## **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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection.

Form 990 (2009)

TEEA0101 07/20/09

	For	the 2009 calen	dar year, e	or tax year be	eginning		2009, an	d ending			,		
В	Chec	k if applicable		C Name of or	ganization					D Employ	er Identifi	cation Number	
		Address change	Please use IRS label	PEOPLES	CLUB INTERNAT	rional - PRI	NCETON	BRAN	CH INC	22-	35964	66	
		Name change	or print or type.		d street (or PO box if ma			Room/su		E Telepho	one numbe	er	
	$\prod_{i}$	nitial return	See specific	16 WRIGH	HT STREET					(20	1) 43	3-3173	
	П.	Termination	Instruc- tions.	City, town o			State ZIP	code + 4		<u>`</u>			
	Π.	Amended return	1	EDISON			NJ O	8820	ĺ	<b>G</b> Gross r	ecerpts \$	211,35	0.
	П,	Application pending	F Name a	and address of pri	incipal officer				I(a) Is this a				
	_		Agwukwu	Ofodu 47 I	BERGEN AVENUE	JERSEY CIT	Y NJO	ا 7305	I(b) Are all			∏ Ye	
ī	Ta	x-exempt statu		(c) (3	) ◄ (insert no )	4947(a)(1)		527	It 'No,'	attach a list	(see instr	uctions)	_
J		ebsite: ► N/			7	1 10 11 (-)(1)	I		H(c) Group e	exemption n	ımber ►		
ĸ		m of organization	X Corpora	ation Trust	Association	Other ►	L Year		on 2006			gal domicile N	
_		Summa		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7.000000000		1 100		2000	7	ALLO OF TOE	gar donnelle 14	<u> </u>
10.00	1			anization's m	nission or most sign	ificant activities	Топ	ake p	eriod	ic con	trib	utions f	or
n	İ				motion of ch								
Š					rovide relie							and dist	ress
Activities & Governance												<del></del> _	
ۆ ⊊	2	Check this bo	ox ► 🗌	if the organiz	ation discontinued	its operations or	disposed	of more	than 25%	6 of its as	sets		
3 O	3				overning body (Part						3 1		
88	4				bers of the governing	ng body (Part VI,	line 1b)					3	
, ≝	5	Total number			•						<b>5 6</b> 0		
<b>V</b> Ct	7.				e if necessary) nue from Part VIII,	lcolumn (C) une	12				7a	<del></del>	0.
_	í	-			me from Form 990-	• • •	12				7b		
	<u> </u>	3 Net unrelated	Dusiness	taxable incol	110 1101111 01111 050	7, 11110 5-4				-i	<del>                                     </del>	C	<u> </u>
)		Contributions	and graps	te (Part VIII I	luno 16)				P1	rior Year	00	Current `	
Revenue	8	Contributions Program serv							<u> </u>	60,5	100.	- 00	,400.
ven.	10	_			n (A), lines 3, 4, ar	nd 7d)							
S S	11		-		), lines 5, 6d, 8c, 9	•				106,0	144	130	950.
5	12				11 (must equal Pa		A). line 12	2)		166,5			350.
ή <u> </u>	13						7,		1				, , , , , ,
	14												
	15	-			oyee benefits (Part	· · · · · · · · · · · · · · · · · · ·	ines 5-10	))					
Expenses	l			-	•			,					
ĕ			otal fundraising-lees (Part IX, column (A), line 11e)  otal fundraising-expenses (Part IX, column (D), line 25)							. \	· .	8" 1 " 3" 848	
ă	i	lotal fundrais	sing-exper	ises:(Eart:IX <del>,</del>	column (D), line 25	o) •		0.	<del></del>	<u>`</u>		<u>`````````````````````````````````````</u>	<u> </u>
	17				), lines 11a-11d, 11					112,9			1,777.
	18				ust equal Part IX, c	olumn (A), line 2	5)			112,9			1,777.
	19	Revenue less	The second second		ne 18ttrom line 12				<del>                                     </del>	53,6	522.	56	<u>573.</u>
Net Assots or Fund Balancos	İ		OG	JEN H	T				Begin	ning of Y		End of Y	
Salar	20	Total assets			T.,					129,9			<u>,481.</u>
at A	21	Total liabilitie	s (Part X,	line 26)						30,2	284.	32	2,744.
	22				ct line 21 from line	20			<u>L</u>	99,6	24.	153	3,737.
Pa	rt, II	Signati	ure Bloc	: <u>k</u>									
		Under penaltie	s of perjury,	I declare that I ha	ave examined this return, reparer (other than office	including accompany	ing schedule	s and state	ments, and	to the best o	of my know	vledge and belief	, it is
		- 1 A	- Complete	1 / i	2-011	, is based on an inne		поп ріоран	i.	10/1		D	
Siç			7 m	www.	D V		<i></i>			1011	411	<u> </u>	
He	re	Signature	er officer	.11. 1	0.05	·	1/1	In i	Dat		. \		
		170	JW	u 18m	n p, n	TO DU	$\perp \square$	$\prod$	RM	1710			
		Type or pr	rint name and	title	<b>`</b>		<u></u>		<del></del>		I n		
_							Date		Ch sel	eck if		parer's identifying instructions)	g number
Pa		Preparer's							еп	ployed -	X		
Pre	e- rer's	signature		O. Okek			<u>  10/</u>	$\frac{14}{10}$	)				
Us		Firm's name (		KE CPA L									
On		employed), address, and			FIELD AVE		<u>.                                    </u>		Eil	v ►			
		ZIP + 4	MAP	LEWOOD		NJ	7040		Ph	one no			<del></del>
May	/ the	IRS discuss th	ıs return w	with the prepa	rer shown above?	(see instructions	)					X Yes	No

