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Form 990-EZ

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20 21 Part II

Expenses

Net Assets

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JSA 9E1008 3 000

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

2009

OMB No 1545-1150

Open to Public Inspection

			t of the Treasury	512(b)(13) must file Form 990. All other organizations with gross receipts less assets less than \$1,250,000 at the end of the year may use the The organization may have to use a copy of this return to satisfy state rep	ns form		al I	Open to Public Inspection	
4571				ar year, or tax year beginning , 2009	, 2009, and ending				
	⊃ ⊏	Check of applicable Please C Name of organization						dentification number	
	<u> </u>		print or	Number and street (or P O box, if mail is not delivered to street address)	Room/suite		54-2126 Telephone	*	
98	x		See	c/o P.O. Box 524	TOOTH SUITE		610-783		
37	-	Amen		City or town, state or country, and ZIP + 4			010-763	-5/12	
O AON SUVE THEFT	· Ŀ	return Applii pendi	cation tone	Valley Forge, PA 19481		F	Group Exe Number •		
		• S	ection 501(c)(3) o	rganizations and 4947(a)(1) nonexempt charitable trusts must attach	G Ac	counting	method 2	Cash Accrua	
				a completed Schedule A (Form 990 or 990-EZ).	Ot	her (spec	ıfy) 🕨		
\$				-	H Ch	eck 🕨	If the or	ganization is not	
MLAZ	1 1	I Website: ▶ require						dule B (Form 990,	
	<u>)</u>	Tax-exempt status (check only one) - X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527 990-EZ					or 990-PF)		
	K Check ▶ If the organization is not a section 509(a)(3) supporting organization and its gross receipts are no							an \$25,000 A	
	!	Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return							
	<u>L /</u>	Add line	s 5b, 6b, and 7b,	to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of For	m 990-EZ	▶ \$;	152,592	
	Pa	irt l	Revenue, E	xpenses, and Changes in Net Assets or Fund Balanc	es (See	the inst	ructions f	or Part I)	
	20	1	Contributions,	gifts, grants, and similar amounts received		. 1		450	
		2		ce revenue including government fees and contracts					
	ଟ୍ରେ	3		ues and assessments					
	\rightarrow	4	Investment inc	come		. 4		3,485	
	NOV	5 a		from sale of assets other than inventory					
	_	b	Less cost or o	ther basis and sales expenses					
	SCANNED	С		from sale of assets other than inventory (Subtract line 5b from line 5a)	· · · · <u>· · · · · · · · · · · · · · · </u>	5c		0	
	Z 2	6	Special events and	activities (complete applicable parts of Schedule G). If any amount is from gamling, check here	. ▶			-	
	₹ ×	а	Gross revenue	e (not including \$ of contributions		_			
4	lj lj		reported on lin	1 _ 1	148,65	57			
•	ഗ	b	Less direct ex	penses other than fundraising expenses 6b	70,73	19			
		С	Net income or	(loss) from special events and activities (Subtract line 6b from line 6a)		6c		77,938	
				inventory, less returns and allowances					
				oods sold 7b			-		
l				(loss) from sales of inventory (Subtract line 7b from line 7a)	_	7c		0	
		8		(describe ▶) 8			
		9		e. Add lines 1 2 3 4 5c 6c 7c and 8		- <u>`</u>	1	81.873	

		Number · · · ►						
ach G Accour	nting r							
Other (specify)								
H Check ▶ if the organization is not								
required to attach Schedule B (Form 990,								
or 527 990-EZ	, or 99	0-PF)						
	nally n	ot more than \$25,000 A						
return, be sure to file a co								
· · · · · · · · · · · · · · · · · · ·	▶ \$	152,592						
Balances (See the	instr	uctions for Part I)						
	1	450						
	2							
	3							
	4	3,485						
]							
5a) <u></u> .	5c	0						
k here ▶	}	_						
	İ							
148,657]							
70,719								
6a) _.	6c	77,938						
	7c	0						
)	8							
<u></u>	9	81,873						
	10	49,735						
	11							
	12							
	13							
	14							
	15							
)	16	14,716						
··	17	64,451						
	18	17,422						
agree with								
	19	298,081						
	20							
<u></u> ▶	21	315,503						
	nore, file Form 990 instead of Form 990-EZ							
(A) Beginning of year (B) End of year								

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

Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8

Salaries, other compensation, and employee benefits

Printing, publications, postage, and shipping

Excess or (deficit) for the year (Subtract line 17 from Iner97.

