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Form 990-EZ

Department of the Treasury  
Internal Revenue Service

# Short Form

## Return of Organization Exempt From Income Tax

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

- For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.
- The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2004

Open to Public  
Inspection

|  |  |   |                    |             |        |
|--|--|---|--------------------|-------------|--------|
| <b>A For the 2004 calendar year, or tax year beginning</b>   |  | January 6                               | , 2004, and ending | December 31 | , 2004 |
| <b>B Check if applicable</b>   |  | <b>D Employer identification number</b> |                    |             |        |
| <input type="checkbox"/> Address change<br><input type="checkbox"/> Name change<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Final return<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Application pending |  | 20-0554856                              |                    |             |        |
| <b>C Name of organization</b>  |  | <b>E Telephone number</b>               |                    |             |        |
| Women's Association of Venture & Equity, Inc.  |  | 1.877.928.3606                          |                    |             |        |
| <b>See Specific Instructions.</b>  |  | <b>F Group Exemption Number</b>         |                    |             |        |
|  |  |   |                    |             |        |

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

- G Accounting method**  Cash  Accrual  
Other (specify) ►

**I Website:** ► <https://women-wave.org/>

**J Organization type (check only one)**  501(c)(6) (insert no)  4947(a)(1) or  527

- H Check**  If the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

**K Check**  If the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

**L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file Form 990 instead of Form 990-EZ ► \$ 25,205.00**

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| <b>Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances</b> <small>(See page 37 of the instructions.)</small>     |   | <b>RECEIVED</b> |  |  |  |
| <b>Revenue</b>  | 1 Contributions, gifts, grants, and similar amounts received  | 1               | 10,000.00                                  |  |  |
|   | 2 Program service revenue including government fees and contracts   | 2               | 15,005.00                                  |  |  |
|   | 3 Membership dues and assessments   | 3               | 200.00                                     |  |  |
|   | 4 Investment income   | 4               | 0  |  |  |
|   | 5a Gross amount from sale of assets other than inventory  | 5a              | TPR BRANCH 0                               |  |  |
|   | b Less cost or other basis and sales expenses   | 5b              | OGDEN 0                                    |  |  |
|   | c Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)  | 5c              | 0.00                                       |  |  |
|   | 6 Special events and activities (attach schedule) If any amount is from gaming, check here ► <input type="checkbox"/>                               | 6a              | 0  |  |  |
|   | a Gross revenue (not including \$ _____ of contributions reported on line 1)  | 6b              | 0  |  |  |
| b Less direct expenses other than fundraising expenses  | 6c  | 0.00            |  |  |  |
| c Net income or (loss) from special events and activities (line 6a less line 6b)  | 7a  | 0               |  |  |  |
| 7a Gross sales of inventory, less returns and allowances  | 7b  | 0               |  |  |  |
| b Less cost of goods sold   | 7c  | 0.00            |  |  |  |
| c Gross profit or (loss) from sales of inventory (line 7a less line 7b)   | 8   | 0               |  |  |  |
| 8 Other revenue (describe ► )   | 9   | 25,205.00       |  |  |  |
| 9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)   |   |                 |  |  |  |
| <b>Expenses</b>   | 10 Grants and similar amounts paid (attach schedule)  | 10              | 0  |  |  |
|   | 11 Benefits paid to or for members  | 11              | 0  |  |  |
|   | 12 Salaries, other compensation, and employee benefits  | 12              | 0  |  |  |
|   | 13 Professional fees and other payments to independent contractors  | 13              | 18,393.77                                  |  |  |
|   | 14 Occupancy, rent, utilities, and maintenance  | 14              | 0  |  |  |
|   | 15 Printing, publications, postage, and shipping  | 15              | 13,151.98                                  |  |  |
|   | 16 Other expenses (describe ► Meeting expenses and general administrative costs.)   | 16              | 19,202.63                                  |  |  |
|   | 17 Total expenses (add lines 10 through 16)   | 17              | 50,748.38                                  |  |  |
| <b>Net Assets</b>   | 18 Excess or (deficit) for the year (line 9 less line 17)   | 18              | (25,543.38)                                |  |  |
|   | 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              | 0.00                                       |  |  |
|   | 20 Other changes in net assets or fund balances (attach explanation)  | 20              | 0  |  |  |
|   | 21 Net assets or fund balances at end of year (combine lines 18 through 20)   | 21              | (25,543.38)                                |  |  |
| <b>Part II Balance Sheets</b> —If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ |   |                 |  |  |  |
| (See page 40 of the instructions )  |   |                 | (A) Beginning of year      (B) End of year |  |  |
| 22 Cash, savings, and investments   | 0   | 22              | 0  |  |  |
| 23 Land and buildings   | 0   | 23              | 0  |  |  |
| 24 Other assets (describe ► )   | 0   | 24              | 0  |  |  |
| 25 Total assets   | 0.00  | 25              | 0.00                                       |  |  |
| 26 Total liabilities (describe ► )  | 0   | 26              | 25,543.38                                  |  |  |
| 27 Net assets or fund balances (line 27 of column (B) must agree with line 21)  | 0.00  | 27              | (25,543.38)                                |  |  |

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

Form 990-EZ (2004)

|  |  |  |  |
|--|--|--|--|
| <b>Part III Statement of Program Service Accomplishments</b> (See page 41 of the instructions) |  |  |  |
|  |  |  | <b>Expenses</b><br>(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others) |

