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Form, 990-EZ

Department of the Treasury Internal Revenue Service

DAA

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

OMB No 1545-1150 2009

Open to Public Inspection

Α	For the	e 2009 calen <u>da</u>	ryear, or tax year beginning $07/01/09$, and ending $06/30/1$	0		
В	Check if	• • • • •	ease C Name of organization		D Emp	loyer identification number
	Address	o Glatiqe I	e IRS belor C. C. C. L. C. C. L. C. C			<i></i>
	Name c	hongo	intor Fifty Club of Galveston			-6105720
Ц	Initial re	1.3	pe. Number and street (or P O box, if mail is not delivered to street address)	Room/suite		phone number
\square	Termina	s	P. O. Box 59			9-763-8536
			Struc- City or town, state or country, and ZIP + 4			up Exemption
			ons. Galveston		Num	
	• Sec	tion 501(c)(3)	organizations and 4947(a)(1) nonexempt charitable trusts must attach	G Accounting		X Cash Accrual
_	16/ - b - b	te: N/	a completed Schedule A (Form 990 or 990-EZ).	Other (specify)		
'		empt status (chec		H Check ► required to	attach Sch	e organization is not nedule B (Form 990,
<u>у</u> К			the organization is not a section 509(a)(3) supporting organization and its gross r			
K			990 return is not required, but if the organization chooses to file a return, be sure			. more than \$25,000 A
$\overline{}$			to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-Ez		<u> </u>	36,338
-	Part I		e, Expenses, and Changes in Net Assets or Fund Balances (S			
<u> </u>	1	-	fts, grants, and similar amounts received	700 1110 111011	1	28,141
	2	-	ce revenue including government fees and contracts		2	
	3	•	ues and assessments		3	
	4	Investment in	come		4	8,197
	5a	Gross amoun	from sale of assets other than inventory 5a			
	b	Less cost or	other basis and sales expenses 5b			
	С	Gain or (loss) fr	m sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
Æ	6	Special events	nd activities (complete applicable parts of Schedule G) If any amount is from gaming, check	here 🕨 🗌		
Revenue	а	Gross revenu	e (not including \$ of contributions			
æ		reported on lu	e 1) 6a			
	b	Less direct e	penses other than fundraising expenses 6b		_	
	С	Net income o	(loss) from special events and activities (Subtract line 6b from line 6a)		6c	
	7a	Gross sales o	f inventory, less returns and allowances 7a		4	
	b	Less cost of	goods sold 7b		_	
	С		(loss) from sales of inventory (Subtract line 7b from line 7a)		7c	
m	8		er Med) 8	06.000
SCANNED	9	Total revenue	. Add lines-1,-2,-3,-4 (3d, 6c, 7c, and 8	<u>'</u>	9	36,338
2	10	Grants and si	nilar amounts gald (attach schedule)		10	6,713
Ž	11	Benegits paid	to or formembers Q2		11	
E S	12		compensation and employee benefits		12	3,650
		•	ed and breek dayments to independent contractors ent, utilities, and maintenance		13	3,030
	14	, ,,	cations, postage, and shipping		15	
~	16	•	es (describe See Statement 1) - 16 -	3,552
<u>ت</u>	17_		es. Add lines 10 through 16		17	13,915
			ficit) for the year (Subtract line 17 from line 9)		18	22,423
010 Net Assets	19		fund balances at beginning of year (from line 27, column (A)) (must agree with			
Os Ss			gure reported on prior year's return)		19	490,903
et/	20	•	s in net assets or fund balances (attach explanation) See State	ement 2	20	10,493
Z	21	Net assets or	fund balances at end of year Combine lines 18 through 20		▶ 21	523,819
	Part II	Balanc	Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file For	m 990 instead o	of Form 9	990-EZ
				Beginning of year		(B) End of year
22	Cash,	savings, and in	vestments	490,90	3 22	523,819
23	Land a	and buildings			23	
24	Other	assets (describ	· · · · · · · · · · · · · · · · · · ·		24	
	Total a			490,90	3 25	523,819
		liabilities (desc		400 50	0 26	0
			alances (line 27 of column (B) must agree with line 21)	490,90	3 27	523,819
E۵	e Deivoc	w Act and Dan	anyork Reduction Act Notice see the senarate instructions			Form 99/1.F7 (2004)

