assessments		S.	EE (STATE	MENT 1	-	3	111,463
	4	Investment					1			ļ	4	14,913
	5a			sale of assets other tha	•		5a			-	1	
	b			asis and sales expense			5b			_	ł	
d:	C	, .			tory (Subtract line 5b from lin				. —	L	5c	
Revenue	6			, , , , ,	parts of Schedule G) If any		n gam ii	ng, check l	nere 🕨 📙		ļ	
Š	a	Gross reven	ue (not i	ncluding \$	of cont	ributions		1		}	1	
œ	:]	reported on	line 1)				6a	ļ			l	
	b	Less direct	expense	s other than fundraising	g expenses		6b	J			ŀ	
	C	Net income	or (loss)	from special events an	d activities (Subtract line	6b from line	e 6a)	,		L	6c	
	7a	Gross sales	of inven	tory, less returns and a	llowances		7a	<u> </u>				
	b	Less cost of	f goods s	old			7b		<u> </u>			
	С	Gross profit	or (loss)	from sales of inventory	(Subtract line 7b from li	ne 7a)				L	7c	
	8	Other revenu	ue (desc	nbe ▶ <u>SEE ST</u>	ATEMENT 2) L	8	2,760
	9	Total revenu	ie. Add I	ines 1, 2, 3, 4, 5c, 6c, 7	⁷ c, and 8				<u>.</u>	>	9	251,888
	10	Grants and s	sımılar ar	mounts paid (attach sch	redule)					L	10	14,000
	11	Benefits paid	to or fo	r members						L	11	
S	12	Salaries, oth	er comp	ensation, and employed	e benefits	г		1-0 100 50		<u>\</u>	12	23,349
2C/Schee	13	Professional	fees and	d other payments to ind	ependent contractors			REC	EIVED	L	13	2,600
Σ§	. 14	Occupancy,	rent, utili	ities, and maintenance							14	81,463
	15	Printing, pub	lications	, postage, and shipping	J		175	JAM I	2 2010		15	
Z	16	Other expens	ses (des	cribe ▶ SEE ST.	ATEMENT 3		-	JAIN -) <u>gl</u>	16	131,735
	17	Total expens	ses. Add	lines 10 through 16							17	253,147
ets	18	Excess or (de	eficit) for	the year (Subtract line	17 from line 9)			OGジ	EN, UI	_[]	18	-1,259
Ass	19	Net assets or fi	und balan	ces at beginning of year (fr	om line 27, column (A)) (mus	t agree with end-c	of-year fig	gure reported	on prior year's return)	19	1,369,922
et	20	Other change	es in net	assets or fund balance	s (attach explanation)						20	
F Net ASSETS DENNY	21	Net assets or	r fund ba	lances at end of year	Combine lines 18 throug	h 20			>	<u> </u>	21	1,368,663
F	Part II Cash, s	Balanc	e She	ets. If Total assets on	line 25, column (B) are \$	2,500,000 o	r more	e, file Forr	n 990 instead	of Fo	rm 99	90-EZ
0			(See	the instructions for Par	t II)			(A) E	eginning of year			(B) End of year
$\overline{}_{22}$	Cash, s	avings, and in	nvestmei	nts					400,42	2	22	381,574
23	Land ar	nd buildings						1	,154,48	_	23	1,100,915
24	Other a	ssets (describ	e 🕨)				24	
25	Total as	ssets	_					1	,554,90	5	25	1,482,489
26	Total lia	abilities (desc	ribe 🕨	SEE STATE	MENT 4)		184,98	_	26	113,826
<u>2</u> 7	Net ass	ets or fund b	alances	(line 27 of column (B)	must agree with line 21)			1	,369,92	_	27	1,368,663
					see the Instructions fo							Form 990-EZ (2008)

