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# Form **990-EZ**

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

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 980. All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 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

For the 2010 calendar year, or tax year beginning 2010 JUN 1. and ending Check if applicable C Name of organization D Employer identification number Address change UNITED WOMEN'S CLUB OF LAKELAND, 59-0757331 Name change Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Telephone number Initial return 863-647-9540 1515 WILLIAMSBURG SQ. Terminated City or town, state or country, and ZIP + 4 F Group Exemption LAKELAND FL33803-4277 Application pending Number > X Cash H Check ► Tif the organization is not Accounting Method: Accrual Other (specify) Website: ► N/A required to attach Schedule B Tax-exempt status (check only one) —  $\bigcirc$  501(c)(3)  $\bigcirc$  501(c) (4)  $\bigcirc$  (insert no.) 4947(a)(1) or (Form 990, 990-EZ, or 990-PF). 🔟 if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return. Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, 48987. line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ Part | Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.) Check if the organization used Schedule O to respond to any question in this Part I X 1505. Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 2 2870. Membership dues and assessments 3 See Schedule O 3252. 4 Investment income 5a Gross amount from sale of assets other than inventory 5a 5b Less: cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than Expenses SCAINNED AUG I n 20 Pevenue 6a \$15,000) **b** Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such 13390. 6ь gross income and contributions exceeds \$15,000) 9195 6с Less: direct expenses from gaming and fundraising events 4195. Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 6d Gross sales of inventory, less returns and allowances 7b b Less: cost of goods sold Gross profit or (loss) from Sales of inventory (Subtract II) Other revenue (describe in Schedule 0) L 2 9 . 2011 7с om line 7a) See Schedule O 27970. 8 3. 4. 5c, 6d, 7c, and 8 39792. Total revenue Add lines 9 Grants and similar amounts paid (listin Sole dule 659. See Schedule O 10 10 11 Benefits paid to or for member 11 12 12 Salaries, other compensation, and employee benefits 1575. 13 Professional fees and other payments to independent contractors 13 See Schedule O 32939. 14 14 Occupancy, rent, utilities, and maintenance 351. 15 15 Printing, publications, postage, and shipping 9103. 16 16 Other expenses (describe in Schedule O) See-Schedule O 44627. 17 17 Total expenses. Add lines 10 through 16 -4835. 18 18 Excess or (deficit) for the year (Subtract line 17 from line 9) Net Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) 251971. 19 (must agree with end-of-year figure reported on prior year's return) 20 0. 20 Other changes in net assets or fund balances (explain in Schedule O) 247136. Net assets or fund balances at end of year. Combine lines 18 through 20 21

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2010)

