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Short Form
Return of Organization Exempt From Income Tax

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

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 $500,000 and total assets less than $1,250,000 at the end of the year may use this form

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

OMB No 1545-1150

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning MAY 1, 2009 and ending APR 30, 2010

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Termin-ated ☐ Amended return ☐ Application pending

Please use IRS label or print or type See Specific Instruc-tions

C Name of organization

THE WINTON CLUB

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite

41 HIGHLAND AVENUE

City or town, state or country, and ZIP + 4

WINCHESTER, MA 01890

D Employer identification number

04-2156187

E Telephone number

781-792-2124

F Group Exemption Number ▶

- **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)**

G Accounting method: ☐ Cash ☒ Accrual Other (specify) ▶

I Website: ▶ N/A

H Check ▶ ☐ if the organization is **not** required to attach Schedule B (Form 990 990-EZ, or 990-PF)

J Tax-exempt status (check only one) — ☒ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check ▶ ☐ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000. A 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.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 414,014.

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

1	Contributions, gifts, grants, and similar amounts received			1	89,400.
2	Program service revenue including government fees and contracts			2	138,664.
3	Membership dues and assessments			3	13,477.
4	Investment income			4	503.
5a	Gross amount from sale of assets other than inventory	5a			
b	Less: cost or other basis and sales expenses	5b			
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)			5c	
6	Special events and activities (complete applicable parts of Schedule G). If any amount is from **gaming**, check here ▶ ☐				
a	Gross revenue (not including $ _____ of contributions reported on line 1)	6a			
b	Less: direct expenses other than fundraising expenses	6b			
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)			6c	
7a	Gross sales of inventory, less returns and allowances STMT 6	7a	171,970.		
b	Less: cost of goods sold	7b	104,930.		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)			7c	67,040.
8	Other revenue (describe ▶ _____)			8	
9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶			9	309,084.
10	Grants and similar amounts paid (attach schedule) STMT 5			10	110,475.
11	*Benefits paid to or for members*			11	
12	Salaries, other compensation, and employee benefits			12	
13	Professional fees and other payments to independent contractors			13	2,600.
14	Occupancy, rent, utilities, and maintenance SEE STATEMENT 4			14	15,270.
15	Printing, publications, postage, and shipping			15	4,483.
16	Other expenses (describe ▶ SEE STATEMENT 1)			16	165,972.
17	**Total expenses.** Add lines 10 through 16 ▶			17	298,800.
18	Excess or (deficit) for the year (Subtract line 17 from line 9)			18	10,284.
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)			19	89,366.
20	Other changes in net assets or fund balances (attach explanation)			20	
21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶			21	99,650.

Revenue / Expenses / Net Assets

SCANNED SEP 29 2010

RECEIVED
SEP 22 2010
OGDEN, UT
IRS-OSC
E2S

Part II Balance Sheets. If Total assets on line 25, column (B) are $1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	153,870.	22	173,053.
23	Land and buildings		23	
24	Other assets (describe ▶ SEE STATEMENT 2)	45,550.	24	43,490.
25	**Total assets**	199,420.	25	216,543.
26	**Total liabilities** (describe ▶ SEE STATEMENT 3)	110,054.	26	116,893.
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	89,366.	27	99,650.

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose? SEE STATEMENT 10

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

28 ANNUAL DONATION TO WINCHESTER HOSPITAL. THE WINTON CLUB PROVIDES ADDITIONAL FUNDING FOR PATIENT CARE EQUIPMENT AND SUPPLIES IN FURTHERANCE OF ITS TAX EXEMPT PURPOSE.

(Grants $ 110,475.) If this amount includes foreign grants, check here ▶ ☐ 28a 110,475.

29 SEE STATEMENT 8

(Grants $) If this amount includes foreign grants, check here ▶ ☐ 29a 72,742.

30 SEE STATEMENT 9

(Grants $) If this amount includes foreign grants, check here ▶ ☐ 30a 8,760.

