

### 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



# Form 990

## **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
2008

Department of the Treasury Internal Revenue Service

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

pen to Public Inspection

Intern	al Revenu	e Service		I ne organizat		se a copy of this	return to sa	itisty state report		_	78		inspection.
	For the	2008 calen	dar year,	or tax year beg	inning 8/	01	, 200	08, and endin	ig 7/	/31		2009	
В	Check if ap	plicable	Planca									ation Numbe	r
	Addre	ss change	Please use IRS label	POLISH WO						36-	448031	18	
	Name	change	or print or type.	CHARITABI			FOUNI	DATION		E Telepho	one number		
	Initial	return	See specific Instruc-	6643 N NC						847	-384-1	1200	
	Termi	nation	Instruc- tions.	CHICAGO,	IT 00031	-1360							
	$\vdash$	ded return								G Gross r	eceipts \$	1,06	59,046.
	$\vdash$	ation pending	F Name a	and address of princ	ipal officer				H(a) Is this	s a group retui	<del>-</del>		res X No
		ation pending	1	AS C ABOVE						II affiliates inc		一月、	Yes No
_	Tay ex	cempt statu			(insert no )	7947	(a)(1) or	527	If 'No	,' attach a list	(see ınstru	ctions)	
÷	Websi	· · · · · · · · · · · · · · · · · · ·		(6) (3 )	(macre no )	4547	(u)(1) 01	02.7	H(a) Crow	exemption n	umbor ►		
<del></del>			X Corpora	ation Trust				L Year of Forma			State of lega	-1 -1	IL
K Pa		organization		ation   Trust	Association	Other -		L fear of Forma	tion 200	)	state of lega	ai domicile	<u> 11</u>
ra		Summ		ganization's mi	scion or most	cionificant ac	tuation	THE OPCA	NTZNT	TON MAC	FODM	ED EOD	тис
Activities & Governance				RITABLE,									
la l				CHOLARSHI TY AND GI							ATW TA	וול דנונד	
Ver				if the organiza									
မွ				n the organizations of the government				sposed of file	JIE Wan	23/0 01 113	3		3
್ದ್ರ				nt voting memb				ıne 1b)			4		<u>3</u>
ties				yees (Part V, I		, ,	,	,			5		Ō
ξį				eers (estimate							6		0
¥	<b>7a</b> To	tal gross u	ınrelated l	ousiness reven	ue from Part \	/III, line 12, co	olumn (C	)			7a		-1,856.
	b Ne	et unrelated	d business	taxable incom	e from Form	990-T, lin <u>e</u> 34					7 b		-1,856.
		<del></del>								Prior Year		Curren	t Year
	<b>8</b> C	ontributions	s and gran	nts (Part VIII, III	ne 1h)					63,4	401.	1,0	58,584.
Revenue			_	ue (Part VIII, I						·			
Ve		•		art VIII, column		4, and 7d)				5,4	405.	•	9,917.
8				III, column (A),			d 11e)			7,	731.		<del>-1,856.</del>
				nes 8 through				, line 12)		76,	537.	1,0	66,645.
				ounts paid (Pa						4,	546.		63,810.
				ener DPar	- I								
	<b>15</b> S	alaries oth	er compe	nsation, emplo	vee benefits (	Part IX. colum	nn (A), lin	nes 5-10)					
ea	16 a D	ofossional	fundraicu	na food (Part I)	Solumn (A)	line 11e)	( 7,	,					
Expenses	104 -	Olessiulai	JAN	ng fees (Part I) nses (Part IX,	, 6 1 1 1 1 (7),	05) -			,		V	· * *	
ង												134 No. 3	
_				X column (A)							508.		2,616.
	18 To	otal expens		Hes 18-14 (mu	st edual Part	X, column (A)	), line 25)	)			054.		66,426.
\	<b>19</b> R	evenue les	s expense	s Subtract line	e 18 from line	12		<u> </u>		70,	483.	1,0	00,219.
5 <u>8</u>		_							Beg	inning of '	Year	End o	f Year
\$ E	20 T	otal assets	(Part X, I	ine 16)						182,	709.	1,1	57,734.
Net Assets Fund Balan		otal liabilitie	•	-							0.		0.
Net Assets or Fund Balances		at accate n	r fund hal	ances Subtrac	t line 21 from	line 20				182,	709.	1.1	57,734.
Pa	irt II		ure Blo		t iiie 21 iioiii								·
					a avaminad this re	turn including acc	ompanying s	schedules and sta	atements a	nd to the best	of my know	ledge and be	lief. it is
		true, correct,	and complete	I declare that I have Declaration of pre	parer (other than o	officer) is based on	all informat	tion of which prep	arer has an	y knowledge	o,		
Sig		► / 2x	1100	in Sol					1	$\bigcap_{n \in \mathbb{N}} a_n$	10 2	1111	
He	jii re	Signature	e of officer	w/w/		<del></del>				<b>ga</b> le	17 CA	<i>V 10</i>	
110		<b>▶</b>	U	011111	har Pa	15 ./ <del>-</del>			0	/			
		Type or r	orint name ar	nd title	Kore, I've	3,000 /	<del></del>	<u></u>					
		- ', ', ', ', ', ', ', ', ', ', ', ', ',	-					Date	T	Charle of	Prep	parer's identifinations)	ying number
D.	:			, /	1111			,	,	Check if self-	seė (seė	instructions)	· -
Pa Pro		Preparer's	<b>&gt;</b>	1 AP	1.1.1			12/1	869	employed *		7.	
	e- rer's	signature		wr.		331117 T MP		110	101		JN/	Δ	
Us		Firm's name yours if self-				PANY LTD.					NT / 78		
Or		employed), address, and	<u> 950</u>						_		N/A		0000
		ZIP + 4	DES			5-6556 <u> </u>				Phone no	· (84 <u>7)</u>		
Ma	v the IR	S discuss t	his return	with the prepa	rer shown abo	ve? (see inst	ructions)					X Yes	No

