

Promotional and Community Event Grant Application

McKinney Community Development Corporation FY 2026

MCDC Mission

Staying true to voter intent, we work proactively, in partnership with others, to promote and fund community, cultural, and economic development projects that maintain and enhance the quality of life in McKinney.

Important Information

- Please read the McKinney Community Development Corporation [Grant Guidelines](#) before completing this application.
- The Grant Guidelines are available at [McKinneyCDC.org](#) or by emailing Info@McKinneyCDC.org.
- If you are interested in a preliminary review of your grant request or event idea, please [complete and submit the online Letter of Inquiry](#).
- **Applications must be submitted via online form and must be submitted no later than 5 p.m. on the deadline date.**

All applicants must submit a complete application with the following attachments and required information as detailed throughout the application to ensure Board consideration for funding.

- Detailed event description
 - Comprehensive narrative that includes event mission, goals, planning and execution timeline;
 - Planned activities pre-event and during event;
 - History of past or similar events;
 - Event budget (fundraising goals, projected revenue, funding sources);
 - Ticket price(s). (At least one category of ticket must be \$35 or under.)
 - Safety/security plan, parking/traffic management plan, weather contingency, event staffing plan.
- Target audience – Please include data from previous events if available.
 - Attendance projections (include how your calculations were made);
 - Target audience including demographics (families, young adults, seniors, all ages, ethnicity) as well as diversity of interests (arts, culture, recreation, sports, shopping, etc.);
 - Geographic reach (goal for attendees from outside of McKinney, estimated travel distance).
- Community and economic impact
 - Describe how your event will showcase McKinney for tourism and economic development for residents and visitors (shopping and dining in McKinney, hotel stays, participation in other McKinney activities).
- Marketing and promotional plan

Detailed and itemized plan and promotional budget - include strategies and channels (print ads, press releases, digital ads, social media, radio, posters, flyers, yard signs, articles, etc.);

- Social media followship and website data if available.
- Financial viability of organization (Please provide the following documentation)
 - Verification of organization's status (IRS letter of determination, W9);
 - Most recent two years of financial statements including organization's budget and profit/loss statements (audited preferred or written explanation if audit not available);

Promotional and Community Event Grant Calendar

To ensure timely and effective use of promotional grant funds, we recommend event(s) are scheduled to occur at least 4-6 months after the award notification date(s).

Cycle I

- Application Deadline: Nov. 28, 2025
- Presentation to MCDC Board: Dec. 18, 2025
- Board Vote and Award Notification: Jan. 22, 2026

Cycle II

- Application Deadline: May 30, 2026
- Presentation to MCDC Board: June 25, 2026
- Board Vote and Award Notification: July 23, 2026

Organization Name	Texas Women Society
CEO / Executive Director	Jennie Shen
Federal Tax I.D.	883219610
Incorporation Date	Wednesday, July 13, 2022
Mailing Address	PO Box 250128 Plano, TX, 75025
Phone Number	(214) 679-1853
Email	texasws12@gmail.com
Website	www.texasws.org
Social Media	www.facebook.com/texasws, mckinneyasianfestival

Please provide a detailed narrative about your organization including year established, mission, goals, scope of services, staff, successes, contribution to community, etc.

Founded in 2022, the Texas Women Society (TWS) was established to create a strong and supportive platform for women to show case their talents and capabilities.
Our mission is to help women enjoy life, grow personally and professionally, and contribute meaningfully to the community.
TWS hosts a variety of events to serve both our members and the Communities.
Monthly small-group events focused on personal development, wellness, and joyful living—such as Culture education, wellness awareness, and social activities.
Large-scale cultural festivals annually, celebrating diverse traditions, promoting cultural understanding, and fostering community connections.
Past events include the McKinney Asian Festival, Moon Festival, tea ceremony performances, calligraphy showcases.

Select One

Nonprofit 501(c)3 (Attach copy of IRS Determination Letter)

IRS Determination Letter for 501(c)3

 tws_501C3_aproval.pdf

Is the representative information same as above?

Yes

Is the contact for communications between MCDC and the organization same as above?

Yes

Total Amount Requested15000

Are matching funds available?

Yes

Matching Funds Available23000

Have you received or will funding be requested from any other City of McKinney entity (e.g. Visit McKinney, Arts Commission, City of McKinney Community Support Grant)?