31 Other program services (attach schedule)

(Grants $) If this amount includes foreign grants, check here ▶ ☐ 31a

32 Total program service expenses (add lines 28a through 31a) ▶ 32 191,977.

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
MARGARET OTIS P.O. BOX 714, WINCHESTER, MA 01890	PRESIDENT 10.00	0.	0.	0.
BARBARA ODDO P.O. BOX 714, WINCHESTER, MA 01890	VICE PRESIDENT 10.00	0.	0.	0.
MARGARET BERTOCHI P.O. BOX 714, WINCHESTER, MA 01890	TREASURER 10.00	0.	0.	0.
GAYLE O'GRADY P.O. BOX 714, WINCHESTER, MA 01890	SECRETARY 5.00	0.	0.	0.

Part V 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		X
34	Were any changes made to the organizing or governing documents? 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 why the organization did not report the income on Form 990-T.			
a	Did the organization have unrelated business gross income of $1,000 or more or was it subject to 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	N/A	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Sch. N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0.			
b	Did the organization file **Form 1120-POL** for this year?	37b		X
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 outstanding at the end of the period covered by this return?*	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a N/A			
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0.			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.			
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		X
41	List the states with which a copy of this return is filed. ▶ MA			
42a	The organization's books are in care of ▶ MARGARET BERTOCHI Telephone no. ▶ 781-729-1431			
	Located at ▶ 41 HIGHLAND AVENUE, WINCHESTER, MA ZIP + 4 ▶ 01890			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for **Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.**			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	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 N/A			

			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of 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 "Yes," Form 990 must be completed instead of Form 990-EZ	45		X

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51

			Yes	No
46	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46		X
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47		X
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		X
b	If "Yes," was the related organization a section 527 organization?	49b		

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

(a) Name and address of each employee paid more than $100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over $100,000 ▶

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

NONE

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation

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

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

▶ Margaret Bertochi 09/10/2010
Signature of officer Date

▶ MARGARET BERTOCHI, TREASURER
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ ☐	Preparer's identifying number (See instr.)
Mitchell A. Stone	09/10/10		

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ STONE & COMPANY, LLC
57 BEDFORD ST., STE 225
LEXINGTON, MA 02420-4443

EIN ▶

Phone no. ▶ (781) 863-6300

May the IRS discuss this return with the preparer shown above? See instructions ▶ [X] Yes [ ] No

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

Name of the organization	Employer identification number
THE WINTON CLUB	04-2156187

Part I 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)

1 ☐ 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).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the 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.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public 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)

9 ☐ An organization that normally receives (1) more than 33 1/3% 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 33 1/3% 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).**

11 ☐ 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

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ 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)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) 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(iii)	

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col. (i) of your support? Yes	(v) No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	(vi) No	(vii) Amount of support
Total									

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) 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 ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **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
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2008 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test - 2009.** 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 ▶ ☐

b **33 1/3% support test - 2008.** 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 - 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 organization ▶ ☐

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 supported organization ▶ ☐

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

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.)

Section A. Public Support

Calendar 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 ")						
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 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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)						
13 **Total support** (Add lines 9, 10c, 11, and 12)						

14 **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

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **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 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

FORM 990-EZ OTHER EXPENSES STATEMENT 1

DESCRIPTION	AMOUNT
OTHER BUSINESS EXPENSES	1,588.
MEETING EXPENSES	4,208.
DUES,PERMITS & LICENSES	240.
ADVERTISING	1,393.
DONATED STAFF	59,488.
INSURANCE	1,328.
FUNCTION EXPENSES	72,742.
HOSPITAL GIFT SHOP	8,760.
DONATED MATERIAL AND SUPPLIES	16,225.
TOTAL TO FORM 990-EZ, LINE 16	165,972.

FORM 990-EZ OTHER ASSETS STATEMENT 2

DESCRIPTION	BEG. OF YEAR	END OF YEAR
MERCHANDISE INVENTORIES	39,890.	37,000.
PREPAID EXPENSES	896.	1,049.
ACCOUNTS RECEIVABLE	0.	2,310.
OTHER DEPRECIABLE ASSETS	4,764.	3,131.
TOTAL TO FORM 990-EZ, LINE 24	45,550.	43,490.

FORM 990-EZ OTHER LIABILITIES STATEMENT 3

DESCRIPTION	BEG. OF YEAR	END OF YEAR
SALES TAX PAYABLE	424.	532.
GRANTS PAYABLE	100,000.	110,000.
ACCRUED EXPENSES	9,630.	3,308.
ACCOUNTS PAYABLE	0.	2,985.
DEFERRED INCOME	0.	68.
TOTAL TO FORM 990-EZ, LINE 26	110,054.	116,893.