Form	990 (2008) POLISH WOMEN'S ALLIANCE OF AMERICA 3	6-448031	8	F	Page 2
Par					
	Briefly describe the organization's mission				
	SEE SCHEDULE O	. <b> <del>-</del> _</b>			
		- <del>-</del>			
	Did the organization undertake any significant program services during the year which were not listed on the p	orior			
_	Form 990 or 990-EZ?	, <b>.</b>	Yes	X	No
	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	?	Yes	X	No
	If 'Yes,' describe these changes on Schedule O				
4	Describe the exempt purpose achievements for each of the organization's three largest program services by e and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allo	xpenses. Se	ction 5	01(c)	(3)
	expenses, and revenue, if any, for each program service reported.	cations to ou	1013, 1	iic tott	41
4 a	(Code (Code (Expenses \$ 55,500. including grants of \$ 55,500.) (Reve	nue \$			)
	SCHOLARSHIPS	· <del></del>			
		- <del></del>			
	(Code (Code (Sample 1)) (Expenses \$ 8,310. including grants of \$ 8,310.) (Reve	nue Š			```
41	GRANTS TO CHARITABLE ORGANIZATIONS.			_	—′
	(Out of S) (Four t	nuo ¢			
40	c (Code) (Expenses \$ including grants of \$) (Reve	inue \$			—,
		<del></del> -			
		<b></b>			
		<b></b>			
		- <b>-</b>			
	d Other program services. (Describe in Schedule O )		-		
	(Expenses \$ including grants of \$ ) (Revenue \$			)	
4	e Total program service expenses ► \$ 63,810. (Must equal Part IX, Line 25, column (B) )				
		<u> </u>			

			Yes	No
1	le the expension described in section E01(a)(2) as 4047(a)(1) (other than a private foundation)? If (Van Learnelate	-		
'	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	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 I	3		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), 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	5		
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	6		X
7	Did 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 II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8	х	
	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		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		_X_
11	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	11		<u> </u>
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	12	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule $E$	13		X
14:	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
I	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	14b		Х
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	15		Х
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		Х
17		17		X
18	· · · · · · · · · · · · · · · · · · ·	18		X
19		19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		Х
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	21	X	<u> </u>
22		22	Α.	
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		Х
24	a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and			v
	complete Schedule K. If 'No, 'go to question 25  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		X
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24c 24d	<del> </del>	
		240		
	a 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		Х
	<b>b</b> 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	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х_
27	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	27		Χ_

#### Part IV Checklist of Required Schedules (continued)

-	terral direction of the dames de officiales (continues)				_
	•	_	Yes	No	_
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee				-
	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee),	*			-
	or an 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		×	•
	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	_
	c 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	
				١.,	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X	-
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	_
				١.,	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X	-
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	

ai	· v	Statements Regarding Other IKS Fillings and Tax Compliance				
	•				Yes	No
1 a	Enter t	the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. ation Returns Enter -0- if not applicable	1a 0			
b	Enter t	he number of Forms W-2G included in line 1a. Enter -0- if not applicable	<b>1b</b> 0			
c	: Did the (gambl	e organization comply with backup withholding rules for reportable payments to vendor ling) winnings to prize winners?	rs and reportable gaming	1 c	·	
2 a	Enter the	e number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the year ending with or within the year covered by this return	2a 0			
2 t		ast one is reported on line 2a, did the organization file all required federal employmen		2b	· <del>················</del>	
		f the sum of lines 1a and 2a is greater than 250, you may be required to e-file this ret				
3 a		e organization have unrelated business gross income of \$1,000 or more during the year	· ' '	3a		Х
t	If 'Yes'	has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q		3b		
4 a	At any financia	time during the calendar year, did the organization have an interest in, or a signature al account in a foreign country (such as a bank account, securities account, or other for	or other authority over, a inancial account)?	4a		х
b		, enter the name of the foreign country			\$	*
	See the Financ	e instructions for exceptions and filing requirements for ${\bf Form\ TD\ F\ 90-22.1},$ Report of ial Accounts.	Foreign Bank and		1786	,
5a	Was th	ie organization a party to a prohibited tax shelter transaction at any time during the ta	x year?	5a		X
t	Did any	y taxable party notify the organization that it was or is a party to a prohibited tax shelt	er transaction?	5b		X
C	If 'Yes, Prohibi	,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exem ited Tax Shelter Transaction?	pt Entity Regarding	5c		
6 a	Did the	e organization solicit any contributions that were not tax deductible?		<u>6a</u>		Х
t	If 'Yes, deduct	,' did the organization include with every solicitation an express statement that such cible?	ontributions or gifts were not	6b		
	-	izations that may receive deductible contributions under section 170(c).				
a	Did the	e organization provide goods or services in exchange for any quid pro quo contribution	of more than \$75?	7a		Х
t	If 'Yes,	,' did the organization notify the donor of the value of the goods or services provided?				
(	Did the Form 8	e organization sell, exchange, or otherwise dispose of tangible personal property for w 3282?		7c		х
C	If 'Yes,	,' indicate the number of Forms 8282 filed during the year	7d			
•	Did the benefit	e organization, during the year, receive any funds, directly or indirectly, to pay premiur t contract?	ms on a personal	7e		X
		e organization, during the year, pay premiums, directly or indirectly, on a personal ben		7 f		X
		contributions of qualified intellectual property, did the organization file Form 8899 as		7g		X
ł	<b>n</b> For all	contributions of cars, boats, airplanes, and other vehicles, did the organization file a l	Form 1098-C as required?	7h		X
8	Sectio	n 501(c)(3) and other sponsoring organizations maintaining donor advised funds and rting organizations. Did the supporting organization, or a fund maintained by a spons business holdings at any time during the year?	d section 509(a)(3) oring organization, have	8		
9	Section	in 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		-	-	-
		e organization make any taxable distributions under section 4966?		9a		
		e organization make any distribution to a donor, donor advisor, or related person?		9b		
		n 501(c)(7) organizations. Enter				ļ
		on fees and capital contributions included on Part VIII, line 12	10a			*
		Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
		n 501(c)(12) organizations. Enter				
		income from other members or shareholders	11a		1	
ı	Gross amour	income from other sources (Do not net amounts due or paid to other sources against ats due or received from them.)	11 b			
12		on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	of Form 1041?	12 a		<u> </u>
		,' enter the amount of tax-exempt interest received or accrued during the year	126			

