Form **990**

Department of the Treasury
Internal Revenue Service

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)

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

OMB No. 1545-0047

2007

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning 7/01/07, and ending 6/30/08

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: THE ATLANTA WOMEN'S FOUNDATION, INC

Number and street (or P.O. box if mail is not delivered to street address): HURT BUILDING, 50 HURT PLAZA — Room/suite: 401

City or town, state or country, and ZIP + 4: ATLANTA GA 30303

D Employer identification number: 58-2389721

E Telephone number: 404-577-5000

F Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) u

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

H and **I** are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter number of affiliates u

H(c) Are all affiliates included? ☐ Yes ☐ No (If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☐ No

I Group Exemption Number u

M Check u ☐ if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: j WWW.ATLANTAWOMEN.ORG

J **Organization type** (check only one) u ☒ 501(c) (3) t (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check here u ☐ if the organization is not a 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 Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 u 5,231,336

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

Revenue

1	Contributions, gifts, grants, and similar amounts received:				
a	Contributions to donor advised funds	1a			
b	Direct public support (not included on line 1a)	1b	2,964,594		
c	Indirect public support (not included on line 1a)	1c	67,432		
d	Government contributions (grants) (not included on line 1a)	1d			
e	**Total** (add lines 1a through 1d) (cash $ 2,915,988 noncash $ 116,038)			1e	3,032,026
2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	
3	Membership dues and assessments			3	
4	Interest on savings and temporary cash investments			4	
5	Dividends and interest from securities			5	170,683
6a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss). Subtract line 6b from line 6a			6c	
7	Other investment income (describe u)			7	

		(A) Securities		(B) Other		
8a	Gross amount from sales of assets other than inventory	1,783,429	8a	51,107		
b	Less: cost or other basis and sales expenses	1,844,963	8b			
c	Gain or (loss) (attach schedule)	-61,534	8c	51,107		
d	Net gain or (loss). Combine line 8c, columns (A) and (B)	SEE STMT 1		SEE STMT 2	8d	-10,427

9	Special events and activities (attach schedule). If any amount is from **gaming,** check here u ☐				
a	Gross revenue (not including $ 72,545 of contributions reported on line 1b) SEE WORKSHEET	9a	194,091		
b	Less: direct expenses other than fundraising expenses	9b	121,109		
c	Net income or (loss) from special events. Subtract line 9b from line 9a			9c	72,982
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a			10c	
11	Other revenue (from Part VII, line 103)			11	
12	**Total revenue.** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12	3,265,264

Expenses

13	Program services (from line 44, column (B))	13	2,996,666
14	Management and general (from line 44, column (C))	14	358,159
15	Fundraising (from line 44, column (D))	15	587,495
16	Payments to affiliates (attach schedule)	16	
17	**Total expenses.** Add lines 16 and 44, column (A)	17	3,942,320

Net Assets

18	Excess or (deficit) for the year. Subtract line 17 from line 12	18	-677,056
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	6,283,621
20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 3	20	-115,766
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	5,490,799

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

DAA

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash $ non-cash $) If this amount includes foreign grants, check here u ☐	22a				
22b Other grants and allocations (attach schedule) STMT 4 (cash $ 1,240,500 non-cash $) If this amount includes foreign grants, check here u ☐	22b	1,240,500	1,240,500		
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A SEE STATEMENT 5	25a	212,769	79,713	66,528	66,528
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b				
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c				
26 Salaries and wages of employees not included on lines 25a, b, and c	26	399,123	213,995	25,256	159,872
27 Pension plan contributions not included on lines 25a, b, and c	27	15,176	7,285	2,276	5,615
28 Employee benefits not included on lines 25a – 27	28	74,567	35,792	11,185	27,590
29 Payroll taxes	29	45,338	21,762	6,801	16,775
30 Professional fundraising fees	30				
31 Accounting fees	31	29,839		29,839	
32 Legal fees	32				
33 Supplies	33	24,956	11,979	3,743	9,234
34 Telephone	34	37,498	18,919	5,625	12,954
35 Postage and shipping	35	56,955	36,650	1,192	19,113
36 Occupancy	36	90,951	43,656	13,643	33,652
37 Equipment rental and maintenance	37	12,998	6,239	1,950	4,809
38 Printing and publications	38	6,762	3,246	1,014	2,502
39 Travel	39				
40 Conferences, conventions, and meetings	40	130,126	88,319	8,566	33,241
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	16,849	8,088	2,527	6,234
43 Other expenses not covered above (itemize): a SEE STATEMENT 6	43a	1,547,913	1,180,523	178,014	189,376
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g	43g				
44 **Total functional expenses.** Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	3,942,320	2,996,666	358,159	587,495

Joint Costs. Check u [X] if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? u [X] Yes ☐ No

If "Yes," enter **(i)** the aggregate amount of these joint costs$ 95,000 ; **(ii)** the amount allocated to Program services $ 70,300 ;

(iii) the amount allocated to Management and general$; and **(iv)** the amount allocated to Fundraising $ 24,700