DAA

Form 990-EZ (2009) Fifty Club of Galveston		-6105720	11 X T		Page 2
Part III Statement of Program Service Accomplishments (see the instruc	tions for Part I	!!.)		penses
What is the organization's primary exempt purpose?					for section
ASSISTANCE TO PEACE OFFICERS	a aloar and agness		\dashv		and 501(c)(4)
Describe what was achieved in carrying out the organization's exempt purposes. In manner, describe the services provided, the number of persons benefited, or other			1	-	ons and section) trusts, optional
	relevant information	1101		for others	
each program title 28 PRESENTATION OF INCENTIVE AWARDS AND HONORS FOR PEACE				101 Utilets	
OFFICERS IN GALVESTON, DICKINSON AND TEXAS CITY POLICE DEPTS AND GALVESTON COUNTY SHERIFF DEPARTMENT					
(Grants \$ 6,713) If this amount includes foreign grants, cl	neck here	•	$\Box \bot$	28a	6,713
29 ASSISTANCE TO PEACE OFFICERS IN GALVESTON COUNTY WHO ARE	ICCK HETE		<u>'-</u>	LUA	0,.15
INJURED OR KILLED IN THE LINE OF DUTY				İ	
Indiab of Manage In the Hind of Boll					
(Grants \$) If this amount includes foreign grants, cl	neck here	•	$\Box \bot$	29a	
30					
(Grants \$) If this amount includes foreign grants, cl	heck here	•	$\Box \mid :$	30a	
31 Other program services (attach schedule)					
(Grants \$) If this amount includes foreign grants, cl	heck here	•	\Box \Box :	31a	
32 Total program service expenses (add lines 28a through 31a)			ightharpoonup	32	6,713
Part IV List of Officers, Directors, Trustees, and Key Employees. List ea	ach one even if not	compensated (See	e the in	structions fo	or Part IV)
A) No constables	(b) Title and average hours per week	(c) Compensation (If not paid,		ontributions to e benefit plans 8	(e) Expense account and
(a) Name and address	devoted to position	enter -0)		d compensation	other allowances
See Statement 3					
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33	THE VOLUME INFORMATION (NOTE the statement requirements in the instructions to			Yes	No
JJ	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed			103	110
	description of each activity		33_		X
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy	of			
	the changes		34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but	not reported			
	on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T				
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section				
	6033(e) notice, reporting, and proxy tax requirements?		35a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?		35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets				
	during the year? If "Yes," complete applicable parts of Schedule N		36		<u> </u>
37a	Enter amount of political expenditures, direct or indirect, as described in the instr	a			
b	Did the organization file Form 1120-POL for this year?		37b		<u> </u>
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or	were			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?		38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	b			
39	Section 501(c)(7) organizations Enter	1			
а	Initiation fees and capital contributions included on line 9				
b	Gross receipts, included on line 9, for public use of club facilities	b			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under				
	section 4911 ▶, section 4912 ▶, section 4955 ▶		-		
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess b				
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified	ed			
	person in a prior year, and that the transaction has not been reported on any of the organization's prior				
	Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		40b		X
C	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on				
	organization managers or disqualified persons during the year under sections 4912,				
	4955, and 4958		— i		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c		1		
			1	i	
	reimbursed by the organization		_		
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter		_	:	v
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		40e		Х
41	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed None	Talanhara		3_0	
41	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed None The organization's books are in care of Fifty Club of Galveston	Telephone no ▶ 4	40e	3-8	
41	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed The organization's books are in care of Fifty Club of Galveston PO Box 59		109-76	3-8	
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41 42a	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed None The organization's books are in care of Fifty Club of Galveston PO Box 59 Located at Galveston, TX At any time during the calendar year, did the organization have an interest in or a signature or other authover a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	ZIP + 4 ▶	109-76		536
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41 42a b	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed The organization's books are in care of Fifty Club of Galveston PO Box 59 Located at Galveston, TX At any time during the calendar year, did the organization have an interest in or a signature or other authover a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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 Ba and Financial Accounts. At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead or Form 990-EZ	ZIP + 4 Pority al	109-76 77550	Yes	No X
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Form 990-EZ (2009)

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Yes

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self-

employed >

EIN

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10/06/10

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Preparer's

Use Only

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May the IRS discuss this return with the preparer shown above? See instructions

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if self-employed),

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SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