BAA

Form **990** (2008)

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				
	For each processe	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, s, or changes in Schedule O See instructions	describe the circumstances,		Yes	No
1 a	Enter the	number of voting members of the governing body	1a3			1
ŀ	Enter the	number of voting members that are independent	1b 3			
2		officer, director, trustee, or key employee have a family relationship or a business re irector, trustee or key employee?	elationship with any other	2		X
3	Did the o	rganization delegate control over management duties customarily performed by or its, directors or trustees, or key employees to a management company or other pers	under the direct supervision	3		Х
4		rganization make any significant changes to its organizational documents prior Form 990 was filed?		4		X
5		rganization become aware during the year of a material diversion of the organization	n's assets?	5		Х
6		organization have members or stockholders?		6		<u>X</u>
		organization have members, stockholders, or other persons who may elect one or	more members of the			<del></del>
	governin	g body?		7a 7b		X
	-	decisions of the governing body subject to approval by members, stockholders, or o		/ D	s -0s	*
8	Did the o	organization contemporaneously document the meetings held or written actions under ${f ving}$	ertaken during the year by	***	* *	
	•	erning body?		8a	<u>X</u>	
		nmittee with authority to act on behalf of the governing body?	ŀ	8ь	<u>X</u>	
		organization have local chapters, branches, or affiliates?	ļ	9a		X
l	If 'Yes,' o and bran	does the organization have written policies and procedures governing the activities of the organization?	of such chapters, affiliates,	9b		
10	Was a co describe	ppy of the Form 990 provided to the organization's governing body before it was filed in Schedule O the process, if any, the organization uses to review the Form 990 S	d? All organizations must EE SCHEDULE 0	10	х	
11	ls there a	any officer, director or trustee, or key employee listed in Part VII, Section A, who ca tion's mailing address? <i>If 'Yes,' provide the names and addresses in Schedule O</i>	nnot be reached at the	11		Х
Sec	tion B.	Policies				
			Г		Yes	No
		organization have a written conflict of interest policy? If 'No,' go to line 13		12a		X
١	h Are office to conflic	ers, directors or trustees, and key employees required to disclose annually interests cts?	that could give rise	12 b		X
,	c Does the Schedule	e organization regularly and consistently monitor and enforce compliance with the po e O how this is done	olicy? If 'Yes,' describe in	12 c	_	Х
13	Does the	organization have a written whistleblower policy?	ļ	13		_X_
14	Does the	organization have a written document retention and destruction policy?		14		_X
15	Did the p	process for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and de	approval by independent		*	*
		anization's CEO, Executive Director, or top management official?		15 a		<u>X</u>
	<b>b</b> Other of	ficers of key employees of the organization?		15 b		X
	Describe	the process in Schedule O (see instructions)				
16		organization invest in, contribute assets to, or participate in a joint venture or simila iring the year?	r arrangement with a taxable	16a		Х
	<b>b</b> If 'Yes,' in joint v	has the organization adopted a written policy or procedure requiring the organizatio renture arrangements under applicable federal tax law, and taken steps to safeguar of the respect to such arrangements?	n to evaluate its participation d the organization's exempt	16b		
Sec		Disclosures				
17	List the	states with which a copy of this Form 990 is required to be filed - IL				
18	Section	6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and Indicate how you make these available. Check all that apply	and 990-T (501(c)(3)s only) av	aılab	le for	public
		website Another's website X Upon request				
19	Describe	e in Schedule O whether (and if so, how) the organization makes its governing docunts available to the public	ments, conflict of interest pol	cy, a	nd fina	ancıal
20	State the	e name, physical address, and telephone number of the person who possesses the NETTE TRELA VANDER NOOT 6643 N NORTHWEST HWY CHICAG	books and records of the orga	anızat 7 – 3 9	ion R <u>4 – 1</u>	200
	- ANTOI	NETIE TVETY AWNER NOOT 6643 N NOCTUMEST UMI CUICKR	5 - + + - 5 - 5 - + - + 5 - 5 - 5 - 5 -	<u>,                                    </u>	<u></u>	

Form 990 (2008)