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

		2-3596466 <u> </u>	Page 2
Par	t III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission.		
	To make periodic contributions for		
	To provide recreational & social amenities for its members & the co	mmunity	<b></b> -
	To assist members & provide relief in sickness, accident, disabilit		
	To reprise were to breath reflective significant decidency disability	X and discres	<u> </u>
	Dut the control of the delice of the control of the		
2	Did the organization undertake any significant program services during the year which were not listed on the price		
	Form 990 or 990-EZ?	Yes X	∐ No
	If 'Yes,' describe these new services on Schedule O.		_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	No
	If 'Yes,' describe these changes on Schedule O		_
4	Describe the exempt purpose achievements for each of the organization's three largest program services by exp	enses Section 501(c)	(3)
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations	ions to others, the tot	àl
	expenses, and revenue, if any, for each program service reported		
	<u></u>	······	<del></del>
1 3	(Code) (Expenses \$25,500. including grants of \$0.) (Rever	ua ŝ	0.)
70	COME MEMBERS DECELUED BUNDS TO UEID THE BUNDS OF DEPARTMENT OF THE PROPERTY OF	iue γ	
	SOME MEMBERS RECEIVED FUNDS TO HELP IN FUNERAL COST OF PARENTS		
	AS PRESCRIBED BY THE BYLAWS OF THE ORGANIZATION		
		<del> </del>	<b></b>
		<del>-</del>	
41	(Code) (Expenses \$ including grants of \$) (Rever	we \$	)
		·	
		<b>-</b>	
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40	: (Code) (Expenses \$ including grants of \$) (Rever	iue \$	)
		<del>-</del>	
	~		
			<b>-</b>
		<b>-</b>	
	Other program services (Describe in Schedule O )		
40			
	(Expenses \$ including grants of \$ ) (Revenue \$		
46	Total program service expenses ► 25, 500.		

PEOPLES CLUB INTERNATIONAL - PRINCETON BRANCH INC 22-3596466 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A 1 X Is the organization required to complete Schedule B, Schedule of Contributors? 2 Х 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 Х Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C. Part II 4 Х Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts where 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 Х 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 Х Did the organization report an amount in Part X, line 21; 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 9 Х Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 10 Х Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable 11 Х Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D. Part Vİ 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 169 If 'Yes,' complete Schedule D, Part VII 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 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 Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 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? If Yes, complete Schedule D, Part X 12 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Yes No 12 A Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes.' completing Schedule D, Parts XI, XII, and XIII is optional 12 A Х 13 Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Х b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F. Part I 14b Х 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? If 'Yes,' complete Schedule F, Part II 15 Х 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, Part III Х 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

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

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H...

lines 1c and 8a? If 'Yes,' complete Schedule G, Part II

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Schedule J.

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Yes

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24a

24b

24c 24d

25a

25b

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27

21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II
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
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? If 'Yes,' complete

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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

- 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?
- d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?
- 25 a 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
  - 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
- 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II
- 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III
- Was the organization a party to a business transation 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 IV
  - b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV
  - c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV
- 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M
- 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M
- 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I
- 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II
- 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
- 34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V,
- 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2
- 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
- 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
- 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O

28a Х 28b Х Х 28c 29 Х 30 X Х 31 32 Х Х 33 34 Х 35 Х 36 Х 37 Х 38 Х Form 990 (2009)

			Yes	No
1:	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable			
1	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Х	<u>.</u>
2	a 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			
2	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		х
١	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b		
4	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		х
1	b 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			
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
١	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
•	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c		
6	a 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?	6a		х
1	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6 b		
7	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?	7а		x
1	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		Ĺ
(	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			_
(	e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X_
	g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	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?	8		x
9	Sponsoring organizations maintaining donor advised funds.			
	a Did the organization make any taxable distributions under section 4966?	9a		Х
	b Did the organization make any distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
	a Gross income from other members or shareholders			
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			

