

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

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

Open to Public Inspection

A F	or th	le 2008 calendar year, or tax year beginning $JUL~1~,~2008$ and ending	JUN 30, 2009	
Вс	heck if	Please C Name of organization	D Employer identifi	cation number
а	pplicat	"   use   RS   CHICAGO METROPOLITAN BATTERED WOMEN'S		
	Addr   chan	ess label or NETWORK		
	Nam-	type	36-3	331605
	]initia returi	See N. J. Co. B.O. Leavest Market and Market	ute E Telephone numbe	r
	Term	in-   Specific   202 NODWH WARACH AVENITE   2222		500730
	Amer	nded tions	G Gross receipts \$	1,051,689.
	Appl:	ca- CHICAGO, IL 60601	H(a) Is this a group re	
	pend	F Name and address of principal officer:DAWN DALTON	for affiliates?	Yes X No
		203 N WABASH AVENUE NO. 2323, CHICAGO, IL	6 H(b) Are all affiliates inc	
IT	ax-ex	empt status. X 501(c) ( 3	<del></del>	list (see instructions)
		ite: ► BATTEREDWOMENSNETWORK.ORG	H(c) Group exemption	
KT	уре о	f organization: X Corporation		A State of legal domicile: IL
	irt I			
_	1	Briefly describe the organization's mission or most significant activities. TO IMPRO	VE SERVICE TO	BATTERED
Activities & Governance		WOMEN IN ILLINOIS BY PROVIDING A FORUM FOR T		
rna	2	Check this box I if the organization discontinued its operations or disposed of m		
)ve	3	Number of voting members of the governing body (Part VI, line 1a)	3	11
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	11
S S	5	Total number of employees (Part V, line 2a)	5	34
/tie	6	Total number of volunteers (estimate if necessary)	6	31
cţ	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
Ā	1	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
_		The amounts such as a most in more from the state of the second of the s	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	1,060,704.	957,807.
2	9	Program service revenue (Part VIII, line 2g)	56,436.	41,811.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,738.	1,411.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	34,717.	22,418.
	12	Total revenue - add lines-8 through, Li, (rips) aqual Part VIII, column (A), line 12)	1,154,595.	1,023,447.
_	13	Grants and similar amounts pard (* art IX, column (A), lines 1-3)	1,131,333.	7,000.
	14	Benefits paid to or for fiembers (Part IX, column (A) (A) (Part IX)		7,0001
ro.	15	Salaries, other composation Apply Salaries, other is (Parl IX, column (A), lines 5-10)	918,159.	911,270.
Expenses		Professional fundraising fees (Part IX, column (A), Intel 11e)		<u> </u>
ben		Total fundraising expenses (Part IX, column (Q) Time 25) 36,999.		
Ä	17	Other expenses (Part IX, column A) Tires 1-fa 1-fa, 117-241)	205,474.	186,717.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,123,633.	1,104,987.
		Revenue less expenses. Subtract line 18 from line 12	30,962.	-81,540.
<u> </u>	19	nevenue less expenses. Subtract line 16 nont line 12	•	
Assets or d Balances	20	Total assets (Part X, line 16)	Beginning of Year 294,611.	End of Year 208, 261.
Ass Bal	20	Total liabilities (Part X, line 26)	102,608.	97,798.
det/		` ' ' '	192,003.	110,463.
Do	22 irt ]]	Net assets or fund balances. Subtract line 21 from line 20  Signature Block	132,003.	110,403.
1.0		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statement	nts, and to the best of my knowled	ge and belief, it is true, correct.
_		and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	dge	go 2010 201101, 11 10 200, 0011001,
⊒ ⋛sigr		1 lalta.	1 1/0//	ıΛ
		Signature of officer	Date	<u>U</u>
Her	е	1'	Date	
<b>***</b>		DAWN DALTON, EXECUTIVE DIRECTOR Type or print name and title		
<u>r</u> —		I Date	Check if Prepar	er's identifying number
Paid			self- (see in:	structions)
Prep		signature / / / / / / / / / / / / / / / / / / /	employed	
∐ Use	Only	yours if SEDICH FOR, LID.	EIN ►	
Use		self-employed), address, and CAN RROOM II 60523 9935		20 054 1400
⋖		ZIP+4 OAK BROOK, IL 60523-8835	Phone no. > 6	30-954-1400
May	the	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
• /		10.00 I HA For Privacy Act and Panaryork Reduction Act Notice see the senarate	inaturations	Form <b>990</b> (2008)

	CHICAGO METROPOLITAN BATTERED WOMEN'S	
	990 (2008) <b>NETWORK</b> 36-3331605 Page	2
Pai	t'III Statement of Program Service Accomplishments (see instructions)	
1	Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION	
	THE CHICAGO METROPOLITAN BATTERED WOMEN'S NETWORK IS A COLLABORATIVE	
	MEMBERSHIP ORGANIZATION THAT IMPROVES THE LIVES OF BATTERED WOMEN,	_
	THEIR CHILDREN, AND OTHERS IMPACTED BY DOMESTIC VIOLENCE BY LEADING	_
		_
	PUBLIC POLICY AND ADVOCACY EFFORTS, PROVIDING EDUCATION AND RAISING	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	0
	If "Yes", describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	0
	If "Yes", describe these changes on Schedule O.	•
4	•	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code ) (Expenses \$ 165,542 · including grants of \$ ) (Revenue \$ 3,466 ·	
	ADVOCACY FOR SYSTEMS CHANGE AND SPEAKING AS THE COLLECTIVE VOICE OF THE	Ĺ
	DOMESTIC VIOLENCE COMMUNITY	-
	DOMEDITE VIOLENCE COMMONTIT	
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4b	(Code ) (Expenses \$ 583,955 • including grants of \$ ) (Revenue \$	)
4b	(Code ) (Expenses \$ 583,955 including grants of \$ ) (Revenue \$ HELP LINE PROGRAM AVAILABLE 24 HOURS A DAY, 365 DAYS OF THE YEAR WITH	)
4b		) —
4b	HELP LINE PROGRAM AVAILABLE 24 HOURS A DAY, 365 DAYS OF THE YEAR WITH TRAINED PERSONNEL TO PROVIDE SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE	) —
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<b>4</b> b	HELP LINE PROGRAM AVAILABLE 24 HOURS A DAY, 365 DAYS OF THE YEAR WITH TRAINED PERSONNEL TO PROVIDE SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE	) — — —
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	HELP LINE PROGRAM AVAILABLE 24 HOURS A DAY, 365 DAYS OF THE YEAR WITH TRAINED PERSONNEL TO PROVIDE SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE AND THEIR CHILDREN.	) —
4b	HELP LINE PROGRAM AVAILABLE 24 HOURS A DAY, 365 DAYS OF THE YEAR WITH TRAINED PERSONNEL TO PROVIDE SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE AND THEIR CHILDREN.  (Code: )(Expenses \$ 261,871. including grants of \$ )(Revenue \$ 38,345.)	) ————————————————————————————————————
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4c	HELP LINE PROGRAM AVAILABLE 24 HOURS A DAY, 365 DAYS OF THE YEAR WITH TRAINED PERSONNEL TO PROVIDE SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE AND THEIR CHILDREN.  (Code: )(Expenses	) ————————————————————————————————————
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832002 12-18-08

