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Department of the Treasury Internal Revenue Service

#### **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)

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

OMB No 1545-0047 2009 Open to Public Inspection

<u>A</u>	For the 200	9 calendar y	ear, or tax year beginning , and ending				
В	Check if applica		C Name of organization			D Employ	yer identification number
	Address change	e use IRS	W & S SOCIAL CLUB, INC.				
	Name change	print or	Doing Business As			63-	08968 <u>51</u>
	Marie Grange	type.	Number and street (or P O box if mail is not delivered to street address)	R	toom/suite	E Telepho	one number
	Initial return	See	1601 RIVER RO DRIVE			205	-799-5 <u>757</u>
	Termination	Specific	City or town, state or country, and ZIP + 4		····	G Gross recei	
	Amended return	Instruc- n tions.	TUSCALOOSAAL_ 35406		ŀ	0 01033 1000	
	Milifilinen iernii					11/42 (- 15	
	Application pen	iding	e and address of principal officer				group return for
			IFTON J. DORSEY, SR.			affiliates H(b) Are all a	affiliates
			01 RIVER RO DRIVE			included	Yes No
			SCALOOSA AL 35406			If "No,"	attach a list (see instructions)
<u></u>	Tax-exempt	statusX	501(c) ( 7 ) ◀ (insert no ) 4947(a)(1) or 527				
J	Website:	N/A				H(c) Group e	exemption number
ĸ	Type of organi	zation X Co	poration Trust Association Other	L Year	r of formation 1	984	<b>M</b> State of legal domicile $AL$
_	Part I	Summa					
			ne organization's mission or most significant activities				
		=	- · · · · · · · · · · · · · · · · · · ·				
ø	) >	OCIAL C.	LUB - DRINKING PLACE				
Ĕ	1						
Ę.							
Apprities & Governance	2 Che	ck this box	if the organization discontinued its operations or disposed of more tha	an 25% of	its net assets		
Ğ	3 Num		members of the governing body (Part VI, line 1a)	an 2070 O	No rici doccio	3	
Š.	3 Null	-					
Ē	4 Num		endent voting members of the governing body (Part VI, line 1b)			4	<del></del>
ě	5 Tota		employees (Part V, line 2a)			5	<del></del>
2	6 Tota	al number of	volunteers (estimate if necessary)			6	
	7a lota	al gross unrel	ated business revenue from Part VIII, column (C), line 12			7a	
RECOMPLED TO THE	b Net	unrelated bu	siness taxable income from Form 990-T, line 34			7b	Ō
ÿ				Pπor Yea	r	Current Year	
S	8 Con	tributions and	d grants (Part VIII, line 1h)				
Q.	9 Proc	aram service	revenue (Part VIII, line 2g)	142	2,510	146,687	
9	10 Inve	-	ne (Part VIII, column (A), lines 3, 4, and 7d)		7 3 2 3	2.07.001	
8	44 Oth			<b>—</b>	<del></del>	17	63
	1		Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	1 4 /		
			add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<del></del>	142	2,527	146,750
	13 Gran	nts and simila	ar amounts paid (Part IX, column (A), lines 1–3)				
	14 Ben	efits paid to o	or for members (Part IX, column (A), lines 1–3)  RECENT				
S	15 Sala	aries, other co	ompensation, employee benefits (Part IX, column (Axilines 5-10)				
Se	16a Prof		157	10 16	7		
Expenses	h Tota		draising fees (Part IX, column (A), line 11e)	20 Tr	<del></del>		
X	47 Oth	_	(Part IX, column (A), lines 11a–11d, 11f–24f)	ă	2/ 130	9,494	148,024
	1, 000	•	1 (1111-1111-11111-11111-11111-11111-11111-1111	7	130	9,494	
	1	•	Add lines 13–17 (must equal Part IX, column (A), line 26)	$\cup \cup \vdash$			148,024
	19 Rev	<u>enue less ex</u>	penses Subtract line 18 from line 12			3,033	
õ	<u> </u>			- ⊢'	Beginning of Cur		End of Year
Set	<b>20</b> Tota	al assets (Pai				3,957	7,683
Ä.	21 Tota	al liabilities (P	art X, line 26)	_		1,700	1,700
Net Assets or	22 Net	assets or fur	d balances Subtract line 21 from line 20		<u></u>	7,257	<u>5,9</u> 83
	art II	Signatu	re Block				
			ties of perjury, I declare that I have examined this return, including accompanying sched	dules and s	statements, and	to the best of	my knowledge
			is true, correct, and complete. Declaration of preparer (other than officer) is based on a				
Sig	<b>1</b> 0	//	ila a la la sa				
	-		1 "				
He	re	1.	re of officer /	DOTD		Date	מ
		ı <b>—</b> —		RESID	FN I	3-15-11	/
		Type or	print name and title				
		Preparer's	A) los Da	ate,	Check	f	Preparer's identifying number
Pa	id	signature	Milliant. Nowting 3	19/10	self- employe	ad be	(see instructions) P00037759
Pr	eparer's		DOWLING & COMPANY, PC	1 1116	employ	<del></del>	1 100031133
	e Only	Firm's name	DO DOY 2402			EIN D	
_		if self-emplo				Phone	005 ===
		address, an	10501100011, AB 33403			no 🕨	205-758-7000
Ma	y the IRS di	iscuss this re	turn with the preparer shown above? (see instructions)				Yes No
		ct and Pape	rwork Reduction Act Notice, see the separate instructions.				Form <b>990</b> (2009)
DAA	٠ -						= = = (= 55)