Yes

Provide name of City of McKinney entity funding source and amount.

Art Commission \$9500

If applicable, please indicate the name of the events, year(s) and amount(s) of MCDC funding received in the past five years.

McKinney Asian Festival 2024 \$8000 McKinney Asian Festival 2025 \$10000, McKinney Moon Fest \$12000

Information about the promotional / community event for which you are seeking funding.

Date(s) of Event

Oct 2nd, and Oct 3rd, 2026

Location(s)

401 E Virginia St. McKinney, TX 75069

Ticket Prices

Free to entry to all the activities except
\$30/ seat for Tea Ceremony (limited seats)

Is this the first time for this event?

No

If not, what is the history for the event (beginning in what year and how often is it held)?

This is the third year of the McKinney Asian Festival.

In the past two years, we hosted two separate events: the March Asian Festival and the October Moon Festival. Both events were successful in bringing the community together to celebrate Asian culture, food, and traditions.

This year, to make the festival more unique and impactful, we combined both events into one annual festival. This allows us to create a larger celebration, offer more diverse cultural experiences, and bring the community together in a more meaningful way.

The annual festival continues our mission of promoting cultural understanding, community connection, and shared celebration among all residents.

How does event showcase McKinney for tourism and/or business development?

The McKinney Asian Festival helps promote McKinney for both tourism and business. The festival brings thousands of visitors to the city each year. Many people come from nearby cities to enjoy food, performances, and cultural activities. This increases awareness of McKinney and encourages people to explore local shops, restaurants, and downtown areas. It also supports local businesses by giving them a chance to set up booths, sell products, and connect with new customers. Sponsors and vendors can promote their services to a large and diverse audience. Overall, the festival helps McKinney attract visitors, support small businesses, and show the city as a lively and welcoming community.

Does the event support a non-profit (other than applicant)?

No

What percentage of revenue will be donated (indicate gross or net)?

0

Expected total attendance and how calculations were made.

5000-8000 by handing out flyers

Expected percentage of attendees coming from outside of McKinney.

65%-70%

Total attendance from previous event(s) (if applicable)

30 _____ of attendees from McKinney at the previous event.
percentage

70 _____ of attendees from outside of McKinney at the previous event.
percentage

Geographic Reach (estimated travel distance)

50miles

Describe the TARGET AUDIENCE to include:

- Demographics (i.e. families, young adults, seniors, all ages, ethnic diversity)
- Diversity of interests (i.e. arts, culture, recreation, sports, shopping, etc.)

The target audience for the McKinney Asian Festival is people of all ages, including families, young adults, and seniors. The event attracts a diverse community from different ethnic backgrounds. It is family-friendly and open to everyone. Main interests include arts, culture, food, and community activities. Many attendees also enjoy performances, shopping from vendors, and learning about different cultures. Overall, the festival is designed for anyone who enjoys cultural experiences, food, and family-friendly entertainment.

FINANCIAL GOALS FOR EVENT OF PROMOTIONAL / COMMUNITY EVENT

Gross Revenue	62000
Projected Expenses	53500
Net Revenue	8500

Please provide funding sources and dollar amounts associated with each of the following.

Sponsorship Revenue	10000
Registration Fees	20000
Donations	24500
Other (raffle, auction, etc.)	7500
Net Revenue	8500

Metrics to evaluate success of event. Outline the metrics that will be used to evaluate success of the proposed event (attendance, reach from across targeted audiences, funds raised, tickets sold, etc). If funding is awarded, a final report will be required summarizing success in achieving objectives outlined for the event.

First, we estimate attendance based on festival schedules distributed at entry points, which helps us track visitor volume.
Second, we review vendor performance through sales reports, which show business activity and economic impact during the event.
Third, we measure participation in workshops and activities through sign-in records and program reports to understand community engagement.
In addition, we also consider overall visitor feedback, volunteer participation, and the level of community and sponsor involvement.
These combined metrics help us evaluate the success of the event in terms of attendance, engagement, and economic impact.

Provide a comprehensive narrative that includes:

- Mission, goals, planning and execution timeline
- Planned activities (pre-event and during event)
- History of past or similar events

Safety/security plan, parking/traffic management plan, weather contingency, event staffing plan

The McKinney Asian Festival is organized by the Texas Women Society to bring the community together and celebrate culture, food, and family.