FORM 990-EZ OCCUPANCY, RENT, UTILITIES AND MAINTENANCE STATEMENT 4

DESCRIPTION	AMOUNT
DEPRECIATION	1,633.
OTHER EXPENSES	13,637.
TOTAL TO FORM 990-EZ, LINE 14	15,270.

FORM 990-EZ CASH GRANTS AND ALLOCATIONS STATEMENT 5

CLASS OF ACTIVITY/GRANTEE'S NAME AND ADDRESS	GRANTEE'S RELATIONSHIP	AMOUNT
GRANT WINCHESTER HOSPITAL 41 HIGHLAND AVE WINCHESTER, MA 018901496	SUPPORTED ORGANIZATION	110,475.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10		110,475.

FORM 990-EZ INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 7A STATEMENT 6

INCOME		
1. GROSS RECEIPTS	171,970	
2. RETURNS AND ALLOWANCES		
3. LINE 1 LESS LINE 2		171,970
4. COST OF GOODS SOLD (LINE 13)	104,930	
5. GROSS PROFIT (LINE 3 LESS LINE 4)		67,040
COST OF GOODS SOLD		
6. INVENTORY AT BEGINNING OF YEAR		
7. MERCHANDISE PURCHASED		
8. COST OF LABOR		
9. MATERIALS AND SUPPLIES	104,930	
10. OTHER COSTS		
11. ADD LINES 6 THROUGH 10		104,930
12. INVENTORY AT END OF YEAR		
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12)		104,930

FORM 990-EZ INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS STATEMENT 7

A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? . . . . . [ ] YES [X] NO

B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [ ] YES [X] NO

PRODUCTION EXPENSES ASSOCIATED WITH THE WINTON CLUB'S ANNUAL CABARET FUNDRAISER. THE ANNUAL CABARET RAISES FUNDS TO SUPPORT PATIENT CARE AT WINCHESTER HOSPITAL BUT ALSO SERVES TO FOSTER GOODWILL IN THE COMMUNITY FOR THE HOSPITAL'S OPERATIONS.

OPERATING EXPENSES ASSOCIATED WITH THE WINTON CLUB'S GIFT SHOP OPERATIONS. THE GIFT SHOP PROVIDES A SIGNIFICANT SOURCE OF FUNDING FOR THE WINTON CLUB AND ULTIMATELY THE DONATION MADE TO WINCHESTER HOSPITAL.

THE SOLE MISSION OF THE WINTON CLUB IS TO SUPPORT AND AID IN THE MAINTENANCE OF WINCHESTER HOSPITAL, THROUGH VOLUNTEER SERVICE, THE RAISING AND CONTRIBUTING TO WINCHESTER HOSPITAL OF FUNDS, AND/OR SUPPLIES AND EQUIPMENT.

THE WINTON CLUB

FINANCIAL STATEMENTS

APRIL 30, 2010

Stone & Company, LLC

THE WINTON CLUB
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APRIL 30, 2010

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Stone & Company, LLC
CERTIFIED PUBLIC ACCOUNTANTS
57 BEDFORD STREET - SUITE 225
LEXINGTON, MASSACHUSETTS 02420-4443
(781) 863-6300 FAX: (781) 862-6736

ACCOUNTANTS' REVIEW REPORT

TO THE BOARD OF DIRECTORS
THE WINTON CLUB
WINCHESTER, MASSACHUSETTS

We have reviewed the statement of financial position of The Winton Club (a non-profit organization) as of April 30, 2010 and the related statements of activities and cash flows for the year then ended in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. All information included in these financial statements is the representation of the management of The Winton Club.

A review consists principally of inquiries of organization personnel and analytical procedures applied to financial data. It is substantially less in scope than an audit in accordance with generally accepted auditing standards, the objective of which is the expression of an opinion regarding the financial statements taken as a whole. Accordingly, we do not express such an opinion.

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in conformity with generally accepted accounting principles.

