

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

OMB No. 1545-1150

2010

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$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 2010 calendar year, or tax year beginning **07/01/10**, and ending **06/30/11**

<p>B Check if applicable:</p> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<p>C Name of organization RADNOR GIRLS CREW CLUB C/O JOHN STEELY</p> <p>Number and street (or P.O. box, if mail is not delivered to street address) Room/suite 215 WALNUT AVENUE</p> <p>City or town, state or country, and ZIP + 4 WAYNE PA 19087</p>	<p>D Employer identification number 23-2840004</p> <p>E Telephone number 610-585-3685</p> <p>F Group Exemption Number</p>
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<p>G Accounting Method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual Other (specify) ▶</p> <p>I Website: ▶ WWW.GIRLS.RADNORCREW.ORG</p>	<p>H Check <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).</p>
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J Tax-exempt status (check only one) — 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **135,422**

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

	Description		Amount
Revenue	1 Contributions, gifts, grants, and similar amounts received	1	10,900
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	95,791
	4 Investment income	4	897
	5a Gross amount from sale of assets other than inventory	5a	1,000
	b Less: cost or other basis and sales expenses	5b	64
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	936
	6 Gaming and fundraising events	6	See Stmt
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	18,544
c Less: direct expenses from gaming and fundraising events	6c		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	18,544	
7a Gross sales of inventory, less returns and allowances	7a	660	
b Less: cost of goods sold	7b	2,113	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	-1,453	
8 Other revenue (describe in Schedule O)	8	7,630	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	133,245	
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	43,788
	14 Occupancy, rent, utilities, and maintenance	14	44,328
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe in Schedule O)	16	36,544
17 Total expenses. Add lines 10 through 16	17	124,660	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	8,585
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	140,559
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	149,144

Part V Other Information (Note the statement requirements in the instructions for Part V.)
Check if the organization used Schedule O to respond to any question in this Part V

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		X
34 Were any significant changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		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, explain in Schedule O why the organization did not report the income on Form 990-T.		X
a Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)?		X
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="text" value="37a"/>		X
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved <input type="text" value="38a"/>		X
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 <input type="text" value="39a"/>		
b Gross receipts, included on line 9, for public use of club facilities <input type="text" value="39b"/>		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <input type="text"/> ; section 4912 <input type="text"/> ; section 4955 <input type="text"/>		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="text"/>		X
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization <input type="text"/>		X
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 <input type="text"/>		X
41 List the states with which a copy of this return is filed. <input type="text" value="None"/>		
42a The organization's books are in care of <input type="text" value="DAN WEBSTER"/> Telephone no. <input type="text" value="610-688-2996"/>		
<input type="text" value="242 RAVENSCLIFF ROAD"/> Located at <input type="text" value="ST DAVIDS"/> PA ZIP + 4 <input type="text" value="19087"/>		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: <input type="text"/>		X
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.? If "Yes," enter the name of the foreign country: <input type="text"/>		X
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 <input type="text" value="43"/>		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
c Did the organization receive any payments for indoor tanning services during the year?		X
d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O <input type="text"/>		X

- 45** Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?
- a** Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)
- 46** Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- | | | |
|------------|-----|----------|
| | Yes | No |
| 45 | | X |
| 45a | | X |
| 46 | | X |

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a** Did the organization make any transfers to an exempt non-charitable related organization?
- b** If "Yes," was the related organization a section 527 organization?
- 50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."
- | | | |
|------------|-----|----------|
| | Yes | No |
| 47 | | X |
| 48 | | X |
| 49a | | X |
| 49b | | |

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

f Total number of other employees paid over \$100,000 ▶ _____

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

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

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

- 52** Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ▶ Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer: Date: 2/15/12
 Type or print name and title: **JOHN STEELY** **TREASURER**

Paid Preparer Use Only

Print/Type preparer's name Carole A. T. Smith, CPA	Preparer's signature	Date 02/08/12	Check <input checked="" type="checkbox"/> if self-employed	PTIN P00140253
Firm's name ▶ RADNOR TAX SERVICES LLC	Firm's EIN ▶ 23-2546446	Phone no. 610-688-6162		
Firm's address ▶ 336 KING OF PRUSSIA RD. RADNOR, PA 19087-4428				

