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Return of Organization Exempt From Income Tax

2012

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury

Open to Public

Inte	rnal Revenue	e Service The organization may have to use a copy of this return to satisfy state repor	ang requirem	ients		inspection	
A	For the 2	2012 calendar year, or tax year beginning $Jun~1$, 2012, and ending	g May			2013	
В	Check if app	plicable C Name of organization LADIES OF THE DUKES		D Employ	er Identifi	ication Number	-
		ss change Doing Business As		25-1	4557	26	
	\vdash	change Number and street (or P O box if mail is not delivered to street addr) Roomi	suite	E Telepho			
	Initial	- I		(724	1) 65	8-9258	
	Termin			(125	, 03	.5 5256	
	H	lated 2		G Gross re		201 707	
	\vdash	ded return NEW CASTLE PA 16101 ation pending F Name and address of principal officer	W(a) is this	a group return		· - '' T	
	Applica					₩	X No
_		IRENE DOWNING 1114 CROTON AVE NEW CASTLE PA 16101	If 'No,'	affiliates incl attach a list	(see instr	ructions)	
<u> </u>		npt status 501(c)(3) X 501(c) (7					
<u>J</u>	Websit		H(c) Group	exemption nu			
K		organization X Corporation Trust Association Other ► L Year of Forma	tion 1963	3 M/s	tate of leg	gal domicile PA	
Pa		Summary					
	1 Bri	efly describe the organization's mission or most significant activities. CREATE _A	N_ORGA	NIZATI	ON_F	OR SOCIAL	<u> </u>
ņ	PÜ	JRPOSES FOR MEMBERS AND CHARITABLE PURPOSES FOR THE	COMMUN	NITY.			
3							
Ĕ			. .				
5	2 Ch	eck this box ► ☐ if the organization discontinued its operations or disposed of mo	re than 25	% of its ne	t asset	s	
5 ×	3 Nu	mber of voting members of the governing body (Part VI, line 1a)		.	3		10
5	4 Nu	mber of independent voting members of the governing body (Part VI, line 1b)			4		10
Į	5 Tot	tal number of individuals employed in calendar year 2012 (Part V, line 2a)			5		26
ACIIVIIIES & GOVETRAIICE	70 Tot	tal number of volunteers (estimate if necessary) tal unrelated business revenue from Part VIII, column (C), line 12			6	200	15
τ	L	t unrelated business taxable income from Form 990-T, line 34			7a 7b		810. 970.
-	D Ne	t unrelated business taxable income from 1 orni 990-1, fine 34	Т в	rior Year	-'B	Current Ye	
	8 Co	ntributions and grants (Part VIII, line 1h)		nor rear		Current re	ar
;		ogram service revenue (Part VIII, line 2g)	<u> </u>	2,1	22	2	002.
į		restment income (Part VIII, column (A), lines 3,4, and 7d)		$\frac{2,1}{1,4}$			53.
}		her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 9cpand (12)13		199,2		202	810.
$\overline{}$		tal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	 	202,8			865.
	+	ants and similar amounts paid (Part IX, column (A), lines 1-3)		202,0	55. 	204,	005.
		nefits paid to or for members (Part IX, column (A), line 4)					
	4	laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	100 0	 -	116	240
es S	13 34		-	126,0	8/.	116,	349.
Š	16a Pro	ofessional fundraising fees (Part IX, column (A), line 11e)	٠ 🗀				
Expenses	b Tot	tal fundraising expenses (Part IX, column (D), line 25) ►			<u> </u>		
ш	17 Oth	ner expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		90,1	15.	99,	831.
	18 Tot	tal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		216,2			180.
	19 Re	venue less expenses Subtract line 18 from line 12		-13,3			315.
8 8			Beginnin	ng of Curren		End of Yea	
Assets of Balances	20 Tot	tal assets (Part X, line 16)		432,9		431.	564.
	21 Tot	tal liabilities (Part X, line 26)	. —	1,2			126.
žĚ	22 Ne	t assets or fund balances. Subtract line 21 from line 20	_	431,7			438.
D:	 	Signature Block	<u> </u>	431,1	33.1	420,	430.
			the best of a				
com	plete Declar	of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to ration of preparer (other than officer) is based on all information of which preparer has any knowledge	the best of n	riy kiriowieuge	and bene	er, it is true, correct	i, and
		Note of Daylor		9-7	-1.2	3	
Sig	1 0	Signature of officer	Da	nte	. /		
He		TRENE DOWNING					
3	. •	IRENE DOWNING Type or print name and title					<u>-</u>
ý—		Print/Type preparer's name Preparer's signature Q Q Date		Check	If F	PTIN	
_		The state of the s	/12	-	」"		
Pa		JOSEPH D DOSTILIO CPA JOSEPH D DOSTILIO CPA 08/13	/13	self-employe	:a E	200045318	
	eparer	Firm's name Joseph D Dostilio, CPA LLC		<u>.</u>			
US	e Only	Firm's address 143 E Wallace Avenue		Firm's EIN		4016583	
		New Castle PA 16101		Phone no	(724		
May	y the iRS	discuss this return with the preparer shown above? (see instructions)	• • •		· .	X Yes	No
							/2012

