

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)

Department of the Treasury
Internal Revenue Service

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

A For the 2008 calendar year, or tax year beginning JUL 01, 2008, and ending JUN 30, 2009

B Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization, number and street, city, town, state, and ZIP code
 FOURTH WARD CLINIC
 GOOD NEIGHBOR HEALTH CARE CENTER
 190 HEIGHTS BLVD
 HOUSTON TX 77007

D Employer identification number
74-1746576

E Telephone number
713-529-3597

G Gross receipts \$

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

H(b) Are all affiliates included? If "No", attach a list. (see instructions) Yes No

H(c) Group exemption number ▶

F Name and address of principal officer: JANET DONATH
190 HEIGHTS BL HOUSTON TX 77007-

I Tax-exempt status: 501(c)(3) ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶

K Type of organization: Corporation Trust Association Other ▶

L Year of formation: **M** State of legal domicile:

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROVIDE HEALTH CARE TO LOW INCOME FAMILIES		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	11
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11
	5 Total number of employees (Part V, line 2a)	5	52
	6 Total number of volunteers (estimate if necessary)	6	100
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	
b Net unrelated business taxable income from Form 990-T, line 34	7b		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	3301474.	3859561.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1052541.	1054520.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	24743.	8038.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-93980.	18147.
		4284778.	4940266.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2043027.	2225068.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	182256.	55587.
	b Total fundraising expenses, (Part IX, column (D), line 25) ▶	55587.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1098462.	2524240.
18 Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	3323745.	4804895.	
19 Revenue less expenses. Subtract line 18 from line 12	961033.	135371.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	3114178.	2863840.
	22 Net assets or fund balances. Subtract line 21 from line 20	194299.	213087.
		2919879.	2650753.

Part II Signature Block

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

Janet S. Donath
Signature of officer

12/03/09
Date

JANET DONATH
Type or print name and title

EXECUTIVE DIRECTOR

Paid Preparer's Use Only

Preparer's signature: *Will K. Blakemore* Date: 12/3/09

Check if self-employed

Preparer's identifying number (see instructions): P00154735

Firm's name (or yours if self-employed), address, and ZIP + 4: WILL K BLAKEMORE PC
10701 CORP STAFFORD TX 77477-4021

EIN: 76-0455444
Phone no.: 281-240-2727

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

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