P	art II	Balance Sheets. (see the instructions for Part II.)						
		Check if the organization used Schedule O to respond to a	ny question in this Part II					X
				(A	) Beginning of year		(8) E	nd of year
22		, savings, and investments			60479.			<u>57531.</u>
23		l and buildings	1 1		193919.	1 —		<u> 193342.</u>
24		r assets (describe in Schedule 0) See Sched	aule O		0.			0.
25		l assets	J., 1 O	<b></b>	<u>254398.</u>			<u>250873.</u>
26		I liabilities (describe in Schedule 0) See Schedassets or fund balances (line 27 of column (B) must agree w			2427. 251971.			$\frac{3737.}{247136.}$
27 P:	art III		plishments (see the instructi	tions for I		121		Denses
نت	41 6 111	Check if the organization used Schedule 0 to respond to	•		Δ. τ,		Required	for section
Wha	at is the	organization's primary exempt purpose?SUPPORT		ITIE	 S.			and 501(c)(4) ons and section
		what was achieved in carrying out the organization's				e   4	947(a)(1	) trusts; optional
		es provided, the number of persons benefited, and ot				fe	or others.	)
28	SUP	PORT OF VARIOUS CHARITIES				1		-
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	(Grants	s \$ 659.) If this amount include	es foreign grants, check here			21	3a	
29						_		
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	(Grants	s \$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	es foreign grants, check here			<sub>30</sub>	12	
31		program services (describe in Schedule O)	es loreign grants, check here				<u> </u>	
٠.	(Grants		es foreign grants, check here		▶ {	<sub>3</sub> .	1a	
32		program service expenses (add lines 28a through 3				▶ 3		0.
	art IV		nd Key Employees. List ea	ach one ev	en if not compensated (se	e the ins	tructions f	or Part IV)
		Check if the organization used Schedule O to respond to	any question in this Part IV					
			(b) Title and average		(0)	(d) Cont to em	ributions	(e) Expense
		(a) Name and address	per week devote position	d to	(If not paid, enter -0)	benefit		account and other allowances
					-0,	compe		Other anowances
<u>KA</u>	<u>THY</u>	HARRISON	PRESIDENT				•	
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Yes		Check if the organization used Schedule O to respond to any question in this Part V			
33 Did the organization engage in any activity not previously reported to the IRS? If Yes, 'provide a detailed description of each activity in Schedule 0  Were any significant changes made to the organization's name. Otherwise, explain the change on Schedule 0 (see instructions)  If the organization had income from bissness activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule 0 (why the organization'd not report the income on Form 990-T.  a bid the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(5), or 501(c)(5) or 301(c)(6) or gonization subject to section 603(c)(6), note, reporting, and proxy tax requirements?  b If Yes, 'has it filed a tax return on Form 990-T for this year?  b 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  7a Enter amount of polinical expenditures, direct or indirect, as described in the instructions.  b Did the organization before an Itage-01 for this year?  3a Did the organization before italian and itage-01 for this year?  3b If Yes, complete Schedule L, Part II and enter the total amount involved  3cention 501(c)(7) organizations. Enter amount of tax imposed on the organization during the year under:  1 If Yes, complete Schedule L, Part I is experiment of the ximposed on organization during the year of did regage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-E2?  If Yes, complete Schedule L, Part I is section 4912 ★ N/A  Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualitied persons during the year under sections 4912, 4955, and 4955  b At any time during the calendar year, did the organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the tax ye		Check if the organization used schedule of to respond to any question in this Part v		Yes	No
Schedule O Were any significant changes made to the organizating or governing documents? If Yes, attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)  15 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, 20 In the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 603(e) notice, reporting, and prioxy tax requirements?  1 If Yes, has a titled a tax return on Form 990-T for this year?  25 Did the organization undergo a laquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete applicable parts of Schedule N  27 a Einter amount of political expenditures, direct or indirect, as described in the instructions.  28 Did the organization before from 7120-POL for this year?  29 a Did the organization of the form 1120-POL for this year?  29 a Did the organization of the form 1120-POL for this year?  29 a Did the organization of the form 1120-POL for this year?  20 a Did the organization of the form 1120-POL for this year?  20 a Did the organization of the form 1120-POL for this year?  20 a Did the organization of the form 1120-POL for this year?  20 a Did the organization of the form 1120-POL for this year?  21 b Test, complete Schedule L, Part II and enter the total amount involved  22 Section 39(1)(7) organizations. Enter amount of tax imposed on the organization during the year under section 4911 P N/A ; section 4912 P N/A ; section 4912 P N/A ; section 4915 P N/A  22 Section 501(c)(3) organizations. Enter amount of tax imposed on organization managers or disqualitied persons during the year under sections 4912, 4955, and 4958  23 Section 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualitied persons during the year	3	Did the organization engage in any activity not previously reported to the IRS2 If "Yes" provide a detailed description of each activity in		103	110
34 Were any significant changes made to the organization's name. Otherwise, explain the change on Schedule 0 (see instructions)  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, explain in Schedule 0 why the organization did not report the income on Form 990-T.  a Did 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, explain in Schedule 0 why the organization did not report the income on Form 990-T.  a Did the organization had income from 990-T for this year?  b If "Yes," has it filed a tax return on Form 990-T for this year?  b If the organization had income a filed of the second of 033(e) notice, reporting, and proxy tax requirements?  5 Did the organization had income a filed of the second of 034(e) notice, reporting, and proxy tax requirements?  5 Did the organization had at it return on Form 990-T for this year?  5 Did the organization had income a filed of the second of 034(e) notice, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  b If "Yes," complete Schedule I, Part II and enter the total amount involved  5 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  a Initiation fees and capital contributions included on line 9, for public use of club facilities  10 Yes, "complete Schedule I, Part II and enter the total amount involved  5 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-E2? If "Yes," complete Schedule I, Part I  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqua	•		33		x
documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)  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, explain in Schedule O why the organization did not report the income on Form 990-T.  a Did the organization have unreliated business gross income of \$1,000 or more or was it a section \$01(c)(4), 501(c)(5), or \$501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?  b If Yes, this it filed a lax return on Form 990-T for the year?  5 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  7 a Enter amount of political expenditures, direct or indirect, as described in the instructions.  b If Yes, complete applicable parts of Schedule N  a Did the organization bit Form 1120-PCU for this year?  3 b If Yes, complete Schedule L, Part II and enter the total amount involved  a Did the organization schedule L, Part II and enter the total amount involved  3 b Gross receips, included on line 9  3 b Gross receips, included on line 9, for public use of club facilities  3 b Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ≥ N/A ; section 4912 ≥ N/A ; section 4955 ≥ N/A   5 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 ≥ N/A	4		"		