	990 (2012) LA			Vala eV	!!ala				25-1	4557	2 <u>6</u>	F	age
ar		ent of Progra Schedule O cont		•			11						
1	Briefly describe	-		s to arry q	uestion in th	13 41()	11				<u>_</u>		
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	PURPOSES F				E PURPOS	ES F	OR THE C	ОММИИ	TY.				
						- -						-	
3	Did the organiza	tion undertake a	nov significant n	rogram c	anyooc durin	a the ve	or which wo	ro not listo	d on the prior				
2	Form 990 or 990		iny significant p	orogram se	ervices durin	y the ye	ai wilicii we	re not uste	u on the prior		Yes	k]	N
	If 'Yes,' describe		ices on Schedu	le O.						Ш		<u> </u>	
	Did the organiza				nt changes ir	n how it	conducts, ar	ny progran	services?		Yes	x	N
	If 'Yes,' describe											_	
4	Describe the org Section 501(c)(3 others, the total	anization's prog) and 501(c)(4) expenses, and r	ram service acc organizations a evenue, if any,	complishmend section for each p	nents for eac n 4947(a)(1) orogram serv	h of its trusts a vice repo	three largest re required t orted	t program s to report th	services, as m le amount of g	easured rants a	d by ex nd allo	pense cation	es Is 1
4 a	(Code:) (Expenses	Ś		including gra	ants of	Ś) (Revenue	\$			
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اد ۸	Other program s	envices (Descri	he in Schedule	0)								<u> </u>	
	(Expenses \$	CIVICES (DESCIII		o) ing grants	of \$) (Revenu	e S)	
	,		miciau	y yrains	· • •			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	~ ~			,	_
	Total program s	ervice expenses	. ▶										

Yes No

Form 990 (2012) LADIES OF THE DUKES Parkit Checklist of Required Schedules

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
á	Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	х	
ŧ	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		х
•	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VIII	11 c		Х
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.	11 e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
ŧ	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV.	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
20 a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
Ŀ	olf 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Part IV: Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 23 Х Schedule I 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25 Х 24a 24b **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 240 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If 'Yes,' complete 25b Schedule L. Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II Х 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III Х 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) X 28a a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х 28b Schedule L, Part IV **c** An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If 'Yes,' complete Schedule L, Part IV* 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M Х 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Х Schedule N. Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II. III. IV. and V. line 1 34 Х X 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If 'Yes' to line 35a, 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,' complete Schedule R, Part V, line 2 Х 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI X 37

Form 990 (2012)

