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Short Form Return of Organization Exempt From Income Tax

2012

Open to Public Inspection

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

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).
All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

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

Department of the Treasury
Internal Revenue Service

A For the 2012 calendar year, or tax year beginning 7/1/2012, and ending 6/30/2013

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization
American Association of University Women - Atlanta Branch

D Employer identification number
58-6043240

Number and street (or P O box, if mail is not delivered to street address) Room/suite
4320 Quail Ridge Way
 City or town state or country ZIP + 4
Peachtree Corners GA 30092-1304

E Telephone number
404/275-8221

F Group Exemption Number ▶ 5649

G Accounting Method Cash Accrual Other (specify) ▶ _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ www.aauwatlanta.org

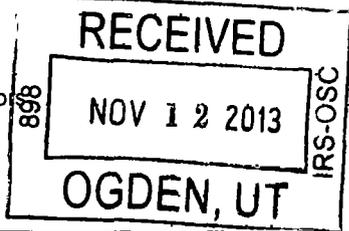
J Tax-exempt status (check only one) — 501(c)(3) 501(c) (4) ◀ (insert no.) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 88,584

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	25
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	3,748
	4	Investment income	4	90
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6	Gaming and fundraising events		
	6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
6b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	84,721	
6c	Less direct expenses from gaming and fundraising events	6c	29,512	
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	55,209	
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0	
8	Other revenue (describe in Schedule O)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	59,072	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	52,486
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	17
	16	Other expenses (describe in Schedule O)	16	6,207
	17	Total expenses. Add lines 10 through 16	17	58,710
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	362
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	92,776
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	93,138



SCANNED NOV 26 2013 Revenue

19

Part II Balance Sheets. (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	92,776	22 93,138
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24
25 Total assets	92,776	25 93,138
26 Total liabilities (describe in Schedule O)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	92,776	27 93,138

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? Continue intellectual growth of college-educated members

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28 To enrich the educational goals of women by providing local scholarships - To contribute to AAUW Funds for women studying for advanced degrees - to assist women in academia & workplace litigations - To provide leadership training (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	25,443
29 Contribute to nonprofits working with young at-risk girls in Atlanta - (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	3,834
30 Bookfair is produced by three branches of AAUW - Atlanta, Cobb Co and North Fulton Atlanta Branch has the fiduciary responsibility for the event, and funds are allocated to each branch based on hours worked (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	23,209
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	6,224
32 Total program service expenses. (add lines 28a through 31a)	32	58,710

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Mary Lynn Merkle Co-Pres	Hr/WK 3 00			
Ruth Yurchuck Co-Pres	Hr/WK 3 00			
Dot Ransom Mbr VP	Hr/WK 1 00			
Alta Birdsong Treas	Hr/WK 6 00			
Sharon Bevis-Hoover Pres-Elect	Hr/WK 1 00			
Diana Witt Secretary	Hr/WK 1 00			
Blondie Chitunya-Wilson Secretary	Hr/WK 1 00			
Betty Slater Secretary	Hr/WK 1 00			
	Hr/WK			

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		X
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
35 c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="text" value="37a"/>		
b	Did the organization file Form 1120-POL for this year?		
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved <input type="text" value="38b"/>		
39	Section 501(c)(7) organizations Enter		
a	Initiation fees and capital contributions included on line 9 <input type="text" value="39a"/>		
b	Gross receipts, included on line 9, for public use of club facilities <input type="text" value="39b"/>		
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 <input type="text"/> , section 4912 <input type="text"/> , section 4955 <input type="text"/>		
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="text"/>		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization <input type="text"/>		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		
41	List the states with which a copy of this return is filed <input type="text" value="GA"/>		
42 a	The organization's books are in care of <input type="text" value="Sharon Bevis-Hoover"/> Telephone no <input type="text" value="404/275-8221"/> Located at <input type="text" value="4320 Quail Ridge Way"/> City <input type="text" value="Peachtree Corners"/> ST <input type="text" value="GA"/> ZIP + 4 <input type="text" value="30092-1304"/>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No
42b			X
c	At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country <input type="text"/>		X
42c			X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="text" value="43"/>		
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
c	Did the organization receive any payments for indoor tanning services during the year?		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
44d			
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
45 b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		X
45b			X

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Yes No
46

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 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 Yes No
47

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 48

49 a Did the organization make any transfers to an exempt non-charitable related organization? 49a

b If "Yes," was the related organization a section 527 organization? 49b

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Name Sharon Bevis-Hoover Title President	Hr/WK 6 00			
Name Myra Carmon Title Program VP	Hr/WK 2 00			
Name Billie Collier Title Membership VP	Hr/WK 2 00			
Name Huiping Du Title Finance Officer	Hr/WK 3 00			
Name Betty Slater Title Secretary	Hr/WK 1 00			

f Total number of other employees paid over \$100,000 ▶ _____

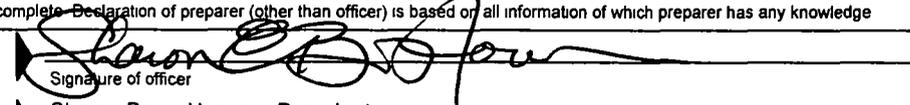
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
Name None City ST ZIP		
Name City ST ZIP		
Name City ST ZIP		
Name City ST ZIP		
Name City ST ZIP		

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ▶ Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here Date 10/30/2013
 Signature of officer 
 Sharon Bevis-Hoover - President
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶		Phone no	
Firm's address ▶				

May the IRS discuss this return with the preparer shown above? See instructions ▶ Yes No

Part I, Line 1 (990-EZ) - Contributions, Gifts, Grants and Similar Amounts Received