# Form 990 (2008) NETWORK Part IV Checklist of Required Schedules

1 is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  1				Yes	No
2 Is the organization required to complete Schedule B. Schedule of Continutions?  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II  Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II  Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II  Did the organization maintain any donor adversed funds or any secounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I  Did the organization report any donor adversed funds or any secounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  Did the organization report and amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part IV  Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part IV  Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part IV  Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?  If "Yes," complete Schedule D, Part IV, IV, IVII, IVII, IV, IV, IVII, IV, IV	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Dut the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Dut the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Dut the organization subject to the section 603(s) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(s) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II Section 501(c)(4), 501 the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Section 501(c)(4), 501 the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV Section 603(c) Part		If "Yes," complete Schedule A	1	X	
public office? If Yes, "complete Schedule C, Part II Section 501(c)(3) organizations. Did the organizations is the organization subject to the section 6033(s) notice and reporting requirement and proxy tax? If Yes, "complete Schedule C, Part III Did the organization manitima may doner advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes, "complete Schedule D, Part II Did the organization mention and areas, or historic structures? If Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debit management, credit repair, or debit negotation services? If Yes, "complete Schedule D, Part IV Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debit management, credit repair, or debit negotation services? If Yes, "complete Schedule D, Part IV Did the organization hold assets in term, permanent, or quasi-endoments? If Yes," complete Schedule D, Part V Did the organization hold assets in term, permanent, or quasi-endoments? If Yes," complete Schedule D, Part V Did the organization and amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debit management, credit repair, or debit negotation services? If Yes, "complete Schedule D, Part V Did the organization hold assets in term, permanent, or quasi-endoments? If Yes, "complete Schedule D, Part V Did the organization name and mount in Part X, line 10, 12, 15, or 25? If Yes, "complete Schedule D, Part V V Did the organization nament an adulted financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If Yes, "complete Schedule D, Part X, IV X, I	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
Section 501(c)(3) organizations. Dut the organization engage in lobbying activities? If "res," complete Schedule C, Part II 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(c) notice and reporting requirement and proxy tax? If "res," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "res," complete Schedule D, Part II 7 Did the organization receive or hold a conservation easiement, including easiements to preserve open space, the environment, habror land areas, or historic structures? If "res," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV 9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X or provide credit counseling and accordance with GAPP? If "Yes," complete Schedule D, Part IV 11 X 11 X 12 X 12 X 13 Did the organization report an amount in Part X, line 21; and 12 X 12 X 13 Did the organization report an existed in "Yes," complete Schedule F, Part II 11 X 12 X 13	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Section 501(c)(4), 601(c)(6) and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III  6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I I  7 Did the organization research or hold a conservation easiment, including easiments to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II I  8 Did the organization report an amount in Part X, ine 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debit management, credit repair, or debit negotiation services? If "Yes," complete Schedule D, Part IV ID off the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V ID off the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V ID off the organization report an amount in Part X, lines 10, 12, 15, or 25?  If "Yes," complete Schedule D, Part V IV, IV, IV, IV, IV, IV, IV, IV, IV, I		public office? If "Yes," complete Schedule C, Part I	3		
reporting requirement and proxy tax? // *Yes,* complete Schedule C, Part III  Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? // *Yes,* complete Schedule D, Part II  Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? // *Yes,* complete Schedule D, Part III  Did the organization maintain collections of works of art, historical treasures, or other similar assets? // *Yes,* complete Schedule D, Part IV  Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotation services? // *Yes,* complete Schedule D, Part IV  Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?  If Yes, ** Complete Schedule D, Parts V, IV, IV, X, or X as applicable  10 bit the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? // *Yes,* ** complete Schedule D, Parts X, IX, IX, and XIII  Did the organization a school as described in section 170(b)(1)(A)(IV) // IV Yes, ** complete Schedule E  11 bit the organization as chool as described in section 170(b)(1)(A)(IV) // IV Yes, ** complete Schedule E  12 bit the organization as chool as described in section 170(b)(1)(A)(IV) // IV Yes, ** complete Schedule E  13 cytical States IV Yes, ** complete Schedule F, Part II  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States IV Yes, ** complete Schedule F, Part II  Did the organization report more than \$15,000 on Part IX, column (A), line 11 in IV Yes, ** complete Schedule G, Part II  Did the organization report more than \$15,000 on Part IX, column	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I  7 Did the organization receive or hold a conservation easiment, including easiments to preserve open space, the environment, histonic land areas, or histonic structures? If "Yes," complete Schedule D, Part II  8 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV  10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV  11 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV  12 Did the organization receive an audited Innancial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Part X, XI, II, and XIII  13 Is the organization receive an audited Innancial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Part X, XI, II, and XIII  14 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside of the U.S.?  15 Did the organization have aggregate revenues or expenses of more than \$5,000 of grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III  15 Did the organization report more than \$15,000 on Part X, column (A), line 11 organization expendence on Part X, column (A), line 2, more than \$5,000 of grants or assistance to individuals located outside the	5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I   1   2   X   2   3   3   3   3   3   3   3   3   3		reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
7 Dd the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III	6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			i
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part V  10 Did the organization report an amount in Part X, line 3 (1, 2, 13, 15, or 25?  If "Yes," complete Schedule D, Part V, VIII, IX, or X as applicable Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?  If "Yes," complete Schedule D, Parts V, VII, VIII, IX, or X as applicable Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?  If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable Did the organization as chool as described in section 170(b)(1)(A)(II) If "Yes," complete Schedule E Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activates outside the U.S? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report more than \$15,000 on Part IX, column (A), line 11er II "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 on Part IX, column (A), line 9a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 on Part IX, column (A), line 9a? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$15,000 on Part IX, column (A), line 9a? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$15,000 on Part IX, column (A), line 9a? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$15,000 on Part IX, column (A), line 9a? I	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			İ
Schedule D, Part III  Did the organization report an amount in Part X, line 21: serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V  10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?  If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  11 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAPP? If "Yes," complete Schedule D, Parts XI, XII, and XIII  13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  14 Did the organization analytic and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II  17 Did the organization report more than \$15,000 on Part IX, column (A), line 110 If "Yes," complete Schedule G, Part II  18 Did the organization organization report more than \$5,000 on Part IX, column (A), line 110 If "Yes," complete Schedule I, Part II II  18 Did the organization report more than \$5,000 on Part IX, column (A), line 110 If "Yes," complete Schedule I, Part II II  19 Did the organization organized more protore than \$5,000 on Part IX, column (A), line 110 If "Yes," complete Schedule I, Part II II  20 Did the organization oreport more than \$5,000 on Part IX, column (A), line 110 If "Yes," complete Schedule I, Part II II  21 Did the organizatio		the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debit management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization do lad sests in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part V, IVII, IVII, IV, IVII, IV, IV, IV, IV	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  10 bit the organization hold assets in term, permanent, or quasive-endowments? If "Yes," complete Schedule D, Part V  11 Dit the organization proport an amount in Part X, lines 10, 12, 13, 15, or 27, 17 Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  12 Dit the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII  13 Is the organization as chool as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  14 Did the organization maintain an office, employees, or agents outside of the U.S.?  15 Did the organization report an Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part II  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II  16 Did the organization report more than \$15,000 on Part IX, column (A), line 1? If "Yes," complete Schedule G, Part II  17 Did the organization report more than \$15,000 on Part IX, column (A), line 1? If "Yes," complete Schedule G, Part II  18 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  20 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and II  21 Did the organization have a tax-exempt bond is sue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," complete Schedule I, Part I and II  2		Schedule D, Part III	8		Х
10 Did the organization hold assets in term, permanent, or quasi-endowments? // *Yes, *complete Schedule D, Part V  11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?  12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GARP? // *Yes, *complete Schedule D, Part X/, X/II, and X/II  13 Is the organization as school as described in section 170(b/(1)/(A)(ii) // *I**'es, *complete Schedule E  14 Did the organization maintain an office, employees, or agents outside of the U.S.?  15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? // *Yes, *complete Schedule F, Part II  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? // *Yes, *complete Schedule F, Part II  16 Did the organization report more than \$15,000 on Part VIII, lines 1 to and 8a? // *Yes, *complete Schedule G, Part II  17 Did the organization report more than \$15,000 on Part VIII, lines 1 to and 8a? // *Yes, *complete Schedule G, Part II  18 Did the organization report more than \$15,000 on Part VIII, lines 1 to and 8a? // *Yes, *complete Schedule G, Part II  19 Did the organization report more than \$15,000 on Part VIII, lines 1 to and 8a? // *Yes, *complete Schedule G, Part II  20 Did the organization report more than \$15,000 on Part VIII, lines 1 to and 8a? // *Yes, *complete Schedule G, Part II  21 Did the organization report more than \$15,000 on Part VIII, lines 1 to and 8a? // *Yes, *complete Schedule G, Part II  22 Did the organization report more than \$15,000 on Part VIII, lines 1 to and 8a? // *Yes, *complete Schedule G, Part II  23 Did the organization report more than \$5,000 on Part IX, column (A), line 1? // *Yes, *complete Schedule G, Part II  24 Did the organization have a tax-exempt bo	9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide			
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 257  If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  2 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII  13 Is the organization as school as described in section 170(b)(1)(A)(II)* If "Yes," complete Schedule E  14 Did the organization as chool as described in section 170(b)(1)(A)(II)* If "Yes," complete Schedule E  15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part II  16 Did the organization perot on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III  17 Did the organization perot on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III  18 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part III  19 Did the organization perort more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part III  19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H  20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H  21 Did the organization operate one or more hospitals? If "Yes," complete Schedule H  22 Did the organization perort more than \$5,000 on Part IX, column (A), line 27 If "Yes," complete Schedule I, Part II and III  23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questron		credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable   Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII   12	10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII  13 Is the organization as school as described in section 170(b)(1)(A)(I)(P) If "Yes," complete Schedule E  14 Did the organization have aggregate revenues or expenses seed for the U.S.?  15 Did the organization have aggregate revenues or expenses seed from than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part II  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part III  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III  17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II  18 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II  18 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III  19 X  20 Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Parts I and II  21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  22 Did the organization asswer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III  23 Did the organization have a tax-exempt bond issue with an outstanding an any time during the year to defease any tax-exempt bonds?  24 Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  24 Did the organization as an "on behalf of" issuer for bonds o	11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII  13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  14 Dd the organization maintain an office, employees, or agents outside of the U.S.?  15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I    15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II    16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III    17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II    18 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II    19 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II    19 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule I, Parts I and II    20 Did the organization report more than \$5,000 on Part IX, column (A), line 11f "Yes," complete Schedule I, Parts I and II    21 Did the organization neport more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III    22 Did the organization are at axempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K, If "No", go to question 25  24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time d		If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Х	
13	12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			ĺ
14a Did the organization maintain an office, employees, or agents outside of the U.S.?  b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I    15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part I    15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part I    16 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I    17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I    18 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I    19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part II    19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part II    19 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II    20 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and II    21 Did the organization naiswer "Yes to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and II    22 Did the organization naiswer "Yes to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule K, If "No", go to question 25    b Did the organization must an approceeds of tax-exempt bonds beyond a temporary period exception?  24b    25c    b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I   15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II   16 X   16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III   16 X   16 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II   17 X   18 Did the organization report more than \$15,000 on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II   18 X   19 Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Part II   19 X   18 X   19 Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Parts I and II   19 X   19 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and II   19 X   19 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and II   19 X   10 Did the organization nawer "Yes" to Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III   19 X   10 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K, If "No", go to question 25   24a X   24a X   24a X   24b   25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I   25a X   25a X   25a X   25a X   2	13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
and program service activities outside the U.S ? If "Yes," complete Schedule F, Part I  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III  17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II  18 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part III  19 X  20 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III  21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III  22 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III  23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III  24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K, If "No", go to question 25  25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  26 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  27 Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I  27 Did the organizati	14a		14a		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III  17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II  18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III  19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III  19 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III  20 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  21 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  21 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No", go to question 25  24 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  25 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  26 Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part II  26 Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," co	b				
located outside the United States? If "Yes," complete Schedule F, Part II  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III  17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I  18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H  21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III  22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III  24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No", go to question 25  25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  26 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  27 Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II  27 Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part III  28 Did the organization provide a grant or other assistance to an officer, director, trustee, key					X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III  17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II  18 Did the organization report more than \$15,000 total on Part VIII, lines 11e? If "Yes," complete Schedule G, Part III  19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  20 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III  21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III  23 Did the organization naswer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III  24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No", go to question 25  25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  26 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  26 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  27 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part II  28 Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part II	15				٠,,
located outside the United States? If "Yes," complete Schedule F, Part III  Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I  Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III  Did the organization operate one or more hospitals? If "Yes," complete Schedule H  Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III  Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No", go to question 25  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III  The transaction of the organization individual? If "Yes," complete		•	15		X
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Form 990 (2008)