Mission and Goals:

Our mission is to connect people through culture and community activities. The goals are to promote diversity, support local businesses, and provide a fun, family-friendly event.

Planning and Timeline: We start planning in April. This includes recruiting planning leaders to different areas like vendors and performers, finding sponsors, marketing the event, and organizing volunteers. In the final stage, we focus on setup and event operations.

Activities:

Before the event: vendor setup, promotion, volunteer training

During the event: cultural performances, food and retail vendors, workshops, and family activities

Event history:

This is our third year. In the past, we held the March Asian Festival and October Moon Festival separately. This year, we combined them into one annual festival to make it bigger and more meaningful.

Safety and Operations

We will work with McKinney Police Department to ensure safety and security. Volunteers help manage the crowd and provide support during the event.

Parking and Traffic

We will use city parking areas.

Weather Plan:

It's rain or shine policy.

Staffing

The event is run by volunteers and organizers who help with setup, vendors, activities, and guest support.

Describe how your event will showcase McKinney for tourism and economic development for residents and visitors (shopping and dining in McKinney, hotel stays, participation in other McKinney activities, etc.)

- 1. Showcasing Cultural Diversity The festival celebrates Asian cultures, making McKinney stand out as a welcoming, diverse city. This can attract visitors who are interested in cultural events and make McKinney a more appealing destination.
- 2. Supporting Local Businesses The festival provides a platform for local businesses—especially those owned by Asian entrepreneurs—to showcase their products and services. This encourages people to explore McKinney’s shops, restaurants, and local vendors.
- 3. Attracting Investment and Partnerships The festival positions McKinney as a city that can successfully host large, diverse events. This can attract investors and businesses interested in the area's growth potential.
- 4. Promoting McKinney’s Tourism Infrastructure The festival showcases McKinney’s event spaces, hotels, restaurants, and other tourism infrastructure. This can make the city more attractive to event planners and tourists looking for a great destination.
- 5. Regional Collaboration The festival brings together local businesses and cultural groups, helping build relationships with other cities and regions. These connections can boost McKinney’s profile as a cultural and business.
- 6. Building McKinney’s Reputation as a Cultural Hub Over time, the festival can establish McKinney as a cultural destination. With more events like it, McKinney can become known as a place where diverse cultural experiences are celebrated.

Provide a detailed and itemized promotional plan and budget for the event(s). Plan should include promotional channels (print ads including publication names, social media, radio, posters, flyers, yard signs, etc.)

Promotional Channel	Budget
Social Media-Facebook, Instagram	8000
News Paper-Impact	5000
Printing poster	4000
Yard Sign	1000

Promotional Channel	Budget
Pre-Event Campaign	2500
Influencer Interview	2500

Event Marketing Plan and Budget Attachment


MAFA2026_budget_plan.pdf

Total Promotional Budget 23000

Does your marketing plan include components specifically designed to promote your event(s) within the ethnically diverse communities that call McKinney home? Please share details.

Yes. Our marketing plan for the McKinney Asian Festival includes specific strategies to reach McKinney’s ethnically diverse communities. We use bilingual and multicultural outreach through social media, community groups, and local cultural networks. Promotions are shared in multiple language-friendly formats when possible, and visuals are designed to be culturally inclusive. We also partner with local ethnic organizations, schools, churches, and community groups to help spread information directly within their communities. Flyers, digital posts, and community announcements are shared through these trusted networks. In addition, we engage diverse vendors and performers who help promote the event within their own cultural communities, creating a wider and more authentic reach. Overall, our marketing plan is designed to ensure that all communities in McKinney feel informed, included, and welcomed to participate.

What percentage of the total marketing budget does the grant represent? 65

Marketing lessons learned from past events (if applicable).

Yes. Based on previous experience with the McKinney Asian Festival, we have learned important marketing lessons. Last year, we focused heavily on social media promotion. This helped us reach a larger audience from outside McKinney and increased overall attendance. However, we also learned that we need stronger outreach to local residents. This year, we plan to improve local engagement by adding advertising in local newspapers and community publications to better reach McKinney households. We will also balance our marketing budget between social media and print advertising to ensure we reach both broader regional audiences and more local community members. These adjustments will help us improve local participation while still maintaining strong regional visibility.

