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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)

Open to Public

OMB No 1545-0047

Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2009 calendar year, or tax year beginning 2009 JUL and ending JUN 30, 2010 C Name of organization Check if applicable D Employer identification number Please use IRS label or Address change General Federation of Women's Clubs print or Name change type 53-0196514 Doing Business As Initial return See Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Specific Termin-734 N Street, NW 202-347-3168 Amende return tions City or town, state or country, and ZIP + 4 G Gross receipts \$ 2,462,260. Applica-Washington, DC 20036 H(a) Is this a group return pending F Name and address of principal officer Carlene Garner for affiliates? Yes X No Same as above H(b) Are all affiliates included? I Tax-exempt status. X 501(c) (3 4947(a)(1) or) (insert no) if "No," attach a list (see instructions) J Website: ► www.gfwc.org H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Other > Association L Year of formation: 1890 M State of legal domicile; NY | Part I | Summary Briefly describe the organization's mission or most significant activities. Promotion of Women's Clubs' SCANNED FEB 0.2, 2011 nue | Activities & Governance common interests. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 164 164 Number of independent voting members of the governing body (Part VI, line 1b) 4 21 5 Total number of employees (Part V, line 2a) 17 Total number of volunteers (estimate if necessary) 6 0. 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 0. **Prior Year Current Year** 194,232. 54,546. Contributions and grants (Part VIII, line 1h) 2,066,215 2,171,253. Program service revenue (Part VIII, line 2g) 99,116. 155,712 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 76,710. 115,054. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,531,213. 2,401,625. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 14,656 48,879. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 170,916 152,018. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 18,389. 1,787,157 1,406,225. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 2,972,729. 2,607,122. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -205,497. -441,516. Revenue less expenses Subtract line 18 from line 12 Assets or | Balances **Beginning of Current Year End of Year** 5,898,370 5,947,744. 20 Total assets (Part X, line 16) Total liabilities (Part X, line 26) 2,035,013 2,124,380. 3,863,357. 3,823,364 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block 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. January 7,2011 Sign Signature of officer Here GFWC International President & CEO Carlene Garner, Type or print-name and title Date Check if self-Preparer's Identifying number JA Preparer's 12/22/10 employed ▶ Preparer's Firm's name (or Rogers & Company PLLC EIN ▶ Use Only .8300 Boone Boulevard, Suite 600 Phone no. $\triangleright 703-893-0300$ Vienna, VA 22182

X Yes ___

Form 990 (2009)

No

May the IRS discuss this return with the preparer shown above? (see instructions)

	990 (2009) General Federation of Women's Clubs 53-0196514 Page 2
Pa	rt III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission. Promotion of Women's Clubs' common interests.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:)(Expenses\$ 503,222. including grants of\$ 6,650.)(Revenue\$ 1,727,343.) Membership services - With roots in local communities and branches around the world, GFWC members enjoy opportunities to learn from and share with one other at district, state, region, and international meetings, seminars, and conventions. Operating under the broad umbrella of community service, GFWC clubs are able to assess the needs of their individual communities, consider the abilities and interests of their members, and focus their projects and programs in areas that satisfy the needs of both. Program guidelines, materials, and resources provided by GFWC and state federations assist clubs in serving the needs of their communities effectively and efficiently.
4b	(Code) (Expenses \$ 630,875. Including grants of \$ 4,190.) (Revenue \$ 328,364.) Convention - GFWC held its 119th Annual International Convention in Omaha, Nebraska. The convention program included speakers, training, workshops, and other relevant activities. This convention features programming for community leaders who work locally to create global change. By supporting the arts, preserving natural resources, advancing education, promoting healthy lifestyles, and encouraging civic involvement.
4c	(Code:)(Expenses \$ 248,982. Including grants of \$ 67.)(Revenue \$ 35,194.) Clubwoman magazine - GFWC's main means of communicating with members, which also provides a platform upon which members share information with each other. Each issue of "GFWC Clubwoman Magazine" features clubs and member who are fulfilling the mission of GFWC in their own communities.
	Other granger convers (Decembe in Schedula O.)
	Other program services (Describe in Schedule O) (Expenses \$ 540, 185. including grants of \$ 37,972.) (Revenue \$ 92,219.)
<u>4e</u>	Total program service expenses ▶\$ 1,923,264.

			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		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	X	
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		<u>X</u>
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		<u>X</u> _
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		<u>X</u>
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	Х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable .	11	X	
•	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			
•	Did the organization report an amount for other assets 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.			
10	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12	Schedule D, Parts XI, XII, and XIII.	12	х	
124	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	<u>-</u>		
127	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	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	i		ļ
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		<u>X</u>
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	<u> </u>	<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	1	ĺ	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	<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	 	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			4,
	complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20 Form	990	2009)
		LOUI	220 (<u>(EUU3)</u>

General Federation of Women's Clubs 53-0196514 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 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		i	
	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
ь	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	ļ	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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	}	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
U	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		OEL	ŀ	X
^^	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]	х
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			v
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV		1	
	instructions for applicable filing thresholds, conditions, and exceptions)		ľ	
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u>X</u>
С	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		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		.	
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u>_x</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32_		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	(
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		_ <u>X</u> _
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		_X
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		_X_
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	Х	
			990 (20091

Form 990 (2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance No Yes 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 13 U.S. Information Returns Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 21 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? 2b X Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? b 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. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5c Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х 6a any contributions that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services Х 7a provided to the payor? 7b b If "Yes." did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х 7c to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7e benefit contract? Х 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 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 8 at any time during the year? Sponsoring organizations maintaining donor advised funds. 9 9a a Did the organization make any taxable distributions under section 4966? 9b b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: 11 11a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

932005 02-04-10 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.

<u>Sec</u>	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body	1a	<u> </u>	164	j	
b	Enter the number of voting members that are independent	15	·	164		-
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip wit	h any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	he dır	ect supervisio	ก		1
	of officers, directors or trustees, or key employees to a management company or other person?			3		<u> </u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo		90 was filed?	4	\neg	X
5	Did the organization become aware during the year of a material diversion of the organization's asse	ets?		_5	_	_X_
6	Does the organization have members or stockholders?			6	<u> </u>	
7a	Does the organization have members, stockholders, or other persons who may elect one or more m	embe	ers of the			
	governing body?			7.		+
b	Are any decisions of the governing body subject to approval by members, stockholders, or other pe			71	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken	durii	ng the year			
	by the following					1
а	The governing body?			8	-+-	+
b	Each committee with authority to act on behalf of the governing body?			81	X	+
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ache	d at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			8		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Rever	ue Code.)		T::	1
					Yes	No
	Does the organization have local chapters, branches, or affiliates?			10	a X	+
þ	If "Yes," does the organization have written policies and procedures governing the activities of such	ı cha	oters, affiliates	I		
	and branches to ensure their operations are consistent with those of the organization?			10	\neg	177
11	Has the organization provided a copy of this Form 990 to all members of its governing body before	filing	the form?	1	1	X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				v	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12	a X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that co to conflicts?	ouia g	ive rise	12	b X	<u> </u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes	," describe			
	in Schedule O how this is done .			12		
13	Does the organization have a written whistleblower policy?			1		
14	Does the organization have a written document retention and destruction policy?			<u> </u>	1 X	
15	Did the process for determining compensation of the following persons include a review and approve	al by	ındependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	?				
а	The organization's CEO, Executive Director, or top management official			15		
þ	Other officers or key employees of the organization			15	<u>ь X</u>	<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	men	t with a			
	taxable entity during the year?			16	a	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evo	aluat	e its participat	ion	1	
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	ganız	ation's			Ì
	exempt status with respect to such arrangements?			<u> 1</u> 6	<u>b</u>	
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶DC					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	·T (50	1(c)(3)s only)	available for		
	public inspection. Indicate how you make these available. Check all that apply. X Own website. X Another's website. X Upon request.					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	confl	ct of interest	policy, and f	inancıa	I
	statements available to the public.	J		,		
20	State the name, physical address, and telephone number of the person who possesses the books a	and r	ecords of the	organization	: >	
	The Organization - 202-347-3168			J. ==: +::	_	
	1734 N Street, NW, Washington, DC 20036					
				Fo	rm 99 ((2009)

932008 02-04-10 Form 990 (2009) General Federation of Women's Clubs 53-0
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

1a Complete this table for all persons required to be listed. 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"