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

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization **RADNOR GIRLS CREW CLUB
C/O JOHN STEELY**

Employer identification number
23-2840004

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 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 organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 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
- e 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 If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)						
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here					12	

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶	<input type="checkbox"/>
b 33 1/3% support test—2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶	<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	▶	<input type="checkbox"/>
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	▶	<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	▶	<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	34,600	51,000	55,617	127,032	75,730	343,979
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose			2,633	4,687	7,596	14,916
3 Gross receipts from activities that are not an unrelated trade or business under section 513			23,361	11,230	15,425	50,016
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	34,600	51,000	81,611	142,949	98,751	408,911
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			13,404	509		13,913
c Add lines 7a and 7b			13,404	509		13,913
8 Public support. (Subtract line 7c from line 6.)						394,998

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	34,600	51,000	81,611	142,949	98,751	408,911
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	20		884	719	460	2,083
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	20		884	719	460	2,083
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	34,620	51,000	82,495	143,668	99,211	410,994

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	96.11 %
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	95.50 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	1 %
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Area with horizontal dotted lines for supplemental information.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010Open to Public
InspectionName of the organization **RADNOR GIRLS CREW CLUB**
C/O JOHN STEELYEmployer identification number
23-2840004**Form 990-EZ, Part I, Line 8 - Other Revenue**

Description	Amount
SRAA NATIONALS COMPETITION	\$ 3,300
EQUIPMENT RENTAL	\$ 1,950
HEAD OF THE CHARLES	\$ 1,500
SPECIAL EVENTS	\$ 880
Total	\$ 7,630

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

Description	Amount
Expenses	
ADMIN FEES	\$ 738
BOATS & VEHICLES	\$ 5,076
COACHING EXPENSES	\$ 2,970
DUES & FEES	\$ 6,490
HOSPITALITY	\$ 3,218
INSURANCE	\$ 2,939
RECOGNITION	\$ 7,280
FINANCIAL AIDE	\$ 1,580
SRAA NATIONALS	\$ 4,084
HEAD OF THE CHARLES	\$ 2,169
Total	\$ 36,544

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

Description	Amount
-------------	--------

Name of the organization

RADNOR GIRLS CREW CLUB

Employer identification number

23-2840004

PRIOR PERIOD ADJUSTMENT FOR DEPRECIATION

\$

0

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

Description	Beg. of Year	End of Year
Grants Receivable	\$ 4,600	\$ 2,000
Accounts Receivable	\$ 2,845	\$ 917
Prepaid Expenses and Deferred Charges	\$ 0	\$ 2,031
BOATS, OARS AND EQUIPMENT	\$ 118,066	\$ 158,924
Less Accumulated Depreciation	\$ 55,808	\$ 76,468
Total	\$ 69,703	\$ 87,404

Form 990-EZ, Part II, Line 26 - Other Liabilities

Description	Beg. of Year	End of Year
Accounts Payable and Accrued Expenses	\$ 1,430	\$ 2,640
Deferred Revenue	\$ 1,500	\$ 1,800

Form 990-EZ, Part III, Line 31 - All Other Achievements

PROVISION OF RECREATIONAL SPORTS ACTIVITIES TO PUBLIC HIGH

SCHOOL STUDENTS

Form **4562**

Department of the Treasury
Internal Revenue Service

(99)

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2010

Attachment Sequence No. **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return **RADNOR GIRLS CREW CLUB
C/O JOHN STEELY**

Identifying number
23-2840004

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 instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
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	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
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 2009 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 2011. 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 depreciation allowance for qualified property (other than listed 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	21,025

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 2010	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 <input type="checkbox"/>		

Section B—Assets Placed in Service During 2010 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	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

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 instructions	22	21,025
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.