a Enter the number reported in Box 3 of Form 1096. Enter -0 - find applicable b Enter the number of Forms W.G3 included in line 1a. Enter -0 - find applicable c Gair the organization comply with backing withholding rules for reportable payments to vendors and reportable gaming c Gair the organization organization withholding rules for reportable payments to vendors and reportable gaming c Gair the reportable or propriet with responsibility of the celerical year entering with or within the year covered by time return 2 a Enter the number of employees reported in Form W3. Transmitted of Mage and Tax. State 2 a Enter the number of employees reported in Form W3. Transmitted reflection and the responsibility of the celerical year entering with or within the year covered by time return. It is a state of the state of t	• •	Check if Schedule O contains a response to any question in this Part V								
a Enter the number reported in Box 3 of From 1096. Enter -0 -1 not applicable 1st 0 0 0 0 0 0 0 0 0		, and the second		Ė٦	Yes	No				
b Enter the number of Forms W-25 included in line 1a. Enter-0- if not applicable Colf the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State ments, filed for the calendar year ending with or within the year covered by this return bil fal least one is reported on the 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-ribe (see instructions) 3 b Off the organization have unreliated business gross incribe of \$1,000 or more during the year? 3 b If Yes has it filed a Form 990-T for this year? If No. provide an explanation in Schedule O 3 b A As any time duming the calendar year, did the agranization have on interest in or a significant or other funding the payment of the provide an explanation in Schedule O 3 b A Significant of the secondary	1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	٥٢	\neg						
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prize winners. Field for the calleding winnings to prize winners. Field for the calleding very serior down the winning to grave and the property of the complex property of the com	·		—							
(gambing) winnings to prize winners? 2 a Fitch the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b if at least one is reported on thine 23, did the organization file all required fearer amployment tax returns? Note. If the sum of lines 1a and 2s is greater than 250, you may be required to e-file (see instructions) 3 b Off the organization have unrelated business gross incore of \$1,000 or more during the year? b if I'ves' has it filed a Form 990-T for this year? If No. 'provide an explanation in Schedule 0 4 a At any time during the calendar year, did the organization have an interest in, or a significant or other authority over, a brives' return in a fineign provinty outh as a bank account, securities account, or other financial accounty? 5 a Was the organization are provinty outh as a bank account, securities account, or other financial accounty? 5 a Was the organization are an area of the foreign country. 5 a Was the organization area and a sheller transaction at any time during the tax year? 5 a Was the organization area and a sheller transaction at any time during the tax year? 5 a Was the organization area and a shell it was or is a party to a prohibitor tax sheller transaction? 6 a Does the organization indust with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 b I'res', to line 5 a of \$5, did the organization file to require the support of the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided by the paymonization receive a payment in excess of \$75 made party as a contribution or quantition or the same party and the organization received a contribution of undertity, to pay premiums on a personal benefit contract? 7 b I'res', indicate the number of Forms \$828.2 fleed during the year 9 Sponsoring organization received a contribution of undertity, to pay pre			Ť							
memsts, filed for the calendar year ending with or within the year covered by this return		(gambling) winnings to prize winners?	<u> </u>	1с	-+-					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? bit If Yes has it filed a Form 990-T for this year? If No, 'provide an explanation in Schedule 0 4 a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial accountly of the financial accountly a bit Yes,' enter the name of the foreign country: bit Yes,' enter the name of the foreign country: See instructions for fining requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that the was or a party to a prohibited tax shelter transaction? 6 a Doss the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that there not tax deductible as charitable contributions? 5 bit Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 to granizations that may receive deductible contributions under section 170(c). 8 bit Yes, indicate the number of Forms 8282 filed during the year and property for which it was required to file Form 8293 as required? 9 bit Yes, indicate the number of Forms 8282 filed during the year and property for which it was required to file Form 8299 as required? 9 bit He organization, curring the year, any premiums, directly to pay premiums on a personal benefit contract? 7 c X 9 Sponsoring organizations maintaining donor advised funds and section 596(XX) supporting organizations	2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 2a	26							
3 a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 4 a 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)? 5 a Was the organization or foreign country (such as a bank account, securities account, or other financial accounts. 5 a Was the organization or party to a prohibited tax shelter transaction at any time during the tax year? 5 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 a Dess the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductable as charitable contributions? 6 a Dess the organization include with every solicitation an express statement that such contributions or grits were not lax deductable as charitable contributions? 7 bit if Yes, did the organization notify the donor of the value of the goods or services provided? 8 bit if Yes, indicate the number of Forms 8822 filed during the year 9 bit if Yes, indicate the number of Forms 8823 filed during the year 10 bit the organization received a contribution of qualified intellectual property, for which it was required to file Form 8829? 11 bit the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 12 bit the organization make any taxable distribution or advised funds and section 596(X) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 596(X) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 596(X) supporting organizations. Did the supporting organizations is contribution to a donor, donor advised funds and section 596(X) supporting organizations. Did the success to insur		b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2 b	X					
b if Yes' has it filed a Form 990-T for this year? If No', provide an explanation in Schedule O 4 a At any time during the callendar 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 interior and interior in the foreign country. It is seen instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 a Was the organization a party to a prohibited tax shelter transaction? 5 a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5 a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6 b if Yes, indicate the number of Form 886-17 7 organizations that may receive deductible contributions under section 170(c). 8 Diff were granization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 9 b if Yes, indicate the number of Forms 8282 filed during the year. 9 b if Yes, indicate the number of Forms 8282 filed during the year. 9 c Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 if the organization was any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 8 required? 8 Sponsoring organization make any taxable distributions under section 509(a)3 supporting organization,		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	Γ							
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g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If Yes, enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 13b c Enter the amount of reserves on hand			L							
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The bit the organization receive any payments for indoor terming services during the tax year.		c Enter the amount of reserves on hand		757 5 7	4,36	19 (B) 19 1				
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14	a Did the organization receive any payments for indoor tanning services during the tax year?	T	14a		X				
		b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		14b						