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

- 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

(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average	/ ,		Posi			6.4	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated &		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Rose Ditto									_	
International President	<u>35.00</u>	X		X		_		15,715.	0.	<u> </u>
Carlene Garner								_		
President-elect	30 <u>.</u> 00	X		X				0.	0.	0.
Mary Ellen Laister									_	
First Vice-President	<u>15.00</u>	X		X		_		0.	0.	0.
Babs Condon						1				
Second Vice-President	<u> 15.00</u>	X		X			_	0.	0.	0.
Sheila Shea									_	_
Recording Secretary	15.00	X		Х				0.	0.	0.
Mary Ellen Brock									_	
Treasurer	15.00	X		X				0.	0.	0.
Melissa McCoy										
Director of Junior Clubs	20.00	X		X		<u> </u>		0.	0.	0.
Sandra Pecha							İ			_
Region President	1.00	X	ļ_	ļ		ļ	<u> </u>	0.	0.	0.
Carolyn_Selders	4 00	Í		İ			ĺ			
Region President	1.00	X		_	ļ	L		0.	0.	0.
Karen Kaler	4 00						Ì			
Region President	1.00	X	ļ	┝	-	 		0.	0.	0.
Fannie Gabriel	1 00									
Region President	1.00	X	-	-	_	┢	-	0.	0.	0.
Dorothy Kemp	1 00	,,					ļ		_	•
Region President	1.00	X	\vdash	┝		-		0.	0.	0.
Pheobe McCoy	1 00	,,			İ				_	_
Region President	1.00	X	-	-	<u> </u>	<u> </u>	-	0.	0.	0.
Pat Swan	1 00							0.	0.	0.
Region President	1.00	A	_	-	\vdash	╁─	\vdash	<u> </u>		·
Carolyn Nash	1 00	.				}		0.	0.	0.
Region President	1.00	 ^	\vdash	├	 - 	 	-	<u> </u>		<u> </u>
Alma Lee Wright	1 00]				0.	0.	0.
State President Karen Kizis	1.00	┢	\vdash	\vdash	-	-	├	· .		
State President	1.00	v	1					0.	0.	0.
	1 1.00	1 1	Ц			<u> </u>		<u> </u>		Form 990 (2009)
932007 02-04-10										1 0.111 000 (2003)

Part VII Section A. Officers, Directors, Tru	stees. Kev Er	nolo	vee	s. a	nd F	liah	est	Compensated Employ	rees (continued)	JI4 rage 0
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours	(cł	neck	Pos	ıtion		ly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Debbie Grieder										-
State President	1.00	X						0.	0.	<u> </u>
Debbie Hall									!	
State President	1.00	X						0.	0.	<u> </u>
Vicki Holden										
State President	1.00	X						0.	0.	<u> </u>
Jeri Lyn Cancel State President	1,00	X						0.	0.	0.
Grace Matyskiela State President	1.00	х						0.	0.	0.
Emma Miller State President	1.00							0.	0.	0.
Linda Dennis State President	1.00							0.	0.	0.
Brenda Martin	-									
State President	1.00	X						0.	0.	0.
Nancy Van Allen State President	1.00	х						0.	0.	0.
Joyce Chase	1.00	72								
State President	1.00	х						0.	0.	0.
1b Total								175,273.	0.	98,209.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d al	oove	e) wł	no re			

	compensation from the organization			(
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4_		<u>X</u>
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to			
	the organization? If "Yes " complete Schedule J for such person	5		X

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent co	tractors that received more than \$100,000 of compensation fro	m
	the organization. NONE		
	(A) Name and business address	(B) (C) Description of services Compens	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 0

See Schedule J-2 for Part VII, Section A Continuation

Form **990** (2009)

	990 (ral Feder	<u>ration of</u>	women's C	Lubs	<u>53-0196</u>	514 Page 9
	rt VII	Statement of Rever	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a					
E a	b	Membership dues	1b					
is, g	С	Fundraising events	1c]			
<u>ag</u>	d	Related organizations	1d					
Ş.E	е	Government grants (contribut	tions) <u>1e</u>					
ig s	f	All other contributions, gifts, gran	nts, and					
들칅		similar amounts not included abo	ove 1f	54,546.				
gg	9	Noncash contributions included in lines	3 1a-1f \$					
0 8	<u>h</u>	Total. Add lines 1a-1f		,▶	54,546.			
				Business Code				
<u>e</u>		Membership dues			1,727,343.			
e €		Convention fees	3	900099	328,364.			·
en S		Material sales		900099	80,352.		· _	
ğă	d	<u>Magazine</u>		900099	35,194.	35,194.		
Program Service Revenue	е							
" [f	All other program service reve	enue		0 171 050			
\rightarrow		Total. Add lines 2a-2f			2,171,253.			
	3	Investment income (including	dividends, inter	_	00 116			99,116.
		other similar amounts)			99,116.	 		99,110.
	4	Income from investment of ta	x-exempt bona (proceeds	65,410.	 		65,410.
ļ	5	Royalties	(i) Real	(ii) Personal	05,410.			03,410.
		Gross Rents	60,068					
		Less, rental expenses	60,635		1			
		Rental income or (loss)	-567					
		Net rental income or (loss)	307.		-567.			-567.
		Gross amount from sales of	(i) Securities	(II) Other	- 5071		· · · ·	
	, ,	assets other than inventory	(1) 0000111100	(1) (1)	j			
1	b	Less cost or other basis						
	Ī	and sales expenses						
	С	Gain or (loss)			1			
- 1		Net gain or (loss)	·	>	1	[
Other Revenue		Gross income from fundraisin						
Ş		contributions reported on line		1				
Æ		Part IV, line 18	а					
흌	b	Less direct expenses	- b		1			
0		Net income or (loss) from fun-	draising events	-	1	[
ŀ		Gross income from gaming a	=					
Ì		Part IV, line 19	а	·]			
ľ	b	Less: direct expenses	b]	İ		
	С	Net income or (loss) from gan	ning activities					
	10 a	Gross sales of inventory, less	returns					
Ì		and allowances	а	·		i		•
l	þ	Less: cost of goods sold	b	L	_			
ļ	С	Net income or (loss) from sale	es of inventory					
1	_	Miscellaneous Revenu	16	Business Code		· /		
	11 a	Other income		900099	11,867.	11,867.		
	b							
1	С							
	d	All other revenue		<u> </u>	11 055			
]	е	Total. Add lines 11a-11d		•	11,867.	0 100 100		162 050
93200	12	Total revenue See instructions.			<u>2,401,625.</u>	2,183,120.	0.	
92-04	-10							Form 990 (2009)

Part IX | Statement of Functional Expenses

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

	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	48,879.	48,879.		
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	}	1		
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	181,566.	127,744.	51,947.	<u> </u>
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	778,352.	546,865.	223,461.	8,026.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	12,230.	8,703.	3,399.	128.
9	Other employee benefits	103,589.	73,719.	28,789.	1,081.
10	Payroll taxes	76,281.	54,285.	21,200.	796.
11	Fees for services (non-employees)				-
а	Management				
b	Legal	59,941.	2,996.	56,910.	35.
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	124,844.	115,262.	9,432.	150.
12	Advertising and promotion				
13	Office expenses	157,190.	149,722.	7,002.	466.
14	Information technology	58,600.	43,017.	15,095.	488.
15	Royalties				
16	Occupancy				
17	Travel	155,623.	155,264.	119.	240.
18	Payments of travel or entertainment expenses				
-	for any federal, state, or local public officials	Ī			
19	Conferences, conventions, and meetings	412,962.	411,951.	881.	130.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	120,249.		120,249.	
23	Insurance	28,040.	20,165.	7,628.	247.
 24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Building maintenance	143,976.	92,814.	49,892.	1,270.
b	Miscellaneous	39,977.	23,958.	13,863.	2,156.
c	Bank fees	35,123.	5,062.	30,061.	
ď	Communication	21,305.	14,061.	7,059.	185
e	Governance	16,696.	16,676.	20.	0.
f	All other expenses	31,699.	12,121.	18,462.	1,116
25	Total functional expenses Add lines 1 through 24f	2,607,122.	1,923,264.	665,469.	18,389
<u> 26</u>	Joint costs. Check here I if following				
	SOP 98-2. Complete this line only if the organization	ļ			
	reported in column (B) joint costs from a combined				
			1		

Form 990 (2009)

•	0,,,,	330	ردووع	1	
	Dar	1 V	Bal		Cha

Pai	rt X	Balance Sheet			
	·		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	-42,795.	1	44,400.
	2	Savings and temporary cash investments	<u>1,895,749.</u>	2	1,716,676.
	3	Pledges and grants receivable, net	10,000.	3_	
	4	Accounts receivable, net	6,036.	4	19,434.
	5	Receivables from current and former officers, directors, trustees, key			
	ŀ	employees, and highest compensated employees. Complete Part II			
		of Schedule L .		5	
	6	Receivables from other disqualified persons (as defined under section			1
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L.		6	
sts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	<u>22,875.</u>	8	37,843.
⋖	9	Prepaid expenses and deferred charges	<u>28,034.</u>	9	47,731.
	10a	Land, buildings, and equipment. cost or other			
		basis Complete Part VI of Schedule D 10a 1,796,141.			
	b	Less accumulated depreciation 10b 898,897.	937,272.		897,244.
	11	Investments · publicly traded securities	2,498,614.	11	2,641,831.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments · program-related See Part IV, line 11	<u> </u>	13	
	14	Intangible assets	540 505	14	540 F0F
	15	Other assets See Part IV, line 11	542,585.	15	542,585.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	<u>5,898,370.</u>	16	5,947,744.
	17	Accounts payable and accrued expenses	292,083.	17	476,796.
	18	Grants payable	1 705 705	18	1 641 360
	19	Deferred revenue	1,725,725.	19	1,641,369.
	20	Tax-exempt bond liabilities		20	
Liabilities	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ij	22	Payables to current and former officers, directors, trustees, key employees,			
E.		highest compensated employees, and disqualified persons. Complete Part II		00	
		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		24	
	24	Unsecured notes and loans payable to unrelated third parties	17,205.	25	6,215.
	25	Other liabilities Complete Part X of Schedule D Total liabilities. Add lines 17 through 25	2,035,013.	26	2,124,380.
—	26	Organizations that follow SFAS 117, check here X and complete	_2,033,013.	20	2,124,500.
ra.		lines 27 through 29, and lines 33 and 34.			
čė	27	Unrestricted net assets	1,786,179.	27	1,706,755.
alar	28	Temporarily restricted net assets	1,510,832.		1,540,263.
Ä	29	Permanently restricted net assets	566,346.		576,346.
Ĕ	~~	Organizations that do not follow SFAS 117, check here			
F.	1	complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund	· · · · · · · · · · · · · · · · · · ·	31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ž	33	Total net assets or fund balances	3,863,357.		3,823,364.
	34	Total liabilities and net assets/fund balances	5,898,370.	34	5,947,744.
_					Form 990 (2009)

b 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

За

3b

X

Act and OMB Circular A-133?

SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section

General Federation of Women's Clubs 53-0196514 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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). 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. d Type III - Other c Type III - Functionally integrated b Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? 9 A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, 11g(i) the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the supported organization(s). (vi) Is the organization in col. (iii) Type of (v) Is the organization (v) Did you notify the (vii) Amount of (i) Name of supported (ii) EIN organization in col. (i) listed in your organization in col. organization support (i) organized in the (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes Schedule A (Form 990 or 990-EZ) 2009 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for

932021 02-08-10

Form 990 or 990-EZ.

	edule A (Form 990 or 990 EZ) 2009 rt II Support Schedule for	Organizations	Described in	Sections 170	0(b)(1)(A)(iv) ar	d 170(b)(1)(A)(Page 2
	(Complete only if you checke						•
Sec	tion A. Public Support						
Cale	endar 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]	j	1		
	include any "unusual grants.")					ļ	
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to		ĺ				
	the organization without charge					ļ	
4	Total, Add lines 1 through 3				<u> </u>		
5	The portion of total contributions						
	by each person (other than a					ļ	
	governmental unit or publicly			ĺ	1		1
	supported organization) included						
	on line 1 that exceeds 2% of the			1	1		
	amount shown on line 11,				1		
	column (f)				 	<u> </u>	
	Public support. Subtract line 5 from line 4 ction B. Total Support	L	L	l	·	<u> </u>	
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 4	(a) 2005	(6) 2000	(0) 2007	(4) 2000	(e) 2003	(i) Total
8	Gross income from interest,				+		
٥	dividends, payments received on]	
	securities loans, rents, royalties		ĺ	Í	1		
	and income from similar sources						
9	Net income from unrelated business						
•	activities, whether or not the			ļ			
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital		j				
	assets (Explain in Part IV.)				<u> </u>	<u> </u>	
11	Total support. Add lines 7 through 10			L	<u></u>		
12	Gross receipts from related activities,	, etc (see instructi	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3)	
<u></u>	organization, check this box and stor						
	ction C. Computation of Publ					тт	
	Public support percentage for 2009 (• •	=	column (f))		14	<u>%</u>
15	Public support percentage from 2008 33 1/3% support test - 2009. If the o			- line 12 and line	14 10 22 1/20/ 01	15	<u>%</u>
102	stop here. The organization qualifies	•			14 15 33 1/370 01 1	fiore, check this bo	× and
	33 1/3% support test - 2008. If the o				1 line 15 ts 33 1/39	6 or more, check th	us box
١.	and stop here. The organization qual	=			11110 13 13 03 1707	o or more, encor u	▶ □
17-	10% -facts-and-circumstances tes		• •		e 13, 16a or 16h	and line 14 is 10%	or more.
.,,	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						▶ []
H	10% -facts-and-circumstances tes					17a, and line 15 is	10% or
_	more, and if the organization meets the						
	organization meets the "facts-and-cire						ightharpoons
18	Private foundation. If the organization		=				is 🕨
					Sch	edule A (Form 990	or 990-EZ) 2009

Sch Pa	edule A (Form 990 or 990-EZ) 2009 G irt III Support Schedule for C	<u>eneral Fe</u> Organizations	<u>deration</u> Described in S	of Women' Section 509(a)	s Clubs	53-019	6514 Page 3
Sec	ction A. Public Support	, guille attorio		00011011 000(0)	(Complete only	ır you cneckea tne b	ox on line 9 of Part I.)
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and						19.5.5.
	membership fees received. (Do not						
	include any "unusual grants.")	82,881.	82,206.	101,994.	194,232.	54,546.	515,859.
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	2055239.	2119941.				10695382.
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	zation's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to			18			
	the organization without charge						ì
6	Total. Add lines 1 through 5	2138120.	2202147.	2387807.	2257368.	2225799.	11211241.
	Amounts included on lines 1, 2, and	<u> </u>	<u> </u>	20070077	22075001	2223,755.	
, ,	3 received from disqualified persons						0.
ь	Amounts included on lines 2 and 3 received						<u>-</u>
-	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0.
_	amount on line 13 for the year Add lines 7a and 7b						0.
_	Public support (Subtract line 7c from line 6)						11211241.
	ction B. Total Support				<u> </u>	·	11211211
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	2138120.	2202147.	2387807.	2257368.	2225799.	11211241.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	290,096.	309,396.	292,776.	269,994.	164,526.	1326788.
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	:					
,	Add lines 10a and 10b	290,096.	309,396.	292,776.	269,994.	164,526.	1326788.
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	2337033.	337,3333				
12	Other income. Do not include gain or loss from the sale of capital	79,712.	78,479.	1,214.	9,155.	11 867.	180,427.
13	assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12)	2507928.	2590022.	2681797.	2536517.		12718456.
	First five years. If the Form 990 is for			·			
	check this box and stop here						•
	Public support percentage for 2009 (I			olumn (6)		15	88.15 %
	· · · · · · · · · · · · · · · · · · ·		· ·	olumn (I))			87.89 %
	Public support percentage from 2008					16	01.03 %
	ction D. Computation of Inves			12 column (6)		17	10.43 %
17	•			ie 13, column (i))			10.43 % 10.70 %
18	Investment income percentage from 2			on line 14, and the	15 is more than 9	18 3 1/3% and line	
198	33 1/3% support tests - 2009. If the						I7 is not ▶X
	more than 33 1/3%, check this box a		-				. – –
t	33 1/3% support tests - 2008. If the	-					. —
20	line 18 is not more than 33 1/3%, che Private foundation. If the organization		-		nis box and see ins	structions	
					Sch	edule A (Form 99	00 or 990-EZ) 2009

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

 Section 501(c)(4), (5), or (6) organization 	zations: Complete Part III.						
Name of organization			'	oloyer identification number			
Genera	<u>l Federation of W</u>	<u>omen's Club</u>	os	53-0196514			
Part I-A Complete if the o	rganization is exempt und	er section 501(c	or is a section 527	organization.			
 Provide a description of the organ 	nization's direct and indirect politic	al campaign activities					
2 Political expenditures			>	\$			
3 Volunteer hours							
D-41D 0			1(0)				
	rganization is exempt und			·			
1 Enter the amount of any excise to	, ,		_	\$ \$			
·	 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 						
_	tion 4955 tax, did it file Form 4720	or this year?		Yes No			
4a Was a correction made?				res No			
b If "Yes," describe in Part IV Part I-C Complete if the o	rganization is exempt und	er section 501(c)	except section 501	(c)(3).			
				\$			
1 Enter the amount directly expend				Ψ			
2 Enter the amount of the filing orga	anization's lunds contributed to ou	ier organizations for s	Section 527	¢			
exempt function activities	Add been 1 and 0. Feter been a	ad on Form 1120 DO		Ψ			
3 Total exempt function expenditur line 17b	es Add lines I and 2. Enter here a	na on Foilli 1120-FOI		¢			
•	5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received						
	elivered to a separate political orga	•	· · · · · · · · · · · · · · · · · · ·				
	ed, provide information in Part IV.		• , •, •, •, •, •, •, •, •, •, •, •, •, •,	- F			
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political			
(a) Namo	(b) Address	(0) 2	filing organization's	contributions received and			
			funds. If none, enter -0-				
			1	delivered to a separate political organization.			
				If none, enter -0			
		 					
			· ·				
							
		 					

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LHA

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009	Gene	ral Fe	deration of	Women's Clu	ıbs 53-	0196514 Page 2
Part II-A Complete if the org			mpt under sectio	n 501(c)(3) and file	ed Form 5768	
(election under sec	tion 50	<u>l (h)). </u>	·			
A Check ► if the filing organiza	ition belon	gs to an affi	liated group.			
B Check ▶ L if the filing organiza	tion check	ked box A a	nd "limited control" pro	ovisions apply.		
		bying Expe	nditures ints paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
						