		& S SOCIAL CLUB		090001		Pag	ge ∡
1	Bnefly describe	tement of Program Service the organization's mission					
S	SOCIAL CI	LUB - DRINKING PI	JACE				
2		cation undertake any significant pro	ogram services during the year which were not list	ed on	Yes	×	No.
_	If "Yes," descri	be these new services on Schedu			162	77	NO
3	services?		significant changes in how it conducts, any progra	m	Yes	Χ	No
4		be these changes on Schedule O xempt purpose achievements for e	each of the organization's three largest program so	ervices by expenses			
	Section 501(c)	(3) and 501(c)(4) organizations an	d section 4947(a)(1) trusts are required to report tended				
42	(Code	) (Expenses \$		\ /Payanya @			
44	(Code	) (Expenses \$	including grants of \$	) (Revenue \$			)
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$			)
			, ,				
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$			)
			· · · · · · · · · · · · · · · · · · ·				
4d	Other program (Expenses \$	services (Describe in Schedule C		evenue \$	)		
4e		service expenses >	148,024				

## Part IV Checklist of Required Schedules

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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 I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		L
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	5		
6	Did the organization maintain any donor advised funds or any similar funds or 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	6		_X
7	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 II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
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	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Х	— <u> </u>
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		'	1 1
_	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
•	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
-	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			1
_	Schedule D, Parts XI, XII, and XIII	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
t4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
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	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			<b> </b>
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	_17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			,,
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	_18_		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	4.5		,,
20	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	000	X (2000)

### Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21		_ X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 29 if "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		_ X_
24a	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 lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		_X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	Ì		
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	256		
26	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	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	26	1	Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		
.,	substantial contributor, or a grant selection committee member, or to a person related to such an individual?		}	
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			<u> </u>
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? 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		Χ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	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			l "
22	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u>X</u>
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	22		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		<u>X</u>
J- <b>T</b>	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	<del></del>		
	Schedule R, Part V, line 2	35		_X
36	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		
37	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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38		_X_
		Form	. จจก	(200a)

Pa	IT V Statements Regarding Other IRS Filings and Tax Compliance			<del></del> 1	
4-	Fater the gureless secreted in Day 2 of Farm 4000. Appeal Commence and Taxas (Wall of	1		Yes	No
та	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	4-			
<b>L</b>	U.S. Information Returns Enter -0- if not applicable	1a	_		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	[ 1b ]			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report gaming (gambling) winnings to prize winners?	lable			v
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1	1c	-	X
Za	Statements, filed for the calendar year ending with or within the year covered by this return	2a		[	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns'	· · · · · · · · · · · · · · · · · · ·	┤ᇵ		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	•	2b		
	instructions)		1		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	N/	1	[	
-	this return?	,	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		Λ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other aut	hority	135		
•••	over, a financial account in a foreign country (such as a bank account, securities account, or other financial				
	account)?		4a		Χ
b	If "Yes," enter the name of the foreign country		144		- 21
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Ba	nk			
	and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	1?	5b	-	X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regards				
	Prohibited Tax Shelter Transaction?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	organization solicit any contributions that were not tax deductible?		6a		Χ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or			
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goo	ds			
	and services provided to the payor?		7a		
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 was				
	required to file Form 8282?		7c		
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 pers	onal			
_	benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	>	7f		_
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	<b>3</b>			
8	required?  Spendaring organizations maintaining departed funds and coation 500(a)(2) and action		7h		
0	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				
	organization, have excess business holdings at any time during the year?			1	
9	Sponsoring organizations maintaining donor advised funds.		8		
a	Did the organization make any taxable distributions under section 4966?				
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9a		
10	Section 501(c)(7) organizations. Enter		9b		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-		
1	Section 501(c)(12) organizations. Enter		┥ !		
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		┪ :		
	amounts due or received from them )	116			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	126			