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 10 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 h 10 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 5 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Х Did the organization have members or stockholders? 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х **7** a members of the governing body? **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Х stockholders, or other persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 a Х a The governing body? X b Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Х 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12c Schedule O how this is done 13 X 13 Did the organization have a written whistleblower policy? Х 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Х Х b Other officers of key employees of the organization 15_b If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Other (explain in Schedule O) Another's website X Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: 20 NEW CASTLE _ PA _ 16101 ____(724) 658-9258 HELEN MORGAN 1114 CROTON AVE Form 990 (2012) BAA TEEA0106 08/08/12

PartVII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees; and former such persons

Check this box if neither the organization	ation nor any r	elated	org			n com	pen	sated any current offi	cer, director, or truste	e
(A) Name and Title	(B) Average	Positio	n (do k, unk	not c	heck erson	more th	nan an	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) CAROL BETHLE	1.00									
TRUSTEE		Х						0.	0.	0.
(2) CAROL MURPHY TRUSTEE	1.00	х						0.	0.	0.
(3) NANCY MARINO	1.00									
TRUSTEE		х						0.	0.	0.
(4) ANITA PRILOZZI TRUSTEE	1.00	х						0.	0.	0.
(5) IRENE DOWNING	1.00		\vdash	\dashv				0.	0.	
PRESIDENT				х				0.	0.	0.
(6) KAY NOCERA	1.00			<u>^-</u>	_			· ·		
VICE-PRESIDENT			-	х				0.	0.	0.
(7) HELEN MORGAN	1.00									
TREASURER				x				0.	0.	0.
(8) CHARLENE FARRIS	6.00			,				F 057	0.	0
SECRETARY (9) CHARMANE RAPKO	1.00		\vdash	Х			_	5,057.		0.
FINANCIAL SEC.				х				0.	0.	0.
(10) GABRIELLA MARINO	9.00		\vdash	^				0.	0.	<u></u>
SARGENT OF ARMS				x				10,356.	0.	0.
(11)				••	_			10,330.	<u> </u>	<u> </u>
(12)										<u> </u>
<u>(13)</u>						_				
(14)										
		نـــــا	ᆜ					L	<u></u>	<u> </u>

Part VII Section A. Officers, Directors, Tru		Key	Em			es, a	anc	Highest Com	pensated Empl	oyees	(cor	1t)
(A) Name and title	Average hours per week	box,	unle	Pos heck ss pe	rson direct	than on the contract of the co	an tee)	(D) Reportable compensation from	(E) Reportable compensation from related organizations	amour	(F) imated it of oth ensatio	ier
	(list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	fro orga and	nization related nization	1
(15)												
(16)				i i								
(17)												
(18)												
(19)					-							
(20)												
(21)												
(22)												
(23)												-
(24)												
(25)	-											
1 b Sub-total c Total from continuation sheets to Part VII, Section	n A						>	15,413.	0.			0
d Total (add lines 1b and 1c)					`		<u> </u>	15,413.	0.			0
2 Total number of individuals (including but not limi from the organization ►	tea to tho	se iis	stea	abo	ve)	wno i	rece	eived more than \$	TOO,000 of reportab	ie comp		
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such			еу е	emp	loye	e, or	hıgl	hest compensated	l employee	3	Yes	No
For any individual listed on line 1a, is the sum of the organization and related organizations greater	reportable	e con	າper ດ? <i>I</i>	nsatı f 'Ye	ion a	and o	the	r compensation fro Schedule J for	om			
such individualDid any person listed on line 1a receive or accrue	compens	sation	n fro	m a	ı∩y ι	 ınrela	ated	l organization or ii	ndıvıdual	. 4		Х
for services rendered to the organization? If 'Yes, Section B. Independent Contractors	complete	e Sch	nedu	ile J	for	such	per	rson		5		X
Complete this table for your five highest compens compensation from the organization. Report comp	ated inde ensation	pend for t	ent he c	cont aler	tract idar	ors tl year	nat end	received more tha	n \$100,000 of the organization's t	tax year		
(A) Name and business addr	ess							(B) Description of		Compe	c) nsatio	'n
2 Total number of independent contractors (including	g but not	lımıt	ed to	o the	ose	listed	l ab	ove) who received	I more than		_	
\$100,000 in compensation from the organization		TEEAC	1108	01/3	24/13					Form	990	(2012