Other changes in net assets or fund balances (attach explanation) ப

(See the instructions for Part) 5 LEN

Net assets or fund balances (line 27 of column (B) must agree with line 21)

end-of-year figure reported on prior year's return)

Professional fees and other payments to independent contractors

Occupancy, rent, utilities, and maintenance

Other expenses (describe ▶ Schedule Bx

Total expenses. Add lines 10 through 16

Other assets (describe Due from PVCMA

Cash, savings, and investments

Total assets

Total liabilities (describe

Land and buildings

Grants and similar amounts paid (attach schedule)

Net assets or fund balances at beginning of wear (from the 27 ealugh (A)) (must agree wi

Balance Sheets. If Total assets on line-25 column (B) are \$1,250,000 or more, file

23

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294,931 22

3,150

298,081

298,081

Form 990-EZ (2009)

315,503

315,503

315,503

1 OIII 990-E.C (2009)					
Part III Statement of Program Service Accomplishme	ents (See the instruct	ions for Part III.)			penses for section
What is the organization's primary exempt purpose? See Schedu	ite x	- 	_	501(c)(3)	and 501(c)(4) ons and section
Describe what was achieved in carrying out the organization's exe				4947(a)(1) trusts, optional
describe the services provided, the number of persons benefited, and	other relevant information	tor each program til	le.	for others.)
28					
(Grants \$) If this amount include	s foreign grants, check her	e ▶	28a	ļ	
29				ŀ	
			I		
(Grants \$) If this amount include	s foreign grants, check her	e	29a		
30					
(Grants \$) If this amount include	s foreign grants, check her	e ▶	30a		
31 Other program services (attach schedule)			<u> </u>		
	s foreign grants, check her		31a		
32 Total program service expenses (add lines 28a through 31a)					0
Part IV List of Officers, Directors, Trustees, and Key Emplo	yees. List each one ever	if not compensated.	(See the in	structions	for Part IV.)
(a) Name and address	(b) Title and average hours per week	(c) Compensation (if not paid,		ibutions to enefit plans &	(e) Expense account and
(a) Name and address	devoted to position	enter -0)		ompensation	other allowances
Janine Budzius	President				-
	1	0		0	0
Rob Anen	Vice President				
	1	0		0	0
Zenard Mikulski, Jr.	Secretary				
	1	0		0	0
Kent Silhanek	Treasurer				
	1	0		0	0
				_	
	-				
		_			
	-				

Part	Other Information (Note the statement requirements in the instructions for Part V)			
			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	ŀ	х
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of			
	the changes	34	}	х
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but	97.34	200	1700
	not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T	是是	53	
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section	144 -152	779 -00	10 3 m
	6033(e) notice, reporting, and proxy tax requirements?	35a		x
h	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	×	<u> </u>
36	Did the organization undergo a liquidation, dissolution, termination, or significant dosposition of net assets	335		
	during the year? If "Yes," complete applicable parts of Schedule N	36		x
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a	泽德	250	400134
b b	Did the community of the France A400 DOL for this work	37b	rates	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	137.54	<u>देशकी</u>	2000
J0 a	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	13. A.	X 2.05278
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	308	15.95 E	565
39	Section 501(c)(7) organizations Enter			
	A CONTRACTOR OF THE CONTRACTOR		1, ^5, J	
a b	Initiation fees and capital contributions included on line 9	1333		
	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
40 a	section 4911 ▶, section 4912 ▶, section 4955 ▶			
b	Section 4917, section 4912, section 4933, section 4918 excess benefit	34		
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified	TARES.		ET LA
	person in a prior year, and that the transaction has not been reported on any of the organization's prior			ļ
	Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40ь		x
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on	3.2T	ALC: N	3424
_	organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c			
	reimbursed by the organization 0			
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e	\$35 / 08	X eringana
41	List the states with which a copy of this return is filed ▶ None	400		
	The organization's books are in care of ▶ Kent Silhanek Telephone no ▶ 215-233	-390	1	
	Located at Whitemarsh Valley Country Club ZIP+4 ▶ 19444-1	100	• • • • • • • • • • • • • • • • • • • •	•
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	ſ	Yes	No
	account)?	42b		x
	If "Yes," enter the name of the foreign county ▶	236	3.2	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreing Bank		5 (1) T	
	and Financial Accounts.	3 d.		
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		X
	If "Yes," enter the name of the foreign country ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		. ▶	
	and enter the amount of tax-exempt interest received or accrued during the tax year ► 43			——— ———
		-		
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	3 TO	透览	120
	Form 990-EZ	44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			14.63
	"Yes," Form 990 must be completed instead of Form 990-EZ	45	<u>_</u> _	<u> </u>
		000		

Part V	Section 501(c)(3) organizations and section 4947 and complete the tables for lines 50 and	7(a)(1) nonexempt cha	exempt charita ritable trusts mu	ble trusts only. A st answer question	All se	ction 6-49b)
46	Did the organization engage in direct or indirect j	political campaign activiti	es on behalf of o	r in opposition to		Yes	No
	candidates for public office? If "Yes," complete Schedule C, Part I						х
47	Did the organization engage in lobbying activities?	If "Yes," complete Schedu	ıle C, Part II		47		х
	Is the organization a school as described in section				48		x
	Did the organization make any transfers to an exe				49a		х
	If "Yes," was the related organization a section 527				49b		×
50	Complete this table for the organization's five high employees) who each received more than \$100,00	nest compensated emplo	yees (other than	officers, directors,			d key
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	acc	Expens ount an allowar	nd
							