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management				
		1 . 1	<del></del>	Yes	No
1a	Enter the number of voting members of the governing body	1a			
ь	Enter the number of voting members that are independent	1b	<b>─</b> ─┤		
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	├—	<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct				v
4	supervision of officers, directors or trustees, or key employees to a management company or other person?	40	3	<del></del>	X
4 5	Did the organization make any significant changes to its organizational documents since the prior Form 990 was file	u /	5	<u> </u>	X
6	Did the organization become aware during the year of a material diversion of the organization's assets?  Does the organization have members or stockholders?		6		X
7a	Does the organization have members of stockholders, or other persons who may elect one or more members		•	<del>                                     </del>	Δ_
, a	of the governing body?		7a		Х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7a 7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		"		<u> </u>
	the year by the following		ł		
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	X	_
9	Is there any officer, director, 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		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the In	ternal			
	renue Code.)				
				Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		10a		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?		10b		<u></u>
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the				
	form?		11		X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990				L
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			ł	
	rise to conflicts?		12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"				
40	describe in Schedule O how this is done		12c		177
13	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?		13		X
14 15	Did the process for determining compensation of the following persons include a review and approval by		14		X
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		46-		<sub>V</sub>
h	Other officers or key employees of the organization		15a		X
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )		15b		<u> </u>
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	1	Х
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate		100	<del> </del>	<u> </u>
	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		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶ None				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s or	nly)			
	available for public inspection. Indicate how you make these available. Check all that apply				
	Own website Another's website Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interesting the source of the conflict of the con	st			
	policy, and financial 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 ► CLIFTON J.DORSEY, SR 1601 RIVER RO DRIV				
	JSCALOOSA AL 354	06	<u> 205-79</u>	9-5	757

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- 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 organizations
- 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

X Check this box if the organization did not compensate any current officer, director, or trustee (A) (B) (C) (E) (F) Name and Title Average Position (check all that apply) Reportable Estimated Reportable hours per compensation compensation amount of institutional trustee Key employee ndıvıdual trustee from from related other organizations compensation organization (W-2/1099-MISC) from the compensated (W-2/1099-MISC) organization and related organizations CLIFTON J. DORSEY. PRESIDENT 0 0 RODNEY KING SECRETARY 0 0

042408 03/09/2010 3 18 PM Form 990 (2009). W & S SOCIAL CLUB, INC. 63-0896851 Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C) (D) Reportable (F) Estimated (E) Name and Title Average Position (check all that apply) Reportable

		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	com fi org an	nount other opensa rom th janiza d rela anizat	ation ne tion ted	
													-	
												<u> </u>		
														_
	·													
											<del>.</del>			
											_			
	-													
1b To	otal otal number of individuals (inc	luding but not lim	uted	to the	ose I	ısted	abo	<b>▶</b> ve) v	who received more than \$1	00,000 in				
re	portable compensation from t	he organization	<u> </u>	0									Yes	No
3 Die	d the organization list any <b>for</b> mployee on line 1a? If "Yes," o	mer officer, direc	tor o	r trus	stee, uch ii	key	emp dual	loye	e, or highest compensated			3	163	X
4 Fo	or any individual listed on line e organization and related org	1a, is the sum of	repo	rtab	le co	mpe	nsati	ion a						
5 Dr	dividual id any person listed on line 1a											4	_	X
	ervices rendered to the organi n B. Independent Contracto		comp	lete	Sche	edule	e J fo	r su	ch person			5		X
1 Co	omplete this table for your five	highest comper ation	sate	d ind	eper	nden	t cor	ntrac	tors that received more than	n \$100,000 of				_
(A) Name and business address Description of services									Com	(C) ipensati	on			
		-												-
	otal number of independent co					uted	to th	ose	listed above) who received			0		