Par	t VIII .Statem				·					
,	Check if S	Schedule O	contains a	a resp	onse to any que	tion in this Part \ (A) Total reven		(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ANTS	1 a Federated c			1 a				10101100		
2,5	b Membership			1 b						
IFTS RA	c Fundraising			1 c						
S,G	d Related orga			1 d		_				:
S S	e Government gra	•	•	1 e	_					
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contri similar amount	s not included	above	1 f						
SE	g Noncash contri		ed in Ins 1a-	1f [.] \$			_			
ᄬ	h Total. Add li	ines la-lf				•				
EN	2a MEMBERSHIP DUES				Business Code					
8					900099	1,3		0.	0.	1,334.
35	b OTHER F				900099		<u>70.</u>	_0.	0.	470.
質	c RAFFLE(900099		<u>63.</u>	0.	0.	163.
3	d <u>BINGO</u>				900099		<u>35.</u>	0.	0.	35.
25	f All other pro	oram servi								
8	•	-	cc revend			► 2,0	02			
		g Total. Add lines 2a-2f3 Investment income (including dividends, interest and								
	other simila	r amounts)	Juding div	identis	s, interest and	•	53.	l o.	0.	53.
	4 Income from	n investmen	nt of tax-ex	xempt	bond proceeds	•	 		1	
	5 Royalties					•				-
	-		(i) R	eal	(II) Personal					
	6a Gross rents		[225						
	b Less: rental	expenses								
	c Rental income	or (loss)		225						
	d Net rental in	ncome or (lo	oss)			> 2	25.	0.	225.	0.
	7 a Gross amount f	from sales of	(ı) Secu	urities	(ii) Other					
	assets other th	an inventory							1	
	b Less cost or of and sales expe									
	c Gain or (los	s)				_				
	d Net gain or	(loss)				•				
OTHER REVENUE	8a Gross incon (not includir		draising e	vents						
Ę	of contributi	ons reporte	d on line	1c)						
R	See Part IV	, line 18			a					
뿓	b Less: direct	expenses			b	,				
0	c Net income	or (loss) fro	om fundra	ısıng e	events	>				
	9a Gross incon See Part IV	ne from gan , line 19	ning activi	ties.	a					
	b Less direct				ь					
	c Net income	or (loss) fro	om gaming	g activ	rities	>				
	10a Gross sales	of inventor	v less ret	urns						
	10a Gross sales and allowar	ices	y, 1000 Tet	.u. 113	a 279,50	7.				
	b Less: cost of	of goods sole	d		b 76,92					
	c Net income	or (loss) fro	om sales o	of inve		202,5	85.	0.	202,585.	0.
j		llaneous Rever	nue		Business Code				ļ	
	11a			-	_					<u> </u>
	b	- -	 .							<u> </u>
	c		_ .							
	d All other rev				<u> </u>				<u> </u>	
	e Total. Add I				•	•				
	12 Total reven	ue. See inst	tructions	<u>.</u>		<u>204,8</u>	<u>65.</u>	<u> </u>	202,810.	2,055.

