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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

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

A Fo	r the 2	2012 cal	lendar year, or tax year beginning	g 07-01-2012 , 2012, and ending 06	5-30-2013		
C he	ck if ap	pplicable	C Name of organization	200		D Employer ide	entification number
_	ress ch		General Federation of Women's Clul		53-019651	4	
– Nar	ne char	nge	Doing Business As				•
– _{Init}	al retur	rn	Number and street (or D.O. hey if m	nail is not delivered to street address) Room,	/suite	_	
_	mınated		1734 N Street NW No 610	nall is not delivered to street address) Room,	/ suite	E Telephone nur	
- Am	ended r	return	City or town, state or country, and	ZIP + 4		(202) 347-	3100
– App	lication	pending	Washington, DC 20036			G Gross receipts	\$ 3.553.561
			F Name and address of prir	ncipal officer	H(a) Is	this a group retur	<u> </u>
			Mary Ellen Laister	•		liates?	┌ Yes ┌ No
			1734 N Street NW No 610 Washington, DC 20036		1,71		
							uded? \(\text{Yes} \(\text{No} \) \(\text{See instructions} \)
Tax	r-exem	pt status	▼ 501(c)(3)	insert no)	┐ "	NO, attach a hist	(see mstructions)
W	ebsite	e:⊨ ww	w gfwc org		H(c) Gr	oup exemption nu	mber ►
C Form	of ora	nanization	Corporation Trust Associatio	n Other b	l Vear of	formation 1890	State of legal domicile NY
	rt I		imary	iii otilei F	L Teal of	Tollilation 1890 I	State of legal dofficile. Wi
	1 E	Briefly d	escribe the organization's mission of Women's Clubs' common in				
<u>≥</u>							
Ĭ	-						
aovemance	2 (Check th	his box দ if the organization di	scontinued its operations or dispose	d of more thar	125% of its net a	ssets
	3 1	Number	of voting members of the govern	ing body (Part VI, line 1a)		з	149
ACIIVINES &				of the governing body (Part VI, line 1			149
1				calendar year 2012 (Part V, line 2a)			26
Ŝ				ecessary)		6	0
ţ				art VIII, column (C), line 12			19,469
				rom Form 990-T, line 34			0
						rior Year	Current Year
	8	Contri	ıbutıons and grants (Part VIII, lı	ne 1 h)		203,085	93,454
ē	9		- · · · · · · · · · · · · · · · · · · ·	ne 2g)	•	2,120,541	1,923,622
Revenue	10	_		(A), lines 3, 4, and 7d)		93,602	147,686
æ	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		90,817	61,717
	12			(must equal Part VIII, column (A), I	line	,	, , , , , , , , , , , , , , , , , , ,
						2,508,045	2,226,479
	13			IX, column (A), lines 1-3)		57,424	18,505
	14			X, column (A), line 4)		0	0
8	15	Saları 5–10)		ee benefits (Part IX, column (A), line	s	1,074,685	1,027,851
Expenses	16a	Profes	ssional fundraising fees (Part IX,	column (A), line 11e)		0	0
ਲੋ	b	Total fu	undraising expenses (Part IX, column (D), line 25) 🛌 67,238	_		
_	17	Other	expenses (Part IX, column (A),	lines 11a-11d, 11f-24e)		1,512,443	1,238,561
	18	Total	expenses Add lines 13-17 (mu	st equal Part IX, column (A), line 25)	2,644,552	2,284,917
	19	Reven	nue less expenses Subtract line	18 from line 12		-136,507	-58,438
net Assec or Fund Balances					Beginn	ing of Current Year	End of Year
9 E	20	Total	assets (Part X, line 16)			5,563,121	5,532,471
Z 2	21	Total	liabilities (Part X, line 26)			1,828,537	1,804,598
22	22	Netas	ssets or fund balances Subtract	line 21 from line 20		3,734,584	3,727,873
Par	t II	Sign	nature Block				
ny kr	nowled rer ha	dge and is any ki	belief, it is true, correct, and con nowledge *** ature of officer	amined this return, including accomp			
	-		/ Ellen Laister GFWC International Presider or print name and title	eni a ceu			
		17	•				
		P	Print/Type preparer's name	Preparer's signature	Date C	heck I of PTIN	
	ł	N	Print/Type preparer's name Nicole M Prince CPA		1 224 24 42 1	theck if PTIN P0131	5245
Paid	i pare	F	Print/Type preparer's name Nicole M Prince CPA Firm's name		2014-04-18 s	HECK! II DOLD!	

Vienna, VA 22182

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

✓ Yes ☐ No

including grants of \$ Women's History and Research Center - Founded in 1984, the Women's History and Resource Center collects, preserves, interprets, and promotes the history of the GFWC and women volunteers. The Center documents the social and political contributions of GFWC clubwomen from 1890 to the present through the GFWC archives, related special collections, and publications

577,099 including grants of \$ (Code) (Expenses \$ 11,250) (Revenue \$ 95,945) Other Programs - Programs which help to further accomplish the Organization's exempt purpose

) (Expenses \$

4d Other program services (Describe in Schedule O) (Expenses \$ 645,150 including grants of \$

(Code

11,250) (Revenue \$ Total program service expenses ► 1,639,504

68.051

95,945)

) (Revenue \$

art IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
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		N o
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	Yes	
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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8	Yes	
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		No
LO	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	Yes	
L1	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	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	11b		No
С	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	11c		No
	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	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Νo
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.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	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		N o
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	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		No
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		No
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		No
L7	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 $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		N o
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	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? <i>If</i> "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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		No
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 Schedule L, Part I	25b		No
26	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	26		No
27	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	27		No
28	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)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32		32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νo
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Yes	

	Chack if Schodule O contains a response to any question in this Bart V			г
	Check if Schedule O contains a response to any question in this Part V	-	Yes	No
la	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 16			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c		
а	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			
,	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
)	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
3	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)?	4a		No
)	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
3	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
:	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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?	6a		N
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
l	If "Yes," indicate the number of Forms 8282 filed during the year	_		
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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?			
	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
	Section 501(c)(7) organizations. Enter	טפ		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
1	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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	13a		
)	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			
	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, 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 O	9		No No
Se		eveni	je Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod Yes	e.) No
	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu		
10a	Did the organization have local chapters, branches, or affiliates?		Yes	
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes	No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes	
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No