Form **990** (2009)

DAA

Pa	rt V	III Stateme	nt of Reve	nue						1 090 0
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
रा र	1a	Federated campa	nans	1a				TOVERIDE		012, 013, 01 314
Contributions, gifts, grants and other similar amounts	b	Membership dues	-	1b						
₽,E	c	Fundraising event		1c						
ifts ar a	4	Related organizat		1d						
9,E	•	Government grants (con		1e						
Sii	•			16						
ig E	'	All other contributions, gi and similar amounts not		4.5						
텵	_	Noncash contributions in	1	1f	<u> </u>					
äÖ	9	Total. Add lines 1			\$					
		Total. Add lines i	ia-11			Busn. Code				<del> </del>
ā	22	D===== C=	B			Busn. Code	103,585	103,585		<del>                                     </del>
Ě	2a b		ervice Reve	nue			43,102	103,363		42 102
9		MEMBERSHIE	5 DOF2				43,102			43,102
٦	د					<u> </u>				<del> </del>
Š	d					<del> </del>				<del> </del>
grar	e	All other program								<del>                                     </del>
Program Service Revenue		All other program		ue		<b>—</b>	146,687			<del></del>
_		Total. Add lines 2 Investment incom			la interna		140,007			<del>                                     </del>
	3		_	ivident	is, interes	t, and				
	4	other similar amou		0.V0.m0	t band are					
	4	Income from inves	siment or tax-	exemp	t bond pro	ceeds				<del> </del>
	5	Royalties	(ı) Real		/u\ E	Personal				<del></del>
	6-	Gross Rents	(I) Neal		(11) F	ersonar				
		Less rental exps						Į.		
	_	Rental inc or (loss)	os (1000)							
	d 7a	Net rental income Gross amount from	(i) Securities			Other	·			
		sales of assets	(i) Securities	,	""	Other				
	h	other than inventory			<del>                                     </del>					
	D	Less cost or other								
	_	basis & sales exps			<del> </del>					1
		Gain or (loss)		-	1					
		Net gain or (loss)		. 1						
ne	oa	Gross income from f	iuliuraisiliy eveli	ıs						
Other Revenu		(not including \$ of contributions repo	orted on line 1e)	į						
Re		See Part IV, line 18	nted on line 1c)	ا ا		:				
her		Less direct exper	200	a b						
₹		Net income or (los		- 1	ovente					
		Gross income from g		- 1	CVEIIIS					
	Ja	See Part IV, line 19	garning donvides	a						
	h	Less direct exper	nses	ь						
		Net income or (los		- 1	vities					+
		Gross sales of inv	· -	ig acti	villes		-			
		returns and allowa		а						
	h	Less cost of good		ь						
		Net income or (los		~ (	entory					
			neous Revenue		y	Busn. Code				<del>                                     </del>
	11a	SALES TAX D			,		63			63
	b	UMBED TAX D					33			0.5
	C					<del> </del>				<del>                                     </del>
	d	All other revenue				· · · · · ·				<del> </del>
	e	Total. Add lines 1	11a-11d				63			<del>                                     </del>
	12	Total Revenue.		ıs			146,750	103,585	1	43,165
					· ·		210,700	100,000	· · · · · · · · · · · · · · · · · · ·	Form 990 (2009)

#### Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must				
	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				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				1
_	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	•		-		
c d	Accounting Lobbying				
a e	Professional fundraising services See Part IV, line 17				
f	Investment management fees			····	
g	Other	147,680	147,680		<del>                                     </del>
12	Advertising and promotion	117,000	147,000		
13	Office expenses				
14	Information technology		-		
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	· · · · · · · · · · · · · · · · · · ·			
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	344	344		
23	Insurance				
	011				
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 )				1
_	on total expenses shown on line 25 below )			<u> </u>	
a b				·	
C		•			
d		<del></del>			<del></del>
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	148,024	148,024		
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				