Form 990-EZ (2008) ARLING	TON WOMAN'S CLUB	79	5-1158137		_	Page 2
Part III Statement of P	rogram Service Accomplishments	(See the instruc	tions for Part I	II.)	Ex	penses
What is the organization's primary e	xempt purpose?				Require	d for 501(c)(3)
TO PROVIDE EDUCATIONAL AN	D CHARITABLE ACTIVITIES.					rganizations
	ring out the organization's exempt purposes. It				and 4947	'(a)(1) trusts,
describe the services provided, the r	number of persons benefited, or other relevant	information for each	n program title		ptional	or others)
28 15 DÉPARTMENTS PROVIDI	NG EDUCATIONAL AND CHARITABLE				}	
ACTIVITIES FOR OVER 60	0 WOMEN					
				_		
(Grants \$) If this amount includes foreign grants, or	check here	<u> </u>	28a		89,383
29 DONATION TO LOCAL CHAR	ITIES				[
				İ		
28.4	64		_	<u> </u>		20 050
	64) If this amount includes foreign grants, o	check here		29a		39,950
30 AWARDED 8 COLLEGE SCHOOL	LARSHIPS			İ		
(Grants \$ 14,0	00) If this amount includes foreign grants, o	hack hara		☐ 30a		14,106
31 Other program services (attach s		neck nere		1 30a		14,100
(Grants \$) If this amount includes foreign grants, o	heck here	•	31a		53,568
32 Total program service expense		meek nere		▶ 32		197,007
	ectors, Trustees, and Key Employees. List e	ach one even if not	compensated (Sec		ctions fo	
		(b) Title and average	(c) Compensation	(d) Contrib	utions to	(e) Expense
(a)	Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee ben deferred com		account and other allowances
MARTHA STALLINGS	ARLINGTON	PRESIDENT	, ,			
1515 WEST ABRAM ST	TX 76013		o		اه	0
JAN SIMON	ARLINGTON	VICE PRESIDE				
1515 WEST ABRAM ST	TX 76013		0		o	0
BETH ANDERSON	ARLINGTON	RECORDING SE			ĺ	
1515 WEST ABRAM ST	TX 76013		0		o	0
CHARLENE VARDEMAN	ARLINGTON	TREASURER			-	
1515 WEST ABRAM ST	TX 76013		0		0	0
JOAN CLEMENS	ARLINGTON	CORR. SEC.			ŀ	
1515 WEST ABRAM ST	TX 76013		0		0	0
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DAA					Forn	n 990-EZ (2008)

P	art V Other Information (Note the statement requirements in the instructions for Part VI.)			age
			Yes	No
33.	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed			
	description of each activity	33		X
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		X
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			
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting,			
	and proxy tax requirements?	35a		X
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,"		1	
	complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr			
b	Did the organization file Form 1120-POL for this year?	37b		Х
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		Х
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations Enter			ĺ
а	Initiation fees and capital contributions included on line 9			1
b	Gross receipts, included on line 9, for public use of club facilities			1
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			İ
	section 4911 ▶, section 4912 ▶, section 4955 ▶			ĺ
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	į į		
	L, Part I	40ь		X
С	Enter amount of tax imposed on organization managers or disqualified persons during			
	the year under sections 4912, 4955, and 4958		1 1	
d	Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed NONE	[.00]		
42a	The books are in care of ▶ LAURIE TITTLE Telephone no	▶ 817-27	7-7	666
	1515 W. ABRAM ST	, , , , , , , , , , , , , , , , , , , ,	•	
	Located at ► ARLINGTON, TX ZIP + 4	▶ 76013		
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		Yes	No
	account)?	42b	103	X
	If "Yes," enter the name of the foreign country	720	\dashv	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.]	
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	Ì	х
•	If "Yes," enter the name of the foreign country	[420]		<u>~</u>
13	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			_
	and enter the amount of tax-exempt interest received or accrued during the tax year	43		
	and officer the difficulty of tax exempt interest received or accided during the tax year	43		
		٢	\overline{z}	
14	Did the organization maintain any donor advised funds? If "Vee " Form 000 must be secretable with a	r	Yes	No
	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			37
	Form 990-EZ	44		X
	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			7,
	"Yes," Form 990 must be completed instead of Form 990-EZ	45		<u>X</u> _
		Form 99 (J-EZ	(2008)

Pa	rt VI	Section 501(c)(3 and complete the		-	501(c)(3)	organizat	ions mu	st ansv	ver quest	ions 4	6–49)	
46	Did the c	organization engage in d			s on hehalf o	of or in opposi	ition to					Yes	No
τυ.		es for public office? If "\	•		3 On Bondin C	и от пт оррозі				ſ	46		X
47		organization engage in lo			dule C. Part	П				Ì	47		X
48		ganization operating a s					hedule F			ŀ	48		X
49a		organization make any ti				•	iicadic L			ŀ	49a		X
b		was the related organiz			ou organizat	OII				ŀ	49b		
50		e this table for the five h		•	an officers d	rectors truste	ees and ke	v emplo	ees) who				
	,	eived more than \$100,0						,, ср.с,					
			ss of each employee pair	d more		itle and average urs per week	(c) Comp		(d) Contributemployee benef			Expens	
		th	nan \$100,000 			oted to position			deferred compo			allowar	
NONE	,												
		·	·_ ·										
					-								
													