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

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

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number Name of the organization Fifty Club of Galveston 74-6105720 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 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) 8 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated d Type III-Other a Type I Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type 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 g following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes Nο and (III) below, the governing body of the supported organization? 11g(ı) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (i) Name of supported (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of (ii) EIN (iii) Type of organization the organization in organization in col organization (described on lines 1-9 in col (i) listed in your support col (I) of your (i) organized in the above or IRC section governing document? US? support? (see instructions)) Yes Yes Yes No No No

Page 2

Schedule A (Form 990 or 990-EZ) 2009 Fifty Club of Galveston 74-6105720

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	17,000	9,687	16,850	16,605	28,141	88,283
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	17,000	9,687	16,850	16,605	28,141	88,283
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						88,283
	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	17,000	9,687	16,850	16,605	28,141	88,283
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	11,465	15,855	16,279	11,686	8,197	63,482
9	Net income from unrelated business activities, whether or not the business is regularly carried on					0	
10 11	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10						 151,765
12	Gross receipts from related activities, etc	(see instructions)		L		12	
13	First five years. If the Form 990 is for the	`	second, third, fou	rth, or fifth tax vear	r as a section 501		
	organization, check this box and stop here	-		,, , ,		(-)(-)	▶ □
Sec	ction C. Computation of Public Su		age				
14	Public support percentage for 2009 (line 6	, column (f) divided	by line 11, colum	n (f))		14	58.17%
15	Public support percentage from 2008 Sch	edule A, Part II, line	14			15	55.56%
16a	33 1/3 % support test-2009. If the organ	ization did not ched	ck the box on line	13, and line 14 is 3	3 1/3 % or more,	check this box	
	and stop here. The organization qualifies	as a publicly suppo	rted organization				► X
b	33 1/3 % support test—2008. If the organ			or 16a, and line 1	5 is 33 1/3 % or m	ore, check this	
	box and stop here. The organization quali	ifies as a publicly si	upported organiza	tion			▶ [
17a	10%-facts-and-circumstances test—200	9. If the organization	on did not check a	box on line 13, 16a	a, or 16b, and line	14 іѕ 10% ог	
	more, and if the organization meets the "fa	acts-and-circumstar	nces" test, check t	his box and stop h	ere. Explain in Pa	rt IV how the	
	organization meets the "facts-and-circums	tances" test. The o	rganızatıon qualifi	es as a publicly sur	pported organizati	on	
b	10%-facts-and-circumstances test—200	8. If the organization	on did not check a	box on line 13, 16a	a, 16b, or 17a, and	d line 15 is 10% or	
	more, and if the organization meets the "fa	acts-and-circumstar	nces" test, check t	his box and stop h	iere. Explain in Pa	rt IV how the	
	organization meets the "facts-and-circums	tances" test. The o	rganization qualifi	es as a publicly sup	pported organizati	on	▶ [
18	Private foundation. If the organization did	t not check a box o	n line 13 16a 16b	17a or 17b ched	ck this box and se	e instructions	▶

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

<u>Sec</u>	tion A. Public Support						
Cal	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 include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year					 	
C	Add lines 7a and 7b		<u> </u>	–			
8 —	Public support (Subtract line 7c from line 6)		. *				
	tion B. Total Support		T				
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6				-		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	-					
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b		ļ				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,					 	
	and 12)		I	L	<u> </u>	1	
14	First five years. If the Form 990 is for the organization, check this box and stop her	~	st, second, third, for	urth, or fifth tax ye	ar as a section 50	1(c)(3)	▶ 🗌
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2009 (line 8		=	nn (f))		15	<u></u>
16	Public support percentage from 2008 Sch					16	<u></u>
	tion D. Computation of Investme					T T	
17	Investment income percentage for 2009 (I		· -	s, column (f))		17	<u>%</u>
18	Investment income percentage from 2008					<u> 18 </u>	<u> </u>
19a	33 1/3 % support tests—2009. If the orga						
	17 is not more than 33 1/3 %, check this b		-	-		•	▶ ∐
þ	33 1/3 % support tests—2008. If the orga						⊾ □
20	line 18 is not more than 33 1/3 %, check the		-	•		-	
<u>20</u>	Private foundation. If the organization did	HOLGIECK a DOX	on line 14, 19a, or	rab, check this be	ox and see instruct	uons	

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Schedule A (Form 990 or 990-EZ) 2009 Fifty Club of Galveston 74-6105720