- 17 List the States with which a copy of this Form 990 is required to be filed ►DC
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
- Describe in Schedule O whether (and if so, how), the organization made 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 ►The Organization 1734 N Street NW Washington, DC (202) 347-3168

Form	990	(2012)
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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, or 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 nor any related organization compensated any current officer, director, or trustee

	1	T (2)								
(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,1033 11130,	MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (list any hours	more t perso and	tion (han d on is	one I both	box, an o	officer stee)		Repor comper from organiza	table isation the tion (W-	(E) Reportable compensation from related organizations (W	v-	(F) Estima amount o compens from t	ted f other ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-M15C)	2/1099-MISC		rganizati relate organiza	ed
												-		
												+		
												+		
												+		
								<u> </u>						
1b c	Sub-Total	cto Dart VII S	oction /		•									
d	Total (add lines 1b and 1c)			• •	٠.	٠.	•	•		166,818		0		16,595
_ <u></u>	Total number of individuals (in			to the	se l	lıste	d abov	e) w	L ho receive		l .			,
_	\$100,000 of reportable compe							-,						
													Yes	No
3	Did the organization list any f o							yee,	or highes	t compen	sated employee			
	on line 1a? If "Yes," complete S	Schedule J for suc	ch indivi	dual	•	•		•				3		No
4	For any individual listed on lin organization and related organ													
	individual	• • • •		• •	•	•	• •	•	• •	• • •		4		No
5	Did any person listed on line 1 services rendered to the organ										or individual for	_		
			, 20,1101	220 0	J., T. C. C.	_,	. 5, 54	ب			· · · ·	5	1	No_
Se	ection B. Independent Co													
1	Complete this table for your five compensation from the organization												tax vear	
		(A)						,,-			(B)		(C)
After	Hours Home Improvement 7722 Shado	lame and business owcreek Terrace Sp		/A 221	53					General co	cription of services ntracting		Comper	189,906
												4		
											•			

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization 1-1

Part V	7111	Statement o						
		Check if Schedu	ule O contains a respor	nse to any question		(2)		<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512,513,or 514
10	1a	Federated camp	paigns 1a					<u> </u>
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	es 1b					
6r8	c	Fundraising eve	ents 1c					
Ē,Ā	d	Related organiz						
E E		Government grants						
ns,	e							
er G	f	All other contribution similar amounts no	ons, gifts, grants, and 1f of included above	93,454				
년 동	g		ons included in lines	İ	İ		į	
Conti and (1a-1f \$ Total. Add lines	10 16		93,454			
<u>ပြုံခဲ့</u>	h	Total. Add lines	S 1 d - 1 1	· · · •	33,434			
e	_			Business Code				
ven	2a .	Membership dues		900099	1,487,320	1,487,320		
<u>æ</u>	b	Registration fees		900099	302,056	302,056		
¥	°	Marketplace sales		900099	93,412	93,412		
Program Serwice Revenue	d	Magazine —		541800	40,834	21,365	19,469	
Ë	e	Λ II - + h						
ूँ	f	All other progra	im service revenue					
	g	Total. Add lines	s 2a – 2f		1,923,622			
	3		ome (including dividen ar amounts)		78,630			78,630
	4		tment of tax-exempt bond					
	5	Royalties		▶	46,841			46,841
		·	(ı) Real	(II) Personal				
	6a	Gross rents	36,006					
	ь	Less rental expenses	23,663					
	c	Rental income	12,343					
	d	or (loss) Net rental incor	me or (loss)		12,343			12,343
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	1,372,475					
	ь	Less cost or						
		other basis and sales expenses	1,303,419					
	С	Gain or (loss)	69,056					
	d		s)		69,056			69,056
Other Revenue	8a	Gross income fi events (not incl \$	luding s reported on line 1c)					
Ę		Jee raiciv, iiii	a a					
₽	ь	Less direct exp	penses b					
δ	С	Net income or (loss) from fundraising	events 🛌				
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19					
	ь	Less direct exi	penses b					
	С		(loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo						
	ь	Less costofa	oods sold b					
			loss) from sales of inv	entory 🛌				
	<u> </u>	Miscellaneous		Business Code				
	11a	Otherincome		900099	2,533	2,533		
	ь							
	С							
	d	All other revenu	ue					
	e	Total. Add lines		🕨				
	12	Total revenue	See Instructions .		2,533			
	l	. Julian i Cyclinden		🟲	2,226,479	1,906,686	19,469	206,870

Part IX Statement of Functional Expenses

	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	-		lete column (A)	
	Check if Schedule O contains a response to any question in this Pa	<u>rt IX</u>			· · · · · · · · · · · · · · · · · · ·
	ot include amounts reported on lines 6b, o, 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	16,730	16,730		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	1,775	1,775		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	2,7.2			
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	292,226	199,676	89,952	2,598
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	597,627	405,826	186,520	5,281
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	22,103	16,973	4,909	221
9	Other employee benefits	46,765	35,936	10,361	468
10	Payroll taxes	69,130	53,009	15,431	690
11	Fees for services (non-employees)				_
а	Management				
b	Legal	6,416	803	5,603	10
c	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	115,044	99,312	13,958	1,774
12	Advertising and promotion	8,949	8,949	·	<u> </u>
13	Office expenses	101,247	82,128	7,088	12,031
14	Information technology	46,164	32,875	 	428
15	Royalties	12,221	22,211	,	
16	Occupancy				
17	Travel	139,078	137,875	1,203	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	200,000	201,010	-,	
19	Conferences, conventions, and meetings	318,393	316,637	1,246	510
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	113,008		113,008	
23	Insurance	33,873	24,731	8,850	292
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)				
а	Building maintenance	235,355	145,682	58,337	31,336
b	Miscellaneous	47,257	35,643	9,709	1,905
c	Bank fees	34,908	210	27,660	7,038
d	Communication	30,316	22,498	7,588	230
e	All other expenses	8,553	2,236	3,891	2,426
25	Total functional expenses. Add lines 1 through 24e	2,284,917	1,639,504	578,175	67,238
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