Par	rt IX Statement of Functional Expen	ses			
Sec	tion 501(c)(3) and 501(c)(4) organizations must	complete all columns A	All other organizations n	nust complete column (A).
	Check if Schedule O contains a r	response to any question	n in this Part IX		
Do r 7b, i	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	_			_
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	15,413.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	88,720.			
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	12,216.			
11	Fees for services (non-employees)				
а	a Management				
b	Legal				
c	Accounting	2,750.			
d	d Lobbying				
	e Professional fundraising services See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amt exceeds 10% of line 25, col- umn (A) amt, list line 11g expenses on Sch O)				
12	Advertising and promotion	3,310.			
13	Office expenses	3,620.			
14	Information technology .				
15	Royalties				
16	Occupancy	38,521.			
17	Travel	30,321.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,830.			
20	Interest .				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.	22,378.			
		7,349.			
24	Other expenses. Itemize expenses not				,
	covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)		2 - 12 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -		
а	CONTRIBUTIONS	3,400.			
	OUTSIDE SERVICES	11,013.			
		4,466.			
	SUPPLIES CARD FEES				-
	CREDIT CARD FEES All other expenses	1,194.			
	· ·	01.0.100			
25	Total functional expenses. Add lines 1 through 24e	216,180.			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X (B) End of year (A) Beginning of year 1 26,752. Cash - non-interest-bearing 16,505 2 Savings and temporary cash investments 2 90,865. 80,827 3 3 Pledges and grants receivable, net Accounts receivable, net 4 Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 3,123 3,810. Prepaid expenses and deferred charges q Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 712,502 b Less: accumulated depreciation 10b 10 c 402,365 332,515 310,137. Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 432,970 431,564 Accounts payable and accrued expenses 17 17 1,217 11,126, Grants payable 18 18 Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 25 Total liabilities. Add lines 17 through 25 26 1,217 11,126 Organizations that follow SFAS 117 (ASC 958), check here ▶ こった。「いろ」の金の大変観点 and complete 4 .4.2lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 Temporarily restricted net assets 28 28 29 Permanently restricted net assets 29 R Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. **艾尔(安) 种种 医结节性体** 经一个工作 Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund. 31 32 Retained earnings, endowment, accumulated income, or other funds 32 431,753 420,438.

BAA

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

431,564. Form **990** (2012)

420,438.

33

34

431,753

432,970

Forn	n 990 (2012) LADIES OF THE DUKES	25-1455726	;	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	04,8	365.
2	Total expenses (must equal Part IX, column (A), line 25)	2		16,1	
3	Revenue less expenses. Subtract line 2 from line 1	3		11,3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		31,7	
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses .	7			
8	Prior period adjustments .	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	4	20,4	138.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
	Check if Schedule O contains a response to any question in this rait All			Yes	No
1	Accounting method used to prepare the Form 990. Cash Accrual Other		Г	103	
•			1 .		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			*	
2:	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	<u> </u>	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed	ewed on a			 -
	separate basis, consolidated basis, or both			<u> </u>	
	Separate basis Consolidated basis Both consolidated and separate basis				
1	b Were the organization's financial statements audited by an independent accountant?		2 ь		x
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a seg	arate		,	
	basis, consolidated basis, or both.	arato		١.	
	Separate basis Consolidated basis Both consolidated and separate basis		-	į.	
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		*5; e*	18 2 -	5, "
3 :	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3 a		х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the	required audit			
•	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	· · · ·	3 ь		
BAA			Form	990	(2012)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection
Employer identification number

Employer dentification number

LAD	DIES OF THE DUKES			25-145	5726	
Par	t Organizations Maintaining Dono	or Advised Funds or Oth	er Similar Funds	s or Accounts. (Complete i	f
	the organization answered 'Yes'	to Form 990, Part IV, Im	e 6.			
		(a) Donor advised	funds	(b) Funds and o	other account	ts
1	Total number at end of year					
2	Aggregate contributions to (during year)			•		
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and dor are the organization's property, subject to the			advised funds	Yes	No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing of the donor or donor advisor,	ig that grant funds ca or for any other purp	n be used only lose conferring	Yes	_ ∏No
Par	t II Conservation Easements. Comp	nlete if the organization :	answered 'Yes' to	Form 990 Part	IV line 7	
1	Purpose(s) of conservation easements held by			71 01111 330, 1 are	. 17, 1110 7	<u>· </u>
•	Preservation of land for public use (e.g., r.	•		n historically importa	ant land area	1
	Protection of natural habitat	consultation of succession,	—	certified historic stru		
	Preservation of open space			cortinou motorio stre	2014.0	
2	Complete lines 2a through 2d if the organization	on held a qualified conservation	n contribution in the f	form of a conservation	nn easement	on the
-	last day of the tax year	on held a qualified conscivation	r contribution in the r	om or a conscivation	ni cascinoni	OII tilo
				Held at the	End of the T	ax Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easer	ments		2 b		
С	: Number of conservation easements on a certif	fied historic structure included	n (a)	2 c		
d	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, ar	id not on a historic	2 d		-
3	Number of conservation easements modified, tax year ►	transferred, released, extinguis	shed, or terminated b	y the organization di	uring the	
4	Number of states where property subject to co	nservation easement is located	.			
5	Does the organization have a written policy reand enforcement of the conservation easemer	garding the periodic monitoring	, inspection, handlin	g of violations,	Yes	No
6	Staff and volunteer hours devoted to monitorin	ng, inspecting, and enforcing co	onservation easemen	ts during the year		
7	Amount of expenses incurred in monitoring, in \$	nspecting, and enforcing conse	rvation easements du	aring the year		
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the red	quirements of section	170(h)(4)(B)(ı)	Yes [No
9	In Part XIII, describe how the organization repinclude, if applicable, the text of the footnote to conservation easements	orts conservation easements in o the organization's financial s	n its revenue and exp tatements that descri	ense statement, and bes the organization	d balance she n's accountine	eet, and g for
Par	t III Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical swered 'Yes' to Form 990	Treasures, or O , Part IV, line 8.	ther Similar Ass	sets.	
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its finan	s held for public exhibition, edu	ication, or research ir	statement and baland furtherance of publ	ce sheet wor lic service, p	ks of rovide,
b	If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items:	SFAS 116 (ASC 958), to repold for public exhibition, educate	rt in its revenue state on, or research in fur	ment and balance s therance of public s	heet works of ervice, provid	of art, de the
	(i) Revenues included in Form 990, Part VIII,	line 1		. ▶\$		
	(ii) Assets included in Form 990, Part X			. ►\$		
2	If the organization received or held works of a amounts required to be reported under SFAS	rt, historical treasures, or other 116 (ASC 958) relating to these	sımılar assets for fır			g
а	Revenues included in Form 990, Part VIII, line	· · · · · · · · · · · · · · · · · · ·		. ⊳ \$		
	Assets included in Form 990. Part X		_	►s		