1a Total lobbying expenditures to influ				}		
b Total lobbying expenditures to influ			dy (direct lobbying)			
c Total lobbying expenditures (add li		d 1b)			_	
d Other exempt purpose expenditure						ļ
e Total exempt purpose expenditure				<u> </u>		
f_Lobbying nontaxable amount_Enter	er the amo	ount from the	e following table in bot	th columns		
If the amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20 <u>% of</u>	the amount on line 1e			
Over \$500,000 but not over \$1,000	0,000	\$100,00	00 plus 15% of the exc	cess over \$500,000		
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	00 plus 10% of the exc	cess over \$1,000,000		
Over \$1,500,000 but not over \$17	,000,000	\$225,00	00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
g Grassroots nontaxable amount (er	nter 25% c	of line 1f)				
-				†	· -	
h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0-						
j If there is an amount other than ze	,		line 1, did the organiz	tation file Form 4720		
reporting section 4911 tax for this		er line in or	ine ii, did trie organiz			Yes No
		4-Year Ave	eraging Period Under	Section 501(h)		
		at made a s	ection 501(h) electio	n do not have to comp		
co	olumns be	low. See th	e instructions for line	es 2a through 2f on pag	ge 4.)	
	Lob	bying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount				298,393.		298,393.
b Lobbying ceiling amount						
(150% of line 2a, column(e))						447,590.
c Total lobbying expenditures				25,000.		25,000.
d Grassroots nontaxable amount				74,598.		74,598.
e Grassroots ceiling amount (150% of line 2d, column (e))						111,897.
	1		1	1 1		[

Schedule C (Form 990 or 990-EZ) 2009

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2009 General Federation of Women's Clubs 53-0196514 Page 3

[Part II-B] Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total Add lines 1c through 1i 2 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)	1 2 3	X X X X X X X X X X X X X 1 2 3	nount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?	(c)(5), or s	X X X X X X X X X X X X 1 2 3	
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d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?	1 2 3	Yes 1 2 3	
Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?	1 2 3	Yes 1 2 3	
501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?	1 2 3	Yes 1 2 3	
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	1 2 3	
Did the organization make only in house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	3	N
Did the organization make only in house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	3	
Did the organization agree to carryover lobbying and political expenditures from the prior year?			T
art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)	- 1/-1		
"Yes." Dues, assessments and similar amounts from members	1	1	
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political			
expenses for which the section 527(f) tax was paid).			
a Current year	2a	22	
b Carryover from last year		<u> </u>	
c Total	2b		
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	2b 2c	2b	
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess		2b 2c	
	2c	2b 2c	
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	2c	2b 2c	
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	2c	2b 2c 3	
	<u>2c</u> 3	2b 2c 3	

Schedule D

(Form 990)

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. 2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

Name	of the organization	6.11	Employer identification number
Par	General Federation	or women's Clubs	53-0196514
Par			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, Iir	```` `	(1) 5
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
	Aggregate grants from (during year)		
	Aggregate value at end of year	<u> </u>	
5	Did the organization inform all donors and donor advisors in	•	
	are the organization's property, subject to the organization's		L Yes No
6	Did the organization inform all grantees, donors, and donor		•
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose of	
D -	impermissible private benefit?		Yes No
Par			art IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or		toncally important land area
	Protection of natural habitat	Preservation of a certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	lified conservation contribution in the form o	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Yea
a	Total number of conservation easements		2a
þ	Total acreage restricted by conservation easements		2b
¢	Number of conservation easements on a certified historic st		2c
q	Number of conservation easements included in (c) acquired		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements		Yes N
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 1700	
	and section 170(h)(4)(B)(ii)?		. Yes N
9	In Part XIV, describe how the organization reports conserva	ition easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes t	the organization's accounting for
_	conservation easements.	(A) III A : I T	N O' N
Par			iner Similar Assets.
	Complete if the organization answered "Yes" to Form	n 990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116, n	•	
	treasures, or other similar assets held for public exhibition, e		blic service, provide, in Part XIV, the text
	the footnote to its financial statements that describes these		
Ь	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education,	or research in furtherance of public service,	, provide the following amounts relating t
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
	(ii) Assets included in Form 990, Part X		► \$ <u>542,585</u>
2	If the organization received or held works of art, historical tr		gain, provide
	the following amounts required to be reported under SFAS	116 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		▶ \$
LHA	For Privacy Act and Paperwork Reduction Act Notice, se	ee the Instructions for Form 990.	Schedule D (Form 990) 200

Sche	dule D (Form 990) 2009 General	Federatio	n of	Women	's Clu	hs	(53-01	96512	Page 2
	t III Organizations Maintaining C						Simila	ar Asse	ts (conti	nued)
3	Using the organization's acquisition, access									
	(check all that apply)	,								1101110
а	X Public exhibition	c		Loan or exc	hange progra	ams				
b	X Scholarly research	6		Other	J- F5					
С	X Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	nev further ti	he organizati	on's exem	pt purpo	se in Par	t XIV	
5	During the year, did the organization solicit of									
_	to be sold to raise funds rather than to be m								Yes	X No
Par	t IV Escrow and Custodial Arran					s" to Form	990, Pa	rt IV, line	9, or	
	reported an amount on Form 990, Pa		_							
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	s or other as	sets not in	cluded			
	on Form 990, Part X?									
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing t	table [.]						
	Amount									
С	Beginning balance						1c			
d	d Additions during the year									
е	e Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on F	orm 990, Part X, line	21?						Yes	No
<u>b</u>	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete	f the organization ar	swered	"Yes" to Fo	rm 990, Part	IV, line 10				
		(a) Current year		rior <u>year</u>	(c) Two year	rs back (c) Three y	ears back	(e) Four	years back
1a	Beginning of year balance	1,706,621.	2,21	<u>8,235.</u>						
b	Contributions	10,000.								
C	Net investment earnings, gains, and losses	<u>226,678.</u>	-51	<u>1,614.</u>						
d	Grants or scholarships		ļ							
е	Other expenditures for facilities								1	
	and programs	123,150.								
f	Administrative expenses	27,075.								
9	End of year balance	<u>1,793,074.</u>	1,70	<u>6,621.</u>					L	
2	Provide the estimated percentage of the year	r end balance held a	as:							
а	Board designated or quasi-endowment		_%							
	Permanent endowment ► 32.14	%								
_		%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ind administe	ered for the	organiz	ation	Г	
	by.									Yes No
	(i) unrelated organizations								3a(i)	X
	(ii) related organizations								3a(ii)	X
	If "Yes" to 3a(ii), are the related organization	·							_3b	
4 Do	Describe in Part XIV the intended uses of the tVI Investments - Land, Building				Dart V. Ima	10				
Pai									4 D Dool	
	Description of-investment	(a) Cost or o			or other		cumulate eciation	ea	(d) Book	value
	1 and	basis (investi	nent)		(other)	debi		-		6/1
	Land	·			$\frac{3,641}{1,846}$		93,5	52		$\frac{3,641}{3,284}$.
	Buildings			1,40	1,040.	0	23,31	V 4 •	300	0.
_	Leasehold improvements			15	0,654.	2	05,3	35	245	319.
d	Equipment • • • • • • • • • • • • • • • • • • •			4. 2	0,004.		, <u>.</u> .			0.
	I. Add lines 1a through 1e (Column (d) must e	oual Form 990 Part	X colum	nn (B) line 1	10(c))	L			895	7,244.
	I Louisi lo louisi lo liust e	on o o o o o o a o		,_,,, , ,	-1-//					

Schedule D (Form 990) 2009 General Fe Part VII Investments - Other Securities.	See Form 990, Part X, line	e 12		196514 Page 3
(a) Description of security or category (including name of security)	(b) Book value	(c)	Method of valuation end-of-year market	
Financial derivatives				
Closely-held equity interests				
Other				
				
				
		<u> </u>		
			· -	
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.	See Form 990, Part X, lir			
(a) Description of investment type	(b) Book value		Method of valuation	
		Cost of	end-of-year market	value
	-			<u> </u>
	-			
				
				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, In		<u> </u>		
<u> </u>	ne 15. (a) Description			(b) Book value
Collectibles and artwork	a) Decemption			542,585.
COTICCUIDICS and arework				012/000
	· · · · · · · · · · · · · · · · · · ·			
				
	<u> </u>			
Total. (Column (b) must equal Form 990, Part X, col (B)	line 15.)		•	542,585.
Part X Other Liabilities. See Form 990, Part				
1 (a) Description of liability		(b) Amount		
Federal income taxes				
Other liabilities		3,500.		
Capital lease obligations		2,715.		
				
	l	l		

	dule D (Form 990) 2009 General Federation of Women's Clubs TXI Reconciliation of Change in Net Assets from Form 990 to Audited Fina	ncial Sta		0196514 Page	<u>4</u>
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		2,401,625	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		2,607,122	_
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3			
4	Net unrealized gains (losses) on investments	4		165,504	
5	Donated services and use of facilities	5		103,304	÷
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		165,504	_
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		-39,993	
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Reve	enue per	Return		_
1	Total revenue, gains, and other support per audited financial statements		1	2,627,764	•
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments 2a 1	65,504	ا		
b	Donated services and use of facilities 2b		_]		
C	Recoveries of prior year grants 2c		_]		
d	Other (Describe in Part XIV)	<u>60,635</u>			
е	Add lines 2a through 2d		2e	226,139	
3	Subtract line 2e from line 1		3_	2,401,625	•
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.				
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIV.)		_		
C	Add lines 4a and 4b		4c		•
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	2,401,625	<u>.</u>
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Exp	enses pe	r Retu		_
1	Total expenses and losses per audited financial statements		1	<u>2,667,757</u>	<u>.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities 2a		4		
b	Prior year adjustments 2b		_		
C	Other losses 2c		-		
d	Other (Describe in Part XIV)	60,635	ᆈᅵ		
e	Add lines 2a through 2d		2e	60,635	
3	Subtract line 2e from line 1		3	2,607,122	•
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		_		
þ	Other (Describe in Part XIV.)		_		
c	Add lines 4a and 4b		4c		<u>.</u>
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIV Supplemental Information	<u>-</u>	5_	2,607,122	·
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4;	Part IV lines	1b and 2	2b: Part V. line 4. Part	_
	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to p				
	ct III, line 4: Collection items were obtained by t				
<u></u>	to fir, fine 4. collection from well obourned by o	019			_
<u>th</u>	rough donations from members and clubs. The collect	ion is	lin.	ked with	_
<u>th</u>	e Women's History and Resource Center, which serves	the C	rgan	ization's	_
<u>ex</u> e	empt purpose. The collection allows the Organization	n to a	ttra	ct those	_
who	o are interested in women's studies and history, wh	<u>ile at</u>	the	same time	
se	rving as a part of the Organization's history.		··-		_
	rt V, line 4: The Organization's endowment has been	funda	d h		
ra]	ic v. iine si ine ordanizacion s endowment nds Deen	runde	עני עי		