Part III **Statement of Program Service Accomplishments** (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? u SEE STATEMENT 7 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	**Program Service Expenses** (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a A FUTURE NOT A PAST PROGRAM HAS A MISSION TO PROTECT AND INSPIRE HOPE IN CHILDREN WHO ARE VICTIMS OF PROSTITUTION AS WELL AS TO ENFORCE PROSECUTION FOR OFFENDERS WHO MAKE THE PROSTITUTION OF CHILDREN A GRUESOME REALITY IN GEORGIA. (Grants and allocations $ 792,355) If this amount includes foreign grants, check here u ☐	1,026,342
b ECONOMIC EMPOWERMENT MAKES GRANTS DESIGNED TO FOSTER SOCIAL CHANGE AS IT RELATES TO ECONOMIC EMPOWERMENT FOR WOMEN WITH CHILDREN HEADING ECONOMICALLY VULNERABLE HOUSEHOLDS AND GIRLS WHO ARE MEMBERS OF THESE HOUSEHOLDS. (Grants and allocations $ 769,830) If this amount includes foreign grants, check here u ☐	997,166
c FAITH AND FEMINISM GRANTS TO ORGANIZATIONS WITH ROOTS IN THE FAITH COMMUNITY WHO SERVICE WOMEN AND GIRLS AND PROMOTE DIALOGUE OF WOMEN ACROSS ETHNICITIES AND FAITHS TO BRIDGE THE DIVIDE BETWEEN ATLANTA'S FAITH-BASED AND FEMINIST COMMUNITIES (Grants and allocations $ 281,037) If this amount includes foreign grants, check here u ☐	364,029
d WOMENS HEALTH SUPPORTS PROGRAMS THAT PROVIDE ACCESS TO PHYSICAL AND MENTAL HEALTH SERVICES TO WOMEN AND GIRLS. (Grants and allocations $ 120,000) If this amount includes foreign grants, check here u ☐	155,437
e Other program services (attach schedule) SEE STMT 8 (Grants and allocations $ 350,258) If this amount includes foreign grants, check here u ☐	453,692
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) u	2,996,666

DAA

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

Section	Line	Description			(A) Beginning of year		(B) End of year
Assets	45	Cash—non-interest-bearing			97,809	45	150,178
	46	Savings and temporary cash investments			734,227	46	1,546,021
	47a	Accounts receivable	47a	1,204			
	b	Less: allowance for doubtful accounts	47b		23,074	47c	1,204
	48a	Pledges receivable	48a	1,814,131			
	b	Less: allowance for doubtful accounts	48b	78,432	1,528,581	48c	1,735,699
	49	Grants receivable				49	
	50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)				50a	
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (att. schedule)				50b	
	51a	Other notes and loans receivable (attach schedule)	51a				
	b	Less: allowance for doubtful accounts	51b			51c	
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges			48,462	53	17,688
	54a	Investments—publicly-traded securities SEE STATEMENT 9	u ☐ Cost ☒ FMV		3,910,086	54a	3,564,295
	b	Investments—other securities (attach schedule)	u ☐ Cost ☐ FMV			54b	
	55a	Investments—land, buildings, and equipment: basis	55a				
	b	Less: accumulated depreciation (attach schedule)	55b			55c	
	56	Investments—other (attach schedule)				56	
	57a	Land, buildings, and equipment: basis	57a	128,744			
	b	Less: accumulated depreciation (attach schedule) SEE STATEMENT 10	57b	108,139	28,613	57c	20,605
	58	Other assets, including program-related investments (describe u)				58	
	59	**Total assets** (must equal line 74). Add lines 45 through 58			6,370,852	59	7,035,690
Liabilities	60	Accounts payable and accrued expenses			31,031	60	63,891
	61	Grants payable			30,000	61	1,476,000
	62	Deferred revenue SEE STATEMENT 11			26,200	62	5,000
	63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a	Tax-exempt bond liabilities (attach schedule)				64a	
	b	Mortgages and other notes payable (attach schedule)				64b	
	65	Other liabilities (describe u)				65	
	66	**Total liabilities.** Add lines 60 through 65			87,231	66	1,544,891
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here u** ☒ and complete lines 67 through 69 and lines 73 and 74.					
	67	Unrestricted			2,917,658	67	2,619,431
	68	Temporarily restricted			903,618	68	476,291
	69	Permanently restricted			2,462,345	69	2,395,077
		Organizations that do not follow SFAS 117, check here u ☐ and complete lines 70 through 74.					
	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds				72	
	73	**Total net assets or fund balances.** Add lines 67 through 69 **or** lines 70 through 72. (Column (A) **must** equal line 19 and column (B) **must** equal line 21)			6,283,621	73	5,490,799
	74	**Total liabilities and net assets/fund balances.** Add lines 66 and 73			6,370,852	74	7,035,690

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements			a	3,111,697
b	Amounts included on line **a** but not on Part I, line 12:				
1	Net unrealized gains on investments	b1	-131,579		
2	Donated services and use of facilities	b2	9,500		
3	Recoveries of prior year grants	b3			
4	Other (specify):	b4			
	Add lines **b1** through **b4**			b	-122,079
c	Subtract line **b** from line **a**			c	3,233,776
d	Amounts included on Part I, line 12, but not on line **a:**				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify): SEE STATEMENT 12	d2	31,488		
	Add lines **d1** and **d2**			d	31,488
e	**Total revenue** (Part I, line 12). Add lines **c** and **d**			e	3,265,264

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements			a	3,904,519
b	Amounts included on line **a** but not Part I, line 17:				
1	Donated services and use of facilities	b1			
2	Prior year adjustments reported on Part I, line 20	b2			
3	Losses reported on Part I, line 20	b3			
4	Other (specify): SEE STATEMENT 13	b4	-6,313		
	Add lines **b1** through **b4**			b	-6,313
c	Subtract line **b** from line **a**			c	3,910,832
d	Amounts included on Part I, line 17, but not on line **a:**				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify): SEE STATEMENT 14	d2	31,488		
	Add lines **d1** and **d2**			d	31,488
e	**Total expenses** (Part I, line 17). Add lines **c** and **d**			e	3,942,320

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(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 plans	**(E)** Expense account and other allowances
SEE STATEMENT 15				

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

			Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings u 22			
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b		X
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization."	75c		X
	If "Yes," attach a statement that includes the information described in the instructions.			
d	Does the organization have a written conflict of interest policy?	75d	X	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
N/A				

Part VI Other Information (See the instructions.)