1 Cash—non-interest-bearing Separation of year Separation of ye	reil	LX	Check if Schedule O contains a response to any question in this	Part X				
2 Savings and temporary cash investments								(B) End of year
3		1	Cash—non-interest-bearing			86,213	1	48,845
A Accounts receivable, net 20.740 4		2	Savings and temporary cash investments		•	1,128,958	2	1,603,326
10		3	Pledges and grants receivable, net			71,000	3	
### Schedule L		4	Accounts receivable, net			20,740	4	25,079
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 501c(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net		5	employees, and highest compensated employees Complete Pa	rt II of			5	
9 Prepaid expenses and deferred charges	ste	6	4958(f)(1)), persons described in section $4958(c)(3)(B)$, and cand sponsoring organizations of section $501(c)(9)$ voluntary er	ontribu nploye	ıtıng employers			
9 Prepaid expenses and deferred charges	8	7	Notes and loans receivable net					
9 Prepaid expenses and deferred charges	ď					69 629	_	96.562
10a						, , , , , , , , , , , , , , , , , , ,		46,649
b Less accumulated depreciation 10b 1,201,353 730,629 10c		-	Land, buildings, and equipment cost or other basis Complete					1.5,5.15
11		ь		10b	1,201,353	730,629	10c	627,784
12 Investments—other securities See Part IV, line 11		11	·			2,876,028	11	2,541,641
13							12	<u> </u>
14 Intangible assets								
15 Other assets See Part IV, line 11			· -					
16 Total assets. Add lines 1 through 15 (must equal line 34)						542.585		542,585
17 Accounts payable and accrued expenses 347,545 17 18 Grants payable						· · · · · · · · · · · · · · · · · · ·		5,532,471
18 Grants payable		-				, , ,		394,451
19 Deferred revenue						0 11 (0 10		
20 Tax-exempt bond liabilities						1 480 992		1,410,147
Escrow or custodial account liability Complete Part IV of Schedule D						1,400,002		1,410,147
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								
24 Unsecured notes and loans payable to unrelated third parties	<u>a</u>		Loans and other payables to current and former officers, directo	ors, trus			21	
24 Unsecured notes and loans payable to unrelated third parties	<u>ত্</u>						22	
24 Unsecured notes and loans payable to unrelated third parties	ï	23						
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								
26 Total liabilities. Add lines 17 through 25			Other liabilities (including federal income tax, payables to relat	ed thire	d parties,			
Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete							25	
		26				1,828,537	26	1,804,598
27 Unrestricted net assets	ce s		•	✓ and o	complete			
	lan	27	Unrestricted net assets			1,526,603	27	1,457,151
28 Temporarily restricted net assets	B	28	Temporarily restricted net assets			1,622,728	28	1,685,239
29 Permanently restricted net assets	됟	29	Permanently restricted net assets			585,253	29	585,483
☐ Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.				ere ► [and			
		30	Capital stock or trust principal, or current funds				30	
30 Capital stock or trust principal, or current funds	Şet	31	Paid-in or capital surplus, or land, building or equipment fund			31		
		32	Retained earnings, endowment, accumulated income, or other f	unds			32	
		33	Total net assets or fund balances			3,734,584	33	3,727,873
34 Total liabilities and net assets/fund balances	~	34	Total liabilities and net assets/fund balances			5,563,121	34	5,532,471

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
	Check if Schedule O Contains a response to any question in this raft XI	· ·		• •	,
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,2	26,479
2	Total expenses (must equal Part IX, column (A), line 25)	2			284,917
3	Revenue less expenses Subtract line 2 from line 1	3			-58,438
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			'34,584
5	Net unrealized gains (losses) on investments	5		5,7	51,727
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			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3,7	27,873
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response to any question in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	it of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	е	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

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EIN: 53-0196514

Name: General Federation of Women's Clubs

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Form 990, Part VII - Compensation of Compensated Employees, and Indeper	ndent Contra	ectors	, I F	iste	es,	, key	CII	npioyees, nigne	st	
(A) Name and Title	(B) Average hours per week (list		than	not one on is ran trust	box s bot d a tee)	, th		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related
	any hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
Babs Condon GFWC President-elect	40 60	Х		х				0	0	0
Sheila Shea GFWC First Vice-President	23 90	х		х				0	0	0
Mary Ellen Brock GFWC Second Vice-President	30 10	х		х				0	0	0
Manan StClair GFWC Secretary	16 40	х		х				0	0	0
Debra Strahanoski GFWC Treasurer	13 40	х		х				0	0	0
Rebecca Weber GFWC Director of Junior Clubs	13 30	х		х				0	0	0
Carol Habgood GFWC Parliamentarian	35 00	х		х				0	0	0
Linda Babeuf GFWC NJ President	35 00	х						0	0	0
Bev Lassiter Membership Committee Chairman	30 00	х						0	0	0
Karen L Martinek GFWC IA President	28 80	×						0	0	0
Wendy Carriker GFWC NC President	28 50	x						0	0	0
Patricia Whitehouse Comm & Public Relations Chairman	20 00	х						0	0	0
Suellen Brazil Leadership Committee Chairman	19 20	х						0	0	0
Elizabeth Griesser GFWC WI President	13 50	х						0	0	0
Elaine Ko-Talmadge Int'l Outreach Program Chairman	12 50	Х						0	0	0
Crystal Sharpe O'Neal GFWC NC Junior Director	12 30	х						0	0	0
Catherine Kay James GFWC MN President	11 40	х						0	0	0
Carol Crews GFWC OK President	11 00	х						0	0	0
Debbie Grieder Convention & Meetings Chairman	10 70	х						0	0	0
Angela Paez GFWC VA Junior Director	9 00	х						0	0	0
Candace Turnham GFWC TN Junior Director	6 70	х						0	0	0
Virginia Ginny Valdespino Protocol Chairman	6 30	х						0	0	0
Pat Zazzarıno GFWC FL President	6 20	х						0	0	0
Dr Dana Charles Clark Writing Contest Chairman	5 80	х						0	0	0
Sara Ann Sally Harper Resolutions Committee	5 60	х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the from related compensation per organization (Worganizations (Wan officer and a from the week (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual 1 or dilector hours Institutional organizations for employee related organızatıons trustae below Trustee dotted line) 5 60 Suzanne Povnor Χ 0 0 0 GFWC MS President 4 80 Patrıcıa Sıegfreıd-Gıles 0 Х 0 Arts Program Chairman 4 60 Hope Royer 0 0 0 Х Public Issues Program Chairman 4 00 Jeanne Urban Х 0 0 0 GFWC KS President 3 70 Donna Calvin 0 0 Χ Mississippi Valley Region President 3 60 0 0 0 Х GFWC Junior Special Project Chairman 3 60 Sherry Nolte Wellman 0 0 0 Х Leadership Committee 3 50 Teresa Craig GFWC VA President 0 0 0 3 40 Deen Meloro Χ 0 0 Credentials Committee Chairman 3 40 Margaret Armstrong ٥ 0 0 X Strategic Planning Committee 3 20 To Ann Bolchoz Χ 0 0 0 GFWC SC President 3 00 Jane Folz 0 0 GFWC DE President 3 00 Lında Palmgren 0 0 0 Х GFWC CO President 3 00 Sandra K Roberts Х 0 0 0 Home Life Partnership Chairman 2 90 Patricia Heitman Х 0 0 0 GEWC II President 2.80 0 0 0 Х GFWC NM President 2 80 Paula Schlice 0 0 0 Х Resolutions Committee Chairman 2 60 Kım Bruns Χ 0 0 0 GFWC WI Junior Director 2 40 Х 0 0 0 Southeastern Region President 2 30 Carol Waters 0 0 0 Х GFWC NH President 2 30 Linda Dodds Х O 0 0 GFWC SD President 2 20 Janelle Holden 0 0 0 GFWC TX President 2 00 Cathy Jo Canterbury 0 0 0 Х Director-elect of Junior Clubs 2 00 Dorothy Bachman 0 0 Х 0 GFWC NY President 2 00 Sandra Jones 0 Fundraising Committee Chairman