Schedule D (Form 990) 2009

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Schedule D (Form 990) 2009	<u>General</u>	<u>Federation</u>	of Women'	s Clubs	53-0196514	Page 5
Schedule D (Form 990) 2009 Part XIV Supplemental Inform	mation (continu	ed)				
			-			
donor-restricted con	ntributio	ns for the	<u>general o</u>	<u>perations o</u>	f the	
Organization.						
			·			
David 1177 11 0.5	0.1					
Part XII, Line 2d -	Otner Ad	<u>]ustments:</u>				
Rental expenses						
Doub WITT I do 04	0.5	a 2				
Part XIII, Line 2d	- Otner A	ajustments:				
Rental expenses						
			·			
		· · · · · · · · · · · · · · · · · · ·				
					<u> </u>	
						
				•		
			<u> </u>			
			 -			
			<u> </u>			
		 .				
						
						
			 -		0.11.11.07.	00) 0000
					Schedule D (Form 9	5 U) 2UU9

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ► Attach to Form 990. Department of the Treasury Internal Revenue Service SCHEDULE (Form 990)

2009	Onen to Public
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2 Employer identification number 53-0196514 Inspection (h) Purpose of grant or assistance X Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant General Federation of Women's Clubs (c) IRC section if applicable General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Part Part II

Enter total number of section 501(c)(3) and government organizations	
(3) and governm	tions
of section 501(c)	Enter total number of other organizations
total number o	total number of
Enter	Enter

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

53-0196514

Schedule I (Form 990) 2009 General Federation of Women's Clubs

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

sistance	ļ									
(f) Description of non-cash assistance										
(e) Method of valuation (book, FMV, appraisal, other)				additional information	grant	ו ח	hey are	returned after		
(d) Amount of non- cash assistance				line 2, and any other	receives the	at, it	evaluation form before they	should be re	completed	
(c) Amount of cash grant				on required in Part I,	Assistant re	of the	uation for	evaluation sh	funding is	
(b) Number of recipients				ide the information	gram	liremen	out the eval	the	ed grant	
(a) Type of grant or assistance				Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	Part I, Line 2: The		required to fill	eligible for any other grants, and	the project for which they received	

(Form 990)

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ➤ See the Instructions for Form 990.

Inspection

Department of the Treasury Internal Revenue Service Name of the Organization

Employer Identification number

General									53-019	
Part I Continuation of Officers, D	s, K	ey	Em	ple	oyees, and Highes	t Compensated	Employees			
(A)	(B)			(C				(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(cl	heck	all t	hat	app	ly)	compensation	compensation	amount of
	per week					9.		from the	from related organizations	other
	Week	ğ				ploye		organization	(W-2/1099-MISC)	compensation from the
	1	a die				ed en		(W-2/1099-MISC)	(** 27 , 55555)	organization
		tee or	ustee			ensat		,		and related
		al trus	nal tr		loyee	EO III				organizations
		individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			
Dahas Chashanashi		트	Ĕ	튬	ş	Ŧ	Œ			
Debra Strahanoski	1 00	v						0.	0.	0.
State President	1.00	Λ	 					U.	<u> </u>	0.
Barbara Conaway	1 00	v						0.	0.	0.
State President	1.00	Ā				_	-	<u> </u>		
S. Nell Rider	1 00	v							^	0.
State President	1.00	A	_		_		-	0.	0.	
Helen Carter	1 00	v						0.	0.	0.
State President	1.00	A	-				-	U .	<u></u>	
Anne Aubrey	1 00	.						0.	0.	0.
State President	1.00	X.					_	<u></u>		
Nannette White	1 00	3,7						0.	0.	0.
State President	1.00	^					\vdash			
Jane Shaw	1 00							0.	0.	0.
State President	1.00	A.					 			
Julianne Gibbs	1 00	v						0.	0.	0.
State President	1.00	^	├				<u> </u>	<u> </u>		
Mary Baird State President	1 00	v						0.	0.	0.
Sherry Wellman	1.00	^	-	-		_	_	· · · · · · · · · · · · · · · · · · ·		
State President	1.00	v						0.	0.	0.
Jan Latola	1.00	^		-		_	├			<u> </u>
State President	1.00	v						0.	0.	0.
Carolyn Huey	1.00	Λ	_			-	-	· · · · · · ·	.	
State President	1.00	v				,	,	0.	0.	0.
Patricia Zachary	1.00	^	-			\vdash		<u> </u>		
State President	1.00	v						_ 0.	0.	0.
Susan Macartney	1.00	<u>^</u>	_	\vdash						
State President	1.00	x	1			ĺ		0.	0.	0.
Janice Predoehl	1.00		┢╌	 		-	\vdash			
State President	1.00	Y.					ŀ	0.	0.	0.
Mary Ann Hantout	1.00	1		\vdash	-	-	 			
State President	1.00	_x					•	0.	0.	0.
Arlene Creeden	1.00	1	-				l			<u>-</u>
State President	1.00	X	ļ				ļ	0.	٥.	0.
Anne Redlus	1.00		-			\vdash		<u> </u>		<u>·</u>
State President	1.00	x						0.	0.	0.
Kathleen Schuster		1	 		-	\vdash	\vdash	<u> </u>		
State President	1.00	x				ĺ	1	0.	0.	0.
Donna Sherrer		† -					Π			
State President	1.00	X	L	L				0.	<u> o.</u>	0.

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Schedule J-2 (Form 990) 2009

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

(Form 990)

Continuation Sheet for Form 990

2009

➤ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

➤ See the Instructions for Form 990.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the Organization

General Federation of Women's Clubs

Employer Identification number 53-0196514

Part I Continuation of Officers, D									53-019	
		ust	ees			EIT	pie			
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	ĺ.,		Posi				Reportable	Reportable	Estimated
	hours	(CI	neck	all t	hat	app	ly)	compensation	compensation	amount of
	per week					9	l	from the	from related organizations	other compensation
	Week	喜				yoldı		organization	(W-2/1099-MISC)	from the
		die				ed en		(W-2/1099-MISC)	(11 27 1000 111100)	organization
	ĺ	te o	ustee			ensat				and related
		l fus	naltr		loyee	dwo				organizations
	}	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			
		를	tus	튱	Key	呈	Ē			
Beverly Lassiter	ļ	ļ								_
State President	1.00	X	_					0.	0.	0.
Cynthia Shattuck										
State President	1.00	X						0.	0.	0.
Rose Logston										
State President	1.00	X						0.	0.	0.
Norma Warnke										
State President	1.00	X						0.	0.	<u> </u>
Heather Thomas										
State President	1.00	X						0.	0.	<u> </u>
Dorothy Zimmerman	}						ł	}		
State President	1.00	X					<u> </u>	0.	0.	<u> </u>
Judith Marak										
State President	1.00	X						0.	0.	0.
Tammy Garland	<u> </u>									
State President	1.00	X						0.	0.	0.
Michelle Glanzer										
State President	1.00	X						0.	0.	0.
Johnnie Hill				'						
State President	1.00	X		_			ļ	0.	0.	0.
Marjorie Williamson				[ĺ		_	
State President	1.00	X		<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
Joan Kimber	1	}					1		_	_
State President	1.00	X			_		_	0.	0.	0.
Deanna Beckman	ļ				١.				_	
State President	1.00	X	<u> </u>	<u> </u>		ļ		0.	0.	0.
Emma Jean Wise		ŀ							_	
State President	1.00	X	L.	<u> </u>			<u> </u>	0.	0.	0.
Shirley Phipps				ļ					_	_
State President	1.00	X	L	<u> </u>		_	<u> </u>	0.	0.	0.
Georgianna Tillis									_	_
State President	1.00	X	ļ	_	<u> </u>	<u> </u>		0.	0.	0.
Marianne Potter		l	}						•	•
State President	1.00	<u> </u>			<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
Bess Stevenson		l	ľ		ł		l			
State President	1.00	X		<u> </u>	<u> </u>		\vdash	0.	0.	0.
Penny Peterson					1	1			_	_
State Director	1.00	X	├		\vdash	├	⊢	0.	0.	0.
Alice Rodriguez									_	_
State Director	1.00			<u> </u>	<u> </u>	<u></u>	Ļ	0.	0.	0.
LHA For Privacy Act and Paperwork Reduction	n Act Notice,	see	the	Ins	truc	tion	s fo	or Form 990.	Schedule J-2	(Form 990) 2009

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(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ► See the Instructions for Form 990.