If applicable, please include examples of past marketing efforts (screen shots of ads, posters, social posts, radio text, etc.)

There is no attachment feature. I will send doc separately.

Additional details related to marketing efforts.

Additional marketing efforts for the McKinney Asian Festival will include launching our first influencer marketing campaign.

We plan to invite local influencers and content creators to help promote the festival, with a special focus on featuring food vendors through interviews, previews, and social media content. These promotions will highlight unique food offerings and festival experiences to build excitement before the event.

We are also placing greater emphasis on theme-driven marketing for each festival. By creating a strong annual festival theme, we can build a more memorable identity, strengthen storytelling in our promotions, and create a more engaging experience for attendees.

These efforts are designed to increase festival visibility and strengthen recognition within surrounding Asian festival communities across North Texas, helping attract new visitors and expand our audience.

Metrics to evaluate success of marketing/promotional plan: Outline the metrics that will be used to evaluate overall success of the executed promotional plan. If funding is awarded, this should be included in the final report. (success in reaching new audiences, social media data, website analytics, etc).

We evaluate the success of the marketing and promotional plan for the McKinney Asian Festival using several clear metrics.

First, we track attendance numbers and estimate visitor origin (local vs. outside McKinney) to measure how well our outreach reaches the target audience.

Second, we monitor social media performance, including reach, engagement (likes, shares, comments), and follower growth before the event.

Third, we measure campaign effectiveness by tracking website visits, event page clicks, and responses from promotional posts and ads.

Fourth, we evaluate vendor and sponsor feedback to see how attendees learned about the event and how effective the promotion was in driving participation.

Finally, we compare results from different channels (social media, newspaper ads, community outreach) to understand which methods are most effective for future planning.

Please provide:

- Verification of organization’s status (IRS letter of determination, W9, etc.)
- Most recent two years of financial statement including organization’s budget and profit/loss statement (Audited is preferred or written explanation if audit not available.)

Budget

 2025_ProfitLoss.pdf

 2024_ProfitLoss.pdf

Financial Statements

 2024_balancesheet.pdf

 2025_balancesheet.pdf

IRS Determination Letter (if applicable)

 TEXAS WOMEN SOCIETY 2025 Clientpdf

W9

 W9 2026_tws.pdf

All Applicants must submit a complete application with the following attachments and required information as detailed throughout the application to ensure the Board consideration for funding	
Procedure	Application completed and submitted prior to deadline (5:00 PM on deadline date)
	Application Submitted via online form
Organization and Financial Information	Completed all organizational information
	Provided documentation of organization status (IRS letter, W9)
	Two most recent years of financial statements (budget + profit & loss) (audited if available)
Event Description	Missions, goals, execution timeline, programming/activities, budget
	Event dates, times, and location(s)
	Cultural or community relevance
	Target audience (numbers, demographics, geographic reach, diversity, past data)
Community & Economic Impact	Description of how the event promotes tourism and economic development
	Economic impact projections
	Benefits to McKinney residents and the community's quality of life
Marketing & Promotional Plan	Itemized marketing plan and budget
	List of marketing channels (print, digital, radio, social, etc.)
	Promotional time
	Social media engagement data and website analytics (if available)

Completed applications that are eligible for consideration by MCDC will be presented to the board according to the schedule outlined on this application. Presentations will be limited to five (5) minutes, followed by time for questions from the Board. **Please be prepared to provide the information outlined below in your presentation:**