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

Sec	tion A. Governing Body and Management								
		1		Yes	No				
1 a	Enter the number of voting members of the governing body	1a 13	]						
ŀ	Enter the number of voting members that are independent	1b 13	.						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation business relationship or a business relationship or a business relationship or a business relationship or a business relationship or a business relationship or a business relationship or a business relationship or a business relationship or a business relationship or a business relationship or a business relationship or a business relationship or a business relation business	itionship with any other	2		х				
3	Did the organization delegate control over management duties customarily performed by or uniof officers, directors or trustees, or key employees to a management company or other person		3		х				
4	Did the organization make any significant changes to its organizational documents		4		X				
	since the prior Form 990 was filed?								
5	Did the organization become aware during the year of a material diversion of the organization's	s assets?	5		X				
6	Does the organization have members or stockholders?		6	Х					
7 a	Does the organization have members, stockholders, or other persons who may elect one or mogoverning body?	ore members of the	7a		x				
t	Are any decisions of the governing body subject to approval by members, stockholders, or other	er persons?	7b	<u> </u>					
8	8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
ā	The governing body?		8a	Х					
t	Each committee with authority to act on behalf of the governing body?		8ь	Х					
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannorganization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	ot be reached at the	9		х_				
Sec	tion B. Policies (This Section B requests information about policies not i	required by the Interna	1						
Reve	nue Code )		·						
			10	Yes	No_				
	Does the organization have local chapters, branches, or affiliates?		10a	—	<u>X</u>				
	olf 'Yes,' does the organization have written policies and procedures governing the activities of and branches to ensure their operations are consistent with those of the organization?		10b						
	Has the organization provided a copy of this Form 990 to all members of its governing body be	fore filing the form?	11		<u>X</u>				
	Describe in Schedule O the process, if any, used by the organization to review this Form 990		12a		X				
	Does the organization have a written conflict of interest policy? If 'No,' go to line 13 Are officers, directors or trustees, and key employees required to disclose annually interests the	nat could give rise	120						
	to conflicts?		12b						
•	Does the organization regularly and consistently monitor and enforce compliance with the polic Schedule O how this is done	cy? If Yes, describe in	12c	_					
	Does the organization have a written whistleblower policy?		13		<u>X</u>				
14	Does the organization have a written document retention and destruction policy?		14		<u>X</u>				
15	Did the process for determining compensation of the following persons include a review and appersons, comparability data, and contemporaneous substantiation of the deliberation and decisions.	oproval by independent sion?		_	-				
	The organization's CEO, Executive Director, or top management official		15a		<u>X</u>				
t	Other officers of key employees of the organization		15 b		<u>X</u>				
	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 a entity during the year?		16 a		Х				
ł	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the status with respect to such arrangements?	o evaluate its participation he organization's exempt	16b		_				
Sec	tion C. Disclosures								
17	List the states with which a copy of this Form 990 is required to be filed								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and inspection. Indicate how you make these available. Check all that apply.	d 990-T (501(c)(3)s only) ava	ailable	for pu	blic				
	Own website Another's website X Upon request								
	Describe in Schedule O whether (and if so, how) the organization makes its governing docume statements available to the public				ıal				
	State the name, physical address, and telephone number of the person who possesses the box-Agwukwu Ofodu 47 BERGEN AVENUE JERSEY CITY N				3173				
		<del>-</del> ·		_					

Form 990 (2009)

## Part-VII 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 organizations's tax year. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of 'key employees.'
- 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, and 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

X Check this box if the organization did not compensate any current officer, director, or trustee (E) (F) (B) (D) (A) (c) Average hours per week Position (check all that apply) Reportable compensation from the organization (W-2/1099-MISC) Estimated amount of other Reportable Name and Title compensation from related organizations (W-2/1099-MISC) ישואוקו anstitutional taistee ved emblyke High est coinnainsated compensation from the 重 2 organization and related X OF organizations N/A N/A

TEEA0107 11/10/09

5	Did any person listed on line 1a receive or accrue compensation from any unrel rendered to the organization? If 'Yes,' complete Schedule J for such person	lated organization for services	5	х							
Sect	ion B. Independent Contractors										
1	1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization										
	(A) Name and business address	(B) Description of Services	(C) Compens	, sation							
	<del></del>										
2	Total number of independent contractors (including but not limited to those liste \$100,000 in compensation from the organization ►	d above) who received more than									
RΔΔ		TEFA0108 01/30/1/	n Form 9	90 (2009							