		 					L						
otal		f other employees paid e this table for the five h			<u> </u>								
		sation from the organiza	•	•				·					
		lame and address of each i	ndependent contractor p	aid more than \$100,000		(b)	Type of se	rvice		(c) Co	mpens	ation	
NOI	NE												
													
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T . 4 . 1				- 6400 000									
otai	number o	f other independent con	77		<u> </u>								
•	}	Under penalties of perjury and belief the rue, corfe											
Sign Here	- 1	Signature of officer	2 Stalling	<u></u>			Date						
1616		MARTHA Type or print name a	STAILING	s Presid	ent				-201	0_			
		Preparer's lon	61111	/		Date	/	heck if	Prepa	rer's Identif	ying Nun	ber (Se	e instr)
Paid	,	signature	14 Shelf			11/24	g e	nployed 🕨	X PO	0369			
	arer's	Firm's name (or yours	SHELTON,	MEAD & SHI	-	CPA'S			EIN	▶ 20	0 - 59	72	538
Jse	Only	if self-employed),		ABRAM STRI					Phone				
		address, and ZIP + 4	ARLINGTON	7, TX 760	10-110	3			no 🕨	817	-46	L - 5	551
May t	he IRS di	scuss this return with th	e preparer shown ab	ove? See instructions	s					<u>▶</u>	Ye		No
										For	m 990)-EZ	(2008)

SCHEDULE A

(Form 990 or 990-EZ)

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

Department of the Treasury Internal Revenue Service Name of the organization

ARLINGTON WOMAN'S CLUB

Employer identification number 75-1158137

Pi	art i	Rea	son for	Public Charity	y Status (All organization	is must	comple	te this	part.)	(see	ınstru	ctions)		
The	o <u>rg</u> a	nization is no	ot a private	foundation becau	use it is (Please check only one	organiza	tion)							
1		A church, c	onvention (of churches, or as	ssociation of churches described	ın sectio	n 170(b)(1)(A)(i).						
2	П)(A)(ii). (Attach Schedule E)									
3	П				vice organization described in se	ection 17	0(b)(1)(A)	(iii). (Att	ach Sch	nedule ł	- 1)			
4	П				ed in conjunction with a hospita							nosnital's nam	ie	
•	ш	city, and sta		gamaanon oporan	ou in conjunction with a nospita	. 400050	a III 300ti	J., ., o(.	5)(1)(<u>~</u>)(,		iospitai s nam	υ,	
5				ted for the benefit	of a college or university owner	d or oners	ited by a c	overnm	ental ur	ut desc	ribed in			
•	ш			v). (Complete Par	-	a or opere	ited by a g	jovenim	icintal ul	iii desc	ilbed iii			
6	\Box				governmental unit described in	section 1	70/5\/4\/	11/41						
7	Н			-	substantial part of its support f				frama th		الطنية المن	_		
•	Ш					ioni a go	/emmeme	ii uriit Oi	nom th	e gener	ai publi	iC .		
۰				70(b)(1)(A)(vi). (C		H N								
8	X		-		170(b)(1)(A)(vi). (Complete Par	•								
9	A				(1) more than 33 1/3 % of its su						_			
					mpt functions—subject to certain	•		•				S		
					and unrelated business taxable	•			x) from	busines	ses			
	\Box				30, 1975 See section 509(a)(2									
10	Н				exclusively to test for public sa									
11	Ш				exclusively for the benefit of, to	•				•				
					rted organizations described in s						section	n		
					the type of supporting organizar		•	nes 11e	through	11h				
	_	а Туре		b ∐ Type Ⅱ	c Type III-Function			d		e III–O				
е	\sqcup				ganization is not controlled direc									
		persons other	er than fou	ndation managers	s and other than one or more pu	iblicly sup	ported org	ganızatıd	ons desc	cribed in	n sectio	n		
		509(a)(1) or												
f		If the organiz	zation rece	ived a written det	ermination from the IRS that it is	s a Type I	, Type II,	or Type	III supp	orting				
		organization	, check this	s box										
g		Since Augus	st 17, 2006	, has the organiza	ation accepted any gift or contrib	oution fror	n any of tl	ne						
		following pe	rsons?											
		(i) A perso	n who dire	ctly or indirectly c	ontrols, either alone or together	with pers	ons descr	ibed in ((II)				Yes	No
		and (III)	below, the	governing body o	of the supported organization?							11g(ı)		
		(II) A family	member o	of a person descri	bed in (i) above?							11g(n)		
		(iii) A 35% d	controlled e	entity of a person	described in (i) or (ii) above?							11g(m		
h		Provide the	following ir	nformation about t	the organizations the organization	on suppor	ts					<u> </u>		
(i) N	lame	of supported		(ii) EIN	(III) Type of organization	(iv) Is the	organization	(v) Did	ou notify	(vii)	le the	(1,11) A==		
(, , .		nization		(, ב	(described on lines 1–9	1	sted in your		nization in	organizat	ls the tion in col	(VII) Am sup		
					above or IRC section		document?	٠.	of your	, -	zed in the			
					(see instructions))	<u> </u>		_	port?	U	S?			
			 			Yes	No	Yes	No	Yes	No			
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Part II 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 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Total. Add lines 1-3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 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) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 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 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 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions 18