*Part*IV* Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b, and Part III, line 12 Provide any other additional information. See instructions 6169 Fifty Club of Galveston 74-6105720

Federal Statements

10/6/2010 2:34 PM

FYE: 6/30/2010

Statement 1 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	\$
Advertising	250
Printing	1,866
Luncheons	1,171
Filing Fees	250
Safe Deposit Box	15
Total	\$ 3,552

Statement 2 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description	 Amount
Unrealized Gain on Triflex Mutual Fund	\$ 10,493
Total	\$ 10,493

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 19
	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10 Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
 -	
Name of Street	

6169 Fifty Club of Galveston 74-6105720 FYE: 6/30/2010	Federal	ederal Statements	10	10/	10/6/2010 2:34 PM
State	Statement 3 - Form 990EZ, Part IV - Li	st of Officers, D	art IV - List of Officers, Directors, Trustees and Key	ıd Key	
	EM	ployees		į	
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
James Albright 863 Bonita Bayou Vista, TX 77563	President	1.00	0	0	0
Eddie Barr 325 Barracuda Galveston, TX 77550		1.00	0	0	0
Thomas Brooker 2525 South Shore Blvd., suite League City, TX 77573	ite 205	1.00	0	0	0
Joyce Dundee P.O. Box 59 Galveston, TX 77553	Treasurer	1.00	0	0	0
Mayor Charles Everts 222 Easterly Drive Tiki Island, TX 77554		1.00	0	0	0
Roger Ezell 1018 23rd Street Galveston, TX 77550		1.00	0	0	0
Susan Falgout 7316 Offats Point Circle Galveston, TX 77551	2nd VP	1.00	0	0	0
Joy Fertitta		1.00	0	0	0
Leonard Gatson 1710 39th Street Gaveston, TX 77550		1.00	0	0	0
Raymond Guidry P.O. Box 3489		1.00	0	0	0
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6169 Fifty Club of Galveston 74-6105720 FYE: 6/30/2010	Federal (Federal Statements	S	10/	10/6/2010 2:34 PM
Stat	Statement 3 - Form 990EZ, Part IV - Lis Employee	st of Officers, [Part IV - List of Officers, Directors, Trustees and Key Employees (continued)	nd Key	
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Texas City, TX 77592					
Kevin Harrington 4620 Woodrow Avenue Galveston, TX 77551		1.00	0	0	0
Eugene Hornstein 63 Colony Park Circle Galveston, TX 77551		1.00	0	0	0
Eddie Janek 7909 Harborside Dr. Galveston, TX 77554		1.00	0	0	0
Leon Kaplan 715 24th St Galveston, TX 77550		1.00	0	0	0
Rabbi Jimmy Kessler 1609 Driftwood Galveston, TX 77551		1.00	0	0	0
John Maisel 2710 Broadway Galveston, TX 77550		1.00	0	0	0
John Mitchiner 5014 Longshadow Dr. Dickinson, TX 77539		1.00	0	0	0
David E. O'Donohoe 5928 Ave S Galveston, TX 77551		1.00	0	0	0
Victor Pierson P.O. Box 1139		1.00	0	0	0
					3

6169 Fifty Club of Galveston 74-6105720	Federal S	deral Statements	w	10	10/6/2010 2:34 PM
FYE: 6/30/2010					
S. S. S. S. S. S. S. S. S. S. S. S. S. S	Statement 3 - Form 990EZ. Part IV - Lis	st of Officers. L	irectors, Trustees a	nd Kev	
		s (continued)	Employees (continued)		
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Galveston, TX 77553					
Lucy Ramirez 1417 Rosenberg Galveston, TX 77550	Secretary	1.00	0	0	0
Harry Robinson 9306 Woodacres Hitchcock, TX 77563		1.00	0	0	0
David Tabaracci 702 N. Holiday Dr., Unit Galveston, TX 77550	۲S	1.00	0	0	0
M. Sean Welsh c/o Fifty Club P.O. Box 59 Galveston, TX 77550		1.00	0	0	0
Walter Wilson c/o Fifty Club P.O. Box 59 Galveston, TX 77550		1.00	0	0	0
Charles A Worthen Jr. 4707 Sherman Galveston, TX 77551	Past Preside	1.00	0	0	0
Leonard Gatson 1710 39th Street Gaveston, TX 77550	1st VP	1.00	0	0	O m