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Short Form

OMB No 1545-1150

Form **990-EZ**

Return of Organization Exempt From Income Tax

2017

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

Open to Public Inspection

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

Go to www.irs.gov/Form990EZ for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning July 1, 2017, and ending June 30, 2018

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C Name of organization: American Association of University Women - Atlanta Branch. D Employer identification number: 58-604324. E Telephone number: 404/633-7183. F Group Exemption Number: 5649.

G Accounting Method: [X] Cash. H Check if the organization is not required to attach Schedule B: [X].

I Website: . J Tax-exempt status (check only one): [X] 501(c)(3), [] 501(c)(4), [] 4947(a)(1), [] 527.

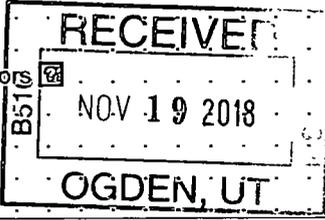
K Form of organization: [] Corporation, [] Trust, [] Association, [] Other.

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. Total: \$ 88292.

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

Table with 21 rows and 2 columns. Rows include: 1 Contributions, gifts, grants, and similar amounts received (1033); 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments (4558); 4 Investment income (48); 5a Gross amount from sale of assets other than inventory; 5b Less: cost or other basis and sales expenses; 5c Gain or (loss) from sale of assets other than inventory; 6 Gaming and fundraising events; 6a Gross income from gaming; 6b Gross income from fundraising events (82653); 6c Less: direct expenses from gaming and fundraising events (46389); 6d Net income or (loss) from gaming and fundraising events (36264); 7a Gross sales of inventory; 7b Less: cost of goods sold; 7c Gross profit or (loss) from sales of inventory; 8 Other revenue; 9 Total revenue (41903); 10 Grants and similar amounts paid (47194); 11 Benefits paid to or for members; 12 Salaries, other compensation, and employee benefits; 13 Professional fees and other payments to independent contractors; 14 Occupancy, rent, utilities, and maintenance; 15 Printing, publications, postage, and shipping (518); 16 Other expenses (8328); 17 Total expenses (56040); 18 Excess or (deficit) for the year (14137); 19 Net assets or fund balances at beginning of year (107529); 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year (93392).

SCANNED BY 020310



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	107529	22 93392
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24
25 Total assets	107529	25 93392
26 Total liabilities (describe in Schedule O)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	107529	27 93392

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? Intellectual growth of college-educated women

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, optional for others)

28 Enrich educational goals of women through local and national scholarships/fellowships - support women in academia and workplace litigations - support women in equity issues		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	31158
29 Contribute to local nonprofits working with education of elementary-age students at high risk - Project in Nepal sponsored by BlinkNow Fdn in Mendham, NJ to improve life in a poverty country		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	5736
30 Bookfair produced by 3 local AAUW branches - Funds are allocated from proceeds to each - Atlanta Branch AAUW - Cobb County Branch AAUW - North Fulton Branch AAUW		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	10300
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	8846
32 Total program service expenses (add lines 28a through 31a)	32	56040

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-President 1651 Executive Park Lane - Atlanta, GA 30329	8	0	0	0
Chitunya-Wilson - Co-President 1399 Red Cedar Trail - Stone Mountain, GA 30083	1	0	0	0
Betty Arden -Co-Program Vice President 3213 Powers Ford SE - Marietta, Ga 30067	3	0	0	0
Amira Saleh - Co-Program Vice President 600 Garnet Court - Canton, GA 30114	3	0	0	0
Kay Collins - Membership Vice President 34 Ivy Parkway - Atlanta, GA 30342	2	0	0	0
Susan Diffenderfer - Co-Secretary 1228 Weatherstone Drive - Atlanta, GA 30324	1	0	0	0
Marcy Nader - Co-Secretary 105 Garden Court - Sandy Springs, GA 30328	1	0	0	0
Phyllis Miller - Co-Finance Officer 2394 Leafgate Road - Decatur, GA 30033	3	0	0	0
Alta Birdsong - Co-Finance Officer 5241 Manhasset Cove - Dunwoody, GA 30338	3	0	0	0