# 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) or 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.

Check this box if the organization did not compensate any officer, director, trustee, or key employee												
(A)	(B)	Position (check all that apply)						i				
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations		
VIRGINIA SIKORA												
PRESIDENT	3 _			X		L		0.	0.	0.		
SHARON ZAGOVICE PRESIDENT	3			Х				0.	0.	0.		
ANTOINETTE TRELA VANDER NO SECRETARY/TREAS	3			х				0.	0.	0.		
	-											
	<u> </u>											
									_			
							<u> </u> 					
						ļ						
										_		
	-											

TEEA0107L 04/24/09

BAA

Part VII   Section A. Officers, Directors, Trust	tees, K	(еу	Em	ıplo	ye	es,	ang	d Highest Con	npensated En	ployees (cont.)
<b>(A)</b>	(B)				c)			(D)	(E)	(F)
Name and Title	Average hours per week							Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	ndividual trustee or director	nstitutional trustee	Officer	Key en	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organization (W-2/1099-MISC)	s compensation from the organization
		ual to	onal		employee	t com	,			and related organizations
		stee	truste		88	pens			:	
			ě			ated				
	<del>-</del> -				-					
				-						
	-			-	_			_		
<del>-</del>					Ì					
					-	-				
		-								
									-	
				ŧ I						
	<u> </u>									
	l									
1 b Total							<b>&gt;</b>	0.	<u> </u>	· l · · · · · · · · · · · · · · · · · ·
2 Total number of individuals (including those in 1a) vorganization ► 0	who rec	eive	d mo	ore 1	than	\$10	0,00	00 in reportable o	ompensation froi	m the
organization ► 0										Yes No
3 Did the organization list any former officer, director	or trust	ee. I	kev	emr	olove	ee. c	or hi	ahest compensat	ed employee	
on line 1a? If 'Yes,' complete Schedule J for such in	ndıvıdua	al								3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t	portable han \$15	50,00	npē	irisa If 'Y	lıŭñ 'es'	and com	l oth plet	er compensation e Schedule J for	trom such	
individual										4 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sci	compens hedule .	satio J for	n fro	om a :h pe	any erso	unre n	elate	ed organization fo	r services	5 X
Section B. Independent Contractors								· <del></del>		
Complete this table for your five highest compensation from the organization.	ted inde	pen	deni	cor	ntrad	ctors	s tha	at received more t	han \$100,000 of	
<del></del>								(B	)	(C)
(A) Name and business addres	is						_	Description	of Services	Compensation
	<del></del>					_				
2 Total number of independent contractors (including	those "	n 1)	who	rec	eive	ed m	nore	than \$100.000 in		
compensation from the organization > 0		. ,				,		- ,,		

Pa	t VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
FIONS, GIFTS, GRANTS R SIMILAR AMOUNTS	1a Federated campaigns b Membership dues c Fundraising events. d Related organizations e Government grants (contributions)  1 a 1,058,584 1 b 1 c 1 c 1 d	•	6,	м	)a-c
E CONTRIBUT	f All other contributions, gifts, grants, and similar amounts not included above  g Noncash contribns included in lns 1a-1f. h Total. Add lines 1a-1f  Business Code	► 1,058,584.	**	** - Y	· .
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	b c d e f All other program service revenue				
4	3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds	9,917.			9,917.
	(i) Real (ii) Personal  6a Gross Rents b Less rental expenses c Rental income or (loss)	*		d w gr	ž, "
	d Net rental income or (loss)  7a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)			s # w	we t
OTHER REVENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses c Net income or (loss) from fundraising events	•	,	,	
	9a Gross income from gaming activities. See Part IV, line 19  b Less direct expenses  c Net income or (loss) from gaming activities			\$ <b>~</b>	
	10a Gross sales of inventory, less returns and allowances  b Less cost of goods sold  b 2,401	<u>.                                    </u>		_1 056	
	c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a  b  c  d All other revenue  e Total. Add lines 11a-11d	-1,856.		-1,856.	
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	1,066,645.	0.	-1,856.	9,917.

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</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	8,310.	8,310.		•
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	55,500.	55,500.	*	
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16			* '	
4	Benefits paid to or for members			<b>*</b>	
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages.				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits.				
10	Payroll taxes				
11	Fees for services (non-employees)			-	
	a Management				
	<b>b</b> Legal	1 050		1 050	
	c Accounting	1,250.		1,250.	
	d Lobbying				<del></del>
	e Prof fundraising svcs See Part IV, In 17		*		
	Investment management fees				
	g Other				
	Advertising and promotion Office expenses	1,366.		1,366.	
	Information technology	1,300.		1,300.	
	Royalties				
	Occupancy				
	Travel				
18			·		
19	Conferences, conventions, and meetings				
	Interest				· · · · · · · · · · · · · · · · · · ·
21	Payments to affiliates		<del></del>		
22	Depreciation, depletion, and amortization				
	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.)	•		у ў м	, ø
;	a				
	b				
	<u></u>	-			<del></del>
	d				
	e				
	f All other expenses  Total functional expenses. Add lines 1 through 24f	66,426.	63,810.	2,616.	0.
26		00,420.	03,010.	2,010.	
RΔ	1				Form <b>990</b> (2008)