ra	rt viii   Stater	nent of Re	evenue						
					-	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
NTS TS	1a Federated of			1 a			revende		312, 313, 01 314
S.R.A.	<b>b</b> Membershir			1 b	80,400.				
TS, C	c Fundraising			1 c					
F	<b>d</b> Related org			1 d	<del></del>	-			
SIM.	e Government gr	ants (contributi	ons)	1 e		-			
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contr sımılar amoun	ibutions, gifts, q	grants, and	1 1 1					
TRIE	g Noncash contri			\$		-			
N N	h Total. Add I		1 1113 14-11	٧-	-	80,400.			}
-	TOTAL FROM	100 10 11			Business Code	30,1001			
ÆN	2a			Ī		1			
 E	_			- 1					
VICE	c			[					
SER	d	. <b></b>					****		
AM	e				<u> </u>				
OGR	f All other pro	ogram servic	ce revenu	e L					
	g Total. Add	lines 2a-2f			<u></u>				
	3 Investment	income (inc	ludıng dıv	idends	, interest and				
i	other simila	· ·	t of toy o	vomet l	nand proposeds				
i	<ul><li>4 Income fror</li><li>5 Royalties</li></ul>	n mvestmen	it Of tax-e.	кеттрст	bond proceeds				
	3 Royallies		(ı) F	eal	(ii) Personal				
	6a Gross Rent	s	(4)		(7)	-			
	<b>b</b> Less rental					-			
	c Rental income	•			<del></del>	•			
	d Net rental II		oss)		<b>•</b>				]
	7a Gross amount	•	(ı) Sec	urities	(ii) Other				
	assets other th								
	<b>b</b> Less, cost or o	•							
	and sales expe								
	c Gain or (los	ss)					<u>-</u>		-
	<b>d</b> Net gain or	(loss)			-				
Ä	8a Gross incor (not includi		draising e	vents					
YEN.		ions reporte	d on line	1c)					]
ž	See Part IV	/, line 18		;	a	_	1		
OTHER REVENU	<b>b</b> Less direct	l expenses		1	b	-			
0	c Net income	or (loss) fro	om fundra	ısıng e	vents •				
	9a Gross incor See Part IV	me from gan /, line 19	ning activ	ities	a				
	<b>b</b> Less direct	t expenses			b				
	c Net income	or (loss) fro	om gamın	g activi	ties				
	10a Gross sales	s of inventor	v. less re	urns					}
	and allowar	nces	,,		a	_[			
	<b>b</b> Less: cost of	-		1	b	_			
	c Net income			of inver		·[			
		ellaneous Rever			Business Code	-		}	
	11a					<del> </del>			<del> </del>
	b			}		<del> </del>			
	C			}		130,950.	130,950.	0.	0.
	d All other re		 d	L			130,930.	0.	1
	e Total. Add 12 Total reven				•	211,350.	130,950.	0.	0.
	i La i otali teveli	はらい しんた ロロー	11 46110113		-	1 211,000.	1 100,000.		<u></u>

Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).										
amounts reported on lines	(A) Total expenses	(B) Program service	(C) Management and	F						

Do l	not include amounts reported on lines 7b, 8b, 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 U.S. See Part IV, line 21			,	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				,
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			·	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
ā	Management				
t	Legal				
(	: Accounting				
c	Lobbying				
e	Prof fundraising svcs See Part IV, In 17				
f	Investment management fees				
ç	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology	<del>-</del>			
15	Royalties		<del></del>		
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	109,451.	0.	109,451.	0.
20	Interest		' :		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23 24	Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
á	BEREAVEMENT BENEFITS	25,500.	25,500.	0.	0.
	BANK CHARGES	240.	0.	240.	0.
	ENTERTAINMENT	3,130.	0.	3,130.	0.
	PRINTING & PUBLICATIONS	8,930.	0.	8,930.	0.
	FILING FEES	40.	0.	40.	0.
	All other expenses .	7,486.	0.	7,486.	0.
25		154,777.	25,500.	129,277.	0.
26	Joint costs. Check here  if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA			<del></del>		Form 990 (2009)

				(A) Beginning of year		(B) End of year		
<u> </u>	1	Cash – non-interest-bearing		3,999.	1	25,522.		
		Savings and temporary cash investments	•	, , , , , , , , , , , , , , , , , , , ,	2	· · · · · · · · · · · · · · · · · · ·		
-   :		Pledges and grants receivable, net			3			
.   .		Accounts receivable, net		125,909.	4	160,959		
!	5	Receivables from current and former officers, directors and highest compensated employees. Complete Part I	s, trustees, key employees, I of Schedule L		5			
-   -	6	Receivables from other disqualified persons (as define	d under section 4958(f)(1))					
		and persons described in section 4958(c)(3)(B) Comp	olete Part II of Schedule L		6			
<u>}</u>   .	7	Notes and loans receivable, net			7			
A S	8	Inventories for sale or use			8			
[ ]	9	Prepaid expenses and deferred charges			9			
10	0 a	Land, buildings, and equipment, cost or other basis						
-		Complete Part VI of Schedule D		]				
	b	Less accumulated depreciation	10b		10 c			
1	1	Investments – publicly-traded securities			11			
1:	2	Investments – other securities See Part IV, line 11			12			
1		Investments - program-related See Part IV, line 11			13			
1.		Intangible assets			14			
1		Other assets See Part IV, line 11			15			
1	6	Total assets Add lines 1 through 15 (must equal line	34)	129,908.	16	186,481		
1	7	Accounts payable and accrued expenses		30,284.	17	32,744		
1:	8	Grants payable		18				
1	9	Deferred revenue		19				
. 2	0	Tax-exempt bond liabilities			20			
2	:1	Escrow or custodial account liability Complete Part I	V of Schedule D		21			
2	2	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per	stees, key employees, sons Complete Part II	_				
<u> </u>		of Schedule L			22			
2	23	Secured mortgages and notes payable to unrelated th	ird parties		23	<u> </u>		
2	4	Unsecured notes and loans payable to unrelated third	parties		24			
2	25	Other liabilities Complete Part X of Schedule D			25			
2	26	Total liabilities. Add lines 17 through 25		30,284.	26	32,744		
N E		Organizations that follow SFAS 117, check here ►	X and complete lines					
Ť		27 through 29 and lines 33 and 34.						
	27	Unrestricted net assets .		99,624.	27	153,737		
2	28	Temporarily restricted net assets			28			
	29	Permanently restricted net assets			29			
R		Organizations that do not follow SFAS 117, check he	re ►					
5 3		lines 30 through 34.						
3 3	30	Capital stock or trust principal, or current funds			30			
₹   3	31	Paid-in or capital surplus, or land, building, and equip	ment fund		31			
3	32	Retained earnings, endowment, accumulated income,	or other funds		32			
3 3 3 3	33	Total net assets or fund balances		99,624.	33	153,737		
รี   3	34	Total liabilities and net assets/fund balances		129,908.	34	186,481		