NETWORK

36-3331605 Page 4

# Part IV | Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an	1		
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			}
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		x
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х

orm	990 (2008) NETWORK 36-333	1605	P	age 5
Par	t'V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable	7		1
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 3	4		<u> </u>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	<u> </u>	ļ	<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	<u> </u>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		1	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	<u> </u>	X
b	If "Yes," enter the name of the foreign country: ▶			ł
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and		İ	
	Financial Accounts.		<u> </u>	<u> </u>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c	Ь—	<u> </u>
6a	Did the organization solicit any contributions that were not tax deductible?	6a	<b> </b>	X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		1	
	were not tax deductible?	6b	<b>↓</b> —	ļ
7	Organizations that may receive deductible contributions under section 170(c).		ļ	<b>↓</b>
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a	X	<b>├</b>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	<u> </u>	X
	If "Yes," indicate the number of Forms 8282 filed during the year	4		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	<u> </u>	<b></b>	<del> </del>
	benefit contract?	7e	<u> </u>	X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	X
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  N/A	7g	-	┼
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? N/A	7h	<del> </del>	<del>                                     </del>
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)	]	+	
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have	1	<del> </del>	├
^	excess business holdings at any time during the year?	8	<del>                                     </del>	-
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	100	<del> </del>	
	Did the organization make any taxable distributions under section 4966?	9a	<del> </del>	
	Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter: N/A	9b	<del> </del>	<del>                                     </del>
10	Section 501(c)(7) organizations. Enter: N/A			
	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	┨		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter N/A	┥		
	Gross income from members or shareholders			
_		┨		
þ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	amounts due of received from them.)			1

Form **990** (2008)

12a

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Form 990 (2008)

NETWORK

36-3331605

Page 6

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

Sec	tion A. Governing Body and Management		_	
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O See instructions.			
1a	Enter the number of voting members of the governing body  1a 1			
b	Enter the number of voting members that are independent 1b 1	]		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		Х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	Х	
ь	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a	Does the organization have local chapters, branches, or affiliates?	9a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			_
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	111		Х
Sec	tion B. Policies			
	<del>^</del>		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		Х
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
•	in Schedule O how this is done	12c		Х
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
а		<u> </u>	Х	
	The organization's CEO. Executive Director, or top management official?	15a		
	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?	15a		
b	Other officers or key employees of the organization?	15a 15b	X	
	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)			
	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	15b		x
16a	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			Х
16a	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	15b		X
16a	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	15b		X
16a b	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	15b		X
16a b	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure	15b		X
16a b Sec 17	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed   IL	15b 16a 16b		X
16a b	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed   IL  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available.	15b 16a 16b		X
16a b Sec 17	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed  IL  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.	15b 16a 16b		X
16a b Sec 17 18	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed  IL  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.  X Own website X Another's website X Upon request	15b 16a 16b	х	X
16a b Sec 17	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed   IL  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.  X Own website X Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	15b 16a 16b	х	X
16a b Sec 17 18	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed   List the states with which a copy of this Form 990 is required to be filed   List the states with which a copy of this Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.  X Own website X Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, statements available to the public.	15b 16a 16b e for	X	X
16a b Sec 17 18	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed  IL  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.  X Own website X Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, statements available to the public.  State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	15b 16a 16b e for	X	X
16a b Sec 17 18	Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed   List the states with which a copy of this Form 990 is required to be filed   List the states with which a copy of this Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.  X Own website X Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, statements available to the public.	15b 16a 16b e for	X	x