			Yes	No
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization u .... and check whether it is ☐ exempt **or** ☐ nonexempt			
81a	Enter direct and indirect political expenditures. (See line 81 instructions.) 81a 0			
b	Did the organization file **Form 1120-POL** for this year?	81b		X

Part VI Other Information (continued)

				Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b 9,500			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?		83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	84b		
85a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	N/A	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	N/A	85b		
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.				
c	Dues, assessments, and similar amounts from members	85c			
d	Section 162(e) lobbying and political expenditures	85d			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	85h		
86	501(c)(7) orgs. Enter: **a** Initiation fees and capital contributions included on line 12	86a			
b	Gross receipts, included on line 12, for public use of club facilities	86b			
87	501(c)(12) orgs. Enter: **a** Gross income from members or shareholders	87a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		88a		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI u		88b		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 u 0 ; section 4912 u 0 ; section 4955 u 0				
b	501(c)(3) and 501(c)(4) orgs. 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," attach a statement explaining each transaction		89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 u	0			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization u	0			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		89e		X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		89f		X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		89g		X

90a List the states with which a copy of this return is filed u GA

b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.) 90b 10

91a The books are in care of u LINDA PITTS Telephone no. u 404-577-5000

Located at u THE HURT BUILDING, STE 401 ATLANTA, GA ZIP + 4 u 30303

			Yes	No
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)?	91b		X
	If " Yes," enter the name of the foreign country u			
	See the instructions for exceptions and filing requirements for **Form TD F 90-22.1,** Report of Foreign Bank and Financial Accounts.			

Part VI Other Information (continued)

			Yes	No
c	At any time during the calendar year, did the organization maintain an office outside of the United States?	91c		X
	If "Yes," enter the name of the foreign country u			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of **Form 1041**—Check here u ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶	92		

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	170,683	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			14	51,107	-61,534
101 Net income or (loss) from special events					72,982
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		221,790	11,448
105 **Total** (add line 104, columns (B), (D), and (E)) u					233,238

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No. q	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
101	LUNCHEON ATTENDED BY 1300+ WITH AGENDA TO INCREASE
	AWARENESS FOR DEVELOPING RESOURCES TO IDENTIFY AND
	ADDRESS PROBLEMS AND TO CREATE OPPORTUNITIES FOR WOMEN
	AND GIRLS IN ATLANTA.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to **(b),** file Form 8870 **and** Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

		Yes	No
106	Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.		X

	(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

		Yes	No
107	Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.		X

	(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

		Yes	No
108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?		

Please 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 Date

Type or print name and title

Paid Preparer's Use Only

Preparer's signature LINDA E. BERGGREN	Date 1/27/09	Check if self-employed ☐	Preparer's SSN or PTIN (See Gen. Instr. X) P00146250
Firm's name (or yours if self-employed), address, and ZIP + 4: GIFFORD, HILLEGASS & INGWERSEN, LLP 1200 ASHWOOD PARKWAY, SUITE 300 ATLANTA, GA 30338-4747		EIN 92-0184475	Phone no. 770-396-1100

DAA

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2007

Name of the organization: THE ATLANTA WOMEN'S FOUNDATION, INC

Employer identification number 58-2389721

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to empl. benefit plans & deferred comp.	(e) Expense account and other allowances
MARTHA TALOTT DECATUR 13 OLD DECATUR CIRCLE GA 30030	PROGRAM DIR. 40	76,222	2,942	0
JENNIFER BAIN AVONDALE ESTATES 694 STRATFORD GREEN GA 30002	COMM. ASSOC. 40	59,288	1,975	0
ISHA A. LEE DECATUR 1406 ALVERADO WAY GA 30032	FUNDRAISING 40	53,696	0	0
Total number of other employees paid over $50,000 ▶	0			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
BOARDWALK CONSULTING ATLANTA 127 PEACHTREE STREET GA 30303		92,837
COXE, CURRY AND ASSOCIATES ATLANTA 50 HURT PLAZA GA 30303		71,700
Total number of others receiving over $50,000 for professional services ▶	0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over $50,000 for other services ▶		

Part III **Statements About Activities** (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ ____________ (Must equal amounts on line 38, Part VI-A, or line **i** of Part VI-B.)	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? SEE PART V-A, FORM 990 SEE STATEMENT 16	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) SEE STATEMENT 17	3a	X	
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		X
b	Did the organization make any taxable distributions under section 4966?	4b		
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		

d	Enter the total number of donor advised funds owned at the end of the tax year u	
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year u	
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts u	0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year u	0

DAA

Part IV **Reason for Non-Private Foundation Status** (See pages 4 through 8 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 ☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state ▶**

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

11a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 X 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:

☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents? Yes	No	(e) Amount of support
Total . . . u					

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,112,958	2,005,502	1,837,003	1,342,771	7,298,234
16 Membership fees received					0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	108,270	242,505	398,811	171,720	921,306
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	151,990	115,154	89,139	84,925	441,208
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 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					0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					0
23 Total of lines 15 through 22	2,373,218	2,363,161	2,324,953	1,599,416	8,660,748
24 Line 23 minus line 17	2,264,948	2,120,656	1,926,142	1,427,696	7,739,442
25 Enter 1% of line 23	23,732	23,632	23,250	15,994	

26 **Organizations described on lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ▶ 26a 0

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ▶ 26b

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ 26c

d Add: Amounts from column (e) for lines: 18 ____ 19 ____ 22 ____ 26b ____ ▶ 26d

e Public support (line 26c minus line 26d total) ▶ 26e

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f %

27 **Organizations described on line 12:** a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year:

(2006) 1,993,126 (2005) 710,526 (2004) 2,035,966 (2003) 213,231

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2),** enter the sum of these differences (the excess amounts) for each year:

(2006) 0 (2005) 0 (2004) 0 (2003) 0

c Add: Amounts from column (e) for lines: 15 7,298,234 16 ____ 17 921,306 20 ____ 21 ____ ▶ 27c 8,219,540

d Add: Line 27a total 4,952,849 and line 27b total ____ ▶ 27d 4,952,849

e Public support (line 27c total minus line 27d total) ▶ 27e 3,266,691

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶ 27f 8,660,748

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g 37.7183 %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h 5.0943 %

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Part V Private School Questionnaire (See page 9 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768) N/A

Check ▶ **a** ☐ if the organization belongs to an affiliated group. Check ▶ **b** ☐ if you checked **"a"** and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		**(a)** Affiliated group totals	**(b)** To be completed for **all** electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table-	41		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

If the amount on line 40 is-	**The lobbying nontaxable amount is-**
Not over $500,000	20% of the amount on line 40
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	**(a)** 2007	**(b)** 2006	**(c)** 2005	**(d)** 2004	**(e)** Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.) N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h.)**			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines **c** through **h.)**			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

			Yes	No
a	Transfers from the reporting organization to a noncharitable exempt organization of:			
(i)	Cash	51a(i)		X
(ii)	Other assets	a(ii)		X
b	Other transactions:			
(i)	Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii)	Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii)	Rental of facilities, equipment, or other assets	b(iii)		X
(iv)	Reimbursement arrangements	b(iv)		X
(v)	Loans or loan guarantees	b(v)		X
(vi)	Performance of services or membership or fundraising solicitations	b(vi)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

DAA

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2007

Name of organization	**Employer identification number**
THE ATLANTA WOMEN'S FOUNDATION, INC	58-2389721

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule. (Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule—see instructions.)

General Rule—

[ ] For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules—

[X] For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of $5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than $1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than $1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year.) . . . . . . ▶ $ ______

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Form **4562**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172
2007
Attachment Sequence No. 67

Name(s) shown on return: THE ATLANTA WOMEN'S FOUNDATION, INC
Identifying number: 58-2389721

Business or activity to which this form relates: INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	125,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	500,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6			
7	Listed property. Enter the amount from line 29	7	

8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2006 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	16,844

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2007	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B-Assets Placed in Service During 2007 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C-Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System

(a) Classification of property	(b)	(c)	(d)	(e)	(f)	(g)
20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instr.	22	16,844
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

DAA

THERE ARE NO AMOUNTS FOR PAGE 2

Special Events Schedule

Form **990** | **2007**

For calendar year 2007, or tax year beginning 7/01/07, and ending 6/30/08

Name: THE ATLANTA WOMEN'S FOUNDATION, INC

Employer Identification Number: 58-2389721

	(A)	(B)	(C)	Others	Total
Gross receipts	250,436	16,200	0	0	266,636
Less contributions	72,545	0	0	0	72,545
Gross revenue	177,891	16,200	0	0	194,091
Less direct expenses	116,809	4,300	0	0	121,109
Net income (loss)	61,082	11,900	0	0	72,982

Description:

(A) FALL LUNCHEON

(B) LEGAL COMMUNITY EVENT

(C)

Others

Statement 1 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Securities

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depr	Gain/ -Loss
PUBLICLY TRADED SECURITIES								
					$1,783,429	$1,844,963	$	$ -61,534
TOTAL					$1,783,429	$1,844,963	$ 0	$ -61,534

Statement 2 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Other

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depr	Gain/ -Loss
CAP.GAIN DISTRIBUT.								
					$ 51,107	$	$	$ 51,107
TOTAL					$ 51,107	$ 0	$ 0	$ 51,107

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

Description	Amount
NET UNREALIZED GAINS ON INVESTMENTS	$ -131,579
DONATED SERVICES AND USE OF FACILITIES	9,500
GRANT RECOVERIES NETTED WITH EXPENSES IN FINANCIAL	6,313
TOTAL	$ -115,766

Statement 4 - Form 990, Part II, Line 22b - Other Grants and Allocations

Name / Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Expl	FMV Expl
DEKALB RAPE CRISIS CENTER, INC. 204 CHURCH STREET DECATUR GA 30030					$ 10,000	$	$		
GEORGIA COALITION AGAINST DOMESTIC 114 NEW STREET, SUITE B DECATUR GA 30030					20,000				
GEORGIA NETWORK TO END SEXUAL ASSAU 131 PONCE DE LEON AVE, STE 122 ATLANTA GA 30308					5,000				
GOAL, INC. 1900 CENTURY BLVD., SUITE 112 ATLANTA GA 30345					15,000				
MEN STOPPING VIOLENCE 533 W. HOWARD AVENUE STE C DECATUR GA 30030					5,000				
PARTNERSHIP AGAINST DOMESTIC VIOLEN P.O. BOX 170225 ATLANTA GA 30317					7,500				

Statement 4 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)

Name / Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Expl	FMV Expl
RAKSHA, INC. P.O. BOX 12337 ATLANTA GA 30355					$ 17,500	$	$		
VOX TEEN COMMUNICATIONS 145 NASSAU ST., SUITE A ATLANTA GA 30303					10,000				
JUVENILE JUSTICE FUND 395 PRYOR STREET, SUITE 1025 ATLANTA GA 30312					5,000				
ATLANTA CHILDREN'S SHELTER 607 PEACHTREE ST., P. O. BOX 54322 ATLANTA GA 30308					5,000				
COMMUNITY ADVANCED PRACTICE NURSES 173 BOULEVARD NE ATLANTA GA 30312					10,000				
THE EDGE CONNECTION KENNESAW STATE UNIVERSITY CENTER, 1 KENNESAW GA 30144					10,000				