ГО	III	Dalance Sirect		<del></del>			
	•		(A) Beginning of year		(E End o	<b>3)</b> f year	,
_	1	Cash - non-interest-bearing		1			
	2	Savings and temporary cash investments	87,683.	2	1.0	78,5	593.
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		4	<del></del>		
	5	Receivables from current and former officers, directors, truslees, key employees,					
	1	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.		5			
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))	^				
Δ		and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6			
ASSETS	7	Notes and loans receivable, net		7			
Ĕ	8	Inventories for sale or use		8			
Ś	9	Prepaid expenses and deferred charges	·-	9			
	10 a	Land, buildings, and equipment cost basis 10a	4	,	SE Y	,	
	l t	Less accumulated depreciation Complete Part VI of	-		* *		
	l	Schedule D 10b		10 c			
	11	Investments – publicly-traded securities	95,026.	11		<u>74, 1</u>	41.
	12	Investments – other securities See Part IV, line 11		12			
	13	Investments - program-related. See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11		15		5,0	000.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	182,709.	16	1,1	57,7	734.
	17	Accounts payable and accrued expenses		17			
	18	Grants payable		18	_		
	19	Deferred revenue		19			
L	20	Tax-exempt bond liabilities		20			
Ä	21	Escrow account liability Complete Part IV of Schedule D		21			
LIABILITI	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II	***********	4,0	* *	***	
Ť		of Schedule L		22			A
Ė	23	Secured mortgages and notes payable to unrelated third parties		23			
•	24	Unsecured notes and loans payable		24			
	25	Other liabilities Complete Part X of Schedule D		25			
		Total liabilities. Add lines 17 through 25.	0.	26			0.
	<del> </del> _	Organizations that follow SFAS 117, check here > X and complete lines			<b>y</b>		
Ĕ		27 through 29 and lines 33 and 34.					
	27	Unrestricted net assets	87,683.	27		79.2	293.
ASSE		Temporarily restricted net assets	95,026.			78,4	
Š	29	Permanently restricted net assets		29		,	
R		Organizations that do not follow SFAS 117, check here ► and complete	4		<b>&gt;</b>	<b>&amp;</b> ;	
		lines 30 through 34.		1, 1	ř		
FUZD	30	Capital stock or trust principal, or current funds		30	<del></del>		
	31	Paid-in or capital surplus, or land, building, and equipment fund		31			
Ā	32	Retained earnings, endowment, accumulated income, or other funds	<del></del>	32	-		
Ň	33	Total net assets or fund balances.	182,709.	33	1.1	57,	734.
BALAZCES	34	Total liabilities and net assets/fund balances	182,709.	34			734.
	art X			1 . 1		<u>.,</u>	
	211	I I maneiar statements and reporting	<del></del> _			Yes	No
1	۱ ۵۰	counting method used to prepare the Form 990 $\overline{\mathrm{X}}$ Cash $\overline{}$ Accrual	Other				
		ere the organization's financial statements compiled or reviewed by an independent			2a		Х
•		ere the organization's financial statements audited by an independent accountant?			2b	X	<u> </u>
			ty for oversight of the a	udit.			ļ
	rev	Yes' to 2a or 2b, does the organization have a committee that assumes responsibiliview, or compilation of its financial statements and selection of an independent according	ountant?	,	2c	X	
3	<b>3a</b> As	a result of a federal award, was the organization required to undergo an audit or audit Act and OMB Circular A-133?	udits as set forth in the	Single			U
							X
=-		Yes,' did the organization undergo the required audit or audits?			3b	ggn .	(2008)
RΔ	Δ				1 0111		()

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

Department of the Treasury Internal Revenue Service

Total

**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 POLISH WOMEN'S ALLIANCE OF AMERICA Employer identification number CHARITABLE AND EDUCATIONAL FOUNDATION 36-4480318 Part | Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is (Please check only one organization) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 7 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 9 X June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h 11 Type II Type III - Functionally integrated Type III- Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization 11 g (i) a family member of a person described in (i) above? 11 g (ii) 11 g (iii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the organizations the organization supports (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (v) Did you notify the organization in col (i) of (i) Name of Supported Organization (iv) Is the (vi) is the (vii) Amount of Support organization in col (i) organized in the US? rganization in col (i) listed in your your support? governing document? Yes No Yes No Yes No

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

Schedule A (Form 990 or 990-EZ) 2008

(Complete only if you checked the box on line 5, 7, or 8 of Part I)  Section A. Public Support  Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008  1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants')  2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants')  2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	(f) Total
membership fees received. (Do not include 'unusual grants')  2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	
organization's benefit and either paid to it or expended on its behalf	
The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge.	
4 Total. Add lines 1-3	
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	3
6 Public support. Subtract line 5 from line 4	
Section B. Total Support	
Calendar year (or fiscal year beginning in) ►         (a) 2004         (b) 2005         (c) 2006         (d) 2007         (e) 2008	(f) Total
7 Amounts from line 4	
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	
9 Net income form unrelated business activities, whether or not the business is regularly carried on	
10 Other income Do not include gain or loss form 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 instructions)	!
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501 organization, cneck this box and stop here	(c)(3) ► ∏
Section C. Computation of Public Support Percentage	
14Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)1415Public support percentage for 2007 Schedule A, Part IV-A, line 26f15	
<b>16a 33-1/3 support test</b> — <b>2008.</b> If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, and <b>stop here.</b> The organization qualifies as a publicly supported organization	check this box
b 33-1/3 support test — 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more and stop here. The organization qualifies as a publicly supported organization	, check this box
17a 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Pathe organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization organization control org	art IV how
<b>b 10%-facts-and-circumstances test</b> — <b>2007.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Programization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization organization meets the 'facts-and-circumstances' test.	on. IV how the
18 Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see  Schedule A (Form	990 or 990-EZ) 2008