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# Part'VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	(C)						ee, or key employee. (D)	(E)	(F)	
Name and Title	Average hours	١,,	Position (check all that					Reportable compensation	Reportable	Estimated amount of	
	per	⊢-	leci	( aii	linal	Т	''y) 	from	compensation from related	other	
	week	direct				e e		the	organizations	compensation	
		Individual trustee or director Institutional trustee Officer Key employee Highest compensated employee Former		İ	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization				
		ual tru	tonal		ploye	St CO III				and related	
		Indiwic	Institu	Officer	Keyer	Higher	Forme			organizations	
MARY DOLAN											
CO-CHAIR	2.00	X	L_	Х	<u> </u>			0.	0.	0.	
RENATA DRIZIN-STIEHL			ŀ		•						
CO-CHAIR	2.00	X	_	Х	L	<u> </u>		0.	0.	0.	
MICHELE M. JOCHNER					ŀ	ŀ			_	_	
SECRETARY	2.00	X	L	Х	<u> </u>	<u> </u>	L	0.	0.	0.	
DAWN MARROS	4 00				ļ	İ					
DIRECTOR	1.00	X	⊢		<u> </u>	┡	_	0.	0.	0.	
CAROL MCGUIRE	1 00	١,,			l	Ì			•		
DIRECTOR DORICE E. PEPIN	1.00	Х	$\vdash$		H	├	-	0.	0.	0.	
TREASURER	2.00	x		x			ŀ	0.	0.	0.	
LINDA PILASTRO	2.00	^		<u> </u>	├	╁	-	0.	0.	0.	
DIRECTOR	1.00	X						0.	0.	0.	
MICHELLE ROJO						f		•		•	
DIRECTOR	1.00	x						0.	0.	0.	
HIMA SARMA											
DIRECTOR	1.00	Х						0.	0.	0.	
APARNA SEN (YELDANDI)									•		
DIRECTOR	1.00	X						0.	0.	0.	
RHONDA WASHINGTON CAMPBE					1				_	_	
DIRECTOR	1.00	X					<u> </u>	0.	0.	0.	
DAWN DALTON	40.00				l	1		64 545			
EXECUTIVE DIRECTOR	40.00	<u> </u>	_		X	<u> </u>	<u> </u>	64,715.	0.	0.	
						l		•			
			├-	Н		├	<del> </del>				
		Ì									
		$\vdash$		Н		$\vdash$	<del>                                     </del>	-		<u>.                                    </u>	
<del></del>			$\vdash$	Н		$\vdash$	$\vdash$	-		<u> </u>	
		$\vdash$	T			Т	I	-			
		l	I		Ì	l	l	1			

Form	990 (2008) <b>NETWORK</b>	METROPO	L 1.	ľAľ	N 1	bA.	11.1	ĽK	ED WOMEN'S	36-3	331	605	Р	age 8
Par	4. 3.704	ustees, Key E	mple	oyee	es, a	nd l	High	est	t Compensated Employ				-	
	(A) Name and title	(B) Average hours per	<b>⊢</b> ∸	heck	Pos			oly)	(D) Reportable compensation from	(E) Reportable compensate from relate	on		(F) stimate nount other	of
		week	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MI	ns	fr org an	pensa fom th anizat d relat	ation ie tion ted
													,	
		<u> </u>	L	<u> </u>	<u> </u>		Ļ	<u> </u>	CA 715					
1b 2	Total Total number of individuals (including those	e in 1a) who re	CON	od n	noro	tha	n \$1	00	64,715.		0.			0.
2	compensation from the organization	e in raj who re	Ceiv	eu II	IIUIE	ula	ui 40i	ω,	ooo iii reportable		•			0
				-						=			Yes	No
3	Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for s			e, ke	y en	nplo	yee,	or	highest compensated ei	nployee on		3		Х
4	For any individual listed on line 1a, is the si	um of reportab	le co							the organization	i			
5	and related organizations greater than \$15 Did any person listed on line 1a receive or									ices rendered to	,	4		X
	the organization? If "Yes," complete Sched											5		Х
Sec 1	tion B. Independent Contractors  Complete this table for your five highest co	mpaneated in	dop		nt o	ont	roote	250	that recoved more than	\$100,000 of oo		ntion :	from	-
	the organization. NONE	mpensated in	uepe	silue	511C C	JOHU	iacu	JI 3	that received more than		- ipens	ation	10111	
	(A) Name and business	address							<b>(B)</b> Description of s	ervices	C	ompe)	<b>)</b> nsatio	n
												_		
													· · ·	
										_				
2	Total number of independent contractors ( from the organization ▶	including those	e in <sup>.</sup>	1) wl	ho re	ecei	ved	mo	re than \$100,000 in com	pensation		_	202	
												Form	990 (	(2008)

Pa	rt VII	I Statement of Rever				_	30 3331	l age 3
	<u> </u>				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
왕	1 a	Federated campaigns	1a					
흔들	b	Membership dues	1b	7,315.				
S,E	С	Fundraising events	1c	15,315.				
荒別		Related organizations	1d					
S. E.				73,349.				
Sign	e			73,343.				
풀힐	Ť	, , , ,		C1 000				
문히		similar amounts not included abo	ve 1f 1	61,828.				
Contributions, gifts, grants and other similar amounts		Noncash contributions included in lines	1a-1f \$					
OB	<u>h</u>	Total. Add lines 1a-1f		<b>•</b>	957,807.			
				Business Code				
8	2 a		IN	541900	38,140.	38,140.		
و کے	b	HONORARIUM		541900	2,390.	2,390.		
S E	С	OTHER		541900	1,076.	1,076.		
E S	d	MANUALS		541900	205.	205.		
Program Service Revenue	е							
ا تة	f	All other program service reve	enue					
		Total. Add lines 2a-2f		<b>•</b>	41,811.			
$\neg$	3	Investment income (including	dividends intere					
- 1	•	other similar amounts)	arriadriad, intere	)Ot, und	1,411.			1,411.
- 1	4	•	v avamat hand a	-	2,111			1,111
	4	Income from investment of ta	x-exempt bond p	roceeds				
	5	Royalties	(3 D I	(3.7)				ļ
l	_	0 5 .	(i) Real	(ii) Personal				×
	6 a		-					
ł	b	•						
	С	` '						
	d	Net rental income or (loss)		<b>•</b>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
ľ		assets other than inventory						
	b	Less: cost or other basis					`	
		and sales expenses						1
- 1	С	Gain or (loss)						
	d	Net gain or (loss)		<b>•</b>				
		Gross income from fundraisin	a events (not	·	<			
Other Revenue			15. of					
Ş		contributions reported on line						
ğΪ		Part IV, line 18	а	50,660.				
Ę	h	Less: direct expenses	b	28,242.				[
δ		Net income or (loss) from fund	1	20/222	22,418.	22,418.		
- 1		Gross income from gaming ac	- ,		22,110.	22,410.		
	3 a							
	L	Part IV, line 19	a					
		Less direct expenses	<b>b</b>					
		Net income or (loss) from gam	- 1	<u> </u>				
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
- 1	b	Less. cost of goods sold	b					
	С	Net income or (loss) from sale	s of inventory	<b>_</b> _				
L		Miscellaneous Revenu	ie	Business Code				
Γ	11 a							
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d	'					
	12	Total Revenue. Add lines 1h, 2g, 3,	4, 5, 6d, 7d, 8c, 9c, 10	, i	1023447.	64,229.	0.	1,411.
83200 02-02						<del></del>	<del> </del>	Form <b>990</b> (2008)