15 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, explain in Schedule 0 why the organization did not report the income on Form 990-T.  25 Did the organization have unrelated business gross income of \$1,000 or more or was it a section \$01(c)(4), \$01(c)(5), or \$01(c)(6) organization subject to section \$033(e) notice, reporting, and proxy tax requirements?  26 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes,*  27 a Enter amount of political expenditures, direct or indirect, as described in the instructions.  28 Did the organization bit form 1120-POL for this year?  29 Did the organization fle Form 1120-POL for this year?  20 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 tax year covered by this return?  20 Difference of 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 tax year covered by this return?  21 Difference 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 tax year overed by this return?  22 Difference organizations. Enter amount organization during the year under:  23 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  24 Difference organization subject to sections 4912, 4955, and 4958  25 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  26 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the orga	•		34		x
reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T.  a Did the organization have unrelated business gross income of \$1,000 or more or was it a section \$01(c)(4), \$01(c)(5), or \$01(c)(6) organization without business gross income of \$1,000 or more or was it a section \$01(c)(4), \$01(c)(5), or \$01(c)(6) organization undergo a fluquiation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete applicable parts of Schedule N  a Enter amount of political expenditures, direct or indirect, as described in the instructions.  b If Yes, complete Schedule L, Part II and enter the total amount involved  a Did the organization form 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 tax year covered by this return?  b If Yes, complete Schedule L, Part II and enter the total amount involved  Section 501(c)(C)(Y) organizations. Enter:  a Initiation fees and capital contributions included on line 9  b Gross receipts, included on line 9, for public use of club facilities  38 Section 501(c)(3) and 501(c)(4) organizations. Did the organization during the year under:  section 4911 ► N/A; section 4912 ► N/A; section 4956 excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-E2?  If Yes, complete Schedule L, Part II  Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax mposed on organization managers or disqualided persons during the year under sections 4912, 4955, and 4959  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax mposed on organization managers or disqualided persons during the year under sections 4912, 4955, and 4959  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax mposed on organization managers or disqualided persons during the search and the propagalization and party to a prohibited tax shelter transaction	5	•			
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b If Yes, has it filed a tax return on Form 990-T for this year?  35 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete splicable parts of Schedule N  36 S  37 a Enter amount of political expenditures, direct or indirect, as described in the instructions.	a				1
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  37a		501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	]	X
complete applicable parts of Schedule N  37a Enter amount of political expenditures, direct or indirect, as described in the instructions.  ▶ 37a Did the organization if Form 1120-PDL for this year?  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 tax year covered by this return?  If Yes,* complete Schedule L, Part II and enter the total amount involved  38b N/A  39 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on line 9 organization sees and capital contributions included on line 9 organizations. Enter amount of tax imposed on the organization during the year under:  section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A  b Section 501(c)(3) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sees benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-EZ?  If Yes,* complete Schedule L, Part I  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 4956  Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax mposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4956  Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax mposed on organization managers or disqualified persons during the exary as the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8866-T  List the states with which a copy of this return is filed. ▶ FL  List the states with which a copy of this return is filed. ▶ FL  1 List the states with which a copy of this return is filed. ▶ FL  3 At any time during the calendar year, did the organization have an interest in or a signature or other unthority over a financial account i	b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/	A
37a Enter amount of political expenditures, direct or indirect, as described in the instructions.    b Did the organization file Form 1120-POL for this year?    37b 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 tax year covered by this return?    b If Yes, complete Schedule L, Part II and enter the total amount involved    38b N/A    39S Section 501(c)(7) organizations. Enter:    10Initation fees and capital contributions included on line 9    b Gross receipts, included on line 9, for public use of club facilities    39a N/A    39b N/A    58c Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:   section 4911 ► N/A  ; section 4912 ► N/A  ; section 4955 ► N/A    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 4959    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 4959    C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization organization which a copy of this return is filed. ► FL  11 List the states with which a copy of this return is filed. ► FL  12 The organization's books are in care of ► HARRIS & WRIGHT PA	6	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"			