Statement 4 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)

Name / Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Expl	FMV Expl
FRIENDS OF THE INTERNATL COMMUNITY 3260 COVINGTON HIGHWAY DECATUR GA 30032					$ 5,000	$	$		
REFUGEE RESETTLEMENT & IMMIGRATION 4151 MEMORIAL DRIVE, SUITE 205-D DECATUR GA 30032					10,000				
9 TO 5 ATLANTA WORKING WOMEN 501 PULLIAM STREET, SUITE 344 ATLANTA GA 30312					65,000				
ACCION USA 235 PEACHTREE STREET SUITE 2000 ATLANTA GA 30303					20,000				
CENTER FOR PAN ASIAN COMMUNITY SER 3760 PARK AVENUE DORAVILLE GA 30340					40,000				
EDGE CONNECTION* KENNESAW STATE UNIVERSITY CENTER, 1 KENNESAW GA 30144					80,000				

Statement 4 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)

Name Address	Relationship to Org	Class of Activity					
	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Expl	FMV Expl
GENESIS SHELTER* 173 BOULEVARD NE ATLANTA GA 30312			$ 80,000	$	$		
GEORGIA JUSTICE PROJECT 458 EDGEWOOD AVENUE ATLANTA GA 30303			25,000				
RRISA* 4151 MEMORIAL DRIVE DECATUR GA 30032			58,000				
WOMEN'S POLICY EDUCATION FUND P. O. BOX 55553 ATLANTA GA 30308			67,000				
WOMEN'S RESOURCE CENTER TO END DV P. O. BOX 171 DECATUR GA 30031			100,000				
FRIENDS OF ICS* 3260 COVINGTON HIGHWAY AVONDALE GA 30032			200,000				

Statement 4 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)

Name / Address	Relationship to Org	Class of Activity				
	Date of Gift	**Description of Property**	**Cash Contrib**	**NonCash Contrib**	**Book Value**	**BV Expl**	**FMV Expl**

Name / Address	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Expl	FMV Expl
G-CAPP 100 AUBURN AVENUE SUITE 200 ATLANTA GA 30303			$ 20,000	$	$		
GEORGIA METROS 1256 PASADENA AVE., NE ATLANTA GA 30306			15,000				
PLANNED PARENTHOOD 100 EDGEWOOD AVENUE, SUITE 1604 ATLANTA GA 30303			70,000				
VOX TEEN COMM. 145 NASSAU ST., SUITE A ATLANTA GA 30303			20,000				
GEORGIA ASSOC ON YOUNG CHILDREN 368 MORELAND AVENUE NE ATLANTA GA 30307-1927			70,500				
QUALITY CARE FOR CHILDREN 50 EXECUTIVE PARK SOUTH, SUITE 5015 ATLANTA GA 30329			50,000				

Statement 4 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)

Name / Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Expl	FMV Expl
COMMUNITY ADVANCED PRACTICE NURSES 173 BOULEVARD, NE ATLANTA GA 30312					$ 5,000	$	$		
THE DRAKE HOUSE 10500 CLARA DRIVE ROSWELL GA 30075					5,000				
JEAN CHILDS YOUNG INSTITUTE FOR YOU 100 EDGEWOOD AVENUE SUITE 530 ATLANTA GA 30303					5,000				
MOVING IN THE SPIRIT 750 GLENWOOD AVENUE ATLANTA GA 30316					5,000				
WOMEN OF FIRE P.O. BOX 923641 NORCROSS GA 30092					5,000				
ANIZ, INC.' 233 MITCHELL ST., SW, SUITE 200 ATLANTA GA 30303					15,000				

Statement 4 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)

Name Address	Relationship to Org	Class of Activity						
	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Expl	FMV Expl
BALLETHNIC DANCE COMPANY, INC. 2597 CHENEY STREET EAST POINT GA 30344			$ 7,500	$	$		
DIABETES ASSOCIATION OF ATLANTA 100 EDGEWOOD AVENUE, SUITE 1004 ATLANTA GA 30303			7,000				
FEMINIST WOMEN'S HEALTH CENTER 1924 CLIFF VALLEY WAY NE ATLANTA GA 30329-2421			7,500				
GEORGIA METROS GIRLS BASKETBALL CLU 1256 PASADENA AVE., NE ATLANTA GA 30306			12,500				
GOOD SAMARITAN HEALTH CENTER 239 IVAN ALLEN JR. BLVD. ATLANTA GA 30313-1949			11,300				
PLANNED PARENTHOOD OF GEORGIA 100 EDGEWOOD AVENUE, SUITE 1604 ATLANTA GA 30303			25,000				

Statement 4 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)

Name Address	Relationship to Org	Class of Activity						
	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Expl	FMV Expl
WOMEN'S AND CHILDREN'S CENTER AT RO EMORY UNIVERSITY, 1518 CLIFTON RD., ATLANTA GA 30322			$ 14,200	$	$		
TOTAL			$ 1,240,500	$ 0	$ 0		

Statement 5 - Form 990, Part II, Line 25a - Compensation of Current Officers

Name	Program Services	Management & General	Fundraising
EXPENSES	$	$	$
DEBORAH RICHARDSON			
COMPENSATION	47,430	35,572	35,572
BENEFIT PLAN CONTRIBUTION	1,717	1,288	1,288
LINDA H. PITTS			
COMPENSATION	29,799	28,923	28,923
BENEFIT PLAN CONTRIBUTION	767	745	745
TOTAL	$ 79,713	$ 66,528	$ 66,528