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

Sec	tion A. Public Support	<u> </u>	10 3 311 41117			·	
	ndar year (or fiscal yr beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	( <b>d</b> ) 2007	<b>(e)</b> 2008	(f) Total
	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	16,052.	13,557.	7,459.		1,058,584.	1,159,053.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the	10,032.	13,337.	1,409.	03,401.	1,030,304.	1,139,033.
	organization's tax-exempt purpose	10,972.	29,690.	13,195.	7,731.	-1,855.	59,733.
3	Gross receipts from activities that are not an unrelated trade or business under section 513			·			0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1-5	27,024.	43,247.	20,654.	71,132.	1,056,729.	1,218,786.
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
t	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	0.	0.	0.	0.	0.	0.
,	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
_	Public support (Subtract line	0.	0.	0.	0.	0.	<u> </u>
•	7c from line 6)						1,218,786.
<u></u>	tion B. Total Support		<u>.</u>			l	1,210,700.
741							
		(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
Cale	ndar year (or fiscal yr beginning in)	(a) 2004 27 024	<b>(b)</b> 2005	(c) 2006	(d) 2007	<b>(e)</b> 2008	(f) Total
Cale 9		27,024.	43,247.	20,654.	71,132.	1,056,729.	1,218,786.
Cale 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form	27,024.	2,217.	3,875.	71,132. 5,405.	9,917.	1,218,786. 23,589.
Cale 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	27,024.	43,247.	20,654.	71,132.	1,056,729.	23,589.
Cale 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on	27,024.	2,217.	3,875.	71,132. 5,405.	9,917.	1,218,786. 23,589.
Cale 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is	27,024.	2,217.	3,875.	71,132. 5,405.	9,917.	1,218,786. 23,589. 0. 23,589. 0.
Cale 9 10 a l l l l l l l l l l l l l l l l l l	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12)	27,024. 2,175. 2,175.	2,217.	3,875. 3,875.	71,132. 5,405. 5,405.	9,917. 9,917.	1,218,786.  23,589.  0. 23,589.  0. 1,242,375.
Cale 9 10 a l l l l l l l l l l l l l l l l l l	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	27, 024.  2,175.  2,175.  s for the organization here	2,217.  2,217.  2,217.	3,875. 3,875.	71,132. 5,405. 5,405.	9,917. 9,917.	1,218,786.  23,589.  0. 23,589.  0. 1,242,375.
Cale 9 10 a l l l l l l l l l l l l l l l l l l	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu	27,024.  2,175.  2,175.  s for the organization here  blic Support P	43, 247.  2, 217.  2, 217.  ation's first, seconercentage	3,875. 3,875. d, third, fourth,	71, 132. 5, 405. 5, 405. or fifth tax year a	9, 917. 9, 917.	1,218,786.  23,589.  0. 23,589.  0. 1,242,375.  (3)  ▶ □
Cale 9 10 a 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu	27,024.  2,175.  2,175.  2,175.  stor the organization here  blic Support P  008 (line 8, column	2,217.  2,217.  2,217.  ation's first, seconercentage  n (f) divided by line	20, 654.  3, 875.  3, 875.  d, third, fourth, (e) 13, column (f))	71, 132. 5, 405. 5, 405. or fifth tax year a	9, 917. 9, 917. s a section 501(c)	1,218,786.  23,589.  0. 23,589.  0. 1,242,375.  (3)  ▶ □
Cale 9 10 a 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu Public support percentage from	27,024.  2,175.  2,175.  2,175.  stop here  blic Support P  008 (line 8, column 2007 Schedule A,	2,217.  2,217.  2,217.  ation's first, seconercentage  (f) divided by line Part IV-A, line 27	20, 654.  3, 875.  3, 875.  d, third, fourth, of third, fourth, of third, fourth, of third, g	71, 132. 5, 405. 5, 405. or fifth tax year a	9, 917. 9, 917.	1,218,786.  23,589.  0. 23,589.  0. 1,242,375.  (3)  ▶ □
Cale 9 10 a 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu Public support percentage from tion D. Computation of Inventorial contents.	27,024.  2,175.  2,175.  2,175.  stop here  blic Support P 008 (line 8, column 2007 Schedule A, restment Incor	2,217.  2,217.  2,217.  2,217.  etion's first, seconercentage of (f) divided by line Part IV-A, line 27 ne Percentage	20, 654.  3, 875.  3, 875.  d, third, fourth, one 13, column (f))	71, 132. 5, 405. 5, 405.	9, 917.  9, 917.  9, 917.	1,218,786.  23,589.  0. 23,589.  0.  1,242,375.  (3)  98.1 % 93.7 %
Cale 9 10a 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pupublic support percentage from the support income percentage from the support percentage from the supp	27,024.  2,175.  2,175.  2,175.  2,175.  Stop here  blic Support P  008 (line 8, column 2007 Schedule A, restment Income for 2008 (line 10c,	2,217.  2,217.  2,217.  2,217.  2,217.  ation's first, seconercentage  (f) divided by line Part IV-A, line 27  ne Percentage  column (f) divided	20, 654.  3, 875.  3, 875.  d, third, fourth, of	71, 132. 5, 405. 5, 405.	9, 917.  9, 917.  9, 917.  15 16	1,218,786.  23,589.  0. 23,589.  0.  1,242,375.  (3)  98.1 %  93.7 %  1.9 %
Cale 9 10 a 11 12 13 14 Sec 15 16 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu Public support percentage for 20 Public support percentage from Investment income percentage for 133-1/3 support tests — 2008. If the	27, 024.  2, 175.  2, 175.  2, 175.  2, 175.  Stop here  blic Support P  008 (line 8, column 2007 Schedule A, restment Incor for 2008 (line 10c, from 2007 Schedul organization did not	2,217.  2,217.  2,217.  2,217.  2,217.  etion's first, secon ercentage n (f) divided by line Part IV-A, line 27 ne Percentage column (f) divided le A, Part IV-A, line check the box on line	20, 654.  3, 875.  3, 875.  d, third, fourth, of	71, 132.  5, 405.  5, 405.  or fifth tax year a	9, 917.  9, 917.  9, 917.  15 16  17 18 3%, and line 17 is no	1,218,786.  23,589.  0. 23,589.  0.  1,242,375.  (3)  98.1 % 93.7 %  1.9 % 6.3 %
Cale 9 10 a 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pupublic support percentage from the support income percentage from the support percentage from the supp	27,024.  2,175.  2,175.  2,175.  2,175.  Stop here  blic Support P  008 (line 8, column 2007 Schedule A, restment Incom for 2008 (line 10c, from 2007 Schedule organization did not boox and stop here the organization did	2,217.  2,217.  2,217.  2,217.  2,217.  ation's first, seconercentage  (f) divided by line Part IV-A, line 27  ne Percentage column (f) divided by line A, Part IV-A, line 17  check the box on line 18  The organization of not check a box	20, 654.  3, 875.  3, 875.  d, third, fourth, of the state of the stat	71, 132.  5, 405.  5, 405.  or fifth tax year a  mn (f))  is more than 33-1/3 iblicly supported a. and line 16 is	9, 917.  9, 917.  9, 917.  15 16  17 18 3%, and line 17 is norganization more than 33-1/39	1,218,786.  23,589.  0. 23,589.  0. 1,242,375.  (3)  98.1 % 93.7 %  1.9 % 6.3 %  1.9 % 6.3 %