b Did the organization file Form 1120-POL for this year?  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 tax year covered by this return?  b If Yes, complete Schedule L, Part II and enter the total amount involved  38b N/A  9 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on line 9  6 Gross recepts, included on line 9, tor public use of club facilities  8 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  8 section 4911 ► N/A is section 4912 ► N/A is section 4955 ► N/A  9 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-EZ?  If Yes, complete Schedule L, Part I  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  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 4959  6 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 4959  6 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 886-T  List the states with which a copy of this return is filled. ► FL  12 List the states with which a copy of this return is filled. ► FL  13 At any time during the calendar year, did the organization have an interest in or a signa		complete applicable parts of Schedule N	36_		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38b N/A  39 Section 501(c)(7) organizations. Enter:  30a Initiation fees and capital contributions included on line 9  39a N/A  39b N/A  39b N/A  40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A; section 4912 ▶ N/A; section 4915 ▶ N/A  5 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-E2?  If 'Yes,' complete Schedule L, Part I  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  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization.  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T  40c Electron 501(c)(3) and 501(c)(4) organizations is filed. ► FL  41 List the states with which a copy of this return is filed. ► FL  42a The organization's books are in care of ► HARRIS & WRIGHT PA  42b The organization's books are in care of ► HARRIS & WRIGHT PA  42c The organization's books are in care of ► HARRIS & WRIGHT PA  42c The organization in a foreign country. ►  52d The organization in a foreign country. ►  52d The section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here	7 a	Enter amount of political expenditures, direct or indirect, as described in the instructions.	_		
b   1"Yes,* complete Schedule L, Part II and enter the total amount involved  38b   N/A  39   Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on line 9  b Gross receipts, included on line 9, for public use of club facilities  40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization during the year under:  section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-E2?  If Yes,* complete Schedule L, Part I  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  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  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* organization organizations are in care of ▶ HARRIS & WRIGHT PA  Telephone no. ▶ 863-687-2695  Located at ▶ 720 S MISSOURI AVENUE, LAKELAND, FL  2 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.  42b  If Yes,* enter the name of the foreign country: ▶  43 Section 4947(a)(1) nonexem	b	Did the organization file Form 1120-POL for this year?	37b		Х
b If Yes, complete Schedule L, Part II and enter the total amount involved  39 Section 501(c)(7) organizations. Enter: a Inhiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities  40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 \( \binom{N/A}\) ; section 4912 \( \binom{N/A}\) ; section 4955 \( \binom{N/A}\) ; section 4955 \( \binom{N/A}\) b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-EZ? If Yes, complete Schedule L, Part I 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 4955 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8886-T List the states with which a copy of this return is filed. \( \binom{FL}{2}\)  1 List the states with which a copy of this return is filed. \( \binom{FL}{2}\)  2 The organization's books are in care of \( \binom{HARRIS & WRIGHT PA}{2}\)  3 Telephone no. \( \binom{863-687-2695}{83815}\)  3 A N/A  40 b  40 e  40 e  42 The organization's books are in care of \( \binom{HARRIS & WRIGHT PA}{2}\)  5 At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country: \( \binom{Party}{2}\)  5 Section 4947(a)(1) nonexempt chari	8 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made			
39 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities  39a N/A 39b N/A  40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A; section 4912 ▶ N/A; section 4955 ▶ N/A  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-EZ? If Yes, complete Schedule L, Part I 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 4956 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the 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  41 List the states with which a copy of this return is filled. ▶ FL  42a The organization's books are in care of ▶ HARRIS & WRIGHT PA Telephone no. ▶ 863-687-2695 Located at ▶ 720 S MISSOURI AVENUE, LAKELAND, FL  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country; ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  if Yes,* enter the name of the foreign country: ▶  42b  42c  43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here			38a		X
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organization  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  41 List the states with which a copy of this return is filed. ► FL  42a The organization's books are in care of ► HARRIS & WRIGHT PA  Located at ► 720 S MISSOURI AVENUE, LAKELAND, FL  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country: ►  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  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  ▶ □					
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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  HARRIS & WRIGHT PA  Located at  720 S MISSOURI AVENUE, LAKELAND, FL  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country:  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  C At any time during the calendar year, did the organization maintain an office outside of the U.S.?  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	•				
List the states with which a copy of this return is filed. ► FL  The organization's books are in care of ► HARRIS & WRIGHT PA Telephone no. ► 863-687-2695  Located at ► 720 S MISSOURI AVENUE, LAKELAND, FL ZIP + 4 ► 33815  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country: ►  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  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	6		400		Х
Telephone no. ► 863-687-2695  Located at ► 720 S MISSOURI AVENUE, LAKELAND, FL  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country: ►  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country: ►  3 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here	1		400		
Located at  720 S MISSOURI AVENUE, LAKELAND, FL  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country:  See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  C At any time during the calendar year, did the organization maintain an office outside of the U.S.?  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			37-2	695	
At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country:  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  C At any time during the calendar year, did the organization maintain an office outside of the U.S.?  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					
over 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 Bank and Financial Accounts.  C 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	b				
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 Bank and Financial Accounts.  c 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	-			Yes	No
If "Yes," enter the name of the foreign country:  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  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			42b		X
c 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		If "Yes," enter the name of the foreign country:			
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		See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here	C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		_X
		If "Yes," enter the name of the foreign country:			
and enter the amount of tax-exempt interest received or accrued during the tax year	3	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	N/A		
Yes I				Yes	No
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of	4 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of			
			44a		X
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead	b				
			44b		X_
			44c		X
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation		If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No " provide an explanation	1	1	1
ın Schedule O 44d 44d	đ		1		