RADGIRFY RADNOR GIRLS CREW CLUB

23-2840004

Federal Asset Report

FYE: 6/30/2011

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:									
1	97 KASCHPER	1/01/07	429			429	5 MO S/L	300	65
	Sold/Scrapped: 3/30/11								
2	OARS	3/11/08	3,136			3,136	10 MO S/L	732	314
3	TENT	11/11/08	1,937			1,937	10 MO S/L	323	194
4	BOATS	1/01/07	29,071			29,071	7 MO S/L	14,536	4,153
5	OARS	1/01/07	2,664			2,664	5 MO S/L	1,865	533
6	TRAILERS	1/01/07	5,250			5,250	7 MO S/L	2,625	750
7	LAUNCHES	1/01/07	2,800			2,800	7 MO S/L	1,400	400
8	MOTORS	1/01/07	3,200			3,200	5 MO S/L	2,240	640
9	ELECTRONICS	1/01/07	5,826			5,826	5 MO S/L	4,078	1,165
10	ELECTRONIC	3/11/08	274			274	10 MO S/L	64	27
11	ERGS	1/01/07	4,500			4,500	7 MO S/L	2,250	643
12	CREW BOATS	3/01/09	23,500			23,500	10 MO S/L	3,134	2,350
13	OARS	2/01/09	2,435			2,435	10 MO S/L	344	244
14	TENT PARTS	4/01/09	381			381	5 MO S/L	95	76
15	FITNESS EQUIPMENT	10/01/09	1,363			1,363	10 MO S/L	102	136
16	TENT	11/01/09	300			300	10 MO S/L	20	30
17	ERGS	1/04/11	3,140			3,140	7 MO S/L	0	224
18	VESPOLI BOATS	9/28/10	37,800			37,800	10 MO S/L	0	2,835
19	HELMET CAMCORDER	10/28/10	347			347	5 MO S/L	0	46
20	98 KASCHPER	1/01/07	8,000			8,000	5 MO S/L	5,600	1,600
21	02 KASCHPER	1/01/07	5,000			5,000	5 MO S/L	3,500	1,000
22	06 VESPOLI	1/01/07	18,000			18,000	5 MO S/L	12,600	3,600
	Total Other Depreciation		<u>159,353</u>			<u>159,353</u>		<u>55,808</u>	<u>21,025</u>
	Total ACRS and Other Depreciation		<u>159,353</u>			<u>159,353</u>		<u>55,808</u>	<u>21,025</u>
	Grand Totals		159,353			159,353		55,808	21,025
	Less: Dispositions and Transfers		429			429		300	65
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>158,924</u>			<u>158,924</u>		<u>55,508</u>	<u>20,960</u>

RADGIRFY RADNOR GIRLS CREW CLUB

23-2840004

AMT Asset Report

FYE: 6/30/2011

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:								
1	97 KASCHPER	1/01/07	429		429	5 MO S/L	300	65
	Sold/Scrapped: 3/30/11							
2	OARS	3/11/08	3,136		3,136	10 MO S/L	732	314
3	TENT	11/11/08	1,937		1,937	10 MO S/L	323	194
4	BOATS	1/01/07	29,071		29,071	7 MO S/L	14,536	4,153
5	OARS	1/01/07	2,664		2,664	5 MO S/L	1,865	533
6	TRAILERS	1/01/07	5,250		5,250	7 MO S/L	2,625	750
7	LAUNCHES	1/01/07	2,800		2,800	7 MO S/L	1,400	400
8	MOTORS	1/01/07	3,200		3,200	5 MO S/L	2,240	640
9	ELECTRONICS	1/01/07	5,826		5,826	5 MO S/L	4,078	1,165
10	ELECTRONIC	3/11/08	274		274	10 MO S/L	64	27
11	ERGS	1/01/07	4,500		4,500	7 MO S/L	2,250	643
12	CREW BOATS	3/01/09	23,500		23,500	10 MO S/L	3,134	2,350
13	OARS	2/01/09	2,435		2,435	10 MO S/L	344	244
14	TENT PARTS	4/01/09	381		381	5 MO S/L	95	76
15	FITNESS EQUIPMENT	10/01/09	1,363		1,363	10 MO S/L	102	136
16	TENT	11/01/09	300		300	10 MO S/L	20	30
17	ERGS	1/04/11	3,140		3,140	7 MO S/L	0	224
18	VESPOLI BOATS	9/28/10	37,800		37,800	10 MO S/L	0	2,835
19	HELMET CAMCORDER	10/28/10	347		347	5 MO S/L	0	46
20	98 KASCHPER	1/01/07	8,000		8,000	5 MO S/L	5,600	1,600
21	02 KASCHPER	1/01/07	5,000		5,000	5 MO S/L	3,500	1,000
22	06 VESPOLI	1/01/07	18,000		18,000	5 MO S/L	12,600	3,600
	Total Other Depreciation		<u>159,353</u>		<u>159,353</u>		<u>55,808</u>	<u>21,025</u>
	Total ACRS and Other Depreciation		<u>159,353</u>		<u>159,353</u>		<u>55,808</u>	<u>21,025</u>
	Grand Totals		159,353		159,353		55,808	21,025
	Less: Dispositions and Transfers		429		429		300	65
	Net Grand Totals		<u>158,924</u>		<u>158,924</u>		<u>55,508</u>	<u>20,960</u>