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the from related compensation per organization (Worganizations (Wan officer and a from the week (lıst director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee hours Institutional organizations idiwduol 1 r diisetor for employee related organızatıons trustae below Trustee dotted line) 2 00 Valerie Barnes Χ 0 0 0 GFWC CA President 1 90 Sharon Carter 0 Х 0 Membership Committee 1 80 Shirley Gomes 0 0 0 Х Legislation & Public Policy Chairman 1 70 Jamie Rae Rockwell Х 0 0 0 GFWC OR President 1 70 Judy Foot 0 0 Χ GFWC AR President 1 70 Marianne Potter 0 0 0 Х Education Program Chairman 1 50 Claudia Corky Nosek 0 0 0 Х GFWC OH President 1 50 Debbie Bach 0 0 0 Fundraising Committee 1 50 Lisa McCoy Hedrick Χ 0 0 Bylaws Committee 1 50 ٥ 0 0 X GFWC IN President 1 50 Rosalie Dialessi Χ 0 0 0 Int'l Liaisons Committee Chairman 1 40 Marcıa L Wılson 0 0 Bylaws Committee Chairman 1 40 Vıckı Holden 0 0 0 Х Leadership Committee 1 20 Laurie O'Kelly Х 0 0 0 Resolutions Committee 1 00 Adına Fox Х 0 0 0 Education Partnership Chairman 1.00 Agnus Marie Petersen 0 0 0 Х Membership Committee 1 00 Alex Ann Borkowski 0 0 0 Х Resolutions Committee 1 00 Alice Donahue Χ 0 0 0 International Past President 1 00 Annabelle Ann James Х 0 0 0 Southern Region President 1 00 Anne H Cress 0 0 0 Х GFWC ME President 1 00 Arlene Creeden Х O 0 0 Strategic Planning Committee 1 00 Barbara Whitaker 0 0 0 Elections Committee 1 00 Betty Skladal 0 0 0 Х GFWC AK President 1 00 Beverly Adams 0 0 Х 0 President's Assistant 1 00 Beverly Death 0 0 GFWC MD President

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both per from the from related compensation organization (Wan officer and a organizations (Wfrom the week (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual 1 or dilector hours Institutional organizations for employee related organızatıons trustae below Trustee dotted line) 1 00 Bobbi Calev Χ 0 0 0 Special Assistant to the President 1 00 Bobby Bjork 0 Х 0 President's Honorary Assistant 1 00 Bonnie Walden 0 0 0 Х Strategic Planning Committee 1 00 Candy Godbee Х 0 0 0 Home Life Program Chairman 1 00 Carlene Garner 0 0 Х International Past President 1 00 0 0 0 Х WHRC Committee 1 00 Carol Lopez 0 0 0 Х Conservation Partnership Chairman 1 00 Carol Rich 0 0 0 Leadership Committee 1 00 Carolyn Lovelace Χ 0 0 Membership Committee 1 00 Celene Post ٥ 0 0 X President's Assistant 1 00 Charlotte Varela Χ 0 0 0 President's Assistant 1 00 Chris Sienkielewski 0 0 Signature Project Chairman 1 00 Connie Radcliffe 0 0 0 Х GFWC ND President 1 00 Cynthia Kay Geis Х 0 0 0 Jennie Award Chairman 1 00 Dara Bergdoll Х 0 0 0 GFWC FL Junior Director 1.00 Dawn Magden 0 0 0 Х GFWC WA President 1 00 Dawn Meracle 0 0 0 Х GFWC AZ President 1 00 Debbie Thomas Χ 0 0 0 Membership Committee 1 00 Debra Capuano Х 0 0 0 Budget & Finance Committee 1 00 0 0 0 Х Comm & Public Relations Committee 1 00 Denise Raisanen Х O 0 0 GFWC NH Junior Director 1 00 Diana Kleeman 0 0 0 Leadership Committee 1 00 Diane Murphy 0 0 0 Х GFWC MA Junior Director 1 00 Donna Cross 0 0 Х 0 Assistant to the Director of Junior Clubs 1 00 Ernie Shriner 0 International Past President

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both per from the from related compensation organization (Worganizations (Wan officer and a from the week (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee hours Institutional organizations idiwduol 1 r diisetor for employee related organızatıons trustae below Trustee dotted line) 1 00 Evelyn Bachman Χ 0 0 0 Signature Project Committee 1 00 Faye Z Dissinger 0 Х 0 International Past President 1 00 Georgianna Tillis 0 0 0 Х Credentials Committee 1 00 Gerri Ceriello Х 0 0 0 GFWC NY Junior Director 1 00 Ida Dorvee 0 0 Х Elections Committee Chairman 1 00 0 0 0 Х WHRC Committee 1 00 Jacquelyn Pierce 0 0 0 Х International Past President 1 00 Jane Carver 0 0 0 Bylaws Committee 1 00 Jane Lee Nosal Χ 0 0 Elections Committee 1 00 Jean Hennings ٥ 0 0 X Fundraising Committee 1 00 leannine Faubion Χ 0 0 0 International Past President 1 00 Joan Wesolowski 0 0 Credentials Committee 1 00 JoAnn Calnen 0 0 0 Х Leadership Committee 1 00 Juanita Bryant Х 0 0 0 International Past President 1 00 Judith Maguire Х 0 0 0 New England Region President 1.00 0 0 0 Х President's Honorary Assistant 1 00 Judy Lutz 0 0 0 Х International Past President 1 00 Karen Kandy Kızıs Χ 0 0 0 Comm & Public Relations Committee 1 00 Karen Kaler Х 0 0 0 Signature Project Committee 1 00 Kate LeMere 0 0 0 Х Conservation Program Chairman 1 00 Katherine Kathy White Х O 0 0 Comm & Public Relations Committee 1 00 Katherine Ann Bessinger 0 0 0 **GFWC UT President** 1 00 Kathı McGraw 0 0 0 Х Bylaws Committee 1 00 Kathie Jorgensen 0 0 Х 0 Signature Project Committee 1 00 Kathy Canzano 0 0 Resolutions Committee