What is the organization's primary exempt purpose? To provide networking and mentorship for women in PE/VC. Describe what was achieved in carrying out the organization's exempt purposes in a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

|  |  |     |      |
|--|--|-----|------|
| 28   | WAVE held a morning seminar and networking event in New York, NY. Over fifty women in the venture capital and private equity fields attended. The event provided attendees the opportunity to meet with their peers and discuss common experiences in their field. (Grants \$ )                | 28a |      |
| 29   | WAVE held an evening networking event in Boston, MA. Over forty women in the venture capital and private equity fields attended. Attendees had the opportunity to meet other women in their profession, share mutual experiences and lay the foundation for mentor relationships. (Grants \$ ) | 29a |      |
| 30   | WAVE also held several content programs. At these events, speakers discussed topics relevant to women working in the private equity and venture capital industries. After the seminars ended, attendees had the opportunity to socialize and discuss the program. (Grants \$ )                 | 30a |      |
| 31   | Other program services (attach schedule) (Grants \$ )  | 31a |      |
| <b>32 Total program service expenses</b> (add lines 28a through 31a) |  | 32  | 0.00 |

|   |  |   |  |  |
|---|--|---|--|--|
| <b>Part IV List of Officers, Directors, Trustees, and Key Employees</b> (List each one even if not compensated See page 41 of the instructions) |  |   |  |  |
| (A) Name and address  | (B) Title and average hours per week devoted to position | (C) Compensation (If not paid, enter -0-) (D) Contributions to employee benefit plans & deferred compensation | (E) Expense account and other allowances |  |
| Please see attached.  |  |   |  |  |
|   |  |   |  |  |
|   |  |   |  |  |
|   |  |   |  |  |

|  |   |  |  |            |           |  |
|--|---|--|--|------------|-----------|--|
| <b>Part V Other Information</b> (Note the attachment requirement in General Instruction V, page 14.) |   |  |  | <b>Yes</b> | <b>No</b> |  |
| 33   | Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity  |  |  |            | X         |  |
| 34   | Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes  |  |  |            | X         |  |
| 35   | If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T |  |  |            |           |  |
| a  | Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?  |  |  |            | X         |  |
| b  | If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?   |  |  |            |           |  |
| 36   | Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement)   |  |  |            | X         |  |
| 37a  | Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a   0  |  |  |            |           |  |
| b  | Did the organization file <b>Form 1120-POL</b> for this year?   |  |  |            | X         |  |
| 38a  | Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?                   |  |  |            |           |  |
| b  | If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved   |  |  |            | 38b       |  |
| 39   | 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  | 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ► , section 4912 ► , section 4955 ►  |  |  |            |           |  |
| b  | 501(c)(3)and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation      |  |  |            |           |  |
| c  | Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958 ►   |  |  |            |           |  |
| d  | Enter Amount of tax on line 40c, above, reimbursed by the organization ►  |  |  |            |           |  |
| 41   | List the states with which a copy of this return is filed ► Massachusetts   |  |  |            |           |  |
| 42   | The books are in care of ► The Beaumont Group Telephone no ► 212.867.0228   |  |  |            |           |  |
|  | Located at ► 551 Fifth Avenue, Suite 1625 New York, NY ZIP + 4 ► 10176  |  |  |            |           |  |
| 43   | Section 4947(a)(1)nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041— Check here ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ► 43                     |  |  |            |           |  |

Please Sign Here

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

Signature of officer

Sarah N.A. Camougis, Esq.

5/20/2013

Date

Type or print name and title

|                          |   |            |   |   |
|--------------------------|---|------------|---|---|
| Paid Preparer's Use Only | Preparer's signature ►  | Date       | Check if self-employed ► <input type="checkbox"/> | Preparer's SSN or PTIN (See Gen Inst W) |
|                          | Firm's name (or yours if self-employed), address, and ZIP + 4 ► | EIN ►      |   |   |
|                          |   | Phone no ► |   |   |

Women's Association of Venture & Equity, Inc.  
80 Hathaway Drive  
Stratford, CT 06615-7304  
EIN: 20-0554856

**2004 990-EZ Short Form Return of Organization Exempt From Income Tax**

Part I, Item 16- Other expenses

Women's Association of Venture and Equity, Inc. ("WAVE") incurred expenses for its member meetings, including catering, travel and venue expenses, and for general administrative purposes.

Part III- Exempt Purpose

WAVE is a voluntary professional organization with the primary purpose to provide networking and mentoring for women in venture capital, private equity and professions that serve venture capital and private equity, such as legal, accounting and executive recruiting.

Part IV:

List of Officers, Directors, Trustees, and Key Employees

| <b>Name and address</b>  | <b>Title and average hours per week devoted to position</b> | <b>Compensation</b> | <b>Contributions to employee benefit plans and deferred compensation</b> | <b>Expense account and other allowances</b> |
|--|---|---------------------|--|---|
| Susan A. Keller<br>2800 Financial Plaza<br>Providence, RI 02903                                | President<br>Director<br>1 hour                             | \$0                 | \$0  | \$0   |
| Hope Vaughn<br>20 West 22 <sup>nd</sup> Street<br>12 <sup>th</sup> Floor<br>New York, NY 10010 | Director<br>1 hour  | \$0                 | \$0  | \$0   |
| Sarah N. Camougis<br>101 Federal Street<br>Boston, MA 02110                                    | Director<br>1 hour  | \$0                 | \$0  | \$0   |
| Lydie Szabo Brown<br>One Belmont Avenue<br>9 <sup>th</sup> Floor<br>Bala Cynwyd, PA<br>19904   | Director<br>1 hour  | \$0                 | \$0  | \$0   |