Schedule A (Form 990 or 990-EZ) 2008

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Part III

Sec	ction A. Public Support						
Ca	alendar 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 include any "unusual grants")	81,130	213,659	63,049	197,068	214,455	769,361
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5	81,130	213,659	63,049	197,068	214,455	769,361
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
_	Add lines 7a and 7b						·····
8	Public support (Subtract line 7c from line 6)	81,130	213,659	63,049	197,068	214,455	760 761
Sec	tion B. Total Support	L		1			769,361
	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	81,130	213,659	63,049	197,068	214,455	769,361
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,667	3,199	9,182	7,074	14,913	36,035
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
Ċ	Add lines 10a and 10b	1,667	3,199	9,182	7,074	14,913	36,035
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	91,551	162 908	97 201	142 626	22 510	516 004
13	Total support. (Add lines 9, 10c, 11,	174,348	162,908 379,766	97,201 169,432	142,626 346,768	22,518 251,886	516,804
	and 12)	174,540	3/3,700	103,432	340,700	251,886	1,322,200
14	First five years. If the Form 990 is for the co	organization's first.	second, third, fourti	n. or fifth tax vear a	as a section 501(c		1,322,200
	organization, check this box and stop here		, , , , , , , , , , , , , , , , , , , ,	, , ,		,,,,,	▶ 🗆
Sec	tion C. Computation of Public Su	pport Percenta	ge				
15	Public support percentage for 2008 (line 8,	column (f) divided l	y line 13, column ((f))		15	58.1879 %
16	Public support percentage from 2007 Sche					16	52.9792 %
	tion D. Computation of Investmer						
17	Investment income percentage for 2008 (lin		•	olumn (f))		17	2.7254 %
18	Investment income percentage from 2007 \$					18	1.2296 %
19a	33 1/3 % support tests—2008. If the organ 17 is not more than 33 1/3 %, check this bo						▶ [X]
b	33 1/3 % support tests—2007. If the organ						~ A
	line 18 is not more than 33 1/3 %, check thi						▶ □
20	Private foundation. If the organization did						. FH
				•			

75-1158137

Page 4

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information (see instructions)