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both per from the from related compensation organization (Worganizations (Wan officer and a from the week (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual 1 or dilector Institutional hours organizations 쥰 for employee related organızatıons trustae below Trustee dotted line) 1 00 Kathy Janssen Χ 0 0 0 Western States Region President 1 00 Krıstı Atha-Rader 0 Х 0 GFWC WV Junior Director 1 00 Kristine Wiley 0 0 0 Х GFWC LA Junior Director 1 00 Lee Leafgren Х 0 0 0 GFWC ID President 1 00 Linda Clark 0 0 0 Х Great Lakes Region President 1 00 0 0 0 Х GFWC OH Junior Director 1 00 Linda Kreussling 0 0 0 Х Membership Committee 1 00 Linda Ross 0 0 0 Membership Committee 1 00 Χ 0 0 GFWC MO President 1 00 ٥ 0 0 X Strategic Planning Committee 1 00 Luanne Davis Χ 0 0 0 President's Assistant 1 00 Lucinda Martinez 0 0 Arts Partnership Chairman 1 00 Lyndsey Miller 0 0 0 Х GFWC LA President 1 00 Lynn Long Х 0 0 0 Photography Contest Chairman 1 00 Madeline Perreault Х 0 0 0 GFWC RT President 1.00 Margaret Midge Tucker 0 0 0 Х GFWC VT President 1 00 Marianne Maynard 0 0 0 Х Comm & Public Relations Committee 1 00 Marijo Shide Χ 0 0 0 International Past President 1 00 Marlene Wine Х 0 0 0 Budget & Finance Committee 1 00 Mary Ann Arnold 0 0 0 Х Leadership Committee 1 00 Mary Ann Pierce Х O 0 0 GFWC MA President 1 00 Mary Elizabeth Preston 0 0 0 International Past President 1 00 Mary Ellen Thompson 0 0 0 Х WHRC Committee Chairman 1 00 Mary Katharine Barnes Miller 0 0 Х 0 International Past President 1 00 Mary Kaye Ernest 0 0 Int'l Liaisons Committee

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both per from the from related compensation organization (Worganizations (Wan officer and a from the week (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual 1 or dilector Institutional hours organizations Ē for employee related organızatıons trustae below Trustee dotted line) 1 00 Mary Sprague Χ 0 0 0 Credentials Committee 1 00 Mary Taylor Jacobs 0 Х 0 Public Issues Partnership Chairman 1 00 Mary Walton 0 0 0 Х GFWC MD Junior Director 1 00 Michele Klages Х 0 0 0 Juniorettee Chairman 1 00 Missi McCoy 0 0 0 Х Int'l Liaisons Committee 1 00 Nancy Hanford 0 0 0 Х GFWC MT President 1 00 Nancy Jones 0 0 0 Х Int'l Outreach Partnership Chairman 1 00 Nancy Kalyan GFWC CT President 0 0 0 1 00 Nannette White Χ 0 0 Signature Project Committee 1 00 Natalie Mahoney ٥ 0 0 X GFWC HI President 1 00 Pam Crochet Χ 0 0 0 **GFWC WY President** 1 00 Patricia Pat Kennedy 0 0 President's Honorary Assistant 1 00 Patricia Gage 0 0 0 Х GFWC NE President 1 00 Patricia Pisarski Х 0 0 0 Fundraising Committee 1 00 Patricia Rodriquez Х 0 0 0 Middle Atlantic Region President 1.00 0 0 0 Х Credentials Committee 1 00 Peggy Barnes 0 0 0 Х GFWC KY President 1 00 Phyllis Jay Dudenhoffer Χ 0 0 0 International Past President 1 00 Phyllis Salzburg Х 0 0 0 Fundraising Committee 1 00 Rachael Clare Fulmer 0 0 0 Х GFWC SC Junior Director 1 00 Rena Labat Х O 0 0 South Central Region President 1 00 Rita Lynch 0 0 0 Signature Project Committee 1 00 Roberta Atkınson 0 0 0 Х GFWC AL President 1 00 Rose Logston 0 0 Х 0 Comm & Public Relations Committee 1 00 Ruth Baty 0 0 GFWC NV President

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both per from the from related compensation organization (Worganizations (Wan officer and a from the week (lıst director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee hours Institutional organizations idiwduol 1 r diisetor for employee related organızatıons trustee below Trustee dotted line) 1 00 Sam Burnside Χ 0 0 0 President's Honorary Assistant 1 00 Sandra Huey 0 Х 0 GFWC GA Junior Director 1 00 Sandy Lindeman 0 0 0 Х GFWC TN President 1 00 Sharon Greeson Х 0 0 0 Leadership Committee 1 00 Shelby Hamlett 0 0 0 Χ International Past President 1 00 0 0 0 Х Int'l Liaisons Committee 1 00 Shirene Daniell 0 0 0 Х GFWC GA President 1 00 Shirley Holly 0 0 0 Fundraising Committee 1 00 Χ 0 0 GFWC DC President 1 00 ٥ 0 0 X Credentials Committee 1 00 T Pisani Jablanski Χ 0 0 0 Membership Committee 1 00 Tammie McCoy 0 0 Signature Project Committee 1 00 Tammy Garland 0 0 0 Х Fundraising Committee 1 00 Tammy Levinson Х 0 0 0 GFWC NJ Junior Director 1 00 Teddy K Hulse Х 0 0 0 Bylaws Committee 1.00 Theresa McFarland 0 0 0 Х GFWC KY Junior Director 1 00 Toni Collins 0 0 0 Х Comm & Public Relations Committee 1 00 Tricia Wagman Χ 0 0 0 Strategic Planning Committee 1 00 Trısha Schafer Х 0 0 0 GFWC IL Junior Director 1 00 Vicky Ann Trimmer 0 0 0 Х GFWC PA President 90 Debbie Hall Х O 0 0 Credentials Committee 70 Anne Redlus 0 0 0 CIP Award Chairman 70 Marty Groleau 0 0 0 Х GFWC MI President 60 Carol Allen 0 0 Х 0 **GFWC WV President** 60 Donna Short 0 0 Fundraising Committee