# Form 990 (2008) NETWORK Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must compl		<del></del>		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	7,000.	7,000.		
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22	_			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	-		· · · · · · · · · · · · · · · · · · ·	<del></del>
4	Benefits paid to or for members				· · · · · · · · · · · · · · · · · · ·
5	Compensation of current officers, directors,	64,999.	59,673.	2,477.	2,849.
6	trustees, and key employees  Compensation not included above, to disqualified	04,000.	33,073.	2,4//•	2,047
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	692,351.	635,611.	26,389.	30,351.
8	Pension plan contributions (include section 401(k)		,		20,002.
-	and section 403(b) employer contributions)				
9	Other employee benefits	153,920.	138,338.	12,120.	3,462
10	Payroll taxes			· ·	•
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	17,523.	17,523.		
d	Lobbying .				
е	Professional fundraising services. See Part IV, line 17		THE A RE		
f	Investment management fees				
g	Other	9,388.	9,388.		
12	Advertising and promotion	- FE FEA	54 504	74.2	225
13	Office expenses	55,554.	54,504.	713.	337
14	Information technology				
15	Royalties	61 057	50,794.	11,063.	
16	Occupancy	61,857. 4,756.	4,756.	11,003.	
17	Travel .	4,750.	4,730.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	20,245.	20,245.		
20	Interest	2,929.	20,2130	2,929.	
21	Payments to affiliates	-,- <b>-</b> -,			
22	Depreciation, depletion, and amortization	2,194.	1,739.	455.	
<u></u>	Insurance	8,327.	7,853.	474.	
24	Other expenses. Itemize expenses not covered	,		`,>	
	above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total		` '	÷	
	expenses shown on line 25 below.)				
а	DUES AND SUBSCRIPTIONS	2,639.	2,639.		
b	STAFF DEVELOPMENT	1,305.	1,305.		
c					
d					
е					
f	All other expenses	1 104 005	1 011 250		26 222
25	Total functional expenses. Add lines 1 through 24f	1,104,987.	1,011,368.	56,620.	36,999
26	Joint Costs Check here Life following				
	SOP 98-2. Complete this line only if the organization	j			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				5 000 (0000)

	1990 ( rt X	(2008) NETWORK Balance Sheet	<u> </u>		30-3	33160	) Pa	age 1
	<u>.</u>	Durance Greet		(A) Beginning of year			3) of year	
	1	Cash - non-interest-bearing	<del> </del>	180,570.	1	1	24,3	326
	2	Savings and temporary cash investments			2			
	3	Pledges and grants receivable, net		83,655.	3		53,3	330
	4	Accounts receivable, net			4		-	
	5	Receivables from current and former officers,	directors, trustees, key	11				
		employees, or other related parties. Complete	Part II of Schedule L		5			
	6	Receivables from other disqualified persons (a	is defined under section					
		4958(f)(1)) and persons described in section 4	958(c)(3)(B). Complete					
		Part II of Schedule L			6			
ţ	7	Notes and loans receivable, net			7			
Assets	8	Inventories for sale or use			8			
⋖	9	Prepaid expenses and deferred charges		27,513.	9		16,3	<u> 399</u>
	10a	Land, buildings, and equipment: cost basis	10a 41,765	<u> </u>				
	b	Less: accumulated depreciation. Complete					<u>-</u> -	_ = _
		Part VI of Schedule D	10b 37,559	2,873.	10c		4,2	206
	11	Investments - publicly traded securities	•		11			
	12	Investments - other securities See Part IV, line			12			
	13	Investments - program-related See Part IV, In	e 11 .		13			
	14	Intangible assets			14			
	15	Other assets. See Part IV, line 11		204 611	15	2.	20 /	261
	16	Total assets. Add lines 1 through 15 (must ed	jual line 34)	294,611.	16		08,2	
	17	Accounts payable and accrued expenses		16,041.	17		4,3	923
	18	Grants payable			18			
	19 20	Deferred revenue Tax-exempt bond liabilities		·	19			
	21	Escrow account liability. Complete Part IV of S	· · · · · · · · · · · · · · · · · · ·	21				
Liabilities	22	Payables to current and former officers, direct		21				
Ē	22	highest compensated employees, and disqual						
Ë		of Schedule L	inica persons Complete Fait in		22		-	
	23	Secured mortgages and notes payable to unre	elated third parties	53,113.	23		51,0	068
	24	Unsecured notes and loans payable	sacou cina parcios		24			
	25	Other liabilities. Complete Part X of Schedule	D	33,454.			11,8	<del>807</del>
	26	Total liabilities. Add lines 17 through 25		102,608.			97,	
		Organizations that follow SFAS 117, check	here X and complete				-	
S		lines 27 through 29, and lines 33 and 34.	•					
Š	27	Unrestricted net assets		148,182.	27		78,2	245
3ala	28	Temporarily restricted net assets		43,821.	28		32,2	218
Ē	29	Permanently restricted net assets			29			
Ī		Organizations that do not follow SFAS 117,	check here 🕨 📖 and					
ō		complete lines 30 through 34.						
sets	30	Capital stock or trust principal, or current fund			30			
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or		·	31			
ē	32	Retained earnings, endowment, accumulated	income, or other funds	100 000	32			463
~	33	Total net assets or fund balances		192,003.	33		10,4	
<u> </u>	34	Total liabilities and net assets/fund balances		294,611.	34	20	08,2	7 P T
<u>ra</u>	rt XI	Financial Statements and Reporting	9		_		Yes	No
1	Δοσο	ounting method used to prepare the Form 990:	Cash X Accrual	Other			1.55	+-
і 2а		e the organization's financial statements compile		<del></del>		2a	+	<del></del>
b		e the organization's financial statements audited	•			2b	<del>  x</del>	†==
		es" to lines 2a or 2b, does the organization have			e audıt,	==	T -	$\top$
		w. or compilation of its financial statements and			•	2c	x	

832011 12-18-08

Form **990** (2008)

За

X

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits?

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

CHICAGO METROPOLITAN BATTERED WOMEN'S NETWORK

Employer identification number 36-3331605

Pa	irt i	Reason	tor Public Char	ity Status (All organiz	ations mu	st complet	te this pan	.) (see ins	tructions)				
he	organ	ization is not a	private foundation	because it is: (Please ch	eck only o	ne organiz	zation.)						
1		A church, co	nvention of churches	s, or association of churc	ches desc	ribed in <b>se</b>	ction 170	(b)(1)(A)(i)	).				
2		A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)								
3		A hospital or	a cooperative hospi	tal service organization o	described	ın <b>section</b>	170(b)(1)	( <b>A)</b> (iii). (At	tach Sche	dule H)			
4		A medical res	search organization o	operated in conjunction	with a hos	pıtal desci	ribed in <b>se</b>	ction 170	(b)(1)(A)(ii	i). Enter t	the hospit	al's nam	ne,
		city, and stat											
5		An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governi	mental unr	t descnb	ed in		
		section 170	<b>(b)(1)(A)(iv).</b> (Comple	ete Part II)									
6		A federal, sta	ite, or local governm	ent or governmental und	t described	d ın <b>sectio</b>	n 170(b)(1	I)(A)(v).					
7		An organizati	on that normally rec	eives a substantial part (	of its supp	ort from a	governme	ental unit c	or from the	general	public des	scribed i	ın
		section 170(	b)(1)(A)(vi). (Comple	te Part II)									
8	$\square$	A community	trust described in s	ection 170(b)(1)(A)(vi). (	(Complete	Part II.)							
9	$\mathbf{X}$	An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, n	nembershij	p fees, a	nd gross i	eceipts	from
		activities rela	ted to its exempt fur	nctions - subject to certa	ıın exceptı	ons, and (2	2) no more	than 33 1	1/3% of its	support	from gros	s invest	ment
	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 the Part III )												
10	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)												
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or												
		• -	• •	itions described in section		•		?) See <b>se</b> o	ction 509(a	a)(3). Ch	eck the bo	ox that	
			_	organization and comple						. —	۔		
		a ☐ Type !		_ Type II	٠.		tionally inf	•		d L	Type III		
е	Ш	-		t the organization is not									ın
				han one or more publicly						9(a)(1) or	section 5	J9(a)(2).	
f		-		ten determination from t	ine ins ina	atitisa iy	pe i, Type	ii, or Type	2 111				
_			rganization, check th			antehutian	from one	of the fell		2002			ш
g		•		rganization accepted ar irectly controls, either al			-					Yes	No
			•	upported organization?	one or tog	etilei witil	persons c	iescribed	iii (ii) ailu (	iii) below	, 11g(i		140
		•		n described in (i) above?					-		11g(i		$\vdash$
			•	person described in (i) of		<b>-</b> ?	•				11g(ii		<del>                                     </del>
h			-	about the organizations			oports.				<u> </u>	. <del>71</del>	
		, , , , , , , , , , , , , , , , , , , ,											
/:\	Mama	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did you	notify the	(vi) Is	the	(vii) /	Amount o	
(1)		anization	(II) EIN	organization	in col. (i) lis	sted in your	organizat	on in col.	organizátio (i) organiz	n in col.		upport	•
				above or IRC section	governing	document?	(i) of you	support?	Ü.S.	.? " "			
				(see instructions))	Yes	No	Yes	No	Yes	No			
				• "									
					ļ								
									<u> </u>				
	_				ļ								
ota	al												