- Summary of organization and goals.
- Summary of event(s) to include dates, location, ticket prices, target audience, estimated attendance from within and outside of McKinney (and past attendance if applicable), event and pre-event activities, how event supports your organization's mission, non-profit beneficiary if applicable,
- Event logistics including timeline, safety/security, parking/traffic management
- How your event showcase McKinney for tourism and economic development
- Specific marketing plans for event(s) including promotional channels and budget for each.
- Past promotional success and lessons learned (if applicable).
- Percentage of total marketing budget that this grant application represents.
- The Promotional/Community Event for which financial assistance is sought will be administered by or under the supervision of the applying organization.
- All funds awarded will be used exclusively for advertising, marketing and promotion of the Promotional/Community event described in this application.
- Recognition to MCDC:
 - MCDC will be recognized in all marketing, advertising, outreach and public relations as a funder of the Promotional/Community Event. A logo will be provided by MCDC for inclusion on all advertising, marketing and promotional materials. Specifics for audio messaging will be agreed upon by applicant and MCDC and included in an executed performance agreement.
 - Grant recipients are encouraged to use graphics and text from the MCDC Grantee Toolkit (to be provided to all grant recipients) for posts/ads to help share how MCDC partners with your organization.
- The Organization officials who have signed the application are authorized by the organization to submit the application;
- Applicant will comply with the MCDC Grant Guidelines in executing the Promotional/Community Event for which funds were received.
- Applicant gives permission for the use of Board presentation images and other published event images on MCDC and City of McKinney website and social media content and print/digital publications.
- Applicant will provide a final report of the Promotional/Community Event(s) no later than 30 days following the completion of the Promotional/Community Event(s). Applicant may choose to use the [online form for Final Report](#) or email Final Report to info@mckinneycdc.org. If emailed, Final Report may be in any format. All Final Reports should include:
 - narrative report on the event(s),
 - goals and objectives achieved based on performance metrics outlined in the application,
 - financial data (budget vs. actual expenses and revenues along with explanation for variances,
 - amount donated to charity (if applicable),
 - samples of marketing efforts (images of printed materials and ads, screenshots of website and online promotions),
 - statement/examples demonstrating how grant recipient promoted MCDC as a partner, and
 - photos and/or video of the event(s).
- Grant funding is provided on a reimbursement basis subsequent to submission of a reimbursement request, with copies of invoices and paid receipts for qualified expenses. Up to 20% of the grant awarded may be withheld until the **final report on the Promotional/Community Event is provided to MCDC.**
- Funds granted must be used within one year of the date the grant is approved by the MCDC board.

Applicant Electronic Signature

We certify that all figures, facts, and representations made in this application, including attachments, are true and correct to the best of our knowledge.

Selecting this option indicates your agreement with the above statement.

Chief Executive Officer



Date

Tuesday, May 5, 2026

Representative Completing Application



Date

Tuesday, May 5, 2026

Notes

- Incomplete applications or those received after the deadline will not be considered.
- A final report must be provided to MCDL within 30 days of the event / completion of the Promotional / Community Event.
- Final payment of funding awarded will be made upon receipt of final report.
- Please use the Final Report to report your results. A PDF version is also available.

2026 McKinney Asian Art and Food Festival – Marketing and Budget Plan

Income estimate:

- Vendor fee, 50-70 vendors, two days, average \$250 each vendor = \$20000
- Sponsorship goal: \$10000
- grant application : \$24500 (Art Commission, and MCDC)
- Other income source: \$7500 (From Tea Ceremony, self funding, personal donation)

Expense

1. Performance, DJ Services: \$10,500

This budget covers paying for performers, DJs(including sound equipment and technical support.), and lighting for the singer and dancer to create an exciting atmosphere, especially for the evening part of the festival.

2. Operation cost. (Event Equipment Rental and Amenity): \$20,000

1. Amenity rental (table, Chair, Tent, Generator, Lighting cost): \$4500
2. Operation cost: Police, Insurance, Waste Service, Mobile Restroom, Traffic Control: \$12000
3. Decoration: 3500

3. Marketing: \$23,000

1. Social Media: \$8000
2. News Paper: \$5000
3. Printing: \$4000
4. Yard Sign: \$1000
5. Event Marketing Campaign :\$5000

Texas Women's Society
Profit & Loss
January through December 2025

	Jan - Dec 25
Ordinary Income/Expense	
Income	
Direct Public Support	
Individ, Business Contributions	8,554.37
Total Direct Public Support	8,554.37
Grant	31,500.00
Program Income	
Membership Dues	2,700.00
Program Service Fees	31,212.67
Total Program Income	33,912.67
Total Income	73,967.04
Expense	
Business Expenses	
Software	166.64
Total Business Expenses	166.64
Operations	
bank charge	7.48
Books, Subscriptions, Reference	380.00
Company General Operation	779.15
Event Operation Supplier	20,880.54
Marketing Expense	34,959.30
Performance Expense	2,008.00
Supplies	83.00
Total Operations	59,097.47
Other Types of Expenses	
Insurance - Liability, D and O	864.00
Total Other Types of Expenses	864.00
Travel and Meetings	
Conference, Convention, Meeting	1,011.42
Travel and Meetings - Other	506.88
Total Travel and Meetings	1,518.30
Total Expense	61,646.41
Net Ordinary Income	12,320.63
Net Income	12,320.63