Name of th	Name of the Organization General Federation of Women's Clubs Employer Identification number 53-0196514											
Part I	Continuation of Officers, Di											
	(A)	(B)				 C)	_		(D)	(E)		(F)
	Name and title	Average	ļ		Pos		1		Reportable	Report		Estimated
		hours	(c	heck				lv)	compensation	compen		amount of
		per	Ė		İ		Ė	"	from	from re		other
		week) de		the	organiza	itions	compensation
			ecto				ea bi		organization	(W-2/1099	-MISC)	from the
			9	8			sated		(W-2/1099-MISC)			organization
			uste	Fust	İ	, ,	i de					and related organizations
			ndividual trustee or director	tona	_	l ge	Highest compensated employee	_				organizations
			Indivi	Institutional trustee	Officer	Key employee	High	Former				
	y Holland											
	Director	1.00	X		<u> </u>	L.	<u> </u>	_	0.		0.	0.
	a Sanford								_		_	_
	Director	1.00	X	_		<u> </u>			0.		0.	0.
	e Sparks		1	l					_			_
	Director	1.00	X						0.		0.	0.
Rita V							ļ		_		_	
	Director	1.00	X	<u> </u>			_		0.		0.	0.
	ey White Miller										_	_
	Director	1.00	X	L			<u> </u>	_	0.		0.	0.
Joyce								,			_	
	Director	1.00	X	<u> </u>	_	<u> </u>	<u> </u>		0.		0.	0.
	Shibley			İ		İ					_	
	Director	1.00	X	<u> </u>	<u> </u>		<u> </u>		0.		0.	0.
	e O'Sullivan				1	ŀ				1	_	
	Director	1.00	X	<u> </u>	_		<u> </u>		0.		0.	0,
	topher Dunyak				}]			_	
	Director	1.00	X	<u> </u>	-	_	<u> </u>	_	0.		0.	0.
	len Cortapasso				ļ						•	
	Director	1.00	X	<u> </u>	ļ	_	<u> </u>	-	0.		0.	0.
	ann Athanaelos Sapp				ĺ						_	
	Director	1.00	X	ļ	ļ	<u> </u>		ļ	0.		0.	0.
	Vugrinovich	4 00		İ					_		^	
	Director	1.00	X	├-	ļ		-		0.		0.	0.
	ine Brown	4 00	Í			ĺ	(•	
	Director	1.00	X	<u> </u>	<u> </u>	 	_	-	0.		0.	0.
	a Love Coley	1 00		ļ	l	}					^	,
	Director	1.00	X	<u> </u>	<u> </u>	-	├	├	0.		0.	0.
	Rocker	1 00	١					ĺ			^	
	Director	1,00	X	⊬	<u> </u>	\vdash	 	-	0.		0.	0.
_	Canterbury	1 00	٠,						0		^	_
	Director	1.00	X	 	┢	├	├-	<u> </u>	0.	<u> </u>	0.	0.
	ne Way	1 00	1,	1	1				^		^	
	Director	1.00	<u>*</u>	╁	\vdash	 	-	╁	0.		0.	0.
	ie Dialessi	1 00			[[[^		^	
	tment Chairman	1.00	X	├	<u> </u>		├-				0.	0.
Kay B		1 00		1	1	l	ł		0.		0.	0.
	tment Chairman Waters	1.00	14	\vdash	┼	\vdash	 	-	U .		<u> </u>	ļ
	waters tment_Chairman	1.00]					0.		0.	0.
	Cmenc_Chairman	_	14		<u> </u>		- -	Щ.	r Form 990			(Form 990) 2000

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

(Form 990)

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the Organization ➤ See the Instructions for Form 990.

Inspection

Name of the Organization General	. Federat:							's Clubs	Employer Identif	
Part I Continuation of Officers,										
(A)	(B)		-	(0	>)			(D)	(E)	(F)
Name and title	Average	ı		Posi	tion	1		Reportable	Reportable	Estimated
	hours	(cl	heck	all t	hat	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	5		1		ployer		the organization	organizations (W-2/1099-MISC)	compensation from the
	- [girect		1		de de	ĺ	(W-2/1099-MISC)	(VV-2/1099-IVII3C)	organization
		50 00	ste			nsate	ŀ	(** = * 1000 111120)		and related
		trus	la tr		oyee	E O				organizations
		Individual trustee or director	Institutional trustee	8	Key employee	Aighest compensated employee	Fg.	ĺ		
		Ī	işi	Officer	Key	물	호			
Bert Alberti		ļ		1 1			Ì			
Department Chairman	1.00	X	_			_		0.	0.	0.
Mary Ann Pierce										
Department Chairman	1.00	X				ļ	<u> </u>	0.	0.	0.
Shirley Holly							ĺ			_
Department Chairman	1.00	X	<u> </u>				ļ	0.	0.	
Dana Clark								_	_	
Department Chairman	1.00	X					<u> </u>	0.	0.	0.
Kathy Canzano										_
Department Chairman	1.00	X				_		0.	0.	0.
Nancy Jones		l					ł			
Department Chairman	1.00	X	_			<u> </u>	<u> </u>	0.	0.	0.
Mary Sprague										
Department Chairman	1.00	X	}_	\vdash	-	<u> </u>	-	0.	0.	0.
Becky Weber	1 200	 							_	
Department Chairman	1.00	X	┡			-	<u> </u>	0.	0.	0.
Mary Sprague	1 00			1 1						_
Department Chairman	1.00	X	-	\vdash		<u> </u>	├	0.	0.	0.
Gloria Leveillee	1 00	,,				ŀ	1		0.	_
Member	1.00	X	<u> </u>	Н	<u> </u>	 	 	0.		0.
Ida Dorvee	1 00	٠,						0.	0.	_
Chairman	1.00	^	\vdash	Н	\vdash	├	-	0.		0.
Cathy Barker Member	1 00	v	l	}	l	l	ł	0.	0.	0.
Linda Bridges	1.00	^	┢		-		╌	<u> </u>	<u></u>	
Member	1.00	v			ļ	ļ		0.	0.	0.
Katherine Monahon	1.00	^	 		-	1	├-			<u>.</u>
Member	1.00	x						0.	0.	0.
Karen Morris	1.00	1	<u> </u>		-	 			`	
Member	1.00	x	-	1	ŀ		}	0.	0.	_ 0.
Jane Lee Nosal	1.00	-	†			<u> </u>	 			
Member	1.00	\mathbf{x}						0.	0.	0.
Sharen Ward		Ť								
Member	1.00	x				1		0.	0.	0.
Katherine Foust		† <u></u>		П	l –	Π				
Chairman	1.00	X	1			1	1	0.	_ 0.	0.
Dixie Hertel		1		$\lceil \rceil$						
Chairman	1.00	X	<u>L</u> .					_ 0.	0.	0.
Bessie Konishi					_					
Chairman	1.00	X		<u> </u>				0.	0.	0.

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

2009.04020 General Federation of Women GFWC___1

(Form 990)

Continuation Sheet for Form 990

2009

Department of the Treasury Internal Revenue Service ► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

See the Instructions for Form 990.

Open to Public Inspection

Name of the Organization

General Federation of Women's Clubs

53-0196514

Employer Identification number

Part I Continuation of Officers, Di	rectors. Tr	ust	909	s. K	ev	Em	pla	ovees, and Highes	t Compensated I	
(A)	(B)			, (C				(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
, . ,	hours	(ct		allt			ly)	compensation	compensation	amount of
	per	Ė	T					from	from related	other
	week	_				oyee		the	organizations	compensation
		recto				empl		organization	(W-2/1099-MISC)	from the
		0 d				sated		(W-2/1099-MISC)		organization and related
		ruste	T us		8	преп		:		organizations
		individual trustee or director	nstitutional trustee		l old	Highest compensated employee	=		:	Organizations
		Indiv	instit.	Officer	Key employee	Highe	F ormer			
Chris Sienkielewski										
Chairman	1.00	X						0.	0.	0.
Marian St. Clair										
Member	1.00	x						0.	0.	0.
Catherine Ryan										
Member	1.00	x						0.	0.	0 •
Faye Gregory				П						
Member	1.00	x						0.	0.	0.
Sandi Jones										
Member	1.00	x						0.	0.	0.
Toni Collins										
Member	1.00	X					İ	0.	0.	0.
Shelli Fehr					_					
Member	1.00	x						0.	0.	0.
Phyllis Salzburg	2100	<u></u>								
Member	1.00	x						0.	0.	0.
Shirley Gomes				-						
Chairman	1.00	x					i	0.	0.	0.
Kathleen Ferrara			H			-				
Director-elect of Jr Clu	1.00	x]	0.	0.	0.
Annette Day	2.00									
Member	1.00	x				l		0.	٥.	0.
Yvonne Schilplin		Ť	-							
Member	1.00	\mathbf{x}					1	0.	0.	0.
Deen Meloro				_						
Member	1.00	x		ĺ		į	ŀ	0.	٥.	0.
Patrice Booze				1			Π			
Committee Chairman	1.00	x						0.	0.	0.
Tammy Guensler			1	\vdash						
Member	1.00	x						0.	0.	0.
Barbara Henry										
Member	1.00	x	1	l				0.	0.	0.
Barbara Whitaker			T	\vdash	\Box	T	t			
Member	1.00	$ \mathbf{x} $			-	1		0.	0.	0.
Debbie Thomas	1100			 -			_			
Member	1.00	$ \mathbf{x} $						0.	٥.	0.
Kathryn Sowers	1	1	T	T	\vdash	\vdash	忊			
Member	1.00	x			1			0.	0.	0.
Cheryl Strickler	1.00	1	T	1	Π	T	T		<u> </u>	
Member	1.00	x	1		1			0.	0.	_ 0.
PICHIA CI.	, 2.00	142	٠		<u> </u>	4		. 5000		2 (Form 990) 2009

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

(Form 990)

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. Department of the Treasury Internal Revenue Service ➤ See the Instructions for Form 990.