Schedule /	(Form 9	990 or 9	90-EZ)	2008	POLIS	SH_WOM	IEN'S	ALL11	NCF C	F AME	RICA	3	<u>6-4480.</u>	318	Page 4
Part IV	Suppl Part II	<b>ement</b> , line	al Info 17a or	ormati 17b;	on. Co or Part	mplete t III, Iin	this page 12. F	art to p Provide	orovide any o	the exp	olanation ditional ir	require nformation	d by Par on. (see	rt II, line instructi	10; ions)
						<del>-</del> -	<del></del>					<b>-</b>	· <b></b> -	<del>_</del>	
		<b>-</b>							<del>-</del>				. <b></b> .	<del>_</del>	
					- <b>-</b>									<del></del>	
	<b>-</b> .			<del>-</del>	. <b></b>								<del>.</del>		
				- <del>-</del>											
	<del>-</del> .														<b>-</b> -
	<b>-</b>					<b>-</b>									
									<b></b>						
	<b></b>														
		<b></b>	. — — -		- <b></b> -										
										. – – – –					
						- <b></b> -		<del>-</del>	· <del>-</del>						
					<del>-</del>					- <b></b>					
					<b>-</b> -		_ <b></b> _		- <b></b> -						
<b>-</b> <del>-</del>				<b>-</b>								<del>_</del> .			
<b>-</b>					<del>-</del> -							<del>-</del> .			
				- <b>-</b>				<b>-</b>							
															. – – – – -
	<del>-</del>					_ <b></b>			- <b></b> -	<b>-</b>					
		<b>-</b> -		<del>-</del>			<del>-</del>	. – – -		- <b></b> -	<del>-</del>				

BAA

#### **SCHEDULE D** (Form 990)

## **Supplemental Financial Statements**

OMB No 1545-0047 2008

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer Identification number

POI	ISH WOMEN'S ALLIANCE OF AMERI	CA	36-4480318
Par	t! Organizations Maintaining Donor	Advised Funds or Other Similar Fun	ids or Accounts Complete if
	the organization answered 'Yes' to		<b>F</b>
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
	Aggregate contributions to (during year).		
	Aggregate grants from (during year)		
	Aggregate value at end of year		
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the assets held in d	onor advised Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for		ds may be
Dav	impermissible private benefit??	ate if the examination engineered 'Vee'	Yes No
	t II   Conservation Easements Comple		to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by		
	Preservation of land for public use (e.g., r	· H	of an historically important land area
	Protection of natural habitat	Preservation	of certified historic structure
_	Preservation of open space		
2	Complete lines 2a-2d if the organization held of the tax year	a qualified conservation contribution in the forr	
			Held at the End of the Year
	Total number of conservation easements		2 a
	Total acreage restricted by conservation ease		2b
	: Number of conservation easements on a certi	• •	2c
	Number of conservation easements included i	• • •	2 d
3	Number of conservation easements modified,	transferred, released, extinguished, or termina	ated by the organization during the taxable
	year >		
4	Number of states where property subject to co	onservation easement is located >	<u> </u>
5	Does the organization have a written policy re enforcement of the conservation easement it	garding the periodic monitoring, inspection, vid holds?	olations, and Yes No
6	Staff or volunteer hours devoted to monitoring	, inspecting, and enforcing easements during	the year ►
7	Amount of expenses incurred in monitoring, in	nspecting, and enforcing easements during the	year ►\$
8	Does each conservation easement reported of 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of se	ection Yes No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote	s conservation easements in its revenue and expe to the organization's financial statements that	nse statement, and balance sheet, and describes the organization's accounting for
_	conservation easements	.,	Other Circles Asset
Par	Complete if the organization ans	ections of Art, Historical Treasures, of wered 'Yes' to Form 990, Part IV, line	r Other Similar Assets 8.
1 a	alf the organization elected, as permitted unde treasures, or other similar assets held for pub the text of the footnote to its financial stateme	lic exhibition, education, or research in further	nent and balance sheet works of art, historical ance of public service, provide, in Part XIV,
t	b) If the organization elected, as permitted unde treasures, or other similar assets held for pub amounts relating to these items	r SFAS 116, not to report in its revenue staten lic exhibition, education, or research in further	nent and balance sheet works of art, historical ance of public service, provide the following
	(i) Revenues included in Form 990, Part VIII,	, line 1	►\$ ►\$ 5,000.
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of a amounts required to be reported under SFAS	art, historical treasures, or other similar assets 116 relating to these items	for financial gain, provide the following
ā	Revenues included in Form 990, Part VIII, line	e 1	<b>&gt;</b> \$
ŧ	Assets included in Form 990, Part X		►\$ ►\$