Part III Organizations Maintai	ming Colle	ections o	Art, misto	orical	reasures, or	Other Similar AS	3613 (C	Jiiuiu	eu)		
3 Using the organization's acquisition items (check all that apply).	on, accession	, and other	records, che	eck any	of the following t	hat are a significant us	se of its o	ollectio	n		
a Public exhibition			d Loan	or exch	ange programs						
b Scholarly research			e Other								
c Preservation for future genera	ations										
4 Provide a description of the organ Part XIII	nzation's colle	ections and	explain how	they fu	irther the organiz	ation's exempt purpose	e in				
5 During the year, did the organizat to be sold to raise funds rather that	an to be mair	ntained as p	part of the or	ganızat	ion's collection?		Yes		No		
Part IV Escrowand Custodial A reported an amount or	Arrangeme n Form 990	nts. Comp 0, Part X	olete if the c , line 21.	organı	zation answere	ed 'Yes' to Form 990), Part I	V, line	9, or		
1 a Is the organization an agent, trust on Form 990, Part X?	tee, custodiar	n, or other i	ntermediary f	for con	tributions or othei	r assets not included	Yes	[No		
b If 'Yes,' explain the arrangement	ın Part XIII ar	nd complete	the following	g table							
							Amoun	t			
c Beginning balance						1 c					
d Additions during the year						1 d					
e Distributions during the year						1 e					
f Ending balance	f Ending balance 1f										
2 a Did the organization include an ai	2a Did the organization include an amount on Form 990, Part X, line 21? Yes No										
b If 'Yes,' explain the arrangement in Part XIII Check here if the explantion has been provided in Part XIII .											
Part V Endowment Funds. C			nization ar	nswer							
ļ	(a) Curren	nt	(b) Prior yea	ar	(c) Two years	(d) Three years	(e)	Four year	'S		
1 a Beginning of year balance											
b Contributions					· · · · · · · · · · · · · · · · · · ·						
c Net investment earnings, gains, and losses											
d Grants or scholarships .											
e Other expenditures for facilities and programs											
f Administrative expenses	·										
g End of year balance											
2 Provide the estimated percentage	of the currer	nt year end	balance (line	e 1g, co	olumn (a)) held as	3:	-				
a Board designated or quasi-endow	ment ►		ક								
b Permanent endowment	8										
c Temporarily restricted endowmen	t ►	ş	B								
The percentages in lines 2a, 2b, a	and 2c should	equal 100	%.								
3 a Are there endowment funds not in	the possess	uon of the c	vraanization t	that are	held and admini	ctored for the					
organization by:	i tile possess	non or the c	rgarnzation t	mat are	riela ana admini	stered for the		Yes	No		
(i) unrelated organizations							3a(i)				
(ii) related organizations	•			٠			3a(ii)				
b If 'Yes' to 3a(II), are the related or	rganizations l	listed as red	quired on Sch	hedule	R?		. 3b		[
4 Describe in Part XIII the intended	uses of the o	organization	's endowmer	nt funds	5.						
Part VI Land, Buildings, and											
Description of property		(a) Cost or	other basis stment)	(b)	Cost or other asıs (other)	(c) Accumulated depreciation	(d)	Book va	lue		
1 a Land					62,104.			62,	,104.		
b Buildings .					468,420.	248,254.			,166.		
c Leasehold improvements					0.	<u> </u>			0.		
d Equipment					122,644.	114,489.		8,	,155.		
e Other	• •				59,334.	39,622.			,712.		
Total. Add lines 1a through 1e. (Column	ı (d) must eq	ual Form 9	90, Part X, co	olumn (. •			,137.		
BAA						Sche	dule D (F				