Statement 6 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund-Raising
EXPENSES	$	$	$	$
ADVERTISING	348		348	
BANKING FEES	2,646		2,646	
BROKERAGE FEES	40,427	6,705	31,487	2,235
COMMUNITY RELATIONS	13,625			13,625
CONSULTING	100,572	52,298	24,137	24,137
DONOR DEVELOPMENT	48,070			48,070
DUES AND SUBSCRIPTIONS	6,988	2,236	2,376	2,376
EVENT DIRECTOR	50,000	25,000		25,000
GRANTMAKING EXPENSE	10,583	10,583		
INSURANCE	3,192		3,192	
INTERNET AND WEBSITE	13,512	7,026	2,027	4,459
MARKETING	42,327		42,327	
PROFESSIONAL DEVELOPMENT	14,036		7,018	7,018
PROGRAM EXPENSE- EMBRACING PO	10,000	10,000		
PROGRAM EXPENSES- ADVOCACY	59,228	59,228		
PROGRAM EXPENSES- AFNAP CAMPA	467,355	467,355		
PROGRAM EXPENSES- DONOR ADVIS	25,281	25,281		
PROGRAM EXPENSES- ECONOMIC EM	64,049	64,049		
PROGRAM EXPENSES- ELDERLY WOM	20,000	20,000		
PROGRAM EXPENSES- FAITH & FEM	281,037	281,037		
PROGRAM EXPENSES- WOMENS SUMM	99,475	99,475		
PROGRAM EXPENSES-DESTINY FD.	29,892	29,892		
PROGRAM EXPENSES-WOMEN ON BD.	20,358	20,358		
RECRUITING	124,912		62,456	62,456
TOTAL	$ 1,547,913	$ 1,180,523	$ 178,014	$ 189,376

Statement 7 - Form 990, Part III - Organization's Primary Exempt Purpose

Description
TO BE A CATALYST FOR CHANGE IN THE LIVES OF WOMEN AND GIRLS IN ATLANTA THROUGH GRANTMAKING, TECHNICAL ASSISTANCE, LEADERSHIP DEVELOPMENT AND PUBLIC EDUCATION

Statement 8 - Form 990, Part III, Line e - Other Program Services

Description
WOMEN'S SUMMIT GRANTS OF $99,475
CHALLENGING VIOLENCE GRANTS OF $95,000
DESTINY FUND GRANTS OF $69,892
ADVOCACY GRANTS OF $59,228

Statement 9 - Form 990, Part IV, Line 54a - Publicly Traded Securities

Description	Beginning of Year	End of Year	Basis of Valuation
US AND STATE GOVERNMENT	$	$	
TREASURY BILLS	292,556	1,105,429	MARKET
CORPORATE STOCK			
STOCKS	1,588,627	1,851,944	MARKET
MUTUAL FUNDS	352,208	315,108	MARKET
CORPORATE BONDS			
BONDS	1,676,695	291,814	MARKET
TOTAL	$ 3,910,086	$ 3,564,295	

Statement 10 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description	Beginning of Year	Accum Depr	End of Year	Accum Depr
EQUIPMENT				
	$ 119,903	$ 91,290	$ 128,744	$ 108,139
TOTAL	$ 119,903	$ 91,290	$ 128,744	$ 108,139

Statement 11 - Form 990, Part IV, Line 62 - Deferred Revenue

Description	Beginning of Year	End of Year
DEFERRED REVENUE	$ 26,200	$ 5,000
TOTAL	$ 26,200	$ 5,000

Statement 12 - Form 990, Part IV-A - Other Revenue Included on Return

Description	Amount
BROKERAGE FEES (NET OF INVMT INCOME ON FIN. STMT.)	$ 31,488
TOTAL	$ 31,488

Statement 13 - Form 990, Part IV-B - Other Expenses included on Financial Statements

Description	Amount
GRANT RECOVERIES NETTED WITH EXPENSES IN FINANCIALS	$ -6,313
TOTAL	$ -6,313

Statement 14 - Form 990, Part IV-B - Other Expenses included on Return

Description	Amount
BROKERAGE FEES (NET OF INVMT INC ON FIN STMT)	$ 31,488
TOTAL	$ 31,488

Statement 15 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
DEBORAH RICHARDSON 50 HURT PLAZA ATLANTA GA 30303	CEO	40	118,574	4,292	0
LINDA H. PITTS 50 HURT PLAZA ATLANTA GA 30303	VP FIN/OPER	40	87,645	2,257	0
ILENE ENGEL 1057 ARBOR TRACE ATLANTA GA 30319	BOARD CHAIR	4	0	0	0
EMILY-MAY RICHARDS 3050 PEACHTREE RD, SUITE 540 ATLANTA GA 30305	TREASURER	4	0	0	0
LUCY VANCE 3370 NANCY CREEK ROAD ATLANTA GA 30327	SECRETARY	4	0	0	0
BARBARA WILLIS BROWN 250 E. PONCE DE LEON AVE, 8TH FLOOR DECATUR GA 30030-5833	BOARD MEMBER	1	0	0	0
BEVERLY THOMAS 3495 PIEDMONT RD. ATLANTA GA 30305-1736	BOARD MEMBER	1	0	0	0
BYRANN CHEN 4151 MEMORIAL DRIVE, SUITE 103-F DECATUR GA 30032	BOARD MEMBER	1	0	0	0
CAROL NEWMAN 1201 WEST PEACHTREE ST NW ATLANTA GA 30309-3488	BOARD MEMBER	1	0	0	0
CAROL Z. COOPER 2000 W PACES FERRY RD	BOARD MEMBER	1	0	0	0