	ırt X	Balance Sheet		(A)		(B)
				Beginning of year		End of year
	1	Cash—non-interest bearing		2,616	1	5,022
- 1	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, tru	ustees, key		i	
		employees, and highest compensated employees Comple	ete Part II of			
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined un	nder section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B				
		Part II of Schedule L		_ 6	<del></del>	
Assets	7	Notes and loans receivable, net			7	<del></del>
SS	8	Inventories for sale or use		5,136	8	1,800
⋖	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment cost or				
		other basis Complete Part VI of Schedule D	10a 2,497 10b 1,636	7)		
	b	Less accumulated depreciation	106 1,636	1,205	10c	861
	11	Investments—publicly traded securities		11		
	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			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,957	16	<u>7,683</u>	
	17	Accounts payable and accrued expenses		17		
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
Sa	21	Escrow or custodial account liability Complete Part IV of S	Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees	s, key			
ъ		employees, highest compensated employees, and disqua	lified			
Li		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third p	parties		23	
	24	Unsecured notes and loans payable to unrelated third part	ties		24	
	25	Other liabilities Complete Part X of Schedule D		1,700	25	1,700
	26	Total liabilities. Add lines 17 through 25	<del></del>	1,700	26	1,700
ရွ		Organizations that follow SFAS 117, check here ▶	and			
Balances		complete lines 27 through 29, and lines 33 and 34.				
la	27	Unrestricted net assets			27	
ä	28	Temporarily restricted net assets	<u> </u>	28		
nd	29	Permanently restricted net assets			29	
F.		Organizations that do not follow SFAS 117, check her				
Net Assets or Fund		and complete lines 30 through 34.				
ts	30	Capital stock or trust principal, or current funds		30		
Se	31	Paid-in or capital surplus, or land, building, or equipment f			31	
As	32	Retained earnings, endowment, accumulated income, or o	other funds	7,257	32	5 <b>,</b> 983
et	33	Total net assets or fund balances		7,257	33	5,983
Z	34	Total liabilities and net assets/fund balances		8,957	34	7,683

Form **990** (2009)

Form 990 (2009) W & S SOCIAL CLUB, INC.

Part XI Financial Statements and Reporting

			Yes	No			
1	Accounting method used to prepare the Form 990 X Cash Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in						
	Schedule O						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Χ			
b	Were the organization's financial statements audited by an independent accountant?	2b		X			
С	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of						
	the audit, review, or compilation of its financial statements and selection of an independent accountant?						
	If the organization changed either its oversight process or selection process during the tax year, explain in						
	Schedule O	]		ı			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			1			
	issued on a consolidated basis, separate basis, or both			1			
	Separate basis Consolidated basis Both consolidated and separate basis			1			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			1			
	the Single Audit Act and OMB Circular A-133?	3a		1			
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the						
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		ı			

Form **990** (2009)

#### SCHEDÜLE D (Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

lame	of the organization		Employe	r identification number
W	& S SOCIAL CLUB, INC		63-0	896851
Pa	rt I Organizations Maintaining Donor Advised Fun	ds or Other Similar Funds or Ac		
	the organization answered "Yes" to Form 990, P	Part IV, line 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 (dunng year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that the	ne assets held in donor advised	_	
	funds are the organization's property, subject to the organization's exclus	ive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in wi	riting that grant funds can be		
	used only for charitable purposes and not for the benefit of the donor or d	onor advisor, or for any other		
	purpose conferring impermissible private benefit?			Yes No
Pa	rt II Conservation Easements. Complete if the orga	nization answered "Yes" to Form	990, P	art IV, line 7
1	Purpose(s) of conservation easements held by the organization (check at	l that apply)		
	Preservation of land for public use (e g , recreation or pleasure)	Preservation of an historically impo	rtant land	d area
	Protection of natural habitat	Preservation of certified historic str	ucture	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conserva	ation contribution in the form of a conservati	on	
	easement on the last day of the tax year		·	
				Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic structure include	led in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06		2d	
3	Number of conservation easements modified, transferred, released, extin	iguished, or terminated by the organization of	during	
	the taxable year			
4	Number of states where property subject to conservation easement is loc	cated ►		
5	Does the organization have a written policy regarding the periodic monito	ring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?			_ Yes _ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	g conservation easements during the year		
	<b>-</b>			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing con-	nservation easements during the year		
	<b>▶</b> \$			
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section		
_	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ı)?		_	. Yes No
9	In Part XIV, describe how the organization reports conservation easemen	•		
	balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements	ganization's financial statements that descri	bes	
D <sub>2</sub>	rt III Organizations Maintaining Collections of Art,	Historical Treasures or Other Si	milar /	\eente
· a	Complete if the organization answered "Yes" to		iiiiiai <i>i</i>	135Cl3.
12	If the organization elected, as permitted under SFAS 116, not to report in	<del></del>	orks of	
ıa	art, historical treasures, or other similar assets held for public exhibition,			e
	provide, in Part XIV, the text of the footnote to its financial statements tha	· ·		<b>C</b> ,
h	If the organization elected, as permitted under SFAS 116, to report in its i		s of art	
~	historical treasures, or other similar assets held for public exhibition, educ		•	
	provide the following amounts relating to these items	or resource in tartificialise of public s		
	(i) Revenues included in Form 990, Part VIII, line 1			· \$
	(ii) Assets included in Form 990, Part X			· •
2	If the organization received or held works of art, historical treasures, or of	ther similar assets for financial dain, provide	the	·
-	following amounts required to be reported under SFAS 116 relating to the	• ''		
а	Revenues included in Form 990. Part VIII. line 1		•	· \$