10:04 PM

05/02/26

Accrual Basis

Texas Women's Society
Balance Sheet
As of December 31, 2025

	Dec 31, 25
ASSETS	
Current Assets	
Checking/Savings	
cash	437.00
Chase-0096	5,500.00
chase5006	24,226.11
Total Checking/Savings	30,163.11
Total Current Assets	30,163.11
TOTAL ASSETS	30,163.11
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	2,900.00
Total Accounts Payable	2,900.00
Total Current Liabilities	2,900.00
Total Liabilities	2,900.00
Equity	
Profit from Event	14,942.48
Net Income	12,320.63
Total Equity	27,263.11
TOTAL LIABILITIES & EQUITY	30,163.11

Texas Women's Society
Profit & Loss
 January through December 2024

	Jan - Dec 24
Ordinary Income/Expense	
Income	
Direct Public Support	
Individ, Business Contributions	70.74
Total Direct Public Support	70.74
Grant	18,849.74
Program Income	
Membership Dues	300.00
Program Service Fees	40,203.98
Total Program Income	40,503.98
Total Income	59,424.46
Expense	
Operations	
Company General Operation	4,338.21
Event Operation Supplier	32,261.89
Marketing Expense	21,675.64
Printing and Copying	91.33
Total Operations	58,367.07
Other Types of Expenses	
Insurance - Liability, D and O	535.00
Total Other Types of Expenses	535.00
Total Expense	58,902.07
Net Ordinary Income	522.39
Net Income	522.39

Texas Women's Society
Balance Sheet
As of December 31, 2024

	Dec 31, 24
ASSETS	
Current Assets	
Checking/Savings	
Chase-0096	3,050.00
chase5006	15,489.58
Total Checking/Savings	18,539.58
Accounts Receivable	
Accounts Receivable	-3,597.10
Total Accounts Receivable	-3,597.10
Total Current Assets	14,942.48
TOTAL ASSETS	14,942.48
LIABILITIES & EQUITY	
Equity	
Profit from Event	14,420.09
Net Income	522.39
Total Equity	14,942.48
TOTAL LIABILITIES & EQUITY	14,942.48

Short Form
Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2025**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form, as it may be made public.

Go to www.irs.gov/Form990EZ for instructions and the latest information.**A For the 2025 calendar year, or tax year beginning****, 2025, and ending****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**TEXAS WOMEN SOCIETY**

Number and street (or P.O. box if mail is not delivered to street address)

Room/suite

PO Box 250128

City or town, state or province, country, and ZIP or foreign postal code

Plano, TX 75025**D** Employer identification number**88-3219610****E** Telephone number**F** Group Exemption
Number**G** Accounting Method: ☐ Cash ☒ Accrual Other (specify): _____**I** Website: **<https://texasws.org/>****J** Tax-exempt status (check only one) - ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**H** Check ☐ if the organization is **not**
required to attach Schedule B
(Form 990).**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other: _____**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, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ **73,967.****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 ☐

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	40,311.
	2	Program service revenue including government fees and contracts	2	30,956.
	3	Membership dues and assessments	3	2,700.
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events:		
	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	
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		
Expenses	7a	Gross sales of inventory, less returns and allowances	7a	
	b	Less: cost of goods sold	7b	
	c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c	
	8	Other revenue (describe in Schedule O)	8	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	73,967.
	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
Net Assets	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	57,931.
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe in Schedule O)	16	3,716.
	17	Total expenses. Add lines 10 through 16	17	61,647.
	18	Excess or (deficit) for the year (subtract line 17 from line 9)	18	12,320.
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	14,943.	
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	27,263.	

Part II **Balance Sheets** (see the instructions for Part II)

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

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments.	18,540.	22 30,163.
23	Land and buildings.	0.	23 0.
24	Other assets (describe in Schedule O).	0.	24 0.
25	Total assets	18,540.	25 30,163.
26	Total liabilities (describe in Schedule O).	3,597.	26 2,900.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	14,943.	27 27,263.