Our review was made for the purpose of expressing limited assurance that there are no material modifications that should be made to the financial statements in order for them to be in conformity with generally accepted accounting principles. The information included in the accompanying Schedule I - Statement of Functional Expenses is presented only for supplementary analysis purposes. Such information has been subjected to the inquiry and analytical procedures applied in the review of the basic financial statements, and we are not aware of any material modifications that should be made there to.

Stone & Co. LLC

AUGUST 30, 2010

THE WINTON CLUB
STATEMENT OF FINANCIAL POSITION
APRIL 30, 2010
(with comparative totals 2009)

ASSETS

	2010	2009
ASSETS		
Cash and cash equivalents	$ 173,054	$ 153,870
Accounts receivable	2,310	-
Merchandise inventories	37,000	39,890
Prepaid expenses	1,049	896
Software, net	3,131	4,764
TOTAL ASSETS	$ 216,544	$ 199,420

LIABILITIES AND NET ASSETS

LIABILITIES		
Accounts payable and accrued expenses	$ 6,826	$ 10,054
Deferred income	68	-
Grants payable	110,000	100,000
TOTAL LIABILITIES	116,894	110,054
NET ASSETS		
Unrestricted	89,274	78,571
Temporarily restricted	10,376	10,795
TOTAL NET ASSETS	99,650	89,366
TOTAL LIABLITIES AND NET ASSETS	$ 216,544	$ 199,420

See accompanying accountants' report and notes to financial statements.

THE WINTON CLUB
STATEMENT OF ACTIVITIES
YEAR ENDED APRIL 30, 2010
(with comparative totals for 2009)

		Unrestricted	Temporarily Restricted	2010 Total	2009 Total
REVENUES AND SUPPORT					
Revenues					
Program revenue		$ 143,721	$ -	$ 143,721	$ 117,450
Membership dues		8,420	-	8,420	8,000
Gift shop revenue	171,970				
Less: cost of goods sold	(104,930)	67,040	-	67,040	74,870
Non-cash contributions					
Personnel support		59,488	-	59,488	61,776
Use of facilities		13,637	-	13,637	13,637
In-kind materials and services		16,225	-	16,225	1,608
Suport and other income					
Interest income		447	56	503	548
General contributions		50	-	50	25
Net assets released from restrictions		475	(475)	-	-
TOTAL REVENUES AND SUPPORT		309,503	(419)	309,084	277,914
EXPENSES					
Grants		110,000	-	110,000	100,000
Program		171,080	-	171,080	162,935
Management and general		17,720	-	17,720	16,398
TOTAL EXPENSES		298,800	-	298,800	279,333
CHANGE IN NET ASSETS		10,703	(419)	10.284	(1,419)
NET ASSETS, BEGINNING OF YEAR		78,571	10,795	89,366	90,785
NET ASSETS, END OF YEAR		$ 89,274	$ 10,376	$ 99,650	$ 89,366

See accompanying accountants' report and notes to financial statements.

THE WINTON CLUB
STATEMENT OF CASH FLOWS
YEAR ENDED APRIL 30, 2010
(with comparative totals for 2009)

	2010	2009
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	$ 10,284	$ (1,419)
Adjustments to reconcile change in net assets to net cash used by operating activities:		
Amortization	1,633	136
Non-cash contributions	(89,350)	(77,021)
Changes in operating assets and liabilities:		
Accounts receivable	(2,310)	-
Merchandise inventories	2,890	(5,690)
Prepaid expenses	(153)	32
Accounts payable and accrued expenses	(3,228)	(8,729)
Deferred income	68	-
Grants payable	10,000	-
TOTAL CASH USED BY OPERATING ACTIVITIES	(70,166)	(92,691)
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of software	-	(4,900)
TOTAL CASH USED BY INVESTING ACTIVITIES	-	(4,900)
CASH FLOWS FROM FINANCING ACTIVITIES		
Non-cash contributions	89,350	77,021
TOTAL CASH PROVIDED BY FINANCING ACTIVITIES	89,350	77,021
CHANGE IN CASH AND CASH EQUIVALENTS	19,184	(20,570)
CASH AND CASH EQUIVALENTS, BEGINNING OF YEAR	153,870	174,440
CASH AND CASH EQUIVALENTS, END OF YEAR	$ 173,054	$ 153,870

See accompanying accountants' report and notes to financial statements.