RADGIRFY RADNOR GIRLS CREW CLUB

23-2840004

FYE: 6/30/2011

Depreciation Adjustment Report

All Business Activities

Form Unit Asset

Description

Tax

AMT

AMT
Adjustments/
Preferences

There are no assets that meet the criteria of this report

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
2	OARS	3/11/08	3,136	313	313
3	TENT	11/11/08	1,937	193	193
4	BOATS	1/01/07	29,071	4,153	4,153
5	OARS	1/01/07	2,664	266	266
6	TRAILERS	1/01/07	5,250	750	750
7	LAUNCHES	1/01/07	2,800	400	400
8	MOTORS	1/01/07	3,200	320	320
9	ELECTRONICS	1/01/07	5,826	583	583
10	ELECTRONIC	3/11/08	274	28	28
11	ERGS	1/01/07	4,500	643	643
12	CREW BOATS	3/01/09	23,500	2,350	2,350
13	OARS	2/01/09	2,435	243	243
14	TENT PARTS	4/01/09	381	77	77
15	FITNESS EQUIPMENT	10/01/09	1,363	137	137
16	TENT	11/01/09	300	30	30
17	ERGS	1/04/11	3,140	449	449
18	VESPOLI BOATS	9/28/10	37,800	3,780	3,780
19	HELMET CAMCORDER	10/28/10	347	70	70
20	98 KASCHPER	1/01/07	8,000	800	800
21	02 KASCHPER	1/01/07	5,000	500	500
22	06 VESPOLI	1/01/07	18,000	1,800	1,800
Total Other Depreciation			<u>158,924</u>	<u>17,885</u>	<u>17,885</u>
Total ACRS and Other Depreciation			<u>158,924</u>	<u>17,885</u>	<u>17,885</u>
Grand Totals			<u>158,924</u>	<u>17,885</u>	<u>17,885</u>

RADGIRFY RADNOR GIRLS CREW CLUB

23-2840004

Federal Statements

FYE: 6/30/2011

Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

<u>Description</u>	<u>Amount</u>
DUES	\$ 93,941
HOSPITALITY EVENTS	1,850
Total	<u>\$ 95,791</u>

RADGIRFY RADNOR GIRLS CREW CLUB

23-2840004

FYE: 6/30/2011

Federal Statements

Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Other

How Received	Description	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depreciation	Gain /
								Loss
97 KASCHPER Purchase			1/01/07	3/30/11	\$ 1,000	\$ 429	\$ 365	\$ 936
Total					\$ 1,000	\$ 429	\$ 365	\$ 936

RADGIRFY RADNOR GIRLS CREW CLUB

23-2840004

Federal Statements

FYE: 6/30/2011

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

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
2009	\$ 5,509	\$ 509
2008	18,404	13,404
Total	<u>\$ 23,913</u>	<u>\$ 13,913</u>