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Schedule A (Form 990 or 990-EZ) 2008

Pe	(Complete only if you checke				(b)(1)(A)(iv) ar	17U(D)(1)(A)(	VI)
Se	ction A. Public Support			<u> </u>		_	
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and	, ,	` '_		1		
	membership fees received. (Do not						
	include any "unusual grants.")				<u> </u>		
2	Tax revenues levied for the organ-			_			
	ızatıon's benefit and either paid to						
	or expended on its behalf			<u></u>			
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge			<u> </u>			
4	Total. Add lines 1 - 3						
5	The portion of total contributions						
	by each person (other than a					İ	
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the				1		
	amount shown on line 11,						
	column (f)						
	Public Support. Subtract line 5 from line 4			<u> </u>	<u> </u>	<u></u>	<u> </u>
	ction B. Total Support	(1)0004	#1.000F	1 ( ) 0000	T ( n 0007	T ()	
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
_	Amounts from line 4			1	<del> </del>	-	
8	Gross income from interest,			1			
	dividends, payments received on			]			
	securities loans, rents, royalties						
9	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the business is regularly carried on					ł	
10	Other income. Do not include gain				<del> </del>		
10	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc (see instructi	ons)	, <u> </u>	1	12	
	First five years. If the Form 990 is for	•		 rd. fourth, or fifth t	ax vear as a secti		
	organization, check this box and stop		,,	,,	,	··· · · · · ( · ) ( · )	▶□
Se	ction C. Computation of Publ		rcentage				<u> </u>
14	Public support percentage for 2008 (	line 6, column (f) d	ıvıded by line 11,	column (f))		14	%
15	Public support percentage from 2007	' Schedule A, Part	IV-A, line 26f			15	%
16a	33 1/3% support test - 2008. If the	organization did no	ot check the box of	on line 13, and line	14 is 33 1/3% or	more, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organizatio	n		•	▶□
t	33 1/3% support test - 2007. If the o	organization did no	t check a box on	line 13 or 16a, and	d line 15 is 33 1/39	% or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly	supported organi	zation			▶□
17a	10% -facts-and-circumstances tes	<b>t - 2008.</b> If the org	anızatıon dıd not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstar	ces" test, check	this box and <b>stop</b> l	here. Explain in Pa	art IV how the orgar	nization
	meets the "facts-and-circumstances"	test. The organiza	ition qualifies as a	a publicly supporte	d organization		▶□
b	10% -facts-and-circumstances tes	<b>t - 2007.</b> If the org	anızatıon dıd not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, o	check this box and	stop here. Explai	n in Part IV how the	<u> </u>
	organization meets the "facts-and-circ	cumstances" test.	The organization	qualifies as a publ	icly supported org	ganization	▶□
18	Private foundation. If the organization	n did not check a	box on line 13, 10	6a, 16b, 17a, or 17	b, check this box	and see instruction	s 🕨
					Sch	edule A (Form 990	or 990-EZ) 2008

36-3331605 Page 3 Schedule A (Form 990 or 990-EZ) 2008 NETWORK

Page 3

Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

	1 A D III O			<del></del>	(-7 (complete city)	. you oncomed the be	on and a dividitie)
	ction A. Public Support						
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	026 020		051 403	4 050 001	040 400	
	include any "unusual grants.")	936,838.	1,050,401.	951,493.	1,060,704.	942,492.	4,941,928.
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	50,862.	38,853.	55,190.	51,181.	41.811.	237,897.
3	Gross receipts from activities that	00,000		00,1201			
Ŭ	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-		-	_			
•	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities				<del></del>		
Ū	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 - 5	987,700.	1,089,254.	1,006,683.	1,111,885.	984,303.	5,179,825.
	Amounts included on lines 1, 2, and	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , ,	, , , ,		
	3 received from disqualified persons						
t	O Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
(	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)		>		* '	は受験と大	5,179,825.
Se	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	987,700.	1,089,254.	1,006,683.	1,111,885.	984,303.	5,179,825.
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	591.	1,978.	3,540.	2,738.	1,411.	10,258.
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	591.	1,978.	3,540.	2,738.	1,411.	10,258.
11	Net income from unrelated business activities not included in 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 IV)	29,786.	49,514.	46,360.	46,254.	65,975.	237,889.
13	Total support (Add lines 9, 10c, 11, and 12)	. , «		ž "			5,427,972.
14	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3) organiz	zation,
	check this box and stop here						
<u>Se</u>	ction C. Computation of Publ	ic Support Pe	rcentage			· · · · · · · · · · · · · · · · · · ·	
	Public support percentage for 2008 (		•	column (f))		15	95.43 %
	Public support percentage from 2007					16	96.24 %
<u>Se</u>	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20	<b>XXX</b> (line 10c, colun	nn (f) divided by lit	ne 13, column (f))		17	.19 %
18	Investment income percentage from	<b>2007</b> Schedule A, I	Part IV-A, line 27h			18	.16 %
198	a 33 1/3% support tests - 2008. If the	organization did n	ot check the box	on line 14, and line	e 15 is more than 3	3 1/3%, and line 1	
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	organization qual	ifies as a publicly s	supported organiza	ation	ightharpoons
t	33 1/3% support tests - 2007. If the	organization did n	ot check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	eck this box and st	<b>op here.</b> The orga	anization qualifies	as a publicly supp	orted organization	▶∐
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	
	<del></del>	<del></del>			Sch	edule A (Form 99	0 or 990-EZ) 2008