Note 1. NATURE OF THE ORGANIZATION

The Winton Club ("Winton"), organized in May 1911, is a non-profit association established exclusively for the benefit and support of the Winchester Hospital of Winchester, Massachusetts. Winton is recognized as a public charity under chapter 180 of Massachusetts general laws.

Note 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The summary of significant accounting policies of Winton is presented to assist in understanding the Organization's financial statements. The financial statements and notes are the representation of the Organization's management, who is responsible for their integrity and objectivity. These accounting policies have been consistently applied in the preparation of these financial statements that conform to generally accepted accounting principles in the United States ("US GAAP"). On July 1, 2009, the Financial Accounting Standards Board ("FASB") launched the *FASB Accounting Codification* (the "Codification") as the single source of authoritative non-governmental US GAAP. All existing accounting standards are superseded by the single-source Codification for interim and annual periods ending after September 15, 2009.

Basis of Presentation

The accompanying financial statements have been prepared on the accrual basis of accounting. Winton follows ASC 958-205 *Not-for-Profit Entities – Presentation of Financial Statements* (formerly SFAS No. 117, *Financial Statements of Not-for-Profit Organizations)*. In accordance with this standard, net assets and revenues, gains and losses are classified based on the existence or absence of donor-imposed restrictions or relevant law. Accordingly, net assets of Winton and the changes therein are classified and reported as follows:

Unrestricted Net Assets.

Net assets are classified in accordance with the Board of Directors approved resolutions. Accordingly, by vote of the Executive Committee, unrestricted net assets are designated for commitments to special projects made from time to time. The character of assets designated for such purpose is undistinguishable from any other unrestricted net asset.

Temporarily Restricted Net Assets.

Net assets known as the "Memorial" account are set aside in recognition of donor-imposed restrictions. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

Note 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Permanently Restricted Net Assets

Net assets subject to donor-imposed stipulations that they be maintained permanently by the organization. The donor of these assets may permit the organization to use all or part of the income earned on any related investments for general or specific purposes. As of April 30, 2010, Winton had no permanently restricted net assets.

Grants and Promises to Give

Winton follows ASC Topic 958-605 *Not-For-Profit Entities – Revenue Recognition* (formerly SFAS No. 116 *Accounting for Contributions Received and Contributions Made*) for charitable recognition purposes. Contributions (unconditional or conditional) as a result of solicitations made for support from grants and voluntary contributions are recorded at cash or fair market value on the date recognized, net of any goods or services provided to the donor by the organization. Recognition of unconditional pledges to give from the general public are made in accordance with policies and procedures appropriate to the voluntary nature of such contributions which are normally difficult to verify. Accordingly, solicitations for support are made as intentions to give and generally recorded as contributions upon receipt. In addition, unpaid intentions of $250 or greater are further identified as pledges to give and recognized as support at year end.

Donated Facilities and Services

Winton recognized revenue of $13,637 for donated facilities received from Winchester Hospital and used for operations of the hospital gift shop in each of the years ended April 30, 2010 and 2009.

Winton recognized revenue for donated services received from Winchester Hospital and used for operations of the hospital gift shop for the years ended April 30, 2010 and 2009, in the amount of $59,488 and $61,776, respectively.

Winton recognized revenue for donated materials and services received from sponsors of cabaret activities for the years ended April 30, 2010 and 2009 in the amount of $16,225 and $1,608, respectively.

Winton does not record as revenue or expense the many hours its members and other supporters volunteer in charitable activities without compensation. The hours of volunteers are not controlled and the value of time spent is not easily estimable, as would be required by ASC Topic 958-605 in order to record volunteer time as revenue and support.

Note 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash Equivalents

The organization considers all highly liquid investments with a maturity of three months or less when purchased to be cash equivalents. The organization maintains its cash in bank deposit accounts which at times may exceed federally insured limits. The organization has not experienced any losses in such accounts. The organization believes it is not exposed to any significant credit risk on cash and cash equivalents.

Income Taxes

Winton is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. Accordingly, the organization does not record a provision for income taxes. The organization has also been classified as an entity that is not a private foundation; therefore, contributions made to Winton are deductible by donors as provided in Section 170 of the Internal Revenue Code. Winton had no unrelated business tax expense or liability at April 30, 2010 or 2009.