Statement 15 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
ATLANTA GA 30327-2198					
CATHY WOOLARD 490 HAMILTON STREET SE ATLANTA GA 30316	BOARD MEMBER	1	0	0	0
CINDY BRAZELL 1100 PEACHTREE ST, SUITE 2800 ATLANTA GA 30309-4528	BOARD MEMBER	1	0	0	0
DANITA V. KNIGHT 1051 BLUFFHAVEN WAY ATLANTA GA 30319	BOARD MEMBER	1	0	0	0
FLAVIA MERCADO, MD 896 LOS ANGELES AVE ATLANTA GA 30306	BOARD MEMBER	1	0	0	0
GLENDA BLUM MINKIN 36 DELTA PLACE ATLANTA GA 30307	BOARD MEMBER	1	0	0	0
JUDI BRUCE 191 PEACHTREE ST, NE ATLANTA GA 30303	BOARD MEMBER	1	0	0	0
MICHELE OZUMBA 100 AUBURN AVENUE, SUITE 200 ATLANTA GA 30303	BOARD MEMBER	1	0	0	0
PINNEY ALLEN 1201 W PEACHTREE ST ATLANTA GA 30309-3424	BOARD MEMBER	1	0	0	0
POLLY SIMPSON 1331 WESLEY PKWY NW ATLANTA GA 30327	BOARD MEMBER	1	0	0	0

Statement 15 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
REV. JOANNA ADAMS 136 WESTMINSTER DR NE ATLANTA GA 30309	BOARD MEMBER	1	0	0	0
SHERRIE SNIPES-WILLIAMS 214 DODD AVENUE ATLANTA GA 30315	BOARD MEMBER	1	0	0	0
SHIRLEY MITCHELL 600 PEACHTREE ST, SUITE 1600 ATLANTA GA 30308	BOARD MEMBER	1	0	0	0
STACEY PASTEL DOUGAN 3290 NORTHSIDE PKWY, SUITE 400 ATLANTA GA 30327	BOARD MEMBER	1	0	0	0
SUZANNE FEESE 1180 PEACHTREE ST ATLANTA GA 30309	BOARD MEMBER	1	0	0	0

Statement 16 - Schedule A, Part III, Line 2d - Payment of Compensation / Reimbursement of Exp

Description
SEE PART V

Statement 17 - Schedule A, Part III, Line 3a - Explanation of Grant/Loan Qualifications

Description
THE ATLANTA WOMEN'S FOUNDATION (AWF) SENDS REQUEST FOR PROPOSALS (RFP) TO PAST AND POTENTIAL GRANTEES. THE RFP CONTAINS INFORMATION OUTLINING THE LIMITATIONS OF AWF GRANTS AS WELL AS REQUIREMENTS OF GRANTEES. AWF CONVENES ALLOCATIONS COMMITTEES COMPRISED OF BOARD MEMBERS AND VOLUNTEERS TO REVIEW THE GRANT REQUESTS, CONDUCT SITE VISITS, AND THEN RECOMMEND PROGRAMS FOR FUNDING TO THE BOARD OF DIRECTORS. THE BOARD OF DIRECTORS MAKES THE FINAL DECISION ON APPROVAL OF GRANTS.