	(a) Name and address of each independent contractor paid		ne " (b) Type	of service ((c) Com	pensati	on
		· · · · · · · · · · · · · · · · · · ·	-				
· d 1	otal number of other independent contractors rec	eiving over \$100,000	▶	l			
Sign Here	Under penalties of perjury, I declare that I have examined and belief, it is true correct, and complete destaration of Signature of officer	f preparer (other than officer) is ba					
	Type or print name and title	Sute		· · · · · · · · · · · · · · · · · · ·			
Paid Prepare	Preparer's signature	Date 10-39-7	- 10p.0y00 r	Preparer's identifying nu	135		bons)
Use Onl	I Firm's name (or NSTEVEN 1) Files) Box 524, Valley For	ge, PA 1948 Pm				
May the	IRS discuss this return with the preparer shown al				x Yes		No
					m 990		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047
2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Philadelphia Club Foundation, Inc. 54-2126977 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations, described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) No Yes and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? |11g(jui) Provide the following information about the supported organization(s) (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section governing document? (i) organized in the col (i) of your (see instructions)) support? US? No Yes Yes Yes No

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

Schedule A (Form 990 or 990-EZ) 2009

0

Total

0

Schedule A (Form 990 or 990-EZ) 2009 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support (d) 2008 (e) 2009 (a) 2005 (b) 2006 (c) 2007 (f) Total Calendar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received (Do not 3,375 2,275 2,200 8,075 450 16,375 include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on The value of services or facilities furnished by a governmental unit to the organization without charge 2,200 2,275 8,075 $3, \overline{375}$ 450 16,375 Total. Add lines 1 through 3. TAC XX The portion of total contributions by each 14 (4) to person (other than a governmental unit or مبدر publicly supported organization) included 是是 on line 1 that exceeds 2% of the amount Profiles shown on line 11, column (f). 16,375 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 3,375 2,200 2,275 8,075 450 16,375 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar 2,687 5,031 8,296 10,183 3,485 29,682 9 Net income from unrelated business activities, whether or not the business is 0 regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 . . 46,057 11 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 35.5538 % Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 16a 331/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop** here. The organization qualifies as a publicly supported organization ▶ b 331/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, 17a 10%-facts-and-circumstances test - 2009. 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

b 10%-facts-and-circumstances test - 2008. 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions	 		<u> </u>	▶
		 		000 000 57) 0000

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

Sec	tion A. Public Support						
C	alendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include						
	any "unusual grants ")						0
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						0
3	Gross receipts from activities that are not an					, , , , , ,	
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						0
5	The value of services or facilities						
•	furnished by a governmental unit to the					}	
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7 a	Amounts included on lines 1, 2, and 3						
b	received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified						0
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13						0
_	for the year	0	0	0	0	0	
8	Public support (Subtract line 7c from						
	line 6)						0
	tion B. Total Support			4 3 0 0 0 7			
Ca	alendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
ıva	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less					1	
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income Do not include gain or						
	loss from the sale of capital assets	İ		1	ļ	[
	(Explain in Part IV)						0
13	Total support. (Add lines 9, 10c, 11,	0	0	0	0	0	0
	and 12)						0
14	First five years. If the Form 990 is for organization, check this box and stop here.						
Sec	tion C. Computation of Public Sup				<u> </u>	• • • • • • • • • • • • • • • • • • • •	
15	Public support percentage for 2009 (line 8,			n (f))		15	0.0000 %
16	Public support percentage from 2008 Sche					16	%
	tion D. Computation of Investmen			<u> </u>			
17	Investment income percentage for 2009 (lin			3. column (fl)		17	0.0000 %
18	Investment income percentage from 2008 S					18	%
	33 1/3% support tests - 2009. If the or						
b	17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and						
	line 18 is not more than 331/3 %, check				•		
20	Private foundation. If the organization of		•	•		•	—
ISA							

Schedule Ax- Scholarships and Donations

December 31, 2009

Form 990-EZ Line 10

Make a Wish Foundation	16,000
National Club Foundation	5,000
National Capital Association	1,000
Subtotal Donations	22,000
Intern Scholarship	5,000
BMI Scholarships	12,735
Dan Layman Scholarship	5,000
University of Delaware Scholarship	5,000
Subtotal Scholarships	27,735
Total:	<u>\$ 49,735</u>

Schedule Bx- Other Expenses

December 31, 2009

Line 17: Other Expenses:

	\$ 14,716
Printing, Paper & Postage	450
Student Chapter Support	4,000
Student Conference	417
Insurance	1,225
Education Expense	8,624

Philadelphia Club Foundation, Inc. Schedule X

PURPOS

Section 1.1. PURPOSE. The purpose of Philadelphia Club Foundation, Inc. (the "Corporation" shall be: (i_ to host an annual golf tournament sponsored by the Philadelphia and New Jersey Chapters of the Club Managers Association of America in order to raise funds for Make-A-Wish Foundation and other charitable organizations; (ii) to financially support educational programs for members of the Philadelphia Chapter of the Club Managers Association of America who are working as Club Managers and Assistant Managers in order to further the Club Management profession through continuing educational programs; (iii) to provide financial assistance to students interested in the club and/or hospitality field and students enrolled in two or four year hospitality education programs; and (iv) to promote the club management profession through academic programs offered by community colleges, trade schools, culinary schools and universities, both in Pennsylvania and in other states.