Merchandise Inventories

Inventories consist primarily of hospital gift shop merchandise, and are valued at the lower of cost, based on the first in, first out method, or market.

Software

Software is recorded at cost and is being amortized over estimated useful lives using the straight-line method. Amortization expense for the year ended April 30, 2010 and 2009 was $1,633 and $136 respectively.

Fair Value Measurements

Winton has adopted ASC 820, *Fair Value Measurements and Disclosures* (formerly SFAS No. 157, *Fair Value Measurements*), which among other matters, requires enhanced disclosures about instruments that are measured and reported at fair value. ASC 820 establishes a hierarchal disclosure framework which prioritizes and ranks the level of market price used in measuring instruments at fair value. Market price is affected by a number of

Note 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

factors, including the type of instrument and the characteristics specific to the instrument. Instruments with readily available quoted prices or for which fair value can be measured for actively quoted prices generally will have a higher degree of market price observability and a lesser degree of judgment used in measuring fair value. The implementation of ASC 820 had no impact on reported amounts.

Prior Year Information

The financial statements include certain prior year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with accounting principles generally accepted in the United States of America. Accordingly, such information should be read in conjunction with Winton's financial statements for the year ended April 30, 2009, from which the summarized information was derived.

Note 3. GRANTS PAYABLE

Grants of $110,000 and $100,000 were made to Winchester Hospital without condition for the years ended April 30, 2010 and 2009 respectively. Payments to satisfy the full grant obligations were made in the subsequent years.

Note 4. FAIR VALUE MEASUREMENTS

The carrying amounts of cash and cash equivalents, accounts receivable, merchandise inventories, prepaid expenses, accounts payable and accrued expenses, deferred income and grants payable approximate fair value due to the short maturity of these financial instruments. The fair value of software, net approximates its carrying value.

Note 5. SUBSEQUENT EVENTS

Subsequent events were evaluated through August 30, 2010, which is the date the financial statements were available to be issued.

THE WINTON CLUB
SUPPLENTAL SCHEDULE I - STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED APRIL 30, 2010
(with comparative totals for 2009)

	Cabaret	Hospital Gift Shop	Management and General	2010 Total	2009 Total
EXPENSES					
Award and grants - memorials	$ 475	$ -	$ -	$ 475	$ 100
Services					
Payroll and taxes	-	64,340	-	64,340	70,204
Directors	3,800	-	-	3,800	3,800
Custodian	4,218	-	-	4,218	5,296
Music director and instrumentalists	9,900	-	-	9,900	10,000
Stage crew	1,049	-	-	1,049	1,070
Police and fire security	2,922	-	-	2,922	1,019
Choreography	3,300	-	-	3,300	3,300
Lighting and sounds	10,300	-	-	10,300	10,300
Music librarian	192	-	-	192	-
Accounting fees	-	-	2,600	2,600	7,119
Non-personnel expenses					
General office supplies and expenses	-	3,909	-	3,909	6,525
Scenery	697	-	-	697	1,141
Makeup, props and costume supplies	5,599	-	-	5,599	3,356
Decorations	948	-	-	948	1,314
Raffle tickets	1,790	-	-	1,790	1,805
Piano rental and tuning	600	-	-	600	705
Flooring/coat rack rental	552	-	-	552	653
Costume rentals	1,309	-	-	1,309	4,055
Postage, shipping, delivery	401	-	743	1,144	1,396
Insurance expense	-	-	1,327	1,327	1,376
Printing and copying	14,719	544	3,741	19,004	16,425
Socials, transportation and meetings	3,016	-	4,208	7,224	8,017
Contract services	-	4,263	-	4,263	-
Occupancy expense	-	13,637	-	13,637	13,637
Materials and services	16,225	-	-	16,225	-
Bank and credit card service fees	-	-	-	-	2,682
Depreciation expense	-	-	1,633	1,633	136
Advertising expense	-	-	1,393	1,393	1,370
Dues, permits and licenses	1,125	-	115	1,240	657
Other expenses	1,250	-	1,960	3,210	1,875
TOTAL EXPENSES	$ 84,387	$ 86,693	$ 17,720	$ 188,800	$ 179,333

See accompanying accountants' report and notes to financial statements.