

Form **990-EZ**

Short Form 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 1545-1150

2009

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 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.

A For the 2009 calendar year, or tax year beginning _____, and ending _____

B Check if applicable: Address change Name change Initial return Termination Amended return Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization WOMEN'S RESOURCE CENTER OF MANATEE, INC.		D Employer identification number 59-3034653
		Number and street (or P O box, if mail is not delivered to street address) Room/suite 1926 MANATEE AVENUE WEST		E Telephone number 941-747-6797
		City or town, state or country, and ZIP + 4 BRADENTON FL 34205		F Group Exemption Number

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method Cash Accrual
Other (specify) _____

I Website: **N/A**

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

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ. **\$ 271,225**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	100,804
	2	Program service revenue including government fees and contracts	2	38,189
	3	Membership dues and assessments	3	
	4	Investment income	4	16,101
	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	
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	63,592
6b	Less direct expenses other than fundraising expenses	6b	30,951	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	32,641	
7a	Gross sales of inventory, less returns and allowances	7a	46,926	
7b	Less cost of goods sold	7b	22,882	
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	24,044	
8	Other revenue (describe SEE STATEMENT 1)	8	5,613	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	217,392	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	118,188
	13	Professional fees and other payments to independent contractors	13	1,054
	14	Occupancy, rent, utilities, and maintenance	14	8,668
	15	Printing, publications, postage, and shipping	15	4,144
	16	Other expenses (describe SEE STATEMENT 2)	16	109,957
	17	Total expenses. Add lines 10 through 16	17	242,011
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-24,619
	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	422,769
20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 3	20	-121,399	
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	276,751	

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	292,604	22 148,910
23	Land and buildings		23
24	Other assets (describe SEE STATEMENT 4)	427,730	24 439,751
25	Total assets	720,334	25 588,661
26	Total liabilities (describe SEE STATEMENT 5)	297,565	26 311,910
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	422,769	27 276,751

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2009)

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Part III Statement of Program Service Accomplishments (See the instructions for Part III.)		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)	
What is the organization's primary exempt purpose? SEE STATEMENT 6			
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title			
28	PROJECT SMART PROGRAM (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	211,265
29	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31	Other program services (attach schedule) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a)	32	211,265

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)				
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
CAROL CASON	PRESIDENT 2.00	0	0	0
KATHLEEN CANNON	VICE-PRES 2.00	0	0	0
MARILYNNE BOLEK	SECRETARY 2.00	0	0	0
KIM HOPPER	TREASURER 2.00	0	0	0
JAMES RAWE	TRUSTEE 1.00	0	0	0
PAM ALI	TRUSTEE 1.00	0	0	0
JOHN KAKLIS	TRUSTEE 1.00	0	0	0
ALICIA NEAL	TRUSTEE 1.00	0	0	0
TODD POKRYWA	TRUSTEE 1.00	0	0	0
BETH DEYO	TRUSTEE 1.00	0	0	0
TONI GROSSENHEIDER	TRUSTEE 1.00	0	0	0
CARMEN WEYLAND	TRUSTEE 1.00	0	0	0

Part V Other Information (Note the statement requirements in the instructions for Part V.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
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
37a	Enter amount of political expenditures, direct or indirect, as described in the instr ▶ 37a 		
b	Did the organization file Form 1120-POL for this year?		X
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 period covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved ▶ 38b 		
39	Section 501(c)(7) organizations Enter		
a	Initiation fees and capital contributions included on line 9 ▶ 39a 		
b	Gross receipts, included on line 9, for public use of club facilities ▶ 39b 		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____		
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 is it 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		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 ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
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		X
41	List the states with which a copy of this return is filed ▶ FL		
42a	The organization's books are in care of ▶ ASHLEY BROWN 1926 MANATEE AVE W Located at ▶ BRADENTON, FL	Telephone no ▶ 941-747-6797	ZIP + 4 ▶ 34209
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 ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country ▶ _____		X
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 ▶ 43 		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 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		<input checked="" type="checkbox"/>
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		<input checked="" type="checkbox"/>
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<input checked="" type="checkbox"/>
49a Did the organization make any transfers to an exempt non-charitable related organization?		<input checked="" type="checkbox"/>
b If "Yes," was the related organization a section 527 organization?		

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 address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

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
NONE		

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

Sign Here 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.