BAA

Form 990 (2009)

orm	<b>990</b> (200	9) PEOPLES CLUB INTERNATIONAL - PRINCETON BRANCH INC	22-3596466		age 12
Par	XI F	inancial Statements and Reporting			
	•			Yes	No
1	Accounti	ng method used to prepare the Form 990 🔲 Cash 🛛 X Accrual 🔲 Other			
	If the org	anization changed its method of accounting from a prior year or checked 'Other,' explain ule O.			
2 a	Were the	organization's financial statements compiled or reviewed by an independent accountant?	2a	X	
b	Were the	organization's financial statements audited by an independent accountant?	2 b	X	
С	If 'Yes' to review, o	line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh r compilation of its financial statements and selection of an independent accountant?	it of the audit,		х
	If the org	anization changed either its oversight process or selection process during the tax year, explainule O			
d		line 2a or 2b, check a box below to indicate whether the financial statements for the year were sted basis, or both	issued on a		
	X Se	parate basis Consolidated basis Both consolidated and separate basis			ļ
3 a		ult of a federal award, was the organization required to undergo an audit or audits as set forth in and OMB Circular A-133?	the Single		х
b	If 'Yes,' or audits	lid the organization undergo the required audit or audits? If the organization did not undergo the explain why in Schedule O and describe any steps taken to undergo such audits	required audit		

BAA

Form **990** (2009)

# SCHEDULE A (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name o	f the organization							Employer	· identificat	tion number		
PEO	PLES CLUB INTE	RNATIONAL - PI	RINCETON BRANCH	INC				22-35	96466	5		
Part	I Reason for Pu	blic Charity Statu	s (All organizations	must d	comple	te this	part.)	See II	nstruct	ions		
The o	rganization is not a priv	ate foundation becaus	se it is (For lines 1 throu	gh 11, cl	neck onl	y one bo	) x					
1	A church, convention	on of churches or asso	ociation of churches descr	ribed in s	section '	170(b)(1	)(A)(i).					
2	A school described	in section 170(b)(1)(A	XXII). (Attach Schedule E	)								
3	A hospital or coope	rative hospital service	organization described i	n sectio	n 170(b)	<b>(1)(A)(</b> iii	).					
4	A medical research	organization operated	d in conjunction with a ho	spital de	scribed	ın secti	on 170(	<b>ЬХ1ХАХ</b>	iii) Ente	er the hospi	tal's	
•	name, city, and sta	-	,	- p			•	-7(-7(-7)	,			
5		erated for the benefit of	of a college or university	owned o	r operat	ed by a	governr	nental u	nıt descr	ibed in sec	tion	
6	A federal, state, or	local government or g	overnmental unit describ	ed in <b>se</b>	ction 17	0(b)(1)( <i>A</i>	۱)(v).					
7	in section 170(b)(1)(A)(vi). (Complete Part II )											
8			<b>70(b)(1)(A)(vi).</b> (Complete		•							
9	An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % 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	An organization org	anized and operated	exclusively to test for pub	olic safet	y See <b>s</b>	ection 5	i09(a)(4	).				
11	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h											
	a ☐ Type I b ☐ Type II c ☐ Type III — Functionally integrated d ☐ Type III— Other											
е	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)											
f		received a written dete	ermination from the IRS t	hat is a	Туре І, Т	ype II o	r Type i	II suppo	rtıng org	anızatıon,		
g	Since August 17, 20	006, has the organizat	tion accepted any gift or	contribu	tion from	n any of	the foll	owing pe	ersons?			
											Yes	No
	<ul><li>(i) a person who below, the go</li></ul>	directly or indirectly overning body of the su	controls, either alone or to ipported organization?	ogether v	with pers	ons des	cribed i	ın (ıı) an	d (III)	11 g (i)		
	(ii) a family mem	ber of a person desc	ribed in (i) above?							11 g (ii)		<u> </u>
	(iii) a 35% control	lled entity of a person	described in (i) or (ii) ab	ove?						11 g (iii)		<u> </u>
h	Provide the following	ig information about th	ne supported organization	ns								
	(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organizat	is the non in col if in your irning ment?	the organ	(i) of	organizati	zed in the	(vii) Amour	nt of Sup	oport
				Yes	No	Yes	No	Yes	No			
					<u></u>			<u> </u>				
	······································											
Total												