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

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
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)
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
35b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
35c 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
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
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) 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
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization
40e 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 Georgia
42a The organization's books are in care of Huiping Du Telephone no. 404/771-0035
Located at 3732 Clairmont Road - Chamblee, GA ZIP + 4 30341-4910
42b 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: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).
42c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b 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)

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		<input checked="" type="checkbox"/>

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		<input checked="" type="checkbox"/>

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

	Yes	No
48		<input checked="" type="checkbox"/>

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

	Yes	No
49a		<input checked="" type="checkbox"/>

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

	Yes	No
49b		<input checked="" type="checkbox"/>

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
NONE - ALL VOLUNTEERS				

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
NONE - ALL VOLUNTEERS		

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: Mary Lynn Merkle Date: Nov. 13, 2018

Type or print name and title: Mary Lynn Merkle - Co-President

Paid Preparer Use Only

Print/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

Part II Fundraising Events. Complete if the organization answered "Yes" on 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
		Book Sale (event type)	(event type)	(total number)	(add col (a) through col (c))
Revenue	1 Gross receipts	82403			82403
	2 Less. Contributions	250			250
	3 Gross income (line 1 minus line 2)	82653			82653
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	15040			15040
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	31349			31349
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				46389
11 Net income summary. Subtract line 10 from line 3, column (d) ▶				36264	

Part III Gaming. Complete if the organization answered "Yes" on 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))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	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) ▶					
8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct 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)

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

**Open to Public
Inspection**

Name of the organization

American Association of University Women - Atlanta Branch

Employer identification number

58-6043240

PART 1 - LINE 16 - OTHER EXPENSES

3944 - Dues to National and State AAUW

782 - Hospitality for meetings

1977 - Convention Expense

109 - Gifts to Presidents

1496 - Expenses for maintaining college/university relationships

20 - Maintaining website

8328 - TOTAL FOR PART 1 - LINE 16 - OTHER EXPENSES

PART III - STATEMENT OF PROGRAM SERVICES

LINE 28a

13448 - American Association of University Women - 1310 L Street - Washington, DC 20005

910 - Madison Hoover - 4320 Quail Ridge Way - Peachtree Corners, GA 30092 (student intern)

2000 - Georgia State University - PO Box 3965 - Atlanta, GA 30302 (for grantee)

3000 - Georgia Institute of Technology - 225 North Avenue - Atlanta, GA 30332 (for grantee)

1100 - Rebecca Dickerson - 1984 Audubon Drive - Atlanta, GA 30329 (grantee)

3200 - Leah Gray - 4930 Wewatta Street - Atlanta, Ga 30331 (grantee) (grantee)

1100 - Alicia Kovaevic - 4366 Cool Water Drive - Douglasville, GA 30135 (grantee)

3200 - Asmaa Malik - 1398 Buckingham Drive - Hamilton, GA 30229 (grantee)

3200 - Kimberly Stokes - 1638 Alexandria Court - Marietta, GA 30067 (grantee)

31158 - TOTAL PART III - LINE 28a

LINE 29a

1236 - Clark Mandela Washington Project - 3519 Peppermint Court - Tucker, GA 30084

1000 - BlinkNow Foundation - PO Box 453 - Mendham, NJ 07945-0453

500 - Atlanta Women for Equity - P O Box 33521 - Decatur, GA 30033

2000 - Dresden Elementary School Foundation - 2449 Dresden Dr - Chamblee, GA 30341

500 - Planned Parenthood - 440 Moreland Ave SE - Atlanta, GA 30316

Name of the organization

American Association of University Women - Atlanta Branch

Employer identification number

58-6043240

500 - Heartbound Ministries - P O Box 191703 - Atlanta, GA 31119

5736 - TOTAL PART III - LINE 29a

PART III - LINE 31a

8328 - Above - Part I - Line 16

518 - Part I - Line 15

8846 - TOTAL PART III - LINE 31a