Ashley A Brown 4/14/10
 Signature of officer Date

Ashley A Brown
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature: *Laurence A. Kravaha* Date: 04/14/10 Check if self-employed: Preparer's Identifying Number (See instr): P00370753

Firm's name (or yours if self-employed): FLORIDA CPA SERVICES, P.A.
 address, and ZIP + 4: 5550 26TH ST W STE 1 BRADENTON, FL 34207
 EIN: 02-0638478
 Phone no: 941-752-6262

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated 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 10						

12 Gross receipts from related activities, etc (see instructions) 12

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2008 Schedule A, Part II, line 14 15 %

16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶

b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	504,854	226,018	156,932	195,323	100,804	1,183,931
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	65,227	115,279	70,333	70,767	56,685	378,291
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	570,081	341,297	227,265	266,090	157,489	1,562,222
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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 amount on line 13 for the year	59,446	110,279	65,333	65,767	58,000	358,825
c Add lines 7a and 7b	59,446	110,279	65,333	65,767	58,000	358,825
8 Public support (Subtract line 7c from line 6)						1,203,397

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	570,081	341,297	227,265	266,090	157,489	1,562,222
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,669	12,271	7,284		16,101	37,325
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	1,669	12,271	7,284		16,101	37,325
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	6,366	397	1,304	1,507	5,613	15,187
13 Total support. (Add lines 9, 10c, 11, and 12)	578,116	353,965	235,853	267,597	179,203	1,614,734

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	74.53%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	75.62%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	2%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	1%

19a 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3 % support tests—2008. 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

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

PART III, LINE 12 - OTHER INCOME DETAIL

OTHER INCOME \$ 15,187

Federal Statements**Statement 1 - Form 990-EZ, Part I, Line 8 - Other Revenue**

Description	Amount
OTHER INCOME	\$ 5,613
TOTAL	\$ 5,613

Statement 2 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
EXPENSES	\$
ADVERTISING AND PROMOTION	2,931
OFFICE	3,043
INTEREST	16,252
INSURANCE	9,051
DEPLETION	14,916
BANK SERVICE CHARGES	1,162
CONTRACT SERVICES	39,452
DUES & SUBSCRIPTIONS	372
EQUIPMENT RENTAL & MAINT	14,049
PROGRAM MATERIALS	1,258
BOARD MEMBER LUNCH	1,069
LICENSES & PERMITS	340
TELEPHONE	5,594
OTHER EXPENSE	468
TOTAL	\$ 109,957

Statement 3 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
LOSS IN VALUATION OF INVESTMENTS FROM PRIOR YEARS	\$ -121,399
TOTAL	\$ -121,399

Statement 4 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginning of Year	End of Year
GRANTS RECEIVABLE	\$ 4,994	\$ 2,248
PREPAID EXPENSES AND DEFERRED CHARGES	3,435	4,665
LAND, BUILDING & EQUIPMENT	530,518	559,481
LESS ACCUMULATED DEPRECIATION	111,217	126,643
	<u>427,730</u>	<u>439,751</u>

Federal Statements**Statement 5 - Form 990-EZ, Part II, Line 26 - Total Liabilities**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	\$ 515	\$ 2,033
LINE OF CREDIT	27,274	47,072
MORTGAGE AND OTHER NOTES PAYABLE	269,776	262,805
	<u>297,565</u>	<u>311,910</u>

Statement 6 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose**Description**

THE WOMEN'S RESOURCE CENTER OF MANATEE IS A NOT-FOR-PROFIT ORGANIZATION DEDICATED TO IMPROVING AND MAINTAINING THE QUALITY OF LIFE FOR ALL WOMEN OF MANATEE COUNTY BY 1)PROVIDING AN ENVIRONMENT THAT FOSTERS THE OPEN EXCHANGE OF IDEAS AND IDEALS, 2)PROVIDING THE SUPPORT FOR THE ATTAINMENT OF EDUCATIONAL AND VOCATIONAL GOALS, AND 3)HELPING THEM BECOME EMOTIONALLY AND FINANCIALLY INDEPENDENT.

Federal Statements**Schedule A, Part III, Line 7b - Excess Gross Receipts**

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
	\$	\$
2009	63,000	58,000
2008	70,767	65,767
2007	70,333	65,333
2006	115,279	110,279
2005	65,227	59,446
TOTAL	\$ <u>384,606</u>	\$ <u>358,825</u>