		LADIES OF THE				25-145	5726	Page 3
Part VII	Investments -	- Other Securities.	See F	orm 990, Part X,	line 12	·		
		security or category me of security)		(b) Book value		(c) Method of valuation end-of-year market		
	ıal derivatives							
	-held equity interes	ts						
(3) Other			[
(A)								
(B)								
(C)								
(D)								
(E)								
(F)								
(G)								
(H)			L					
(l)								
Total. (Colum	nn (b) must equal Form 9	90, Part X, column (B) line 12.,) ►					
Part VIII	Investments -	 Program Related. 	See F	orm 990, Part X,	line 13.			
	(a) Description of	investment type		(b) Book value		(c) Method of valuation	Cost or	
<u></u>		 · · · - · - · · · · · · · · · · · ·				end-of-year market	value	
(1)						·		
(2)			-		-			
(3)					ļ			
(4)					ļ			
(5)								
(6)			-					
(7)								
(8)								
(9)								
(10)	(1)	100 Deat V Learn (D) Lear 12) ▶					
Part IX		90, Part X, column (B) line 13.		1E				
Part IA	Other Assets.	See Form 990, Par	(a) Desc				(b) Book v	alue
(1)			(a) Desc	inpuori			(b) Book v	alue
(2)							·	<u>-</u>
(3)								
(4)	·	<u> </u>	<u>.</u>					
(5)	•							
(6)		·						
(7)		·					··· -	
(8)			-				_	
(9)			_					
(10)								
	lumn (h) must eaua	l Form 990, Part X, colu	mn (R)	line 15)				
Part X		es. See Form 990,			•		<u> </u>	
II GITA		ition of liability	artx	(b) Book value				
(1) Feder	ral income taxes			(3) 20011 10100				
(2)								
(3)								
(4)								
(5)	· <u>-</u>							
(6)	·							
(7)				-				
(8)					—			
(9)				 				
(10)			<u> </u>					
(11)					—			
	on (h) must savel Fare 0	100 Part V calumn (D) Inc 05		>				
		190, Part X, column (B) line 25.			etatemente t	that reports the organization's liability	for uncertain tou	nocitions
under FIN 48	(ASC 740). Check here if	the text of the footnote has be	en provid	ed in Part XIII			unocitalli tax	
BAA		-	•	TEEA3303 12/23/12			dule D (Form 9	990) 2012

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1	6 Page 4
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
c Recoveries of prior year grants d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities 2a	
b Prior year adjustments	
c Other losses 2c	
d Other (Describe in Part XIII)	
e Add lines 2a through 2d	
3 Subtract line 2e from line 1	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	
Part XIII Supplemental Information	
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inf	2b; Part V, ormation
BAA Schedule D	(Form 990) 2012

Schedule D (Form 990) 2012 LADIES OF THE DUKES Park XIII Supplemental Information (continued)	25-1455726	Page 5
PartixIII Supplemental Information (continued)		
		
	_ <i></i>	
		_
-		
		-
		<u>-</u>
		
		- -

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

	Employer identification number
LADIES OF THE DUKES	25-1455726
Pt_VI, Line 11b REVIEWED BY THE MEMBERS OF THE GOVERNING BODY A	T_A_BOARD
MEETING BEFORE THE 990 IS FILED.	
Pt_VI, Line 19 DOES NOT MAKE THESE DOCUMENTS AVAILABLE TO THE	PUBLIC
UNLESS REQUESTED.	
	