Part III **Statement of Program Service Accomplishments** (see the instructions for Part III)

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

What is the organization's primary exempt purpose? **Supporting and empowering women**

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28	Asian and Mid-Autumn Moon Festival celebrate rich culinary heritage of countries across Asia. Beyond the food, there are cultural performances, lantern displays, and storytelling	(Grants \$) If this amount includes foreign grants, check here	☐	28a	57,931.
29				29a	
30		(Grants \$) If this amount includes foreign grants, check here	☐	30a	
31	Other program services (describe in Schedule O)	(Grants \$) If this amount includes foreign grants, check here	☐	31a	
32	Total program service expenses (add lines 28a through 31a)			32	57,931.

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated - see the instructions for Part IV)

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

[illegible]

Part V

Other Information (Note the Schedule A and personal benefit contract 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 significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	X
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach 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	34	X
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	X
b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	
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	36	
37a Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	
b Did the organization file Form 1120-POL for this year?	37b	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?	38a	X
b If "Yes," complete Schedule L, Part II, and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911: ; section 4912: ; section 4955:		
b Section 501(c)(3), 501(c)(4), and 501(c)(29) 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	40b	X
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.		
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization.		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	X
41 List the states with which a copy of this return is filed: TX		
42a The organization's books are in care of: Jennie Shen Telephone no. 214-679-1853 Located at: PO Box 250128, Plano, TX ZIP + 4 75025		
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: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	42b	X
c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country:	42c	X
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year	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	44a	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	44b	X
c Did the organization receive any payments for indoor tanning services during the year?	44c	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.	44d	
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	X
b 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	45b	

	Yes	No
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	46	X

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations 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 ☐

	Yes	No
47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47	
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b If "Yes," was the related organization a section 527 organization?	49b	

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."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000 **0****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 business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000. **0****52** Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations 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 Jennie Shen, President		Date		
	Officer's name and title				
Paid Preparer Use Only	Preparer's name Pei Huang	Preparer's signature	Date 04/24/2026	Check ☐ if self-employed	PTIN P00710021
	Firm's name MCKEE AND HUANG, LLC			Firm's EIN 20-5258119	
	Firm's address 5501 Lindsey Drive PLANO, TX 75093			Phone no. 972-208-5106	

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

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2025

Open to Public
Inspection

Name of the organization

TEXAS WOMEN SOCIETY

Employer identification number

88-3219610

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 12, 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 (Form 990).)
- 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)(vii).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☒ 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.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization must generally satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(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 .						0.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(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 VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 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

14 Public support percentage for 2025 (line 6, column (f), divided by line 11, column (f))	14	00.00%
15 Public support percentage from 2024 Schedule A, Part II, line 14	15	00.00%
16a 33 1/3% support test - 2025. 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		☐
b 33 1/3% support test - 2024. 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		☐
17a 10%-facts-and-circumstances test - 2025. 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		☐
b 10%-facts-and-circumstances test - 2024. 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		☐
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		☐

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

(Complete only if you checked the box on line 10 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) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		7,640.	27,980.	48,918.	73,967.	158,505.
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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
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		7,640.	27,980.	48,918.	73,967.	158,505.
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						
c Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8 Public support. (Subtract line 7c from line 6.)						158,505.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
9 Amounts from line 6		7,640.	27,980.	48,918.	73,967.	158,505.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	0.	7,640.	27,980.	48,918.	73,967.	158,505.
14 First 5 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 2025 (line 8, column (f), divided by line 13, column (f))	15	100.00%
16 Public support percentage from 2024 Schedule A, Part III, line 15	16	00.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2025 (line 10c, column (f), divided by line 13, column (f))	17	00.00%
18 Investment income percentage from 2024 Schedule A, Part III, line 17	18	00.00%
19a 33 1/3% support tests - 2025. 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 - 2024. 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 Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

- 11** Has the organization accepted a gift or contribution from any of the following persons?
- a** A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?
- b** A family member of a person described on line 11a above?
- c** A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in **Part VI**.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 1** Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2** Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 1** Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 1** Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2** Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).
- 3** By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a** ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- b** ☐ The organization is the parent of each of its supported organization. Complete **line 3** below.
- c** ☐ The organization supported a governmental supported organization. Describe in **Part VI** how you supported a governmental supported organization (see instructions). (see instructions).