PART III, LINE 12 - OTHER INCOME DETAIL

PROGRAM SERVICE REVENUE

\$ 375,214

OTHER REVENUE

\$ 141,590

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

Identifying number

Name(s) shown on return

	ARLING	TON WOMAN	S CLUB					75-	-11:	8137
	ness or activity to which this form relates	TON								
	NDIRECT DEPRECIAT art I Election To Expe		norty Under Co	otion 170			<u> </u>			
F	Note: If you have				ייטע פ	com	nlete F	ert I		
1	Maximum amount See the instru				<u>c you</u>	COII	ipicie i	arti	1	250,000
2	Total cost of section 179 property								2	230,000
3	Threshold cost of section 179 pro	•	•	instructions)					3	800,000
4	Reduction in limitation Subtract I		*	•					4	
5	Dollar limitation for tax year Subtract li				atelv. se	ee instr	uctions		5	
	(a) Description			(b) Cost (busine				Elected cos	t	
6										
										1
7	Listed property Enter the amount	from line 29				7				
8	Total elected cost of section 179	property Add amour	nts in column (c), line	es 6 and 7	_		<u></u>		8	
9	Tentative deduction Enter the sm	aller of line 5 or line	8						9	
10	Carryover of disallowed deduction	from line 13 of your	2007 Form 4562						10	
11	Business income limitation Enter	the smaller of busin	ess income (not les	s than zero) o	r line 5	(see	nstructio	ns)	11	
12	Section 179 expense deduction A	Add lines 9 and 10, b	ut do not enter more	e than line 11	_				12	
13	Carryover of disallowed deduction			2		13		_		
~~~	e: Do not use Part II or Part III belov									
P							<u>ude list</u>	ed prop	erty	(See instructions)
14	Special depreciation allowance fo		other than listed pro	perty) placed	n servi	ice				
	during the tax year (see instruction	ns)							14	
15	Property subject to section 168(f)(	1) election							15	
16	Other depreciation (including ACF								16	24,631
Pa	art III MACRS Depreciat	ion (Do not incl			nstru	ction	ıs.)			
		<del></del>	Section						,	
17	MACRS deductions for assets pla								17	28,937
18	If you are electing to group any assets p								L	
	Section B—/	Assets Placed in Se				Gener	al Depre	ciation Sy	stem	<del>,</del>
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investme only-see instructi	nt use	1	(e) C	onvention	(f) Met	thod	(g) Depreciation deduction
19a	3-year property									
b	5-year property									
С	7-year property									
d	10-year property									
е	15-year property									
f	20-year property									
g	25-year property			25 y	s			S/L		
h	Residential rental			27 5	/rs	N	1M	S/L		
	property	<del></del> -	<u>-</u> .	27 5	rs	Λ	1M	S/L		
i	Nonresidential real			39 y	s	N	1M	S/L		
	property						1M	S/L		
		sets Placed in Serv	ice During 2008 Ta	x Year Using	the Alt	ternat	ve Depr	ciation S	ystem	)
	Class life							S/L		
	12-year			12 y	s			S/L		
	40-year			40 y	s	M	IM	S/L		
	rt IV Summary (See ins		<u> </u>							
1	Listed property Enter amount from								21	
2	Total Add amounts from line 12, li									
	Enter here and on the appropriate			corporations-	see <u>in</u>	str			22	53,568
3	For assets shown above and place	d in service during th	ne current year,							
	enter the portion of the basis attribu	utable to section 263	A costs			23				

### **Federal Statements**

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

Description		Amount
MEMBERSHIP DUES	\$_	111,463
TOTAL	\$	111,463

### Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description		Amount
INSURANCE PROCEEDS	\$	2,514
OFFICE INCOME		216
MISCELLENOUS REVENUE	<del></del>	30
TOTAL	\$	2,760

# Federal Statements

	Statement 3 - Fo	orm 990-EZ, Part I,	Line 10 - Gra	Statement 3 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid	ounts Paid	
Name and Address		Relationship to Organization	d uoi	Class of Activity	Date of Gift	
Description of Property	Cash Contribution	Noncash Contribution	Book Value	Book Value Explanation	FMV Explanation	Purpose
MIRACLE LEAGUE OF DFW	0		DON	DONATIONS		
1901 W RANDOL MILL RD	78,404					
ARLINGTON, TX 76012						
TOTAL	28,464					

### Statement 4 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
EXPENSES	\$
BANK CHARGES	
BUILDING & GROUNDS	23,558
CHRISTMAS OPEN HOUSE	346
FUNDRAISING	972
GENERAL MEETING EXPENSES	9,879
MISCELLANEOUS EXPENSES	825
NEW MEMBER ORIENTATION	39
NEWSLETTER	644
OPENING COFFEE EXPENSE	1,976
OPERATING EXPENSE	16,638
PHILANTROPY EXPENSE	11,486
PROGRAM & MEETING EXPENSE	3,378
YEARBOOKS	4,205
SCHOLARSHIP EXPENSES	106
PERSONAL PROPERTY TAX	27,552
PRESIDENT'S FUND	1,500
MILEAGE REIMBURSEMENT	159
TOTAL	\$ 103,271

### Statement 5 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	 Beginning of Year	End of Year
DEFERRED REVENUE PAYROLL LIABILITY ROUNDING	\$ 184,614 369	\$ 113,509 317
	 184,983	 113,826

## **Federal Statements**

### Statement 4 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
EXPENSES	\$
BANK CHARGES	8
BUILDING & GROUNDS	23,558
CHRISTMAS OPEN HOUSE	346
FUNDRAISING	972
GENERAL MEETING EXPENSES	9,879
MISCELLANEOUS EXPENSES	825
NEW MEMBER ORIENTATION	39
NEWSLETTER	644
OPENING COFFEE EXPENSE	1,976
OPERATING EXPENSE	16,638
PHILANTROPY EXPENSE	11,486
PROGRAM & MEETING EXPENSE	3,378
YEARBOOKS	4,205
SCHOLARSHIP EXPENSES	106
PERSONAL PROPERTY TAX	27,552
PRESIDENT'S FUND	1,500
MILEAGE REIMBURSEMENT	159
TOTAL	\$ 103,271

### Statement 5 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning End of of Year Year	
DEFERRED REVENUE PAYROLL LIABILITY ROUNDING	\$ 184,614 \$ 113, 369	509 317
	184,983 113,	826