	t II Support Schedule for						
ı aı	(Complete only if you checke				(од ідадіў) ап	и тиступуну	VI)
Sec	tion A. Public Support	or the period that	<u>0,7,0,0,0,1,0,0</u>	· /			
Cale	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')						
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public 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)						
	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support				T	<del></del>	
Cale begi	ndar year (or fiscal year nning 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 form 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 activi	ities, etc (see ins	tructions)			12	
	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, o	r fifth tax year as a	a section 501(c)(3)	▶ [
	tion C. Computation of Pu						
	Public support percentage for 200 Public support percentage from 2		-	e II, column (t)		14 15	<u>%</u> 
16	a 33-1/3 support test — 2009. If the and stop here. The organization	e organization did qualifies as a pub	not check the box	on line 13, and ganization	the line 14 is 33-1	/3 % or more, chec	ck this box
l	33-1/3 support test – 2008. If the and stop here. The organization	e organization did qualifies as a pub	not check a box o	on line 13, or 16a, ganization	and line 15 is 33-	1/3% or more, che	ck this box
17 a	a 10%-facts-and-circumstances te or more, and if the organization in the organization meets the 'facts	neets the 'facts-a	nd-circumstances	' test, check this t	oox and stop here.	. Explain in Part IV	0% how . ► []
ı	o 10%-facts-and-circumstances te or more, and if the organization r organization meets the 'facts-and	neets the 'facts-a	nd-circumstances	' test, check this t	oox and stop here.	. Explain in Part IV	5 is 10% how the ►
18	Private foundation. If the organiz	ation did not che	ck a box on line, 1	3, 16a, 16b, 17a,	or 17b, check this	box and see instr	uctions ►

S	Complete only if you check tion A. Public Support	ked the box on lin	e 9 of Part I)			<del></del>	
		(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
	ndar year (or fiscal yr beginning in) Cifts, grants, contributions and membership fees received (Do not include 'unusual grants')	(a) 2005	(b) 2000	(c) 2007	(d) 2008	(e) 2009	(i) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
	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						<u> </u>
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
C	: Add lines 7a and 7b				, ,	,	
8	Public support (Subtract line		3			,	
_	7c from line 6)	٤, ١		*	<u>l`</u>	<u> </u>	
	tion B. Total Support	4 > 0005	420000	(2) 2007	(4) 2009	(e) 2009	(f) Total
	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(i) Total
_	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b  Net income from unrelated business activities not included inline 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)						
13	Total support. (add Ins 9, 10c, 11, and 12)						
	First five years. If the Form 990 organization, check this box and	stop nere		nd, third, fourth, c	or fifth tax year as	a section 501(c)(3)	<u>► X</u>
	tion C. Computation of Pul			. 12 (6)		15	9/.
	Public support percentage for 200			ie 13, column (f))		15	<u> </u>
16	Public support percentage from 2 tion D. Computation of Inv	octment Inco	ne Percentag			1 10 1	
					mn (fl)	17	<del>%</del>
17 18						18	%
19	a 33-1/3 support tests - 2009. If the	ne organization die ox and <b>stop here.</b>	d not check the b The organization	ox on line 14, an qualifies as a pu	ibiiciy supported or	han 33-1/3%, and li ganization	ne 17 is not ►
1	b 33-1/3 support tests — 2008. If the is not more than 33-1/3%, check Private foundation. If the organize	this box and stop	here. The organ	ization qualifies a	is a publicly suppo	neu organization	and line 18

Part IV	Suppleme	ntal Infor	mation. C	omplete	INTERNAT	O Drovide	the explan	ations requ	22-359646 ured by Part	II, line 10; instructions.
	Part II, line	17a or 1	7b; and f	Part III, III	ne 12. Pro	ovide any	other addit	ional inform	nation. See	nstructions.
	- <b></b>					<b></b> _			<b></b>	
	<b></b> -		- <b></b>							
	·									
	. <b>-</b>						- <b></b>	- <b></b>		
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TEEA0404 02/05/10