**b** Assets included in Form 990, Part X

Schedule D (Form 990) 2009

63

636

497

d Equipment

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Other

1,700

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

organization's liability for uncertain tax positions under FIN 48

Sche	dule D (Form 990) 2009 W & S SOCIAL CLUB, INC.		63-08968	<u>51</u>	Page <b>4</b>
_Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audite	ed Financial Staten	nents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	
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	
8	Other (Describe in Part XIV )			8	
9	Total adjustments (net) Add lines 4 through 8			9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Stateme	nts Wi	th Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements		<del></del>	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV )	2d		_	
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	) (			
a .	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV )	4b		<b>-</b>	
	Add lines 4a and 4b	<u> </u>		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
_	irt XIII Reconciliation of Expenses per Audited Financial Statem	ents V	Vith Expenses per		 1
1	Total expenses and losses per audited financial statements		<u></u>	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		<b> </b>	
c	Other losses	2c		<b> </b>	
d	Other (Describe in Part XIV )	2d	-	╡	
e	Add lines 2a through 2d				
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	) [			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		ŀ	
b	Other (Describe in Part XIV )	4b		<b>∃</b>	
c	Add lines 4a and 4b	ر_حن_		4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	
	art XIV Supplemental Information		, , , , , , , , , , , , , , , , , , ,		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines	s 1a and	4 Part IV lines 1h		<del>_</del>
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines				
	part to provide any additional information	20 0.10	10 7 too complete		
11.10 p	art to provide any additional information				
					. <b></b>
	- <b></b>		<b></b>		
			. <b></b>		. <b>_</b>
			<b>_</b>		<b></b>
		<b>-</b> -			·

Schedule D (Form 990) 2009 W & S SOCIAL CLUB, INC.  Part XIV Supplemental Information (continued)									63-0896851 F		
Part XIV	Supplem	ental In	formation	n (contin	ued)	<u> </u>				Page S	
	<del>-</del>										
	<b>-</b>			- <b>-</b> -							
						<b>-</b>					
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SCHEDULE O (Form 990) **Supplemental Information to Form 990** 

Attach to Form 990.

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

W & S SOCIAL CLUB, INC.

Employer identification number 63-0896851

Form 990, Part III, Line 4d - All Other Achievements SOCIAL CLUB - DRINKING PLACE

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

# Form **4562**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

#### **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions.

Attach to your tax return.

2009

Identifying number

achment 67

W & S SOCIAL CLUB, INC. 63-0896851 Business or activity to which this form relates Indirect Depreciation Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount. See the instructions for a higher limit for certain businesses. 1 250,000 2 Total cost of section 179 property placed in service (see instructions) 2 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 8 q Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 12 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instr.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) Property subject to section 168(f)(1) election 15 15 Other depreciation (including ACRS) 16 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2009 344 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (q) Depreciation deduction period service only-see instructions) 19a 3-year property b 5-year property C 7-year property 10-year property 15-year property е 20-year property 25-year property 25 yrs S/L Residential rental 27 5 yrs S/L MM property 27 5 yrs MM S/L Nonresidential real 39 yrs MM S/L property MM S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life 12-year b 12 yrs S/L 40-year 40 vrs ММ S/L Summary (See instructions.) Part IV Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 344 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs