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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 private foundation)

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 990 (see instructions) 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 conv of this return to satisfy state reporting requirements

2011

OMB No 1545 1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

intern	nal Revenue Servic	te The organization may have to use a copy of this return	rn to satisfy state reporting requirements	Inspection
A [	For the 2011 c	alendar year, or tax year beginning	, 2011, and ending	•
	Check if applicable		D Employ	er identification number
	Address change	ILLINOIS WOMEN'S GOLF ASSOCIATION	23-	7059067
_ □,	Name change	E Telepho		
_ [] ·	Initial return	MOLINE, IL 61265	1	
_	Terminated			
=	Amended return		F Group Numb	Exemption
	Application pendin		<del></del>	
	Accounting Me	<del></del>		the organization is <b>not</b> ch Schedule B (Form
	-	N/A	990-F7 or	990-PF)
		us (ck only one) — X 501(c)(3) 501(c) ( ) ◀(insert no ) If the organization is not a section 509(a)(3) supporting organ		ite arace receipts are
	Check ►	nore than \$50,000. A Form 990-EZ or Form 990 return is not	required though Form 990-N (e-postcard)	may be required (see
ļ	instructions).	But if the organization chooses to file a return, be sure to file	a complete return	may be required (see
		6c, and 7b, to line 9 to determine gross receipts. If gross receipts		
	assets (Part II	, line 25, column (B) below) are \$500,000 or more, file Form	990 instead of Form 990-EZ	\$ 67,486
Pa	rt   Rever	nue, Expenses, and Changes in Net Assets or F	und Balances (see the instruction	ns for Part I.)
4	Check i	f the organization used Scheding Orto respond to any question	on in this Part I	
		itions, gifts, grants, and similar amounts received	1	23,017
		service revenue including government fees and contracts	2	
ĺ	3 Member	ship dues and assessments WAR 0 1 2012	3	3,660
ļ		ent income	4	
x 2017	1	mount from sale of assets other than inventory	5a	
72		ost or other basis and sales expenses.	5b	1
~~		pss) from sale of assets other than inventory (Subtract line 5b from line 5a)	<u> </u>	c
	· .	and fundraising events		
₹ R	_	ncome from gaming (attach Schedule G if greater than \$15,00	00)   6a	1
REV			of contributions	į
E N	1	ncome from fundraising events (not including \$	<del></del>	1
Ų į	of such	ndraising events reported on line 1) (attach Schedule G if the gross income and contributions exceeds \$15,000)	6b 35,440.	1
_		rect expenses from gaming and fundraising events	6c 34,781.	1
REVENUE	ļ			
		ome or (loss) from gaming and fundraising events (add lines $\epsilon$ subtract line $\epsilon$ c)	oa and	d 659
İ	i	ales of inventory, less returns and allowances	7a	
	1	ost of goods sold	76	
1	1	rofit or (loss) from sales of inventory (Subtract line 7b from lin		c
		evenue (describe in Schedule O)	8	
	ŀ	venue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	► g	
	<del> </del>	and similar amounts paid (list in Schedule O)	10	
			11	
F	1	s paid to or for members	12	-
E X P		s, other compensation, and employee benefits	13	
E N		ional fees and other payments to independent contractors	<del></del>	**
SE	1	ncy, rent, utilities, and maintenance	14	
Š	1	, publications, postage, and shipping	CDE COMEDINE O	
	1	xpenses (describe in Schedule O)	SEE SCHEDULE O	
	<del></del>	cpenses. Add lines 10 through 16	► 17	<del></del>
	18 Excess	or (deficit) for the year (Subtract line 17 from line 9)	18	-10,395
A N S	19 Net ass	ets or fund balances at beginning of year (from line 27, colum	nn (A)) (must agree with end-of-year	170 100
2 51	figure re	eported on prior year's return)	19	<del></del>
N S E S T E	. 1			
N S E S T E		hanges in net assets or fund balances (explain in Schedule O ets or fund balances at end of year Combine lines 18 through		

Check if the organization used Schedule O to respond to any question in this Part II  22 Cash, savings, and investments 23 Indivated buildings 24 Indivated buildings 25 Total assets (describe in Schedule O) 27 Not assets or fund balances (line 27 of column (8) must agree with line 2) 28 Total liabilities (describe in Schedule O) 29 Total sessets of fund balances (line 27 of column (8) must agree with line 2) 29 Total sessets or fund balances (line 27 of column (8) must agree with line 2) 20 Total sessets or fund balances (line 27 of column (8) must agree with line 2) 21 Total 2. 25 1 60, 217. 22 Total liabilities (describe in Schedule O) 23 Total sessets or fund balances (line 27 of column (8) must agree with line 2) 25 Total assets or fund balances (line 27 of column (8) must agree with line 2) 26 Total sessets or fund balances (line 27 of column (8) must agree with line 2) 27 Total 2. 27 Tot	Par	t II Balance Sheets. (see the ins	tructions for Part II.)	ction in this Part II			
22   23   1, and and buildings		Check if the organization used Sched	udie O to respond to any que		(A) Beginning of v	ear	(B) End of year
24   Cheer assets (describe in Schedule O)   170, 128, 25   160, 217.	22	Cash, savings, and investments					
25 Total assets or fund balances (une 20 of column (B) must agree with line 21)  27 Net assets or fund balances (une 20 of column (B) must agree with line 21)  28 Check the organization used Schedule O to respond to any question in this Part III  29 This is the seguination's primary exempl aproxer? SEE SCHEDILE On a construction of the relevant information for each program service and concess manner, describe the services program services, as dependent on the relevant information for each program title  28 GRANTS TO OTHER CHARITABLE ORGANIZATIONS  29 Carants \$ 32,600.) If this amount includes foreign grants, check here  29 Carants \$ 32,600.) If this amount includes foreign grants, check here  30 Carants \$ 31 lits amount includes foreign grants, check here  31 Other program services (describe in Schedule O)  31 Other program services (describe in Schedule O)  32 Total program service expenses (add lines 28th through 31a)  32 Total program service expenses (add lines 28th through 31a)  33 Total program service expenses (add lines 28th through 31a)  34 Total program service expenses (add lines 28th through 31a)  36 Check if the organization used Schedule O (orespond to any question in this Part IV)  37 Check if the organization used Schedule O (orespond to any question in this Part IV)  38 Check if the organization is produced to respond to any question in the program service expenses (add lines 28th through 31a)  39 Check if the organization of the program service expenses (add lines 28th through 31a)  30 Check if the organization of the program service expenses (add lines 28th through 31a)  30 Check if the organization of the program service expenses (add lines 28th through 31a)  40 Check if the organization of the program service expenses (add lines 28th through 31a)  40 Check if the organization of the program service expenses (add lines 28th through 31a)  41 Check if the organization of the program service expenses (add lines 28th through 31a)  42 Check if the program service expenses (add lines 28th through	23	Land and buildings				2	3
28 Total fabilities (describe in Schedule C) 29 Net assets or fund balances (line 27 of column (B) must agree with line 21) 29 In 170, 128 X 150, 217.  Part III   Statement of Program Service Accomplishments (see the instr for Part III)   Statement of Program Service Accomplishments (see the instraint of Part III)   What is the amount need Schedule C0 to respond to any question in this Part III   XI   Statement of Program Services (see the instraint of Part III)   What is the amount program in the part III   XI   Statement of Program Services (see the instraint of Part III)   XI   Statement of Program Services (see the instraint of Part III)   XI   Statement of Program Services (see the instraint of Part III)   XI   Statement of Program Services (see the instraint of Part III)   XI   Statement of Program Services (see the instraint of Part III)   XI   Statement of Program Services (see the instraint of Part III)   XI   Statement of Part III   XI   Statement of Program Services (see the instraint of Part III)   XI   Statement of Part III   XI	24	Other assets (describe in Schedule O)					<del>`</del>
27 Net assets or fund balances (line 2 of column (8) must agree with line 2)   170, 128,   27   150, 217.	25						
Part III   Statement of Program Service Accomplishments (see the instrict of Part III)   Expenses (Required for section Check if the organizations used Schedule O to respond to any question in this Part III)   X   X   X   X   X   X   X   X   X							
Check if the organization used Schedule O to respond to any question in this Part III XI (frequired for section with the the organization's primary exempt upporals SEC SCHEDILE. On this three largest program services, as measured by expenses in a clear and concess manner, describe the services provided, the number of persons of the relevant information for each program the services provided, the number of persons of the relevant information for each program the services provided, the number of persons of the relevant information for each program the services provided, the number of persons of the relevant information for each program the services provided, the number of persons of the relevant information for each program the services provided, the number of persons of the relevant information for each program the services provided, the number of persons of the relevant information for each program the services provided to other feedward information for each program the services provided to other feedward information for each program the services provided to other feedward information for each program the services program services program the services program services program services (describe in Schedule O). If this amount includes foreign grants, check here 32 32 32,600.  [Grants \$ ] If this amount includes foreign grants, check here 32 32 32 32,600.  [Grants \$ ] If this amount includes foreign grants, check here 32 32 32 32,600.  [Grants \$ ] If this amount includes foreign grants, check here 32 32 32 32,600.  [Grants \$ ] If this amount includes foreign grants, check here 32 32 32 32,600.  [Grants \$ ] If this amount includes foreign grants, check here 32 32 32,600.  [Grants \$ ] If this amount includes foreign grants, check here 32 32 32,600.  [Grants \$ ] If this amount includes foreign grants, check here 32 32 32,600.  [Grants \$ ] If this amount includes foreign grants, check here 32 32 32,600.  [Grants \$ ] If this amount includes foreign grants, check here 32 32 32 32,600.  [Grants \$ ] If this amount includ						8. 2	
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Grants \$   State   S							•
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31 Other program services (describe in Schedule O) (Grants \$ 32 Total program service expenses (add lines 28a through 31a)  32 Total program service expenses (add lines 28a through 31a)  Check if the organization used Schedule O to respond to any question in this Part IV  (a) Name and address  (b) Title and average devoted to position  (c) Title and average devoted to position  (d) Name Alaberrer  (e) Name Alaberrer  (f) In or paid, enter-6-)  (g) Title and average devoted to position  (g) Title average devoted to position  (g) Title and average devoted to position  (g) Title and average devoted to position  (g) Title average devot	30		<b>_</b>			. 🚽	
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Grants \$ ) If this amount includes foreign grants, check here 312 32,600.  Total program service expenses (add lines 28a through 31a) 32 32,600.  Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (see the instructions for Part IV).  Check if the organization used Schedule O to respond to any question in this Part IV.  (a) Name and address (b) Title and average developed by the program of the compensation of other compensation of the compensation of	31		<del></del>	ants, theth here		30	
Total program service expenses (add lines 28a through 31a)   32   32,600.	٥,		•	ants, check here	▶ [	31	a
Check if the organization used Schedule O to respond to any question in this Part IV  (a) Name and address (b) Title and average house per week devoted to position (c) Reportable compensation contributions to employee benefit plans, and deferred compensation  (ARRUN TILLETT  PRESIDENT  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	32				-	32	32,600.
(a) Name and address  (b) Title and average hours per week devoted to position  (c) Health benefits, contributions to employee benefit plans, and deferred compensation  (b) Form W 2/1099 MISCO (If not paid, enter -0)  (c) Health benefits, contributions to employee benefit plans, and deferred compensation  (c) Health benefits, contributions to employee benefit plans, and deferred compensation  (d) Health benefits, contributions to employee benefit plans, and deferred compensation  (e) Estimated amount of other compensation  (d) Health benefits, contributions to employee benefit plans, and deferred compensation  (e) Estimated amount of other compensation  (f) Form W 2/1099 MISCO (If not paid, enter -0)  (If not paid, enter -0)  (D) O O O O O O O O O O O O O O O O O O O	Par	t IV List of Officers, Directors,	Trustees, and Key Em	oloyees. List each one	even if not compensate	ed (see	the instructions for Part IV
hours per week devoted to position (In of paid, enter 49) centify lains, and deferred compensation benefit plans, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centify lains, and deferred compensation (In of paid, enter 49) centified (In of paid, enter 49) c		Check if the organization used Sch					
KARUN TILLETT PRESIDENT  O O O O O O O O O O O O O O O O O O		(a) Name and address	hours per week	(c) Reportable compensatio (Form W 2/1099 MISC)	contributions to er	mployee	
KARUN TILLETT		`,	devoted to position	(ii not paid, enter -u-)			
PRESIDENT         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0	KAF	RIIN TILLETT			dererred compen	Sation	*******
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	BAA		TEEA0812L (	02/06/12	<u> </u>	-	Form <b>990-EZ</b> (2011)

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Page 2

Form 990-EZ (2011) ILLINOIS WOMEN'S GOLF ASSOCIATION

Form 990-EZ (2011) ILLINOIS WOMEN'S GOLF ASSOCIATION 23-705906			age <b>3</b>
Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V ) Check if the organization used Schedule O to respond to any question in this Part V	HEDUI	E O	X
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 Q	33	Yes	No X
Were any significant changes made to the organizing 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 0 (see instructions)	34		х
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35 a		Х
<b>b</b> If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O	35 b		<u> </u>
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	35 c		
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		Х
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 0.	-1 1		
b Did the organization file Form 1120-POL for this year?	37b		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  b If 'Yes,' complete Schedule L. Part II and enter the total	38a		Х
amount involved 38b N/A	4		
39 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 9  N/A			
b Gross receipts, included on line 9, for public use of club facilities  33b  N/A	-t I		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			ĺ
section 4911 ► 0., section 4912 ► 0., section 4955 ► 0.			ĺ
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 !	40 ь	-	Х
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	40 e		Х
shelter transaction? If 'Yes,' complete Form 8886-T  41 List the states with which a copy of this return is filed ► IL	400		
42a The organization's books are in care of ► ELLEN BOEYE Telephone no ►			
Located at ► 3653 70TH STREET CT MOLINE IL ZIP + 4 ► 61265			
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a	42b	Yes	No X
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	420		
If Tes, 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	40	1	
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	42c		X
in res, enter the marke of the loreign country			
		_	/.
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	'	<b>-</b> []	N/A N/A
and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	No
44a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	<b>44</b> a		Х
<b>b</b> Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44ь		х
c Did the organization receive any payments for indoor tanning services during the year?	44 c		Х
d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	44 d		1
45a Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?	45a		X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,'	45:		V
Form 990 and Schedule R may need to be completed instead of Form 990-E./ (see instructions)	45 b orm 990	)-EZ (	(2011)
			,

Form 990-I	EZ (2011) ILLINOIS WOMEN'S GO	LF ASSOCIATION	Ţ	23-705	59067	Page <b>4</b>
•	•					Yes No
46 Did t	he organization engage, directly or indirec	tly, in political campaig	n activities on behalf of	or in opposition to		
Part VI	dates for public office? If 'Yes,' complete Section 501(c)(3) organization:		7(a)(1) nanayamat	aharitahla turata a	46	X
ratt 41	501(c)(3) organizations and sec	s and section 4547	onexempt charitable	e trusts must answ	er auestion	uon s
	47-49b and 52, and complete the	ne tables for lines	50 and 51.		q	•
	Check if the organization used Schedul	e O to respond to any o	question in this Part VI			
					1	es No
47 Did ti comp	he organization engage in lobbying activit blete Schedule C, Part II	ies or have a section 50	01(h) election in effect d	uring the tax year? If 'Y		Х
<b>48</b> Is the	e organization a school as described in se	ction 170(b)(1)(A)(ii)? I	f 'Yes,' complete Sched	ule E	48	X
<b>49 a</b> Did tl	he organization make any transfers to an	exempt non-charitable	related organization?		49a	X
<b>b</b> If 'Ye	es,' was the related organization a section	527 organization?			49b	
<b>50</b> Complempt	plete this table for the organization's five loyees) who each received more than \$10	highest compensated e 0,000 of compensation	mployees (other than of from the organization. If	ficers, directors, trustee f there is none, enter 'N	s and key one '	
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W 2/1099 MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated a other compe	
NONE	- <del></del>			deterred compensation		
-,244 -			†			
					<del></del>	
			_			
<u> </u>					~ n+n	
			-			
					<u> </u>	
			1			
<b>e</b> Total	number of other employees paid over \$1	00,000				
<b>51</b> Comp	plete this table for the organization's five	highest compensated in	ndependent contractors v	who each received more	than \$100,00	)0 of
	pensation from the organization of there is lame and address of each independent contractor paid		(b) Type	of service	(c) Compen	sation
	taine and address of each maspenderic confractor pare		(а) турс	51 3611166	(c) compen	
NONE _						
					<u></u>	
			<u> </u>			
	<del></del>					
	number of other independent contractors	oneh recourse over ¢	100.000			<del></del>
	he organization complete Schedule A? <b>N</b> o	5 ,	,	Ť.		
	table trusts must attach a completed Sch		organizations and 454.	(a)(1) honexempt	► X Yes	No
Under penaltic true, correct,	es of perjury, I declare that I have examined this return and complete Declaration of preparer (other than offic	i, including accompanying schi er) is based on all information	edules and statements, and to to of which preparer has any know	he best of my knowledge and b vledge	elief, it is	
<del></del>	Ellen B. Brene	Treasure	2/2	2-27-201	2	
Sign	Signature of officer	,		Date		
Here	ELLEN B. BOEYE	TREASUR	rer	·		
	Type or print name and title	Oddarle All A	A Date		TIAL	
D : 1	Print/Type preparer's name	50500 JUST -	Date 2 /1 0 /1	Check Lill	TIN	
Paid Preparer	SCOTT A WEBER  Firm's name SCHEFFEL & COMP	ANY PH	12/10/1	Z self employed P	00028120	
Use Only	Firm's address > 143 N KANSAS ST			Firm's EIN	37-12065	30
,		L 62025-1770		Phone no (61		
May the IR	RS discuss this return with the preparer sh		ıctıons		► X Yes	No
					Form 990-E	<b>Z</b> (2011)

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

**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

Open to Public

Employer identification number

ILLINOIS WOMEN'S GOLF ASSOCIATION 23-7059067 Part | 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 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 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 carry out the purposes of one or 11 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 Type II c | Type III — Functionally integrated d | Type III - Other 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 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? g Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) 11 g (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s) h (i) Name of supported (iii) Type of organization (iv) Is the (v) Did you notify (vi) Is the (VII) Amount of support organization in column (i) listed in organization described on lines 1.9 above or IRC section the organization in column (i) of organization in column (i) your governing document? your support? (see instructions)) organized in the No Yes No Yes Yes No (A) (B) (C) (D) (E) Total BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2011

#### 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support			T	<del>,</del>		
	ndar year (or fiscal year nning in) ►	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 2011	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4				-		
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2007	<b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc (see inst	ructions)			12	
13	First five years. If the Form 990 organization, check this box and	s for the organiza stop here	tion's first, secon	d, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ □
Sec	tion C. Computation of Pu	ıblic Support	Percentage				· · · · · · · · · · · · · · · · · · ·
	Public support percentage for 20	•	•	e 11, column (f))		14	%
15	Public support percentage from 2	2010 Schedule A,	Part II, line 14			15	
16 a	33-1/3% support test – 2011. If to and stop here. The organization				I the line 14 is 33-1	1/3% or more, che	ck this box
t	33-1/3% support test — 2010. If t and stop here. The organization				a, and line 15 is 33	-1/3% or more, ch	eck this box
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	ind-circumstances	s' test, check this i	box and stop here.	. Éxplain in Part IV	0% ′ how ►
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	ind-circumstances lest. The organiza	s' test, check this i ition qualifies as a	box and stop here publicly supported	. Explain in Part IV d organization	how the
	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,			
RΔΔ					Sr	:hedule A (Form 99	an or 990.E21 2011

#### 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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

<u></u>	Nam A. Dublia Command						
	tion A. Public Support			4 > 0 = 0 =	411 655 1		
	dar year (or fiscal yr beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions and membership fees					ļ	
	received (Do not include	33,941.	27,207.		30,699.	26,677.	118,524.
2	any 'unusùal grants '). Gross receipts from admis-	33,941.			30,033.	20,077.	110, 324.
2	sions, merchandise sold or						
	services performed, or facilities						
	furnished in any activity that is						
	related to the organization's tax-exempt purpose	35,845.	34,205.		35,830.	35,440.	141,320.
3	Gross receipts from activities						
	that are not an unrelated trade						0
	or business under section 513						0.
4	Tax revenues levied for the organization's benefit and	ŀ					
	either paid to or expended on			ŀ			•
_	its behalf						0.
Э	The value of services or facilities furnished by a	}					
	governmental unit to the						0
	organization without charge						0.
	Total. Add lines 1 through 5	69,786.	61,412.	0.	66,529.	62,117.	259,844.
7 a	Amounts included on lines 1, 2, and 3 received from	]			ŀ		
	disqualified persons	0.	0.	0.	0.	0.	0.
Ь	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					1	
	for the year	0.	0.	0.	0.	0.	0.
c	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support (Subtract line						
	7c from line 6)			1	<u></u>		259,844.
Sec	tion B. Total Support						
	dar year (or fiscal yr beginning in)►	(a) 2007	<b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(f) Total
Calen	dar year (or fiscal yr beginning in)► Amounts from line 6	<b>(a)</b> 2007 69, 786.	<b>(b)</b> 2008 61, 412.	<b>(c)</b> 2009	(d) 2010 66, 529.	(e) 2011 62, 117.	(f) Total 259, 844.
Calen	Amounts from line 6 Gross income from interest,						
Calen	Amounts from line 6 Gross income from interest, dividends, payments received						
Calen	Amounts from line 6 Gross income from interest,	69,786.	61,412.	0.	66,529.	62,117.	259,844.
Calen 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
Calen 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	69,786.	61,412.	0.	66,529.	62,117.	259,844.
Calen 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511	69,786.	61,412.	0.	66,529.	62,117.	259,844.
Calen 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	69, 786. 12, 121.	61,412. 5,123.	988.	66,529. 5,086.	62,117. 5,369.	259,844. 28,687.
Calen 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	69,786.	61,412.	0.	66,529.	62,117.	259,844. 28,687.
Calen 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	69, 786. 12, 121.	61,412. 5,123.	988.	66,529. 5,086.	62,117. 5,369.	259,844. 28,687.
Calen 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	69, 786. 12, 121.	61,412. 5,123.	988.	66,529. 5,086.	62,117. 5,369.	259,844. 28,687.
Calen 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	69, 786. 12, 121.	61,412. 5,123.	988.	66,529. 5,086.	62,117. 5,369.	259,844. 28,687.
Calen 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include	69, 786. 12, 121.	61,412. 5,123.	988.	66,529. 5,086.	62,117. 5,369.	259,844. 28,687. 0. 28,687.
Calen 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	69, 786. 12, 121. 12, 121.	5,123. 5,123.	988.	66,529. 5,086.	62,117. 5,369.	259,844. 28,687. 0. 28,687.
Calen 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include	69, 786. 12, 121. 12, 121.	5,123. 5,123. 25.	988.	5,086. 5,086.	5,369. 5,369.	259,844. 28,687. 0. 28,687. 0.
Calen 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in	69, 786. 12, 121. 12, 121.	5,123. 5,123.	988.	66,529. 5,086.	62,117. 5,369.	259,844. 28,687. 0. 28,687.
Calen 9 10 a b 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV Total support. (Add ins 9, 10c, 11, and 12) First five years. If the Form 990 in	69, 786.  12, 121.  12, 121.  565. 82, 472. s for the organizat	5,123. 5,123. 25. 66,560.	988. 988.	5,086. 5,086. 71,615.	5,369. 5,369.	259,844. 28,687. 0. 28,687. 0.
Calen 9 10 a b 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV Total support. (Add ins 9, 10c, 11, and 12) First five years. If the Form 990 i organization, check this box and	69, 786.  12, 121.  12, 121.  565. 82, 472. s for the organizat stop here	5,123. 5,123. 25. 66,560. Ition's first, second	988. 988.	5,086. 5,086. 71,615.	5,369. 5,369.	259,844. 28,687. 0. 28,687. 0.
Calen 9 10 a b 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV Total support. (Add Ins 9, 10c, 11, and 12) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pu	565. 82,472. s for the organizat stop here	5,123. 5,123. 5,123. 25. 66,560. clion's first, second	988. 988. 988. , third, fourth, or	5,086. 5,086. 71,615.	5, 369.  5, 369.  67, 486. section 501(c)(3)	259,844. 28,687. 0. 28,687. 0. 590. 289,121. ►□
Calen 9 10 a b 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV Total support. (Add lins 9, 10c, 11, and 12) First five years. If the Form 990 if organization, check this box and tion C. Computation of Pu	12,121.  12,121.  12,121.  565. 82,472. s for the organizat stop here lblic Support F	5,123. 5,123. 5,123. 25. 66,560. tion's first, second Percentage (f) divided by line	988. 988. 988. , third, fourth, or	5,086. 5,086. 71,615.	5, 369.  5, 369.  67, 486. section 501(c)(3)	259,844. 28,687. 0. 28,687. 0. 590. 289,121. ►□
Calen 9 10 a b 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV Total support. (Add lins 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Pupublic support percentage from 20	12,121.  12,121.  12,121.  565. 82,472. s for the organizat stop here lblic Support F	5,123. 5,123. 5,123. 25. 66,560. tion's first, second Percentage (f) divided by line Part III, line 15	988. 988. 988. , third, fourth, or	5,086. 5,086. 71,615.	5, 369.  5, 369.  67, 486. section 501(c)(3)	259,844. 28,687. 0. 28,687. 0. 590. 289,121. ►□
Calen 9 10 a b 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV Total support. (Add lins 9, 10c, 11, and 12) First five years. If the Form 990 if organization, check this box and tion C. Computation of Pu	12,121.  12,121.  12,121.  565. 82,472. s for the organizat stop here lblic Support F	5,123. 5,123. 5,123. 25. 66,560. tion's first, second Percentage (f) divided by line Part III, line 15	988. 988. 988. , third, fourth, or	5,086. 5,086. 71,615.	5, 369.  5, 369.  67, 486. section 501(c)(3)	259,844.  28,687.  0.  28,687.  0.  590.  289,121.  • [
Calen 9 10 a b 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV Total support. (Add lins 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Pupublic support percentage from 20	12,121.  12,121.  12,121.  565. 82,472. s for the organizat stop here blic Support F 11 (line 8, column 2010 Schedule A, Festment Incor	5,123.  5,123.  5,123.  25. 66,560.  Ition's first, second  Percentage (f) divided by line Part III, line 15  me Percentage	988. 988. 988. , third, fourth, or	5,086. 5,086. 71,615.	62, 117. 5, 369. 5, 369. 67, 486. section 501(c)(3) 15 16	28,687.  0. 28,687.  0. 28,687.  \$9.92 %
Calen 9 10 a  b 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV Total support. (Add lins 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Pupublic support percentage for 20 Public support percentage from 2 tion D. Computation of Inventors.	12,121.  12,121.  12,121.  12,121.  565. 82,472. s for the organizat stop here blic Support F 11 (line 8, column 2010 Schedule A, Fyestment Incorpor 2011 (line 10c, corpor 2011 (line 2011 (	5,123.  5,123.  5,123.  5,123.  66,560.  clion's first, second.  Percentage (f) divided by line Part III, line 15 me Percentage column (f) divided	988. 988. 988. , third, fourth, or 13, column (f))	5,086. 5,086. 71,615.	5, 369.  5, 369.  67, 486. section 501(c)(3)	259,844.  28,687.  0.  28,687.  0.  590.  289,121.  • [
Calen 9 10 a  b 11 12 13 14 Sec 15 16 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV Total support. (Add Ins 9, 10c, 11, and 12) First five years. If the Form 990 i organization, check this box and tion C. Computation of Public support percentage from 2 tion D. Computation of Investment income percentage for	12,121.  12,121.  12,121.  12,121.  565. 82,472. s for the organizat stop here blic Support F 11 (line 8, column 2010 Schedule A, F) com 2010 Schedule ithe organization d	5,123.  5,123.  5,123.  5,123.  66,560.  Ition's first, second Percentage (f) divided by line Part III, line 15 me Percentage column (f) divided e A, Part III, line 1 iid not check the bi	988.  988.  988.  13, column (f))  by line 13, column (f) ox on line 14, and	5,086.  5,086.  71,615.  fifth tax year as a	5, 369.  5, 369.  5, 369.  67, 486. section 501(c)(3)  15 16  17 18 han 33-1/3%, and	28,687.  0. 28,687.  0. 28,687.  0.  590. 289,121.
Calen 9 10 a  b 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV Total support. (Add Ins 9, 10c, 11, and 12) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pu Public support percentage from 2 tion D. Computation of Investment income percentage from 33-1/3% support tests — 2011. If	12,121.  12,121.  12,121.  12,121.  565. 82,472. s for the organizat stop here blic Support F 11 (line 8, column 2010 Schedule A, Vestment Incorpor 2011 (line 10c, com 2010 Schedule the organization d this box and stop the organization d	5,123.  5,123.  5,123.  5,123.  5,123.  66,560.  Ition's first, second  Percentage  (f) divided by line Part III, line 15  me Percentage  column (f) divided  e A, Part III, line 1  id not check the binere. The organization of check a box	988.  988.  988.  988.  third, fourth, or third, fourth, and third qualifies as the on line 14, and third qualifies as the on line 14 or line	5, 086.  5, 086.  71, 615.  ifth tax year as a publicly support a publicly support 19a, and line 16	5, 369.  5, 369.  5, 369.  67, 486. section 501(c)(3)  15 16  17 18 han 33-1/3%, and ted organization is more than 33-1	28,687.  0. 28,687.  0. 28,687.  89.87.  89.87.  88.84.  9.92. 10.91.  Inne 17.  X/3%, and

Schedule A	(Form 990 or	990-EZ) 201	<u>1 1777</u>	NOTS MO	MEN 5 G	JLF ASSU	CIATION		23-7059	<u>067</u>	Page <b>4</b>
Part IV ·	Supplemer Supplemer Part II, line (See instru	ntal Inform 17a or 17 ctions).	nation. Co b; and P	omplete t art III, lin	this part to e 12. Also	o provide o complet	the explar e this part	nations re for any	equired by ladditional ii	Part II, line nformation.	10;
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011 · SCH	EDUL	E A, PART	IV -	SUPI	PLEI	MENT	AL IN	FORMATIO	N PAGE
·		ILLINOIS WO	MEN	I'S GOL	F ASS	OCIATI	ON		23-705906
/10/12		· <del></del>							08 45A
PART III, LINE 12 - OT	HER IN	COME							
NATURE AND SOURCE		2011	-	2010		2009		2008	2007
OTHER	TOTAL	\$ 0.	\$		<u>0.</u> \$		0. \$	25. 25. \$	565. 565.

•

## SCHEDULE G (Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545 0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

Name of the organization					Employer identifica	
ILLINOIS WOMEN'S GOLF AS	SOCIATION				23-705906	7
Part I Fundraising Activities. Comp	lete if the organ quired to comple	ization ans ete this pa	swered 'Ye rt	s' to Form 990, Part IV	, line 17.	
Indicate whether the organization     A Mail solicitations     Internet and email solicitations     Phone solicitations     In-person solicitations	n or oral agreen rt VII) or entity ii idividuals or ent	nent with a n connection	e f g iny individi on with pro	Solicitation of non-g Solicitation of gove Special fundraising ual (including officers, d ofessional fundraising so	government grants rnment grants events irectors, trustees or ke ervices?	Yes A No
compensated at least \$5,000 by the (i) Name and address of individual or entity (fundraiser)	(ii) Activity	have custoo	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7				:		
8						
9						
10						
Total  3 List all states in which the organiz or licensing.	zation is register	ed or licer	 hsed to sol	icit contributions or has	been notified it is exen	npt from registration

Sche	dule	G (Form 990 or 990-EZ) 2011 ILLINO	IS WOMEN'S GOLF	ASSOCIATION	23-705	59067 Page <b>2</b>
Pa	<b>1   </b>	Fundraising Events. Complete if the	ne organization ans	wered 'Yes' to Forn	n 990, Part IV, line	18, or reported
	٠	more than \$15,000 of fundraising List events with gross receipts gr	event contribution	is and gross incom	e on Form 990-EZ,	lines 1 and 6b.
		List events with gross receipts gr	(a) Event #1	<b>(b)</b> Event #2	(a) Other events	(d) Total events
			1 ''	(b) Event #2	(c) Other events	(add column (a)
R			GOLF TOURNAMEN (event type)	(event type)	(total number)	through column (c))
Ę			(0.011.1)	(orani typa)	(14111111111111111111111111111111111111	
REVENUE	1	Gross receipts	35,440.			35,440.
Ē			}			
	2	Less Charitable contributions				
	3	Gross income (line 1 minus line 2)	35,440.			35,440.
	4	Cash prizes				
	5	Noncash prizes	8,930.			8,930.
D I R E C T	6	Rent/facility costs				
	7	Food and beverages				
E X P	8	Entertainment				
EXPENSES	9	Other direct expenses	25,851.			25,851.
S	10	Direct expense summary Add lines 4 three	ough 9 ın column (d)		<b>•</b>	34,781.
<u></u>	11	Net income summary Combine line 3, co			<u> </u>	659.
Pa	1 111	Gaming. Complete if the organiz	ation answered 'Ye	es' to Form 990, Pa	irt IV, line 19, or re	ported more than
	_	*\$15,000 on Form 990-EZ, line 6a			<u></u>	<del></del>
R			(a) Bingo	(b) Puli tabs/Instant bingo/progressive	(c) Other gaming	(d) Total gamıng (add column (a)
REVENUE				bingo		through column (c))
N						
Ĕ	1	Gross revenue	·			
	2	Cash prizes				
D X						
D P E N S E	3	Non-cash prizes				
C S T E S	4	Rent/facility costs				<del></del>
	5	Other direct expenses				
	Ť	Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No ——	No —	No	
			<u> </u>			
	7	Direct expense summary Add lines 2 thr	ough 5 in column (d)		•	
	8	Net gaming income summary. Combine I	ines 1, column (d) and l	ine 7	<b>•</b>	
		er the state(s) in which the organization op	• •			
		he organization licensed to operate gaming				Yes No
	7 T T	No,' explain.				
		re any of the organization's gaming license	· ·	<del>-</del>	=	Yes No
ı	o If 'Y 	Yes,' explain				
BAA	١.		TEEA3702L	01/24/12	Schedule <b>G</b> (Fo	rm 990 or 990-EZ) 2011

Page 2

Schedule <b>G</b> (Form 990 or 990-FZ)	2011 ILLINOIS WC	MEN'S GOLF ASSOCIATION	23-7059067	Page 3
11 Does the organization opera			Yes	No
12 'Is the organization a grantor administer charitable gamin	r, beneficiary or trustee of g <sup>2</sup>	f a trust or a member of a partnership or o	ther entity formed to Yes	No
13 Indicate the percentage of g	jaming activity operated in	า		
a The organization's facility	,		13a	%
<b>b</b> An outside facility			13Ь	8
14 Enter the name and address	s of the person who prepa	ares the organization's gaming/special ever	nts books and records	
Name •				
Address	<del>-</del>			
<b>b</b> If 'Yes,' enter the amount of	gaming revenue received	ty from whom the organization receives ga d by the organization ► \$		s No
of gaming revenue retained				
c If 'Yes,' enter name and add	dress of the third party			
Name ►				· <del></del> - 7
Address ►				 
16 Gaming manager informatio	n			
Name ►				. – – – – –
Gaming manager compensa	ation ► \$			
Description of services provi	ided			
Director/officer	Employee	Independent contractor		
17 Mandatory distributions				
a Is the organization required state gaming license?	under state law to make	charitable distributions from the gaming pr	oceeds to retain the	s No
<b>b</b> Enter the amount of distribu	itions required under state	e law to be distributed to other exempt orga	anizations or spent in the	Luqued .
organization's own exempt a	activities during the tax ye	ear ► \$		<u> </u>
columns (iii) and	(v), and Part III, line	e this part to provide the explanates 9, 9b, 10b, 15b, 15c, 16, and 15 ormation (see instructions).	ions required by Part I, lir 7b, as applicable. Also co	ne 2b, implete
			· · · · · · · · · · · · · · · · · · ·	
BAA		TEEA3703L 05/20/11	Schedule G (Form 990 or 9	990-EZ) 2011

## SCHEDULE O (Form 990 or 990-EZ)

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

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

- · · · · · · · · · · · · · · · · · · ·	
ILLINOIS WOMEN'S GOLF ASSOCIATION	23-7059067
FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE	
TO_PROMOTE_AMATEUR_GOLF_IN_ILLINOIS	
FORM 990-EZ, PART V - REGARDING TRANSFERS ASSOCIATED WITH PERSONAL	BENEFIT CONTRACTS
(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,	DIRECTLY OR
INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?	NO
(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIREC	CTLY OR
INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?	NO
	· <b></b>
<b>.</b>	

2 <b>0</b> 11 `	SCHEDULE O - SUPPLEMENTAL INFORMATION ILLINOIS WOMEN'S GOLF ASSOCIATION		PAGE 2 23-7059067
•			
2/10/12 FORM 990-E OTHER EXP	Z, PART I, LINE 16 ENSES		08 45AN
INSURANCE MISC EXPEN SUPPLIES		\$ TOTAL \$	950. 656. 2,050. 3,656.
FORM 990-E OTHER CHA	Z, PART I, LINE 20 NGES IN NET ASSETS OR FUND BALANCE	:S	W
UNREALIZED	GAIN ON SECURITIES	TOTAL \$	484. 484.