Schedule A (Form 990 or 990-EZ) 2009

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public Inspection

Name of the organization			Employer identification	n number
PEOPLES CLUB INTERNATIONAL - PR	TNCETON DDANCU INC		22-3596466	
Part I Organizations Maintaining Dono	r Advised Funds or Other Similar Fundation	ds or Acco		=
the organization answered 'Yes'	o Form 990, Part IV, line 6.			
	(a) Donor advised funds	(b) F	unds and other acc	counts
1 Total number at end of year				
2 Aggregate contributions to (during year)				
3 Aggregate grants from (during year)				
4 Aggregate value at end of year				
5 Did the organization inform all donors and don funds are the organization's property, subject	or advisors in writing that the assets held in done to the organization's exclusive legal control?	or advised	Yes	☐ No
6 Did the organization inform all grantees, donor used only for charitable purposes and not for t purpose conferring impermissible private bene	rs, and donor advisors in writing that grant funds the benefit of the donor or donor advisor or for an fit??	may be ly other	Yes	☐ No
Part II   Conservation Easements Compl	ete if the organization answered 'Yes' t	o Form 99	0, Part IV, line	7.
1 Purpose(s) of conservation easements held by	the organization (check all that apply)			
Preservation of land for public use (e g , re			Illy important land a	area
Protection of natural habitat	Preservation o	f certified his	toric structure	
Preservation of open space				
2 Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation contribution in th	e form of a c	onservation easem	ent on the
			Held at the End o	f the Year
a Total number of conservation easements		2a		
<b>b</b> Total acreage restricted by conservation easer	nents	2 b		
c Number of conservation easements on a certif	red historic structure included in (a)	2c		
d Number of conservation easements included in	n (c) acquired after 8/17/06	2d	<del></del>	
	transferred, released, extinguished, or terminated	by the orga	nization during the	tax
year ►	nservation easement is located >			
	garding the periodic monitoring, inspection, hand	~ ling of violati	ons —	
and enforcement of the conservation easemen	t it holds?		Yes	☐ No
6 Staff and volunteer hours devoted to monitorin during the year ►	g, inspecting, and enforcing conservation easem	ents		
7 Amount of expenses incurred in monitoring, in during the year ►	specting, and enforcing conservation easements	\$		
8 Does each conservation easement reported or 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of section	on	Yes	☐ No
9 In Part XIV, describe how the organization rep include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its revenue and on the organization's financial statements that des	expense state scribes the or	ement, and balance ganization's accour	e sheet, and nting for
Part III Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	Other Sin 8.	nilar Assets	
1 a If the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial stateme	ic exhibition, education, or research in furtherand	t and balance ce of public s	e sheet works of ar ervice, provide, in I	t, historical Part XIV,
b If the organization elected, as permitted under treasures, or other similar assets held for publ amounts relating to these items	SFAS 116, to report in its revenue statement and ic exhibition, education, or research in furtherand	d balance sh ce of public s	eet works of art, hi ervice, provide the	storical following
(i) Revenues included in Form 990, Part VIII,	line 1		<b>►</b> \$	
(ii) Assets included in Form 990, Part X			<b>&gt;</b> \$	
2 If the organization received or held works of a amounts required to be reported under SFAS	rt, historical treasures, or other similar assets for 116 relating to these items:	financial gai	n, provide the follo	wing
a Revenues included in Form 990, Part VIII, line	1		. <b>&gt;</b> \$	
<b>b</b> Assets included in Form 990, Part X			<b>-</b> \$	

Schedule <b>b</b> (Form 990) 2009 PEOPL									
Part III   Organizations Mainta	ining Collection	ons of Art, Histo	orical Treasures, o	r Other Similar Ass	ets (continued)				
3 Using the organization's acquisition items (check all that apply)	on accession and	other records, chec	k any of the following th	nat are a significant use	of its collection				
a Public exhibition		<b>d</b> Loan	or exchange programs						
<b>b</b> Scholarly research	Scholarly research e Other								
	Preservation for future generations								
Part XIV	· •···								
	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No								
Part IV Escrow and Custodia 9, or reported an amo	I Arrangemen unt on Form 9	<b>ts</b> Complete if o 90, Part X, line	organization answe 21.	red 'Yes' to Form 9	90, Part IV, line				
1 a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or	other intermediary f	for contributions or othe	r assets not	Yes No				
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and co	omplete the followin	g table						
					Amount				
c Beginning balance				1c					
d Additions during the year				1 d					
e Distributions during the year				1 e					
f Ending balance				1f	<del></del>				
2a Did the organization include an a		0, Part X, line 21?			∐ Yes ∐ No				
b If 'Yes,' explain the arrangement			107 11 5 0	00 0 10/1 10					
Part V Endowment Funds Co									
	(a) Current year	(b) Prior yea	r (c) Two years bac	k (d) Three years back	(e) Four years back				
1 a Beginning of year balance									
<b>b</b> Contributions									
c Net Investment earnings, gains, and losses									
d Grants or scholarships									
<ul> <li>Other expenditures for facilities and programs</li> </ul>									
f Administrative expenses	<u> </u>								
g End of year balance			<u></u>						
2 Provide the estimated percentage	of the year end t	alance held as							
a Board designated or quasi-endow	ment 🟲	<b>8</b>							
<b>b</b> Permanent endowment ►									
c Term endowment ►	8								
3a Are there endowment funds not in organization by	the possession (	of the organization t	hat are held and admın	stered for the	Yes No				
(i) unrelated organizations					3a(i)				
(ii) related organizations					3a(ii)				
b If 'Yes' to 3a(ii), are the related o	rganizations listed	I as required on Sch	nedule R?		3b				
4 Describe in Part XIV the intended	uses of the organ	nization's endowmer	nt funds						
Part VI Investments-Land, B	uildings, and	Equipment. See	e Form 990, Part X	l, line 10.					
Description of investment		Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value				
1 a Land									
<b>b</b> Buildings									
c Leasehold improvements									
<b>d</b> Equipment									
e Other									
Total. Add lines 1a through 1e (Column	n (d) must equal F	orm 990, Part X, co	olumn (B), line 10(c))	<b>•</b>					
BAA				Sche	dule <b>D</b> (Form 990) 2009				