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

37 50

37 50

Lisa Lopinsky

Irına Zabello

Executive Director

Sr Dir Of Fin & Admin

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)		than	o not n one son is er and trust	e box, is bot nd a tee)	c, oth	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Rose Ditto International Past President	60	х						0	0	0
Jolie Frankfurth Comm & Public Relations Committee	50	х						0	0	0
Suzanne Raymond Signature Project Committee	50	х						0	0	0
Mary Ellen Laister International President	37 50	х		х				9,036	0	0

Х

81,505

76,277

0

0

4,438

12,157

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493112003214

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

General Federation of Women's Clubs

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Inspection

									53-0196							
	rt I			blic Charity Sta					<u> </u>	ınstructıon	S.					
The	rganı:			te foundation becaus												
1			•	on of churches, or a				section 170	(b)(1)(A)(i)	•						
2	Г	A scho	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Sche	dule E)									
3	Γ	A hosp	oital or a coo	perative hospital se	rvice organiz	zatıon desc	rıbed ın sect i	ion 170(b)(1)(A)(iii).							
4	Γ	A med	ical researc	h organization operat	ted ın conjun	ction with	a hospital de	scribed in s	ection 170(b)(1)(A)(iii).	Enter the					
_	_			ty, and state												
5	ı	_	-	erated for the benefi	=	e or univers	sity owned or	operated by	y a governme	ntal unit des	cribed in					
	_			A)(iv). (Complete P	•											
6	<u> </u>			local government or												
7				at normally receives			s support fro	m a governn	nental unit or	from the ge	neral public					
8	_			on 170(b)(1)(A)(vi). : described in sectior	, ,	,	mplete Part	TT \								
9	<u> </u>		-				-	-	abutions mo	mborchin for	s and gross					
9	1*				receives (1) more than 331/3% of its support from contributions, membership fees, and gross and to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of											
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% 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	_															
10	_	_		-												
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the pu one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)															
			•	bes the type of supp				•		see section	309(a)(3). Check					
				b						Non-function	ally integrated					
е	\sqcap	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons														
				on managers and otl	her than one	or more pu	ablicly suppo	rted organız	ations descri	bed ın sectı	on 509(a)(1) or					
_			n 509(a)(2)		- t t	6 th T	DC that it is	. .								
f			organization this box	received a written de	etermination	from the I	KS that it is a	a iype i, iy	pe II, or I yp	e III suppor	ting organization,					
g				2006, has the organi	zation accei	oted any di	ft or contribu	tion from an	ıv of the		•					
_			ng persons?	, 3	·	, , ,			,							
		(i) A p	erson who d	irectly or indirectly o	ontrols, eith	ner alone or	r together wit	h persons d	escribed in (i		Yes No					
		and (111) below, the	governing body of th	ie supported	organizati	on?			11	.g(i)					
		(ii) A f	amıly memb	er of a person descr	bed ın (ı) ab	ove?				11	g(ii)					
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)) above?			119	g(iii)					
h		Provid	e the followi	ng information about	the support	ed organıza	ation(s)				_					
_	-	lame of (ii) EIN (iii) Type of (iv) Is the (v) Did you notify (vi) Is the									(vii) A mount of					
		ported organization organization in the organization organization in									monetary					
OI	ganiz	ation		(described on lines 1- 9 above	col (i) lis		ın col (i)		col (i) or		support					
				lines 1 - 9 above your governing support? in the U.S.? or IRC section document?												
				(see	accame											
				instructions))	Yes	No	Yes	No	Yes	No	\dashv					
					163	140	163	110	165	140						
								+		-						
								1								
Total				I		1	1	1	1		1					

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(f) 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							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	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							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

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.)

	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20	12	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	194,232	54,546	95,384	203,085		93,454	640,701
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	2,063,136	2,171,253	2,034,332	2,120,541	1,	906,686	10,295,948
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	2,257,368	2,225,799	2,129,716	2,323,626	2,0	000,140	10,936,649
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons							0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the							0
	amount on line 13 for the year							
8	Add lines 7a and 7b Public support (Subtract line 7c from line 6)							10,936,649
	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20	12	(f) Total
9	A mounts from line 6	2,257,368	2,225,799	2,129,716	2,323,626	2,0	000,140	10,936,649
L0a	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties and income from similar sources	269,994	164,526	139,065	167,149	:	137,814	878,548
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
C	Add lines 10a and 10b	269,994	164,526	139,065	167,149	:	137,814	878,548
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	9,155	11,867	30,717	2,483		2,533	56,755
13	Total support. (Add lines 9, 10c,	2,536,517	2,402,192	2,299,498	2,493,258	2,:	140,487	11,871,952
14	11, and 12) First five years. If the Form 990 is for the check this box and stop here	or the organization	on's first, second,	thırd, fourth, or f	ifth tax year as a	501(c)(3) organı	ızatıon, ▶┌
Se	ction C. Computation of Publ							
15	Public support percentage for 2012			13, column (f))		15		92 120 %
16	Public support percentage from 201		*			16		91 230 %
	ection D. Computation of Inve				- (£))			
17 10	Investment income percentage for 2 Investment income percentage from				n (f))	17		7 400 %
18	LIVESTMENT INCOME DESCENTAGE FROM	ZULL Schedille A	v Parrill line 1	,		18		
10-	33 1/3% support tests—2012. If the				lino 1 E io mara H		2/2 224	8 330 %

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493112003214

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B ◆ Section 527 organizations Complete Part I-A only If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** General Federation of Women's Clubs 53-0196514 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	▶ □	if the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address,	EIN,
		expenses	and share of excess lobbying expenditures)	

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means a		(a) Filing organization's totals	(b) Affiliated group totals
a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)	0	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	0	
c	Total lobbying expenditures (add lines 1a and 1	b)	0	
d	Other exempt purpose expenditures		2,278,854	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	2,278,854	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	263,943	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	65,986	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -	0	
i	Subtract line 1f from line 1c If zero or less, ente	er-0-	0	
j	If there is an amount other than zero on either li	ne 1h or line 1i, did the organization file Form 472	0 reporting	

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) Total beginning in) 280,356 276,275 281,919 263,943 Lobbying nontaxable amount 1,102,493 Lobbying ceiling amount 1,653,740 (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount 70,089 69,069 70,050 65,986 275,194 Grassroots ceiling amount 412,791 (150% of line 2d, column (e)) Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has Notice filed Form 5768 (election under section 501(h)).	ОТ			7 0	ge S
	Week Week was a second to be a second to be a second to be a second to be a second to the second to	(6	a)		(b)	
activ	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.	Yes	No	1	Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 505(c)(6).	01(c)(5), (or s		
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?					
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

DLN: 93493112003214

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public Inspection

nterna	al Revenue Service	► Attach to For	m 990. ► See separate instructions.			Inspe	ctio	n
	me of the organ			Emp	oloyer ident if icat	ion num	ber	
ıсı	neiai i eueration of	WOITIGHS CIUDS		53-	0196514			
E		nizations Maintaining Donor Adv				Compl	ete i	f th
	organı	ization answered "Yes" to Form 990	·					
	T - t - l		(a) Donor advised funds		(b) Funds and o	theracco	ounts	-
	Total number a							
		ntributions to (during year)						
		nts from (during year)						
		ue at end of year						
	funds are the	ization inform all donors and donor advisor organization's property, subject to the or	ganization's exclusive legal control?			┌ Yes	Γ	No
	used only for a	ization inform all grantees, donors, and do charitable purposes and not for the benef permissible private benefit?				┌ Yes	Г	- No
a		ervation Easements. Complete if	the organization answered "Yes"	to Forr	n 990, Part IV	, line 7.		
		conservation easements held by the org		n hıstor	rically important	land area	a	
		of natural habitat	Preservation of a		• •			
	┌ Preservatı	ion of open space						
		s 2a through 2d if the organization held a the last day of the tax year	a qualified conservation contribution in	the forr	m of a conservat	ion		
		,			Held at the	End of th	ıe Ye	ar
3	Total number	of conservation easements		2a				
)	Total acreage	restricted by conservation easements		2b				
:	Number of cor	nservation easements on a certified histo	oric structure included in (a)	2c				
i		nservation easements included in (c) acq ture listed in the National Register	uired after 8/17/06, and not on a	2d				
		nservation easements modified, transferr 	ed, released, extinguished, or terminat	ed by tl	he organızatıon c	luring		
	Number of sta	ites where property subject to conservati	ion easement is located ►					
	Does the orga	inization have a written policy regarding to of the conservation easements it holds?		ndling o	f violations, and	┌ Yes	Г	No
	Staff and volu	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments	during the year			
	•	penses incurred in monitoring, inspecting	, and enforcing conservation easement	ts durın	g the year			
	Does each co	nservation easement reported on line 2(of 70(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ction 1	70(h)(4)(B)(ı)	┌ Yes	Γ	No
	balance sheet	describe how the organization reports con t, and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financia					
1	ttill Organ	nizations Maintaining Collection lete if the organization answered "Y	s of Art, Historical Treasures,	or Ot	her Similar A	\ssets.		
3	If the organiza works of art, h	ation elected, as permitted under SFAS 1 historical treasures, or other similar asse de, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its reve ts held for public exhibition, education	, or rese	earch in furtherai			
b	If the organiza works of art, h	ation elected, as permitted under SFAS 1 historical treasures, or other similar asse de the following amounts relating to thes	16 (ASC 958), to report in its revenue ts held for public exhibition, education	staten	nent and balance		blıc	
	(i) Revenues	included in Form 990, Part VIII, line 1			► \$			
		cluded in Form 990, Part X			► \$			585
	If the organiza	cluded in Form 990, Part X ation received or held works of art, histor unts required to be reported under SFAS					,	
1	_	·	(, - <u></u>		b. #			
		luded in Form 990, Part VIII, line 1			* *			
)	Assets includ	led in Form 990, Part X			► \$			

Part	Urganizations Maintaining Co	llections of Ar	t, HIS	tori	<u>cai ire</u>	easur	res, or C	tnei	Similar A	sets	(coi	<u>rtinued)</u>
3	Using the organization's acquisition, access collection items (check all that apply) $$	on, and other reco	rds, ch	neck —	·		-		sıgnıfıcant us	e of its	5	
а	▼ Public exhibition		d	Γ	Loan o	rexch	ange prog	rams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	aın hov	v the	y further	the or	rganızatıor	ı's ex	empt purpose	ın		
5	During the year, did the organization solicit of								ılar			
Dow	assets to be sold to raise funds rather than t								!!	<u>Γ Υ</u> е	s	✓ No
Par	Part IV, line 9, or reported an an						answere	u re	es to Form	990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	edıary	for c	ontributi	ions o	r other ass	sets n	ot	Γ Ye	:s	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follov	ving t	able		г					
							-		A	nount		
с	Beginning balance						-	1c				
d	Additions during the year						-	1d				
e	Distributions during the year						-	1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, Iir	ne 21?							┌ Ye	S	∏ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	natio	n has be	een pr	ovided in F	art X	ш			Г
Par	t V Endowment Funds. Complete											
_		(a)Current year	(b)	Prior y		(c) Tw	-		hree years back	(e) Fo		ars back
1a	Beginning of year balance	1,765,640		1,	321,818		1,793,074	+	1,706,621		- 4	2,218,235
b	Contributions	230			100		8,807	Ή—	10,000			
С	Net investment earnings, gains, and losses	73,783			107,534		202,158	3	226,678			-511,614
d	Grants or scholarships											
e	Other expenditures for facilities and programs				122,671		150,000)	123,150			
f	Administrative expenses				41,141		32,22	1	27,075			
g	End of year balance	1,839,653		1,	765,640		1,821,818	3	1,793,074		1	1,706,621
2	Provide the estimated percentage of the curi	ent year end balan	ce (lın	e 1g	column	(a)) h	eld as					
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment ► 31 830 %											
c	Temporarily restricted endowment ► 68:	170 %										
	The percentages in lines 2a, 2b, and 2c show						d					
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	zation i	triat i	are neid	and ac	ammistere	a ior	ine	Г	es	No
	(i) unrelated organizations								3a	-		No
	(ii) related organizations								3a	(ii)		No
b	If "Yes" to $3a(II)$, are the related organizatio	•							3	b		
4	Describe in Part XIII the intended uses of th											
Par	Land, Buildings, and Equipme	ent. See Form 99	90, Pa				(h)Cast au	-41	(-)	-	4\ D-	-11
	Description of property) Cost or o		(b) Cost or basis (oth		(c) Accumulat depreciation		a) Bo	ok value
1 a L	and						6	3,641				63,641
b B	Buildings						1,32	8,371	886,	529		441,842
c L	easehold improvements											
d E	quipment						29	3,212	186,	820		106,392
e (Other						14	3,913	128,	004T		15,909
	. Add lines 1a through 1e <i>(Column (d) must e</i>							-,		004		