Form	1 990-EZ (	2010)	UNITED WOMEN	S CLUB OF LA	AKELAND,	INC.		59-0757	331		Page 4
		•						·— -		Yes	
45			nization a controlled entity of th	-					45	<u> </u>	X
а			n receive any payment from or			tity within th	e meaning of sectior	1 512(b)(13)?	١		,,
AC.			and Schedule R may need to be	•		n opposition	s to condidates for n	ublic office?	45a	-	<u> </u>
46		_	n engage, directly or indirectly, Schedule C, Part I	in political campaign activiti	ies on benan of of	iii oppositioi	i to candidates for p	ublic office?	46		x
Pa			n 501(c)(3) organizati	ons and section 4	947(a)(1) non	exempt	charitable tru	sts only. All		n 501(c	
	_		ions and section 4947(a)(1) nor			-		_			
		Check if t	he organization used Schedule (	O to respond to any question	n in this Part VI						
									,	Yes	No
47		-	n engage in lobbying activities?	•					47_		
48	-		a school as described in section		-	dule E			48	-	<u> </u>
			n make any transfers to an exen		rganization?				49a	<del> </del>	<u> </u>
50			ated organization a section 527 for the organization's five high	_	c (other than office	ere directors	tructone and kov or	mnlovoce) who	49b	cowad	
50			ompensation from the organiza		•	ira, un cultura	, trustees and key er	iipioyees/ wiio e	aciiiç	CCIVCU	HOLE
		<u>.,</u>		non in anoto io mono, omor	(b) Title and ave	rage hours	(c) Compensation	(d) Contribution	s (	e) Expe	nse
		(a) Nam	e and address of each employe	e paid more	per week dev	oted to		to employee benefit plans &	a	ccount	and
			than \$100,000 N	I/A	positio	on 		deferred compensation	oth	er allow	ances
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				<del></del>	1						
f 51	Complete	this table	ner employees paid over \$100,0 for the organization's five higher is none, enter "None."		ent contractors wh	o each receiv	ved more than \$100,	000 of compens	ation f	rom the	)
		(a) Nam	ne a <u>nd address of each undepend</u>	<u>dent contractor paid more t</u>	han \$100,000		(b) Type of ser	vice (	c) Con	pensat	ION
			<del></del>								
			<del></del>	<del></del>							
_			<del></del>								
_			<del></del>								
d	Total nun	ber of ot	ner independent contractors eac	th receiving over \$100,000			<b></b>				
52		-	n complete Schedule A? Note: A	. ,, ,	zations and 4947(a	ı)(1) nonexe	mpt	, г	<del></del>		
	charitable U	trusts m	ust attach a completed Schedule les of pequry, I declare that I have exa completed Declaration of preparer (oth	e A mined this return, including acc	ompanying schedules	and statemen	ts, and to the best of my	knowledge and be	Your	true,	No
		orreginal d	complete Declaration of preparer (oth	er than officer) is based on all in	formation of which pre	parer has any	knowledge	<u> </u>			
Sig	n _   🕨	Signature	Officer ( 1-/-				<del></del>	Date	<del></del>		
Hei	re	Mar	y Sue Moody, T	reasurer							
			print name and title	.I Cubul CI	<del> </del>	· · ·					
		Print/Ty	pe preparer's name	Preparer's signature		Date	Check	If PTIN			
Pai	d	1/			nob.	1/20	self- emplo	yed			
	parer	110	and L'. Harris	Zergine	Colon	130					
Use	Only	Firm's r		RIGHT, P.A.			Firm's EIN				
		Firm's a		MISSOURI AV	ENUE		Phone no.	863-6	87-	269	5
		<u> </u>	<u>LAKELAND,</u>	FL 33815			<del></del>				
May 03217		scuss this	return with the preparer shown	above? See instructions					X Y		<u>No</u>
03-04	-11								Form 9	90-EZ	(2010)