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Schedule <b>D</b> (Form 990) 2009 PEOPLES CLUB INTER			age 3
Part VII Investments-Other Securities See			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Financial derivatives			
Closely-held equity interests			
Other		<del>_</del>	
	-		
	-		
	· <del>-</del>		
Total (Column (b) must equal Form 990 Part X, col (B) line 12)			
Part VIII Investments-Program Related (Se			
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
		Cost or end-or-year market value	
	<del>                                     </del>	····	
	-		
		<del></del>	
T. 1. (0.1. (1.). 1.5. (0.0. D. 1.V. 0.1. (7.) b 12.)			
Total. (Column (b) must equal Form 990, Part X, Col (B) line 13)  Part IX Other Assets (See Form 990, Part I.	V (mo 15)		
<u> </u>		(b) Book value	
(a)	Description	(b) Book Value	<u>e</u>
		<u> </u>	
Total. (Column (b) must equal Form 990, Part X, col (B)		<b>&gt;</b>	
Part X Other Liabilities (See Form 990, Pa			
(a) Description of Liability	(b) Amount		
Federal Income Taxes			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)			
2. FIN 48 Footnote In Part XIV, provide the text of the fo	otnote to the organization's fina	ncial statements that reports the organization's liabili	ıty
for uncertain tax positions under FIN 48			-

BAA	TEEA3304 02/02/10		Schedule <b>D</b> (	Form 990) 2009
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		<del></del>	<del></del>	
	mation.	. ,	-	
line -	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Par 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d ar	id 4b. Also complete this p	art to provide any	additional
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Par	III lines 1a and 4 Part II	/ lines 1h and 2h	Part V
	TXIV Supplemental Information			
	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18)		5	
	: Add lines 4a and 4b		4c	
	Other (Describe in Part XIV)	4b		
	Investments expenses not included on Form 990, Part VIII, line 7b	4a		
	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Subtract line 2e from line 1		3	
	Add lines 2a through 2d		2 e	
	Other (Describe in Part XIV)	2 d		
	Other losses	2c		
	Prior year adjustments	2b		
	Donated services and use of facilities	2 a		
	Amounts included on line 1 but not on Form 990, Part IX, line 25			
	Total expenses and losses per audited financial statements		1	
	TXIII Reconciliation of Expenses per Audited Financial Stateme	nts With Expenses p	er Return	
-	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	***
	Add lines 4a and 4b	<del>' '</del>	4c	
	Other (Describe in Part XIV)	4b		
	Investments expenses not included on Form 990, Part VIII, line 7b	4a		
-	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
	Subtract line 2e from line 1		3	
	Add lines 2a through 2d	······	2e	
	Other (Describe in Part XIV)	2 d		
	: Recoveries of prior year grants	2c		
	Donated services and use of facilities	2b		
	Net unrealized gains on investments	2a	[	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
	Total revenue, gains, and other support per audited financial statements		1	
	t XII Reconciliation of Revenue per Audited Financial Statemen		Return	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a	and 9	-	56,573.
9	Total adjustments (net) Add lines 4 through 8			
7 8	Prior period adjustments Other (Describe in Part XIV)			· · · · · · · · · · · · · · · · · · ·
6	Investment expenses			
5	Donated services and use of facilities			<del></del>
4	Net unrealized gains (losses) on investments			
3	Excess or (deficit) for the year Subtract line 2 from line 1			56,573.
2	Total expenses (Form 990, Part IX, column (A), line 25)			154,777.
1	Total revenue (Form 990, Part VIII,column (A), line 12)			211,350.
Par	t XI Reconciliation of Change in Net Assets from Form 990 to F	inancial Statements		
20116	dule <b>D</b> (Form 990) 2009 PEOPLES CLUB INTERNATIONAL - PRINCETON BI	RANCH INC	<u> 22-3596466</u>	Page 4

Schedule D	(Form 990) 2009	PEOPLES CLUB INTER	RNATIONAL -	PRINCETON BRAN	NCH INC	22-3596466	Page 5
Part XIV	Supplementa	Information (contin	ued)		_		
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#### **SCHEDULE O** (Form 990)

### **Supplemental Information to Form 990**

OMB No 1545-0047

2009

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

► Attach to Form 990. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number PEOPLES CLUB INTERNATIONAL - PRINCETON BRANCH INC 22-3596466 Pt III, Line 2 N/A Pt III, Line 3 N/A Pt V, Line 3b N/A Pt VI-A, Line 2 N/A Pt VI-A, Line 3 N/A Pt VI-A, Line 4 N/A Pt VI-A, Line 5 N/A Pt VI-A, Line 6 These are dues-paying members who joined the organization on thier own free will. Pt VI-A, Line 7a N/A Pt VI-A, Line 7b Some decisions require the approval of the members Pt VI-A, Line 8a The General Secretary records the minutes of the meetings Pt VI-A, Line 8b A member is usually appointed to take minutes of committee meetings \_\_ Pt VI-B, Line 10b N/A Pt VI-B, Line 11A The financial records are reviewed by the President, Finl Secr & Treasurer Pt VI-B, Line 12c N/A Pt VI-C, Line 19 Financial Secretary makes the records available at any time requested.