## **Short Form Return of Organization Exempt From Income Tax** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-1150 2015

**Open to Public** 

Inspection

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A	For the	2015 calendar year, or tax year beginning January 1st , 2015, and ending	Decer	nber 31s	st , 20 15						
В	Check if ap	oplicable: C Name of organization D	D Employer identification number								
	Address o	Education for Women in Turkey Fund	47-1668066 E Telephone number 1-832-736-1220								
Ц	Name cha	L									
H	Initial retur	rn m/terminated									
Ħ	Amended	City or town, state or province, country, and ZIP or foreign postal code	Group	Exemp							
=	Applicatio			oer ▶							
G	Account	ting Method: ✓ Cash	eck >	☐ if th	e organization is <b>not</b>						
۱ ۱	Website				Schedule B						
J 1	Tax-exen		•		Z, or 990-PF).						
		organization:									
L	Add line:	s 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total as	sets								
(Pa	art II, col	umn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	. 1	<b>\$</b>							
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the ins	struc	tions fo	r Part I)						
		Check if the organization used Schedule O to respond to any question in this Part I .									
	1	Contributions, gifts, grants, and similar amounts received		1	46426.18						
	2	Program service revenue including government fees and contracts		2	10-120.10						
	3	Membership dues and assessments		3							
	4	Investment income	-	4	24.81						
	5a	Gross amount from sale of assets other than inventory   5a			24.01						
	b	Less: cost or other basis and sales expenses									
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c							
	6	Gaming and fundraising events	•								
	а										
ne		\$15,000)									
'en	ь	Gross income from fundraising events (not including \$ of contributions									
Revenue		from fundraising events reported on line 1) (attach Schedule G if the									
		sum of such gross income and contributions exceeds \$15,000)   6b									
	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 subtra	act								
		line 6c)	.	6d							
	7a	Gross sales of inventory, less returns and allowances		ou							
	b	Less: cost of goods sold	$\neg$								
	С	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c							
	8	Other revenue (describe in Schedule O)		8							
	9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	•	9	46450.99						
Expenses	10	Grants and similar amounts paid (list in Schedule O)		10	34200						
	11	Benefits paid to or for members	.	11	34200						
		Salaries, other compensation, and employee benefits	.	12							
	13	Professional fees and other payments to independent contractors		13	Table Telephone						
	14	Occupancy, rent, utilities, and maintenance		14							
	15	Printing, publications, postage, and shipping		15	60						
	16	Other expenses (describe in Schedule O)		16	1865						
	17	Total expenses. Add lines 10 through 16		17							
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	36124.80						
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree w	ith	10	10326.19						
	3505	end-of-year figure reported on prior year's return)		19	010.00						
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	916.06						
	21	Net assets or fund balances at end of year. Combine lines 18 through 20		21	11242 25						
_				41	11242.25						

Part	Balance Sheets (see the instruction	s for Part III				Page 2
	Check if the organization used Schedu	le O to respond to a	any question in this	Part II		
			, 4	(A) Beginning of year	· ·	(B) End of year
22 23	Cash, savings, and investments				22	11242.25
24	Land and buildings				23	
25	Other assets (describe in Schedule O)				24	
26	Total liabilities (describe in Schedule O)				25	11242.25
27	Net assets or fund balances (line 27 of colum	n (D) must saves			26	0
Part I	Statement of Program Service According	mnlishmente (soo t	tn line 21)	David III)	27	11242.25
	Check if the organization used Schedu	le O to respond to a	any guestion in this	Part III)		Expenses
What is	the organization's primary exempt purpose?	Charitable Education	on for Under privilige	Part III 🔽	(Red	quired for section
Describ as mea	be the organization's program service accomp asured by expenses. In a clear and concise is benefited, and other relevant information for	olishments for each of	of ito these less t			(c)(3) and 501(c)(4) anizations; optional for ers.)
28 <u>Pr</u>	oviding 100 economically underpriviliged high so	chool female students				-
(G		t includes fausian				
-1	oviding 5 economically underpriviliged college	nt includes foreign gr	ants, check here .	▶ 🗸	28a	30150
		emale students schol				
(0						
30	rants \$ 4050) If this amour	t includes foreign gr	ants, check here .	▶ 🗸	29a	4050
(G	rants \$ ) If this amoun					4.4
_	her program services (describe in Schedule O)	t includes foreign gra	ants, check here .	▶ □	30a	
32 To	otal program service expenses (add lines 28a	t includes foreign gra	ants, check here .	▶ 🗌	31a	
Part IV	List of Officers, Directors, Trustees, and Ke	v Employees (list ass)	h one over # t		32	34200
	Check if the organization used Schedul	e O to respond to a	nv auestion in this	pensated—see the in Part IV	struc	tions for Part IV)
		(b) Average	(c) Reportable	(d) Health benefits.	Τ.	
Duste (A	(a) Name and title	hours per week devoted to position	compensation (Forms-W-2/1099-MISC) (if not paid, enter -0-)	contributions to employe benefit plans, and deferred compensation	0	Estimated amount of their compensation
Dudu (A	KA Deniz) Demirors-President	- 45	800			
Elcin (Ha	atice) Kaleli Treasurer	15	-0-	-0	+-	-0-
		8	-0-			
Hulya (Ju	ulia) Unay-Secretary		-0-	-0	-	-0-
		5	-0-	-0		-0-
Samiye /	Ardic-Vice President	-				-0-
Muge Sir	nsek Director	5	-0-	-0-		-0-
nuge on	nsex Director					
Cana Bey	yoglu Director	5	-0-	-0-		-0-
		5	-0-	-0-		-0-
erya Po	erschke , Director					
		5	-0-	-0-		-0-