	Form 990, Part X, line 1	<u> </u>	
(a) Description of security or category	(b)Book value	(c) Metho	od of valuation
(including name of security)		Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
	+		
	+		
Table (California (II) annot a supl Farm 2000, Bart V, and (II) Inc. 42.)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X. line	· 13.	
(a) Description of investment type	(b) Book value		od of valuation
(a) Description of investment type	(2) Book value		f-year market value
	+	Cost of ella-o	. , car market value
	+	1	
		1	
	+	+	
		1	
	+		
	<u> </u>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lir	າe 15.		
(a) Descrip			(b) Book value
(1) Collectibles and artwork			542,585
Total. (Column (b) must equal Form 990. Part X. col.(B) line 15			542.585
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15			542,585
Part X Other Liabilities. See Form 990, Part X	(, line 25.		542,585
			542,585
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability	(, line 25.		542,585
Part X Other Liabilities. See Form 990, Part X	(, line 25.		542,585
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	(, line 25.		542,585
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability	(, line 25.		542,585
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	(, line 25.		542,585
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Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	(, line 25.		542,585
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	(, line 25.		542,585
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	(, line 25.		542,585
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes See Additional Data Table	(, line 25.		542,585
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	(, line 25.		542,585

			, age ,
Par	XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	2,301,869
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	1	
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)	1	
e	Add lines 2a through 2d	2e	75,390
3	Subtract line 2e from line 1	3	2,226,479
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	1	
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,226,479
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	sper	Return
1	Total expenses and losses per audited financial statements	1	2,308,580
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)	3	
e	Add lines 2a through 2d	2e	23,663
3	Subtract line 2e from line 1	3	2,284,917
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII).............. 4b		
C	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	2,284,917

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 2b, Part V, 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 information

I dentifier	Return Reference	Explanation
	Part III, Line 4	Collection items were obtained by the Organization through donations from members and clubs. The collection is linked with the Women's History and Resource Center, which serves the Organization's exempt purpose. The collection allows the Organization to attract those who are interested in women's studies and history, while at the same time serving as a part of the Organization's history.
Description of Intended Use of Endowment Funds	Part V, Line 4	The Organization's endowment has been funded by donor-restricted contributions, and inappropriate earnings from the endowment may be used for general operations of the Organization by Board's decision
Description of Uncertain Tax Positions Under FIN 48	Part X, Line 2	The Organization had no significant uncertain tax positions during the year ended June 30, 2013
Part XI, Line 2d - Other Adjustments		Expenses allocable to rental income 23,663
Part XII, Line 2d - Other Adjustments		Expenses allocable to rental income 23,663

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990

OMB No 1545-0047

DLN: 93493112003214

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

Name of the organization General Federation of Women's Clubs **Employer identification number**

53-0106514

	d to award the grants rganization's procedu ner Assistance t	orassistance?	of grant funds in the large of Granizations in	Jnited States the United States	s. Complete if the or	ganızatıon answered	✓ Yes I "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable		(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) US Fund for UNICEF 125 Maiden Lane New York, NY 10038	13-1760110	501(c)(3)	16,730		, , , , , , , , , , , , , , , , , , ,		Haiti Disaster Relief Fund
Enter total number of sec Enter total number of othe	tion 501(c)(3) and g	overnment organizations	listed in the line 1 table	e			

(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
1		1		I
				recipients cash grant non-cash assistance (book,

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier Return Reference Explanation

Schedule I (Form 990) 2012

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012

Open to Public Inspection

Name of the organization General Federation of Women's Clubs **Employer identification number**

53-0196514

Identifier	Return Reference	Explanation			
	Form 990, Part VI, Section A, line 6	The Organization has members who attain membership through the payment of an annual fee			
	Form 990, Part VI, Section A, line 7a	Members on the International level elect the seven members of the Executive Committee (Int ernational President, President-elect, First Vice-President, Second Vice-President, Record ing Secretary, Treasurer, and Director of Junior Clubs), Members on the region level elect their region officers (region presidents) who serve on the Organization's Board of Direct ors, Members on the state level elect their state leaders on the state level (state presid ent and state director of junior clubs) who serve on the Organization's Board of Directors			
	Form 990, Part VI, Section A, line 7b	All proposed changes to the Organization's Bylaw's are reviewed and voted on by the general membership annually at the Annual Convention			
	Form 990, Part VI, Section B, line 11	The 990 is reviewed by the Senior Director of Finance and Administration with the Executive Director Copies of the draft 990 are sent to the International President & Chief Executive Officer and Treasurer If there are any questions, the Senior Director of Finance and Administration communicates them with the auditor			
	Form 990, Part VI, Section B, line 12c	The conflict of interest policy is contained in the Organization's Bylaws It is distribut ed to directors, officers, and key employees, for self-disclosure Individuals are require d and are reminded to report any conflicts of interest to the Board, which will take appropriate action			
	Form 990, Part VI, Section B, line 15	Compensation of the Executive Director is discussed by the Executive Committee. The Execut ive Committee, as part of the budget planning and approval process, establishes the budget for salary expense. Staff salaries are also compared to the median salary rate in the D.C metropolitan area. The Executive Director and International President have the final aut hority over compensation of the Organization's staff within the approved salary budget.			
	Form 990, Part VI, Section C, line 19	The Organization's governing documents are available upon request and on its website, and its audited financial statements, 990 forms and conflict of interest policy are posted on the Organization's website			
	Form 990, Part XII, Line 2c	The Organization's Executive Committee assumes responsibility for oversight of the audit o f its financial statement and selection of an independent accountant, which is reviewed an d approved by the Board of Directors This process is consistent with prior years			