Open to Public Inspection

OMB No 1545-0047

Name of the Organization

Employer Identification number

Part Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (D) Reportable (C) Position (Marie and title (C	General I	<u>ederat</u>	<u>i 01</u>	1 (of.	Wo	<u>ome</u>	en	's Clubs	53-019	
Name and table			ust	ee			Em	plo	oyees, and Highes	t Compensated I	Employees
Dough Park		(B)							(D)	• •	(F)
Per Week Section S	Name and title]								-
Week B			(cl	heck	all	that	app	ly)	1 '	•	
Judi Stankowich Member 1.00 x 0. 0. 0. 0. 0.		•			ļ	ļ			= ::		
Judi Stankowich Member 1.00 x 0. 0. 0. 0. 0.	!	week	a	1			ploye				•
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Judi Stankowich Member 1.00 x 0. 0. 0. 0. 0.			o a	ste		'	nsate		(** 2/ 1000 (**1000)		_
Judi Stankowich Member 1.00 x 0. 0. 0. 0. 0.			gg	al tru		yee	E	ĺ	[
Judi Stankowich Member 1.00 x 0. 0. 0. 0. 0.			idual	tap	a	ыф	esto	1			
Member			Ē	랿	를	Ke	Hg	돌			
Marcia Wilson	Judi Stankowich		Г								
Marcia Wilson Committee Chairman 1.00 x 0. 0. 0. 0. 0. 0.		1.00	X						0.	0.	0.
Kimberly Meyer Member 1.00 X 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	Marcia Wilson										
Kimberly Meyer Member 1.00 X 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	Committee Chairman	1.00	X					ļ	0.	0.	0.
Mary Jacobs Member 1.00 X 0. 0. 0. Paula Schlice	Kimberly Meyer										
Mary Jacobs Member 1.00 X 0. 0. 0. Paula Schlice 1.00 X 0. 0. 0. 0. Member 1.00 X 0. 0. 0. 0. Colleen Haycock 0. 0. 0. 0. 0. 0. Member 1.00 X 0. <td></td> <td>1.00</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>		1.00	X						0.	0.	0.
Member 1.00 X 0. 0. 0. 0. Paula Schlice 0. <td>Mary Jacobs</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Mary Jacobs										
Paula Schlice Member 1.00 X 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	-	1.00	X	[0.	0.	0.
Mary Beth Guy Member 1.00 X 0. 0. 0. Colleen Haycock 1.00 X 0. 0. 0. 0. Member 1.00 X 0. 0. 0. 0. Barbara Nunnari 0. 0. 0. 0. 0. Janice Adler 0. 0. 0. 0. 0. 0. Carol White 0.	Paula Schlice										
Mary Beth Guy Member 1.00 X 0. </td <td>Member</td> <td>1.00</td> <td>X</td> <td></td> <td></td> <td>}</td> <td></td> <td>ļ</td> <td>0.</td> <td>_ 0.</td> <td>0.</td>	Member	1.00	X			}		ļ	0.	_ 0.	0.
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Colleen Haycock Member	- -	1.00	X						0.	0.	0.
Member 1.00 X 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.											
Barbara Nunnari Committee Chairman 1.00 X 0. 0. 0. 0. 0		1.00	X						0.	0.	0.
Janice Adler			\Box								
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Carol White Committee Chairman 1.00 X 0. 0. 0. 0. Barbara Winingham Member 1.00 X 0. 0. 0. 0. Joann Wheeler Committee Chairman 1.00 X 0. 0. 0. GFWC Clubwoman Chairman 1.00 X 0. 0. 0. 0. Patricia Keel Jennie Awards Chairman 1.00 X 0. 0. 0. 0. Joy Mims Juniorette Chairman 1.00 X 0. 0. 0. 0. Melanie Reynolds Special Project Chairman 1.00 X 0. 0. 0. 0. Marcia Heronimus Music Chairman 1.00 X 0. 0. 0. 0. Sue Hass Protocol Chairman 1.00 X 0. 0. 0. 0. Bette Brust Member 1.00 X 0. 0. 0. 0. Bobbi Caley Double Double Chairman 0. 0. 0. 0. 0. Double Caley Double Chairman 0. 0. 0. 0. 0. Double Caley Double Chairman 0. 0. 0. 0. 0. Double Caley Double Chairman 0. 0. 0. 0. 0. Double Caley Double Cale Ca	Janice Adler		Γ								
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Committee Chairman 1.00 X 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.		1.00	X						0.	0.	0.
Marianne Maynard 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	Joann Wheeler										
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Patricia Keel Jennie Awards Chairman 1.00 X 0. 0. 0. Joy Mims Juniorette Chairman 1.00 X 0. 0. 0. Melanie Reynolds 0. 0. 0. 0. 0. 0. 0. Special Project Chairman 1.00 X 0. 0. 0. 0. Music Chairman 1.00 X 0. 0. 0. 0. Sue Hass 0. 0. 0. 0. 0. 0. 0. 0. Protocol Chairman 1.00 X 0. 0. 0. 0. Bette Brust 0. 0. 0. 0. 0. 0. 0. 0. Bobbi Caley 0. 0. 0. 0. 0.	Marianne Maynard										
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Joy Mims Juniorette Chairman 1.00 X 0. 0. 0. Melanie Reynolds Special Project Chairman 1.00 X 0. 0. 0. Marcia Heronimus Music Chairman 1.00 X 0. 0. 0. 0. Sue Hass Protocol Chairman 1.00 X 0. 0. 0. 0. Bette Brust Member 1.00 X 0. 0. 0. 0. 0. Bobbi Caley 0. 0. 0. 0. 0. 0. 0. 0.											
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Melanie Reynolds 0.0.0.0.0.0. Special Project Chairman 1.00 X 0.0.0.0.0. Marcia Heronimus 0.0.0.0.0.0. Music Chairman 1.00 X 0.0.0.0.0. Sue Hass Protocol Chairman 1.00 X 0.0.0.0.0.0. Bette Brust Member 1.00 X 0.0.0.0.0.0.0.0. Bobbi Caley 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	Joy Mims		Π								
Special Project Chairman 1.00 X 0. 0. 0. Marcia Heronimus 0. 0. 0. 0. Music Chairman 1.00 X 0. 0. 0. Sue Hass 0. 0. 0. 0. Protocol Chairman 1.00 X 0. 0. 0. Bette Brust 0. 0. 0. 0. Bobbi Caley 0. 0. 0. 0.	Juniorette Chairman	1.00	X	<u> </u>					0.	0.	0.
Marcia Heronimus Music Chairman 1.00 X 0. 0. 0. Sue Hass 0. 0. 0. 0. 0. 0. Protocol Chairman 1.00 X 0. 0. 0. Bette Brust 0. 0. 0. 0. 0. 0. 0. Member 1.00 X 0. 0. 0. Bobbi Caley 0. 0. 0. 0. 0. 0. 0.	Melanie Reynolds										
Music Chairman 1.00 X 0. 0. 0. Sue Hass 0. 0. 0. 0. 0. Protocol Chairman 1.00 X 0. </td <td>Special Project Chairman</td> <td>1.00</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>	Special Project Chairman	1.00	X						0.	0.	0.
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Member 1.00 X 0. 0. 0. Bobbi Caley		1.00	X		<u> </u>			L	0.	0.	0.
Member 1.00 X 0. 0. 0. Bobbi Caley 0.											
Bobbi Caley		1.00	X			<u></u>	L		0.	0.	0.
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ➤ See the Instructions for Form 990.

