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## Short Form Return of Organization Exempt From Income Tax

**2015**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

**A For the 2015 calendar year, or tax year beginning** 07-01, 2015, and ending 06-30, 2016

**B** Check if applicable

- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

**C** Name of organization

**American Assn. University Women - Atlanta Branch**

Number and street (or P O box, if mail is not delivered to street address)

Room/suite

**443 Woodstone West Drive**

City or town, state or province, country, and ZIP or foreign postal code

**Marietta, GA 30068-4085**

**D** Employer identification number

**58-6043240**

**E** Telephone number

**(770) 973-7964**

**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](http://www.aauwatlanta.org)

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

**K** Form of organization  Corporation  Trust  Association  Other

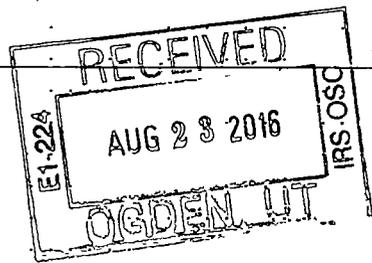
**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets

(Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **96,738**

**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

	Description	Line	Amount
<b>Revenue</b>	1 Contributions, gifts, grants, and similar amounts received	1	1,579
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	3,653
	4 Investment income	4	45
	5a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	91,461
c Less direct expenses from gaming and fundraising events	6c	42,814	
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	48,647	
7a Gross sales of inventory, less returns and allowances	7a		
b Less cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8 Other revenue (describe in Schedule O)	8		
9 <b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	53,924	
<b>Expenses</b>	10 Grants and similar amounts paid (list in Schedule O)	10	40,931
	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	293
	16 Other expenses (describe in Schedule O)	16	6,751
	17 <b>Total expenses.</b> Add lines 10 through 16	17	47,975
<b>Net Assets</b>	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	5,949
	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	104,320
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	
	21 <b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20	21	110,269



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P 15



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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 33 through 45b regarding organizational activities, financials, and compliance.

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		X

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

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

49b		
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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	(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

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 business address of each independent contractor	(b) Type of service	(c) Compensation

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 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**

Signature of officer: *Myra Carmon* Date: *8-6-2016*

Type or print name and title: **Dr. Myra Carmon, President**

**Paid Preparer Use Only**

Pnnr/Type preparer's name: \_\_\_\_\_ Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check  if self-employed PTIN: \_\_\_\_\_

Firm's name: \_\_\_\_\_ Firm's EIN: \_\_\_\_\_

Firm's address: \_\_\_\_\_ Phone no: \_\_\_\_\_

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

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

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No 1545-0047

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

**2015**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

**American Assn. University Women - Atlanta Branch**

**58-6043240**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17  
 Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
<b>Total</b>						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

**Georgia**



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

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

**2015**

**Open to Public  
Inspection**

Name of the organization

American Assn. University Women - Atlanta Branch

Employer identification number

58-6043240

**01. List of grants and similar amounts paid (Part I, line 10)**

Activity	Local Nonprofit - Scholarships - projects
Grantee	Cobb County Branch AAUW
Street	4569 River Parkway Apt. E
City, State, Zip	Atlanta, GA 30339-3853
Relationship	None
Amount	8,087

Activity	Local Nonprofit - Scholarships - Projects
Grantee	North Fulton Branch AAUW
Street	205 Glen Holly Drive
City, State, Zip	Roswell, GA 30076
Relationship	None
Amount	5,657

Activity	National Nonprofit - Scholarships and Research
Grantee	AAUW
Street	1310L St. NW Ste 1000
City, State, Zip	Washington, DC 20005
Relationship	under group exemption 5649
Amount	11,414

Activity	Nepal Project for women & children
Grantee	BlinkNow Foundation
Street	P.O. Box 453

Name of the organization

Employer identification number

American Assn. University Women - Atlanta Branch

58-6043240

City, State, Zip Mendham, NJ 07945-0453

Relationship None

Amount 1,000

Activity Support disadvantaged young girls

Grantee Cool Girls

Street 621 North Ave. A220

City, State, Zip Atlanta, GA 30332-0460

Relationship None

Amount 2,523

Activity Scholarship to College Student

Grantee Amy Douglas

Street 1566 N. Morningside Drive

City, State, Zip Atlanta, GA 30306

Relationship None

Amount 2,250

Activity Scholarship to College Student

Grantee Brittany Jordan

Street 12104 Providence Cr

City, State, Zip Lithonia, GA 30038

Relationship None

Amount 1,000

Activity Scholarship to College Student

Grantee Monica Patterson

Name of the organization <b>American Assn. University Women - Atlanta Branch</b>	Employer identification number <b>58-6043240</b>
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Street 1085 Dunedin Trail  
 City, State, Zip Woodstock, GA 30188  
 Relationship None  
 Amount 2,250

Activity Scholarship for College Student  
 Grantee Joi Rump  
 Street 4112 Trotters Way Drive  
 City, State, Zip Snellville, GA 30039  
 Relationship None  
 Amount 2,250

Activity Scholarship for College Student  
 Grantee Katherine Rutledge  
 Street 1215 State St. NW  
 City, State, Zip Atlanta, GA 30318  
 Relationship none  
 Amount 2,250

Activity Scholarship for College Student  
 Grantee Sarah Shapiro  
 Street 649 Auburn Ave. 224  
 City, State, Zip Atlanta, GA 30312  
 Relationship none  
 Amount 2,250

Name of the organization <b>American Assn. University Women - Atlanta Branch</b>	Employer identification number <b>58-6043240</b>
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**02. Description of other expenses (Part I, line 16)**

Description	Amount
Dues to National and State Organ.	2,826
Meeting Expenses	559
College Students - Nat'l Conference	750
College/University Workshop	752
Miscellaneous	334
Convention Expense	40
Intern Expense	1,490

**03. Other program services (Part III, line 31)**

Expenses to operate the organization and provide programs and other information to members

- Payment of dues to national and state organization - sending delegate to national convention - Sending college students to National Conference in Washington, DC. and having the services of an intern or communication to members.

The Atlanta Branch American Association of University Women (AAUW) is committed to advancing the mission of its parent organization, the national AAUW, to benefit women and girls in today's society primarily through education and research