#### **SCHEDULE O**

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

INITED WOMEN'S CLUB OF LAKELAND TNC **Employer identification number** 59-0757331

UNITED WOMEN 5 CHOS OF DAREDAND, INC. 37-1	3737331
Form 990-EZ, Part I, Line 4, Other Investment Income:	
Description of Property:	Amount:
INTEREST INCOME	3252.
Form 990-EZ, Part I, Line 8, Other Revenue:	
Description of Other Revenue:	Amount:
COMMERCIAL LAKELAND FL	27970.
Form 990-EZ, Part I, Line 10, Grants and Allocations:	
Activity Classification:	
Grantee Name: LAKELAND VOLUNTEERS IN MEDICINE	<u> </u>
Grantee Address: 1021 LAKELAND HILLS BLVD LAKELAND, FL 33805	
Amount Given:	
Activity Classification:	
Grantee Name: HARRISON SCHOOL OF THE ARTS	
Grantee Address: 750 HOLLINGSWORTH DRIVE LAKELAND, FL 33801	
Amount Given:	200.
Activity Classification:	
Grantee Name: UNICEF	
Grantee Address: 125 MAIDEN LANE NEW YORK, NY 10038	
Amount Given:	37

Activity Classification:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032211 01-24-11

Schedule O (Form 990 or 990-EZ) (2010)

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization Employer identification number 59-0757331 UNITED WOMEN'S CLUB OF LAKELAND, INC. Grantee Name: TEEN PARENT PROGRAM Grantee Address: 910 LOWRY AVENUE LAKELAND, FL 33801 Amount Given: 35. Activity Classification: Grantee Name: MARCH OF DIMES Grantee Address: 405 N. REO STREET TAMPA, FL 33609 120. Amount Given: Activity Classification: 40. Amount Given: Activity Classification: Grantee Name: GRWC LAKE WALES Grantee Address: LAKE WALES, FL 33853 77. Amount Given: 659. Total included on Form 990-EZ, line 10 Form 990-EZ, Part I, Line 14, Occupancy, Rent, Utilities, and Maintenance: Description of Expenses: Amount: 8327. Depreciation 24612. Other-Expenses- ---32939. Total to Form 990-EZ, line 14 Form 990-EZ, Part I, Line 16, Other Expenses: Description of Other Expenses: Amount: Schedule O (Form 990 or 990-EZ) (2010) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

#### **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization  UNITED WOMEN'S CLUB OF LAKELAND,	TNC		r identification number
OFFICE EXPENSES			
ASSOCIATION DUES			
TRAVEL			
FFWC DUES			
FFWC FALL BOARD			1931.
FFWC CONVENTION			200.
UWC OFFICERS BOND			172.
FLORIDA SOLICITATION FEE			10.
LANDSCAPE EXPENSE			1463.
MEETINGS		<u> </u>	55.
Total to Form 990-EZ, line 16			9103.
Form 990-EZ, Part II, Line 24, Other Assets:			
Description	Beg.	of Year	End of Year
Other Depreciable Assets		8514.	7017.
Form 990-EZ, Part II, Line 26, Other Liabilities			
Description	Beg.	of Year	End of Year
SALES TAX PAYABLE		27.	137.
SECURITY DEPOSIT PAYABLE		2400.	
PREPAID RENT		0.	
Total to-Form-990-EZ, line-26			
TOUR OF TOUR 950 BB/ TIME BO		2211	-3,3,0
			<del></del>