Inspection

Name of the Organization

Employer Identification number

General 1 Part I Continuation of Officers, D									53-019	
	T	usi	ees			СП	ıpıı			
(A)	(B)			_ (C				(D)	(E)	(F)
Name and title	Average	١,,		Posi			L A	Reportable	Reportable	Estimated
	hours per	(CI	100	allt	nat	app	iy)	compensation	compensation from related	amount of other
	week			} }		eg.	ł	the	organizations	compensation
	WOOK	喜			l	ploy		organization	(W-2/1099-MISC)	from the
		dre				ua pa		(W-2/1099-MISC)	(· = 	organization
		tee o	ustee			ensat				and related
		altus	nal tr		loyee	сош				organizations
	ł	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			
		ם	Sul	ਙ	<u>ā</u>	표	횬			
Bobby Bjork										_
Member	1.00	X						0.	0.	0.
Carol Pralle		l							•	•
Member	1.00	X		-				0.	0.	0.
Carol Silvus	1 00								•	•
Member	1.00	X					_	0.	0.	0.
Cheryl Martin	1 00	₹.							0.	0.
Member Dawn Himler	1.00	Δ		\vdash			\vdash	0.	0.	<u> </u>
Member	1.00	v						0.	0.	0.
Della Gowan	1.00	^		\vdash			\vdash	0.		
Member	1.00	Y						0.	0.	0.
Donna Short	1.00	^	-			<u> </u>			<u> </u>	
Member	1.00	x						0.	0.	0.
Edith Miller	1 2.00									
Member	1.00	x	ŀ					0.	0.	0.
Evelyn Dill										
Member	1.00	X	ŀ					0.	0.	0.
Fern Nevatt										
Member	1.00	X						0.	0.	0.
Fleta Haskins										
Member	1.00	X		ļ				0.	0.	0.
Gay Tarr	}						l			
Member	1.00	X					_	0.	0.	0.
Member										
Member	1.00	X				_	-	0.	0.	0.
Gayle Hanna	1 00									_
Member	1.00	X	<u> </u>	\vdash		\vdash	⊢	0.	0.	0.
Ivous Sisk	1 00	,,		1			l			١ ,
Member	1.00	X					├	0.	0.	0.
Jan Bailey Member	1 00							0.	0.	0.
Joan Wesolowski	1.00	^				-	╁	· ·	<u> </u>	<u> </u>
Member	1.00	v						0.	0.	0.
Judith Maguire	1.00	A					\vdash	·		
Member	1.00	x		'				0.	0.	0.
Judy Thomas Martin	1.00	 **		 	\vdash		T	 		<u>;</u>
Member	1.00	x						0.	0.	0.
Katherine White		T-	T -		<u> </u>					
Member	1.00	\mathbf{x}						0.	0.	0.
									<u> </u>	

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

(Form 990)

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ► See the Instructions for Form 990.

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the Organization

Employer Identification number

	al Federat:								53-019	6514
Part I Continuation of Officer		<u>ust</u>	tee			Em	ıple			Employees
(A)	(B)	ĺ		(((D)	(E)	(F)
Name and title	Average	١		Pos				Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	app	ly)	compensation	compensation	amount of
	per week		İ			 123		from the	from related organizations	other compensation
	Week	真				Highest compensated employee		organization	(W-2/1099-MISC)	from the
		l e				5		(W-2/1099-MISC)	(· · · · · · · · · · · · · · · · · · ·	organization
		ste o	ustee			el Sa				and related
		la fa	onal tr		ploye	8				organizations
		Individual trustee or director	nstitutional trustee	Officer	Key employee	ghest	Богшег			
Kathleen Seeger		=	=	δ	3	로	32	-		
Member	1.00	x				1	1	0.	0.	0.
Kay Salewske		ļ <u></u>								
Member	1.00	X						0.	0.	0.
Lin Wilken										
Member	1.00	X						0.	0.	0.
Linda Boyd		<u> </u>								
Member	1.00	X						0.	0.	0.
Linda Kreussling		<u> </u>								
Member	1.00	X	ļ					0.	0.	0.
Lorraine Gorham							Г			
Member	1.00	X						0.	0.	0.
Mary Emma Tisinger										
Member	1.00	X						0.	0.	0.
Mary Jo Thomas							1			
Member	1.00	X	<u> </u>		<u></u>			0.	0.	0.
Mary Kaye Ernest			ļ						_	_
Member	1.00	X		<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
Mary Pat Marcello										
Member	1.00	X		<u> </u>			<u> </u>	0.	0.	0.
Pat Davis										
Member	1.00	X	-	-	<u> </u>	├	<u> </u>	0.	0.	0.
Pat Huffman	4 00]								ا م
Member	1.00	X		-		-	-	0.	0.	0.
Pat Pisarski	1 1 00	١,,	}					0.	0.	
Member Patricia Rodriguez	1.00	┝		\vdash		\vdash	-		<u> </u>	0.
Member	1.00	v						0.	0.	0.
Patty Benskin	1.00	^	┢	 -		┢	-	<u> </u>	<u> </u>	
Member	_ 1.00	v			ĺ	ĺ		0.	0.	0.
Renee Horist		A	\vdash	 			┢		<u> </u>	
Member	_ 1.00	v		i		1		0.	0.	
Rowena Drinkwater	1.00	 ^	\vdash	╁	-				•	
Member	1.00	x						0.	0.	0.
Sandra Phillips	1.00	1	T	<u> </u>	1		\vdash	<u> </u>		
Member	1.00	$ \mathbf{x} $				-		0.	0.	0.
Sheryl Axmear		† <u></u>	1	T		T	T			
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Department of the Treasury

(Form 990)

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ➤ See the Instructions for Form 990.

Inspection

Name of the Organization

Employer Identification number

General	Federat:	ior	n c	of	Wo	ome	en	's Clubs	53-019	6514
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		Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Рогле			
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

SCHEDULE O

Supplemental Information to Form 990

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Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

General Federation of Women's Clubs	53-0196514
Form 990, Part III, Line 4d, Other Program Services:	
Women's History and Research Center - Founded in 1984, th	e Women's
History and Resource Center collects, preserves, interpre	ts, and
promotes the history of the GFWC and women volunteers. Th	e Center
documents the social and political contributions of GFWC	clubwomen from
1890 to the present through the GFWC archives, related sp	ecial
collections, and publications.	
Expenses \$ 204581. including grants of \$ 0. Revenue \$	0.
Other Programs - Programs which help to futher accomplish	the
Organization's exempt purpose.	
Expenses \$ 335604. including grants of \$ 37972. Reven	ue \$ 92219.
Form 990, Part VI, Section A, line 6: The Organization ha	s members who
attain membership through the payment of an annual fee.	
Form 990, Part VI, Section A, line 7a: Members on the Int	ernational level
elect the seven members of the Executive Committee (Inter	national
President, President-elect, First Vice-President, Second	Vice-President,
Recording Secretary, Treasurer, and Director of Junior Cl	ubs); Members on
the region level elect their region officers (region pres	idents) who serve
on the Organization's Board of Directors; Members on the	state level elect
their state leaders on the state level (state president a	nd state director
of junior clubs) who serve on the Organization's Board of	Directors.

Form 990, Part VI, Section A, line 7b: All proposed changes to the

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02-03-10

SCHEDULE O

Supplemental Information to Form 990

(Form 990)

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

General Federation of Women's Clubs

Employer identification number 53-0196514

Organization's Bylaws are reviewed and voted on by the general membership annually at the International Convention.

Form 990, Part VI, Section B, line 11: The 990 is reviewed by the Senior

Director of Finance and Administration with the Executive Director. Copies

of the draft 990 are sent to the International President & Chief Executive

Officer and Treasurer. If there are any questions, the Senior Director of

Finance and Administration communicates them with the auditor.

Form 990, Part VI, Section B, Line 12c: The conflict of interest policy is contained in the Organization's Bylaws. It is distributed to directors, officers, and key employees, for self-disclosure. Individuals are required and are reminded to report any conflicts of interest to the Board, which will take appropriate action.

Form 990, Part VI, Section B, Line 15: Compensation of the Executive

Director is discussed by the Executive Committee. Staff salaries are

approved by the Executive Director and reviewed in accordance with the

budget. They are also compared to the median salary rate in the D.C.

metropolitan area. The Executive Committee, as part of the budget planning

and approval process, establishes the budget for salary expense. The

Executive Director has the final authority over compensation of the

Organization's staff within the approved salary budget.

Form 990, Part VI, Section C, Line 19: The Organization's governing

documents are available upon request and on its website, and its audited

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

Schedule O (Form 990) 2009

032211
02-03-10

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization Gener	al Federation of Women's Clubs	Employer identification number 53-0196514
financial statements,	990 forms and conflict of interes	t policy are posted
on the Organization's	website.	
		
Form 990, Part XI, Li	ne 2c	
The Organization's Ex	secutive Committee assumes responsi	bility for
oversight of the audi	t of its financial statement and se	election of an
independent accountant	nt which is reviewed and approved by	y the Board of
Directors. This proce	ess is consistent with prior years.	
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Form 8868' (Rev. April 2009) Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Internal	Revenue Service	▶ File a separate application for each return.			
 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. 					
Partif Automatic 3-Month Extension of Time. Only submit original (no copies needed).					
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only					
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.					
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.					
Туре	or Name of Exemp	t Organization E	mploye	er identification number	
print	General	Federation of Women's Clubs	53-	0196514	
File by the due date filing you return Sinstruction	e for Number, street, and room or suite no. If a P.O. box, see instructions. 1734 N Street. NW				
	266				
Check type of return to be filed (file a separate application for each return) Form 990 Form 990-T (corporation) Form 990-BL Form 990-EZ Form 990-EZ Form 990-PF Form 1041-A Form 8870					
The Organization • The books are in the care of ▶ 1734 N Street, NW - Washington, DC 20036 Telephone No. ▶ 202-347-3168 • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box • If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all members the extension will cover.					
	February 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: Calendar year or Amount of the organization named above. The extension is for the organization's return for: X tax year beginning JUL 1, 2009 , and ending JUN 30, 2010 .				
	·				
	If this application is fo nonrefundable credits	r Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	3a \$		
		r Form 990-PF or 990-T, enter any refundable credits and estimated	<u> </u>		
		·	3b \$		
			3c \$	N/A	
Cauti	on. If you are going to	make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 88	879·EO	for payment instructions.	