58-2389721

Federal Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Other Depreciation:												
1	Computer	7/16/98	8,056				8,056	3	MO	S/L	8,056	0
3	Software - Raisor's Edge	7/09/98	6,735				6,735	3	MO	S/L	6,735	0
4	Telephone Equipment	7/01/98	2,958				2,958	5	MO	S/L	2,958	0
5	Telephone Equipment	7/06/98	2,958				2,958	5	MO	S/L	2,958	0
7	Furniture	8/06/98	1,631				1,631	7	MO	S/L	1,631	0
8	Computer	1/08/99	1,456				1,456	3	MO	S/L	1,456	0
9	Painting - "Forever Changing'	3/13/99	3,600				3,600	7	MO	S/L	3,600	0
18	3 Furniture-Style Filing Cabinets	6/25/99	1,950				1,950	7	MO	S/L	1,950	0
19	Chalks	8/01/98	3,000				3,000	7	MO	S/L	3,000	0
20	Black & White Photo	8/01/98	1,000				1,000	7	MO	S/L	1,000	0
21	Printer	10/06/00	680				680	3	MO	S/L	680	0
22	Pentium	11/17/00	2,810				2,810	3	MO	S/L	2,810	0
23	Raiser's Edge Software	4/30/01	4,296				4,296	3	MO	S/L	4,296	0
24	New Server	5/16/01	7,313				7,313	3	MO	S/L	7,313	0
25	MicroEdge Software	11/16/99	11,500				11,500	3	MO	S/L	11,500	0
26	Telephone Equipment	1/14/00	1,365				1,365	5	MO	S/L	1,365	0
27	Computer	7/30/99	1,140				1,140	3	MO	S/L	1,140	0
28	2 Pentium Computers	5/31/02	1,541				1,541	3	MO	S/L	1,541	0
29	Pentium Computer	8/15/02	690				690	3	MO	S/L	690	0
30	Telephone System	2/28/03	1,947				1,947	5	MO	S/L	1,688	259
31	Furniture	3/06/03	531				531	7	MO	S/L	329	75
32	HP Laser Jet Printer	1/16/04	3,231				3,231	3	MO	S/L	3,231	0
33	Celleron Processor	1/16/04	1,631				1,631	3	MO	S/L	1,631	0
34	Computer Workstation/Admin Asst	8/01/05	1,296				1,296	3	MO	S/L	828	432
35	RE Special Events Module Software	8/03/05	3,209				3,209	3	MO	S/L	2,050	1,070
36	nx6110 HP Notebook and carrying case	1/03/06	909				909	3	MO	S/L	455	303
37	LCD Projector and Maintenance Agreement	2/28/06	1,011				1,011	3	MO	S/L	450	337
38	Dell PowerEdge 1800 SC Server	4/03/06	10,124				10,124	3	MO	S/L	4,219	3,374
39	Blackberry Devices, USB Cord, Earphone (2	3/17/06	818				818	3	MO	S/L	341	273
40	HP Laserjet Printer	3/17/06	1,131				1,131	3	MO	S/L	471	377
41	Pentium 4 CPU/19" Flat Screen Monitor	3/28/06	1,161				1,161	3	MO	S/L	484	387
42	Intel Pentium 4 Processor	4/13/06	1,006				1,006	3	MO	S/L	419	335
43	Color Laserjet Printer	4/26/06	944				944	3	MO	S/L	367	315
44	Blackberry Devices (2)	6/13/06	805				805	3	MO	S/L	291	268
45	Desk and Guest Chairs	6/30/05	562				562	7	MO	S/L	160	81
46	Computer Workstation	9/20/04	1,584				1,584	3	MO	S/L	1,452	132
47	Computer Workstation	1/13/05	2,247				2,247	3	MO	S/L	1,873	374
48	Telephone System	4/18/05	3,316				3,316	5	MO	S/L	1,437	663
49	New Phone Extensions	5/22/05	509				509	5	MO	S/L	212	102
50	Computer Work Station	6/22/05	1,760				1,760	3	MO	S/L	1,174	586
51	NetSolutions Online Software Fndr and Eve	9/22/06	5,503				5,503	3	MO	S/L	1,376	1,834
52	Telephone-Intern Desk	10/12/06	415				415	3	MO	S/L	104	138
53	VA 17inch Black Monitor	10/24/06	224				224	3	MO	S/L	50	74
54	Dell Dimension E521- Sr Programs Officer	11/15/06	950				950	3	MO	S/L	211	317
55	Dell Dimension E521-Director of Developer	10/06/06	922				922	3	MO	S/L	231	307
56	Software-Tribute 7	1/10/07	1,356				1,356	3	MO	S/L	226	452
57	Dell Laptop-General Office	1/03/07	1,584				1,584	3	MO	S/L	264	528
58	Software-Address Finder	1/12/07	431				431	3	MO	S/L	72	143
59	Dell Optiplex	2/12/07	956				956	3	MO	S/L	133	318
60	Software-Win License	3/01/07	635				635	3	MO	S/L	71	211
61	Computers-2 Dell OptiPlex Dev & Comm D	3/20/07	1,881				1,881	3	MO	S/L	157	627
62	Software- 2006 Quickbooks	9/17/06	636				636	3	MO	S/L	159	212
63	Dell Optiplex Minitower	7/23/07	777				777	3	MO	S/L	0	237
64	Latitude D830 Laptop	7/23/07	1,783				1,783	3	MO	S/L	0	545
65	Dell Dual Core Xeon Processor Server	11/09/07	3,240				3,240	3	MO	S/L	0	720
66	Dell Dual Core Xeon Installation Server	12/14/07	2,250				2,250	3	MO	S/L	0	438
67	Dell Dual Core Processor E2220	6/30/08	791				791	3	MO	S/L	0	0
	Total Other Depreciation		128,745				128,745				91,295	16,844
	Total ACRS and Other Depreciation		128,745				128,745				91,295	16,844

58-2389721

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
	Grand Totals		128,745				128,745				91,295	16,844
	Less: Dispositions		0				0				0	0
	Less: Start-up/Org Expensed		0				0				0	0
	Net Grand Totals		128,745				128,745				91,295	16,844

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for taking part in the IRS e-file Program.

THE ATLANTA WOMEN'S FOUNDATION, INC
HURT BUILDING, 50 HURT PLAZA

ATLANTA, GA 30303

[X] Your Form 8868, Application for Extension of Time to File an Exempt Organization Return for tax year June 30, 2008 is being filed electronically with the IRS by the services of GIFFORD, HILLEGASS & INGWERSEN, LLP.

[X] Your extension was accepted by the IRS on 11/17/08 and the Submission Identification Number assigned to your return is 58216120083220610387.

Since you are filing your return electronically, PLEASE DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

Acknowledgement Process

The IRS will notify your electronic return originator when they accept your return, usually within 48 hours. If your return was not accepted, IRS will notify your electronic return originator of the reasons for rejection.

XX 67 200806 670 5844 K 93404-322-01377-8 A0125283 211A
200848 091624 30303 IRS USE ONLY 582389721 TE 3

Department of the Treasury
Internal Revenue Service
OGDEN, UT 84201-0074

For assistance, call:
1-877-829-5500

Notice Number: CP211A
Date: December 8, 2008

Taxpayer Identification Number:
58-2389721
Tax Form: 990
Tax Period: June 30, 2008

005605.562775.0022.001 1 AT 0.346 530

ATLANTA WOMENS FOUNDATION INC
% RUTH T WEST
50 HURT PLZ SE STE 401
ATLANTA GA 30303-2915013

005605

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We have received your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above.

We have approved your request and have extended the due date to file your return to February 15, 2009.

Please attach a copy of this letter to your return when you file it. It is evidence that we granted an extension of time to file your return. A copy is provided for your records.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top left of this letter.

Reminder - You May Be Required to File Electronically

Exempt organizations may be required to file certain returns electronically. For tax years ending on or after December 31, 2006, the electronic filing requirement applies to exempt organizations with $10 million or more in total assets if the organization files at least 250 returns in a calendar year, including income, excise, employment tax and information returns. Private foundations and charitable trusts will be required to file Forms 990-PF electronically regardless of their asset size, if they file at least 250 returns annually. For more information, go to www.irs.gov . Click "Charities and Non-Profits" and look for the "e-file for Charities and Non-Profits" tab.

For tax forms, instructions and information visit **www.irs.gov**. (Access to this site will not provide you with your specific taxpayer account information.)