832023 12-17-08

# Schedule D

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

CHICAGO METROPOLITAN BATTERED WOMEN'S NETWORK

Employer identification number 36-3331605

Schedule D (Form 990) 2008

Pai	τl	<b>Organizations Maintaining Donor Advise</b>	d Funds or Other Similar Fund	s or Accounts. Complete if the
		organization answered "Yes" to Form 990, Part IV, line	e 6.	
			(a) Donor advised funds	(b) Funds and other accounts
1	Tota	number at end of year		
2	Aggı	regate contributions to (during year)		
3	Aggı	regate grants from (during year)		
4	Aggi	regate value at end of year		
5	Did t	he organization inform all donors and donor advisors in	writing that the assets held in donor adv	sed funds
	are t	he organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did t	he organization inform all grantees, donors, and donor a	dvisors in writing that grant funds may b	e used only
	for c	haritable purposes and not for the benefit of the donor of	or donor advisor or other impermissible p	rivate benefit? Yes No
Pai	t II	Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purp	ose(s) of conservation easements held by the organizat	ion (check all that apply).	
		Preservation of land for public use (e.g., recreation or p	oleasure) Preservation of an h	storically important land area
		Protection of natural habitat	Preservation of certi	fied historic structure
		Preservation of open space		
2	Com	plete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a coi	nservation easement on the last day
		e tax year.		-
				Held at the End of the Year
а	Tota	number of conservation easements		2a
b	Tota	acreage restricted by conservation easements		2b
С	Num	ber of conservation easements on a certified historic str	ucture included in (a)	2c
d	Num	ber of conservation easements included in (c) acquired	after 8/17/06	2d
3	Num	ber of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organization during the taxable
	year	<b>&gt;</b>	·	
4	Num	ber of states where property subject to conservation ea	sement is located	
5	Does	the organization have a written policy regarding the pe	riodic monitoring, inspection, violations,	and
	enfo	rcement of the conservation easements it holds?		Yes No
6	Staff	or volunteer hours devoted to monitoring, inspecting, a	nd enforcing easements during the year	<b>&gt;</b>
7	Amo	unt of expenses incurred in monitoring, inspecting, and	enforcing easements during the year 🕨	\$
8	Does	s each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	O(h)(4)(B)(i)
	and	section 170(h)(4)(B)(ii)?		Yes No
9	In Pa	art XIV, describe how the organization reports conservat	ion easements in its revenue and expens	e statement, and balance sheet, and
	ınclu	de, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	s the organization's accounting for
	cons	ervation easements.		
Par	t III	Organizations Maintaining Collections o	f Art, Historical Treasures, or C	Other Similar Assets.
		Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the	e organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and l	balance sheet works of art, historical
	treas	sures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of p	ublic service, provide, in Part XIV, the text of
	the f	ootnote to its financial statements that describes these	items.	
b	If the	e organization elected, as permitted under SFAS 116, to	report in its revenue statement and bala	nce sheet works of art, historical treasures,
	or ot	her similar assets held for public exhibition, education, c	or research in furtherance of public service	e, provide the following amounts relating to
	thes	e items:		
	(i) I	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) /	Assets included in Form 990, Part X		<b>\$</b>
2	If the	e organization received or held works of art, historical tre	asures, or other similar assets for financi	al gain, provide
		ollowing amounts required to be reported under SFAS 1		•
а		enues included in Form 990, Part VIII, line 1	- -	<b>▶</b> \$
b		ets included in Form 990, Part X	·	► \$ ► \$
		·		

832051 12-23-08

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CHICAGO METROPOLITAN BATTERED WOMEN'S Schedule D (Form 990) 2008 NETWORK 36-3331605 Page 2 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply). Public exhibition Loan or exchange programs а Other b Scholarly research С Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included Yes on Form 990, Part X? No b If "Yes," explain the arrangement in Part XIV and complete the following table: Amount c Beginning balance 1c d Additions during the year 1d Distributions during the year 1e Ending balance 1f Yes No 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV. Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10 (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance b Contributions c Investment earnings or losses d Grants or scholarships Other expenditures for facilities and programs Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: Board designated or quasi-endowment Permanent endowment Term endowment 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization Yes No bv: 3a(i) (i) unrelated organizations (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (c) Depreciation (d) Book value (a) Cost or other (b) Cost or other basis (investment) basis (other) 1a Land **b** Buildings c Leasehold improvements 41,765 37,559. 4,206d Equipment e Other

Schedule D (Form 990) 2008

4,206.

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c))

				_	
N	F.'	ΤV	чC	R	K

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Part VII Investments - Other Securities. Se	e Form 990 Part X line 1	<u> </u>	30-3331003 Fage 3
(a) Description of security or category		(c) N	lethod of valuation:
(including name of security)	(b) Book value		nd-of-year market value
Financial derivatives and other financial products	<del>                                     </del>		-
Closely-held equity interests			<del></del>
Other			
	-		······································
	<del></del>		
	<u> </u>		
		······································	
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)	,		
Part VIII Investments - Program Related.		13	
	(b) Book value	(c) N	lethod of valuation:
(a) Description of investment type	(D) BOOK Value	Cost or e	nd-of-year market value
		<del></del>	•
		<del></del>	
		<u> </u>	
	<u> </u>		
	-	· ·	
· · ·		-	
		-	<del></del>
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)		27.1	
Part IX Other Assets. See Form 990, Part X, line			
(a	Description		(b) Book value
	- <del> </del>		
Total. (Column (b) should equal Form 990, Part X, col (B)			<b>•</b>
Part X Other Liabilities. See Form 990, Part X	, line 25.		
(a) Description of liability		(b) Amount	
Federal income taxes			
ACCRUED VACATION		41,807.	
Total. (Column (b) should equal Form 990, Part X, col (B)	line 25 )	41,807.	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 832053 12-23-08

Schedule D (Form 990) 2008

Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Financial St	atements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		1,023,447.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,104,987.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		-81,540.
4	Net unrealized gains (losses) on investments		4	-	
5	Donated services and use of facilities		5		
6	Investment expenses		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV)		8		
9	Total adjustments (net), Add lines 4-8		9		0.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10		-81,540.
Pai	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Rev	enue per R	eturr	
1	Total revenue, gains, and other support per audited financial statements	·		1	1,033,036.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b	9,589.	1	
С	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIV)	2d		1 i	
е	Add lines 2a through 2d	L		2e	9,589.
3	Subtract line 2e from line 1			3	1,023,447.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		•		, ,
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b		1	
c	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)			5	1,023,447.
	rt XIII Reconciliation of Expenses per Audited Financial Statement	ents With Ex	penses per		
1	Total expenses and losses per audited financial statements		· · · · · · · · · · · · · · · · · · ·	1	1,114,576.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				· · · · · ·
a	Donated services and use of facilities	2a	9,589.		
b	Prior year adjustments	2b	. ,	1	
G	Losses reported on Form 990, Part IX, line 25	2c		1	
d	Other (Describe in Part XIV)	2d		1	
e	Add lines 2a through 2d			2e	9,589.
3	Subtract line 2e from line 1			3	1,104,987.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	•		٣	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
h	Other (Describe in Part XIV)	4b		1	
	Add lines 4a and 4b	_ <del>10</del>	<del> </del>	4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		•	5	1,104,987.
	t XIV Supplemental Information			<u> </u>	1,101,507.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	l lines 1a and 4:	Part IV lines 1	h and	2h: Part V line 4: Part
	irt XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	, iii 65 Tu unu 4,		D and	LD, rare v, mio v, rare
Λ, , .	יייני און אווייני				
					<u> </u>
					# <del>*</del> <u>-</u>
		-			
		<del> </del>			
			<del></del>		

### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

## **Supplemental Information Regarding Fundraising or Gaming Activities**

Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990.

OMB No 1545-0047

**Open To Public** Inspection

Internal Revenue Service Name of the organization CHICAGO METROPOLITAN BATTERED WOMEN'S **Employer identification number** 36-3331605 NETWORK Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Indicate whether the organization raised funds through any of the following activities. Check all that apply. e Solicitation of non-government grants Mail solicitations b Email solicitations Solicitation of government grants C Phone solicitations Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or X No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table. (v) Amount paid (iii) Did (vi) Amount paid (i) Name of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) have custody or control of from activity fundraiser organization listed in col. (i) contributions' Yes No 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

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Schedule G (Form 990 or 990-EZ) 2008