1	Contributions	1	
2	Noncash contributions	2	25
3	Membership dues and assessments (contributions from the public)	3	
4	Government contributions (grants)	4	
5	Commercial co-venture	5	
6	Special events contributions (Line 6 - Special Events)	6	0
7	Associated organization contributions	7	
8		8	
9		9	
10		10	
11	Total	11	25

Part I, Line 4 (990-EZ) - Investment Income

1	Interest on savings and temporary cash investments	1	90
2	Dividends and interest from securities	2	
3	Gross rents	3	
4	Other investment income	4	
5	Total	5	90

Part I, Line 16 (990-EZ) - Other Expenses

		Total:
Description		
1	Travel	
2	Meals and entertainment	
3	Fundraising	
4	Conferences, conventions, and meetings	
5	Depreciation	
6	Equipment rental and maintenance	
7	Interest	
8	Supplies	
9	Telephone	
10	Unrelated business income taxes	
11	Amortization	
12	Depletion	
13	Dues to AAUW and AAUW of GA	
14	Convention Expenses	
15	Handbook	
16	Hospitality/Meetings	
17	Storage Expense	
18	President's Expense	
19	Financial Service Fee	
20		
21		
22		
23		
24		
25		
26		
27	Cool Girls Branch Project	

Part I, Line 16 (990-EZ) - Other Expenses

6,207	
	Amount
1	
2	
3	
4	
5	0
6	
7	
8	
9	
10	0
11	0
12	
13	2,913
14	1,388
15	283
16	850
17	276
18	438
19	59
20	
21	
22	
23	
24	
25	
26	
27	

Part I, Line 20 (990-EZ) - Other Changes in Net Assets or Fund Balances

		Total:
Description		
1		

Part I, Line 20 (990-EZ) - Other Changes in Net Assets or Fund Balances

0	
	Amount
1	

Part II, Line 24 (990-EZ) - Other Assets

		Totals:	0
Description			Beginning
1			

Part VI, Line 50 (990-EZ) - Compensation of Other Employees

Name and title of each employee paid more than \$100,000	Average hours per week devoted to position	Compensation	Contributions to emp benefit plans & deferred compensation	Expense account and other allowances
1. Name Sharon Bevis-Hoover Title President	Hr/WK 6.00 Explanation	0	0	0
2. Name Myra Carmon Title Program VP	Hr/WK 2.00 Explanation	0	0	0
3. Name Billie Collier Title Membership VP	Hr/WK 2.00 Explanation	0	0	0
4. Name Huiping Du Title Finance Officer	Hr/WK 3.00 Explanation	0	0	0
5. Name Betty Slater Title Secretary	Hr/WK 1.00 Explanation	0	0	0

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events		
		Booksale (event type)	Online & Bookroom (event type)	Silent Auction (total number)	(add col (a) through col (c))		
Revenue	1	Gross receipts	50,913	33,079	729	84,721	
	2	Less Contributions			0	0	
	3	Gross income (line 1 minus line 2)	50,913	33,079	729	84,721	
Direct Expenses	4	Cash prizes			0	0	
	5	Noncash prizes			0	0	
	6	Rent/facility costs	5,078		0	5,078	
	7	Food and beverages			0	0	
	8	Entertainment			0	0	
	9	Other direct expenses	19,659	4,775	0	24,434	
	10	Direct expense summary Add lines 4 through 9 in column (d)					(29,512)
	11	Net income summary Combine line 3, column (d), and line 10					55,209

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))	
Revenue	1	Gross revenue			0	
Direct Expenses	2	Cash prizes			0	
	3	Noncash prizes			0	
	4	Rent/facility costs			0	
	5	Other direct expenses			0	
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary Add lines 2 through 5 in column (d)				(0)
	8	Net gaming income summary Combine line 1, column d, and line 7				0

- 9 Enter the state(s) in which the organization operates gaming activities _____
- a Is the organization licensed to operate gaming activities in each of these states? Yes No
- b If "No," explain _____
- 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
- b If "Yes," explain _____

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

American Association of University Women - Atlanta Branch

58-6043240

Form 990-EZ, Part III, Line 31 Atlanta Branch AAUW provides stimulating programs to enhance
the mission/purpose of the organization and communicates to the membership Pays dues to
national and state in the amount of \$2913 Grants and allocations 0, Program service
expenses 6,224

Form 990-EZ, Part I, Line 10, Grants Paid Activity National Nonprofit, Grantee AAUW Funds
1111 Sixteenth Street Washington DC 20036, Cash Grant 11,804, Relationship

Form 990-EZ, Part I, Line 10, Grants Paid Activity Local Nonprofit, Grantee N Fulton
Branch AAUW 205 Glen Holly Drive Roswell GA 30076, Cash Grant 10,315, Relationship

Form 990-EZ, Part I, Line 10, Grants Paid Activity Local Nonprofit, Grantee Cobb County
Branch AAUW 4569 River Parkway Apt E Atlanta GA 30339-3853, Cash Grant 12,894, Relationship

Form 990-EZ, Part I, Line 16, Other Expenses Dues to AAUW and AAUW of GA 2,913

Form 990-EZ, Part I, Line 16, Other Expenses Convention Expenses 1,388

Form 990-EZ, Part I, Line 16, Other Expenses Handbook 283

Form 990-EZ, Part I, Line 16, Other Expenses Hospitality/Meetings 850

Form 990-EZ, Part I, Line 16, Other Expenses Storage Expense 276

Form 990-EZ, Part I, Line 16, Other Expenses President's Expense 438

Form 990-EZ, Part I, Line 16, Other Expenses Financial Service Fee 59

Form 990-EZ Part I Line 10 All college students, who were recipients of scholarships, were
given Form 1099MISC if the amount received during calendar year 2012 was greater than \$600

Some students opted to split the scholarship between the fall and spring semesters