2 Activities Test. Answer lines 2a and 2b below.

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of its supported organization(s)? If "Yes," then in **Part VI** identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b** Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

	Yes	No
2a		
2b		

3 Parent of Supported Organizations. Answer lines 3a, 3b, and 3c below.

- a** Are the organization and its supported organization(s) part of an integrated system (for example, a hospital system)? If "Yes," provide details in **Part VI**.
- b** Did the organization direct the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.
- c** Did the organization have the power to regularly appoint or elect (and remove) a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in **Part VI**.

	Yes	No
3a		
3b		
3c		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Total annual distributions. Add lines 1 through 5.	6
7	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	7
8	Distributable amount for 2025 from Section C, line 6	8
9	Line 7 amount divided by line 8 amount	9

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2025	(iii) Distributable Amount for 2025
1 Distributable amount for 2025 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2025 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2025			
a From 2020			
b From 2021			
c From 2022			
d From 2023			
e From 2024			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2025 distributable amount			
i Carryover from 2020 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2025 from Section D, line 6: \$			
a Applied to underdistributions of prior years			
b Applied to 2025 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2025, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2025. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2026 . Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2021			
b Excess from 2022			
c Excess from 2023			
d Excess from 2024			
e Excess from 2025			

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, 3b, and 3c; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5 and 7; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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**Schedule B
(Form 990)**

(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

TEXAS WOMEN SOCIETY

Employer identification number

88-3219610

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 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 an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 $\frac{1}{3}$ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization

TEXAS WOMEN SOCIETY

Employer identification number

88-3219610**Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	McKinney Art Commision Grant 111 N. Tennessee St. Mckinney, TX 75069	\$ 9,500.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
2	McKinney Community Development Cent 401 E. Virginia Street Mckinney, TX 75069	\$ 22,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

TEXAS WOMEN SOCIETY

Employer identification number

88-3219610**Part II****Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____

Name of organization

TEXAS WOMEN SOCIETY

Employer identification number

88-3219610**Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

Transactions With Interested Persons
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27,
28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open To Public
Inspection

Name of the organization TEXAS WOMEN SOCIETY	Employer identification number 88-3219610
--	---

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. \$

Part II Loans to and/or From Interested Persons
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						\$						

Part III Grants or Assistance Benefiting Interested Persons
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Part IV Business Transactions Involving Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L. See instructions.

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**SCHEDULE O
(Form 990)**

(Rev. December 2024)

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 Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

TEXAS WOMEN SOCIETY

Employer identification number

88 - 3219610

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Name of the organization

Employer identification number

TEXAS WOMEN SOCIETY**88-3219610****Part I Line 16****Other office expenses \$1167.00****Part I Line 16****Information technology \$167.00****Part I Line 16****Travel \$507.00****Part I Line 16****Conferences, conventions, and meetings \$1011.00****Part I Line 16****Insurance \$864.00****Part II Line 26****Accounts payable and accrued expenses. Beginning:\$3597.00 Ending: \$2900.00**

**Do Not File
Client Copy**



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

TEXAS WOMEN SOCIETY
PO BOX 250128
PLANO, TX 75025

Date:
01/25/2023
Employer ID number:
88-3219610
Person to contact:
Name: Customer Service
ID number: 31954
Telephone: 877-829-5500
Accounting period ending:
December 31
Public charity status:
509(a)(2)
Form 990 / 990-EZ / 990-N required:
Yes
Effective date of exemption:
June 07, 2022
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053419001743

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Texas Women Society	2 Business name/disregarded entity name, if different from above.
3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate ☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. ☒ Other (see instructions) No n profit	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i>
3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions ☐	5 Address (number, street, and apt. or suite no.). See instructions. PO Box 250128 6 City, state, and ZIP code Plano, TX 75025
7 List account number(s) here (optional)	Requester's name and address (optional)

Part I	Taxpayer Identification Number (TIN)
---------------	---

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number

			-			-				
--	--	--	---	--	--	---	--	--	--	--

or

Employer identification number

8	8	-	3	1	1	9	6	1	0
---	---	---	---	---	---	---	---	---	---

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II	Certification
----------------	----------------------

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Jennie Shen	Date	6/15/2026
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they