Schedule G (Form 990 or 990-EZ) 2008 NETWORK

36-3331605 Page 2

Pa	irt	Fundraising Events. Complete if the	ne organization answered	d "Yes" to Form 990, Part	IV, line 18, or reported	more th	an \$15,00	0
		on Form 990-EZ, line 6a. List events with						
			(a) Event #1 ANNUAL	(b) Event #2 BREAKFAST	(c) Other Events NONE		Total Ever	
			BENEFIT (event type)	EVENT (event type)	(total number)	-{	col. <b>(c)</b> )	
Jue			(Oronic type)	(Overlie type)	(total riambor)	┪——		
Revenue	1	Gross receipts	61,645.	4,330.	· · · · · · · · · · · · · · · · · · ·		65,9	75.
	2	Less. Charitable contributions	15,315.				<u> 15,3</u>	315.
	3	Gross revenue (line 1 minus line 2)	46,330.	4,330.	W		50,6	<u> 560.</u>
	4	Cash prizes				ļ		
ses	5	Non-cash prizes	15,315.				15,3	315.
Direct Expenses	6	Rent/facility costs	·					
Direct	7	Other direct expenses	12,927.			ļ	12,9	<u> 27.</u>
	8	Direct expense summary. Add lines 4 through	h 7 ın column (d)		•	(	28,2	242.)
	9	Net income summary. Combine lines 3 and 8					22,4	118.
Pa	ırt		answered "Yes" to Form	n 990, Part IV, line 19, or r	eported more than			
		\$15,000 on Form 990-EZ, line 6a.		T		1		
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming		al gaming through o	
æ —	1	Gross revenue		:				
	ļ					1		
nses	2	Cash prizes						
Direct Expenses	3	Non-cash prizes			<u>-</u> -			
Direc	4	Rent/facility costs				<u> </u>		
	5	Other direct expenses						
	6	Volunteer labor	Yes %  No	Yes%	Yes% No			
		Direct expense summary. Add lines 2 through		1		1,		
	7	· · · · · · · ·	.,		_		<u> </u>	
	8	Net gaming income summary. Combine lines	1 and 7 in column (d)	_	<u> </u>		Yes	No
9	En	ter the state(s) in which the organization opera	ites gaming activities:			Γ		
а	ls t	the organization licensed to operate gaming ac	ctivities in each of these	states?			9a	
b	If "	No," Explain:						
	_							
10a	We	ere any of the organization's gaming licenses re	evoked, suspended or te	erminated during the tax y	/ear? .		I0a	
b	If "	Yes," Explain:						
	_							<u> </u>
11		es the organization operate gaming activities value in the organization a grantor, beneficiary or trusters		r of a nartnership or other	r entity formed to	-	11	+
12		me organization a grantor, beneficiary or truste minister charitable gaming?	se of a trust of a member	i oi a partifership oi othei	entity formed to	<b> </b>	12	1

### CHICAGO METROPOLITAN BATTERED WOMEN'S

Schedule G (Form 990 or 990-EZ) 2008 NETWORK 36 – 33	13160	5 P	age 3
		Yes	No
13 Indicate the percentage of gaming activity operated in:			
	%		]
b An outside facility	%		
14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:			
Name	-		
Address >	_		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
h If "Voc " enter the amount of gaming revenue received by the organization			
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
c If "Yes," enter name and address.		:	
Name	_		
Address >	_		
16 Gaming manager information:			
Name ▶	ŀ		
Name -	-		
Gaming manager compensation ▶ \$			
Description of services provided	_		
	_		
	-		`
Director/officer Employee Independent contractor		į	
Director/officer Employee Independent contractor		į	
17 Mandatory distributions:		:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		:	
retain the state gaming license?	17a		
<b>b</b> Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the			
organization's own exempt activities during the tax year	-	1	1

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE					:			OMB No	OMB No 1545-0047
(Form 990)			Governing	Grants and Otner Assistance to Organizations, Governments, and Individuals in the U.S.	e to Organizations tuals in the U.S.	<i>ด</i> ์			. 5008
Department of the Treasury Internal Revenue Service		<b>▼</b> Compl	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.	on answered "Yes," on F ► Attach to Form 990.	," on Form 990, P≀ m 990.	art IV, lines 21 or 22.		Open to Inspe	Open to Public Inspection
Name of the organization	CHICAGO NETWORK	METROPOLITAN	ı	BATTERED WOMEN'S			ш	Employer identification number 36-3331605	entification number 36-3331605
Part   General In	General Information on Grants and Assistance	Assistance							
1 Does the organiz	Does the organization maintain records to substantiate the amount of the	substantiate the		or assistance, the	grantees' eligibility	y for the grants or ass.	grants or assistance, the grantees' eligibility for the grants or assistance, and the selection		
criteria used to a 2 Describe in Part I	criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	nce? dures for monit	oring the use of grant	funds in the United	d States.			X	2
Part II Grants and	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	vernments and	l Organizations in the	e United States. C	complete if the orga	anization answered "Y	es" on Form 990, Part I	IV, line 21, for any	
recipient th	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	000. Check this	box if no one recipier	nt received more th	ian \$5,000. Use Pa	art IV and Schedule I-1	(Form 990) if additiona	Il space is needed	×
1 (a) Name and ad or gov	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	grant ce
2 Enter total numb	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	government or	ganizations					<b>A A</b>	
LHA For Privacy Act	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	on Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2008	n 990) 2008

# CHICAGO METROPOLITAN BATTERED WOMEN'S NETWORK

36-3331605 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. Schedule | (Form 990) 2008 Part III

Page 2

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. CMBWN REQUESTS GRANT APPLICATIONS FROM MEMBER THE ORGANIZATIONS TO ASSIST VICTIM'S OF ABUSE REGAIN THEIR ECONOMIC FOOTING TO PROPERLY UTLIZE CMBWN REVIEWS THESE GRANT APPLICATIONS AND AWARDS GRANTS TO MEMBER (d) Amount of non-cash assistance (c) Amount of cash grant ENTRUSTING THE MEMBER ORGANIZATION (b) Number of recipients 5: (a) Type of grant or assistance LINE PART I, ORGANIZATIONS, GRANT MONIES H SCHEDULE Part IV

Schedule I (Form 990) 2008

### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

CHICAGO METROPOLITAN BATTERED WOMEN'S NETWORK

Employer identification number 36-3331605

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
INFORMATION AND SKILLS BETWEEN GROUPS AND INDIVIDUALS COMMITTED TO THE
PREVENTION OF DOMESTIC VIOLENCE BY DEVELOPING PROJECTS FOR SYSTEMIC
REFORM, PROVIDING ADVOCACY FOR COMPREHENSIVE DOMESTIC VIOLENCE
LEGISLATION, PROVIDING COMMUNITY EDUCATION AND PROFESSIONAL TRAINING,
AND DEVELOPING MORE AUXILLARY SERVICES FOR BATTERED WOMEN.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PUBLIC AWARENESS; AND CONNECTING MEMBERS OF THE COMMUNITY TO DIRECT
SERVICE PROVIDERS.
FORM 990, PART VI, SECTION A, LINE 6: THE NETWORK IS COMPRISED OF VARIOUS
DOMESTIC ABUSE DIRECT SERVICE PROVIDER ORGANIZATIONS.
FORM 990, PART VI, SECTION A, LINE 7B: ANY CHANGES TO THE ORGANIZATIONAL
DOCUMENTS MUST BE APPROVED BY THE WHOLE MEMBERSHIP.
FORM 990, PART VI, SECTION A, LINE 10: THE EXECUTIVE DIRECTOR WILL PROVIDE
BOARD MEMBERS WITH A PRINTED COPY OF FORM 990. THE BOARD MEMBERS WILL BE
INSTRUCTED TO REVIEW FORM 990 AND PROVIDE ANY FEEDBACK THEY DEEM NECESSARY.
FORM 990, PART VI, SECTION B, LINE 15: IN ORDER TO DETERMINE COMPENSATION,
THE BOARD REVIEWS SALARIES PAID IN OTHER SIMILAR SIZE ORGANIZATIONS IN THE
CHICAGOLAND AREA. BASED ON EMPLOYEE PERFORMANCE AND SALARIES PAID BY OTHER
ORGANIZATIONS FOR SIMILAR POSITIONS, THE EMPLOYEE'S COMPENSATION IS SET.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

### SCHEDULE O (Form 990)

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Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

CHICAGO METROPOLITAN BATTERED WOMEN'S NETWORK

Employer identification number 36-3331605

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
AVAIABLE TO THE PUBLIC UPON THE REQUEST OF AN INTERESTED PARTY.
ADDITIONALLY, EXCERPTS OF THESE DOCUMENTS ARE AVAILABLE ON THE NETWORK'S
WEBSITE.