

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2008 calendar year, or tax year beginning 7/1/2008, and ending 6/30/2009

- 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
CALIFORNIA CHAPTER I.A.W.P.

Number and street (or P O box, if mail is not delivered to street address) Room/suite
12550 CALLE TAMEGA #125

City, town, or country State ZIP + 4
SAN DIEGO CA 92128

D Employer identification number
94-1567931

E Telephone number

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 Organization type (check only one)— 501(c) (6) ◀ (insert no) 4947(a)(1) or 527

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

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 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 \$1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 211,550

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

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Revenue	1	Contributions, gifts, grants, and similar amounts received																								0		
	2	Program service revenue including government fees and contracts																								2,513		
	3	Membership dues and assessments																								199,934		
	4	Investment income																								881		
	5a	Gross amount from sale of assets other than inventory																								0		
	b	Less: cost or other basis and sales expenses																								0		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)																								0		
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>																										
	a	Gross revenue (not including \$ <u>0</u> of contributions reported on line 1)																								415		
b	Less: direct expenses other than fundraising expenses																								0			
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)																								415			
7a	Gross sales of inventory, less returns and allowances																											
b	Less: cost of goods sold																											
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)																								0			
8	Other revenue (describe ▶ <u>See attached statement</u>)																								7,807			
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8																								211,550			
Expenses	10	Grants and similar amounts paid (attach schedule)																								0		
	11	Benefits paid to or for members																										
	12	Salaries, other compensation, and employee benefits																								15,846		
	13	Professional fees and other payments to independent contractors																								6,900		
	14	Occupancy, rent, utilities, and maintenance																										
	15	Printing, publications, postage, and shipping																								11,362		
	16	Other expenses (describe ▶ <u>See attached statement</u>)																								177,724		
	17	Total expenses. Add lines 10 through 16																								211,832		
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)																								-282		
	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)																								120,781		
	20	Other changes in net assets or fund balances (attach explanation)																								13,506		
	21	Net assets or fund balances at end of year. Combine lines 18 through 20																								134,005		

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	120,781	134,005
23	Land and buildings		
24	Other assets (describe ▶ _____)	0	0
25	Total assets	120,781	134,005
26	Total liabilities (describe ▶ _____)	0	0
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	120,781	134,005

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

		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.	33		X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		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 your reason for not reporting the income on Form 990-T			
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36		X
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a _____ 0			
b Did the organization file Form 1120-POL for this year?	37b		X
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b _____ 0		
39 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on line 9	39a _____ 0		
b Gross receipts, included on line 9, for public use of club facilities	39b _____ 0		
40 a 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 (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40b		
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____			
d 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.	40e		
41 List the states with which a copy of this return is filed. ▶ <u>CA</u>			
42 a The books are in care of ▶ Name <u>PHIL DWYER</u> Telephone no. ▶ _____			
Located at ▶ <u>12550 CALLE TAMEGA</u> City <u>SAN DIEGO</u> ST <u>CA</u> ZIP + 4 ▶ <u>92128</u>			
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)?	42b		X
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.			
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		X
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 ▶ <input type="checkbox"/>			
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 <u>N/A</u>			
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		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	45		X

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

- 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.

	Yes	No
46		
 - 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II.

	Yes	No
47		
 - 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.

	Yes	No
48		
 - 49 a Did the organization make any transfers to an exempt non-charitable related organization?

	Yes	No
49a		
 - b If "Yes," was the related organization(s) a section 527 organization?

	Yes	No
49b		
- 50 Complete this table for the 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
Name None City ST ZIP	Title Hr/WK	.00	0	0
Name City ST ZIP	Title Hr/WK	.00	0	0
Name City ST ZIP	Title Hr/WK	.00	0	0
Name City ST ZIP	Title Hr/WK	.00	0	0
Name City ST ZIP	Title Hr/WK	.00	0	0
Total number of other employees paid over \$100,000 ▶		0	0	0

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

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
Name None City ST ZIP		0
Name City ST ZIP		0
Name City ST ZIP		0
Name City ST ZIP		0
Name City ST ZIP		0
Total number of other independent contractors each receiving over \$100,000 ▶		0

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

Signature of officer: Mary Navarro Aldana Date: 11/28/2009

Type or print name and title: MARY NAVARRO-ALDANA, 2nd Vice-President

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: 11/28/2009 Check if self-employed: Preparer's Identifying Number (See instructions): P00627606

Firm's name (or yours if self-employed), address, and ZIP +4: RJ WOODFORD EA EIN: 95-4741862
P O BOX 923293, SYLMAR, CA 91392 Phone no: 818 427-1127

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

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

1	Interest on savings and temporary cash investments	1	881
2	Dividends and interest from securities	2	
3	Gross rents	3	
4	Other investment income	4	
5	Total	5	881

Part I, Line 8 (990-EZ) - Other Revenue

7,807

Description		Amount
1	INTERNATIONAL DELEGATES	4,274
2	RESTITUTION	2,300
3	BOARD LUNCHES	1,233
4		
5		
6		
7		
8		
9		
10		

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

177,724

1	Travel, Meals and Entertainment		
	a Travel	1a	
	b Total meals and entertainment	1b	
2	Fundraising	2	
3	From Form 4562 - Amortization	3	
4	Conferences, conventions, and meetings	4	
5	Depreciation, depletion, etc.	5	
6	Equipment rental and maintenance	6	
7	Interest	7	
8	Supplies	8	1,113
9	Telephone	9	
10	Unrelated business income taxes	10	0
11	PAYROLL EXPENSES	11	3,850
12	CONTROLLER FEES	12	6,308
13	INTERNATIONAL MEMBERSHIP DUES	13	95,445
14	SUB CHAPTER DUES	14	20,835
15	ADMIN EXP	15	3,940
16	SPEAKER FUND	16	4,000
17	INTERNAT DELEGATE FUND EXP	17	14,284
18	FUNDRAISING EXP	18	988
19	PRES INTERNAT FUND	19	1,319
20	BYBEE 2%	20	1,499
21	EXEC BOARD MEETINGS EXP	21	18,984
22	OTHER MEETINGS EXP	22	2,050
23	LOCAL CHAPTER TRAINING	23	123
24	BANK CHARGES	24	113
25	AWARDS EXP	25	2,873
26		26	