Schedule <b>D</b> (Form 990) 2008 POLIS					36-4480		Page <b>2</b>
Part III Organizations Maintai	ning Collections	of Art, Histor	ical Treasures, o	r Other	Similar Ass	ets (cont	inued)
3 Using the organization's accession that apply):	n and other records,		-	significant	use of its colle	ection items	s (check all
a X Public exhibition		<del></del>	exchange programs				
<b>b</b> Scholarly research		e U Other			<del></del>		
c X Preservation for future gener			46 £46 46				
4 Provide a description of the organ Part XIV SEE PART XIV						se in	
5 During the year, did the organiza assets to be sold to raise funds r	ather than to be mai	ntained as part of	the organization's co	lection?	iiiiiai [	Yes	X No
Part IV Trust, Escrow and Cu IV, line 9, or reported	stodial Arranger an amount on Fo	nents Compleorm 990, Part	te if organization X, line 21.	answer	ed 'Yes' to F	orm 990	, Part ———
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or ot	her intermediary f	for contributions or ot	her assets	s not [	Yes	No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and com	plete the followin	g table:				
						Amount	
c Beginning balance				1 c			
d Additions during the year				1 d			
e Distributions during the year				1 e	1		
f Ending balance				1f	<u> </u>	<b>—</b>	
2a Did the organization include an a		Part X, line 21?			l	Yes	∐ No
b If 'Yes,' explain the arrangement			104-11-50	00 0	07 1 10	<del></del>	
Part V Endowment Funds Co						(.) [	
	(a) Current year	(b) Prior year	(c) Two years bad	ck (d)	Three years back	(e) Four	years back
1 a Beginning of year balance						<b></b>	- 240
<b>b</b> Contributions		3, 62 (33)			<u> </u>		
c Investment earnings or losses						1 3336.4 4 13	3 37 3 8 36, . 2448
d Grants or scholarships		\$\text{2} \tag{2} \tag		3.8			
e Other expenditures for facilities and programs		× × × × ×					
f Administrative expenses			) William (1977)	100 TO 1	V 6030	3 3 3	
g End of year balance		* * * *		##C v	1 21	-%-X-XX	* * * * * * * * * * * * * * * * * * *
2 Provide the estimated percentage		ance held as					
a Board designated or quasi-endov		8					
<b>b</b> Permanent endowment							
c Term endowment	<sup>8</sup>						
3a Are there endowment funds not organization by	in the possession of	the organization t	hat are held and adm	nnistered	for the	_	es No
<ul><li>(i) unrelated organizations</li></ul>						3a(i)	
(ii) related organizations						3a(ii)	
<b>b</b> If 'Yes' to 3a(II), are the related of	<del>-</del>					3b	
4 Describe in Part XIV the intender	d uses of the organiz	ation's endowme	nt funds	1		<del></del>	
Part VI Investments-Land, B				1		40.5	
Description of investment		st or other basis nvestment)	(b) Cost or other basis (other)		epreciation	( <b>d)</b> Boo	k Value
<b>1 a</b> Land				<u>                                     </u>	27 : 21 T	_	
<b>b</b> Buildings						<del></del>	
c Leasehold improvements	<u> </u>		<u>.</u>	<del> </del>		•	
<b>d</b> Equipment	<u> </u>		<u> </u>		<u>-</u>		
e Other		D. A.Y.	(D) In- 10(-) )	<u> </u>			0.
Total. Add lines 1a-1e (Column (d) sh	ouia equal Form 990	, ⊢art λ, column (	(b), line (U(c))		School	lule <b>D</b> (Form	n 990) 2008

Part VII	Investments-Other Securities See F	orm 990, Part X, line	12. N/A	
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	
Financial o	derivatives and other financial products		Cost of the of year mar	NCT VAIDO
	eld equity interests			
			<del></del>	
Other		<del> </del>	<del></del>	<del></del>
		-		<del></del>
		- <del></del>		
		-		<u>-</u> .
_ <b></b>				<u> </u>
	mn (b) should equal Form 990 Part X, col (B) line 12)		**	
Part VIII	Investments-Program Related (See	Form 990, Part X, Iir	ne 13) N/A	
	(a) Description of investment type	(b) Book value	(c) Method of valua	tion
			Cost or end-of-year mar	ket value
_				
			•	
	· · · · · · · · · · · · · · · · · · ·			
		1	· · · · · · · · · · · · · · · · · · ·	
Total Colum	nn (b)(should equal Form 990, Part X, Col (B) line 13.)			* 6
Part IX	Other Assets (See Form 990, Part X,		*	
	<u> </u>	escription	<del></del>	(b) Book value
	(4) 3	ocomparent		(2) 20011 10100
		<u>-</u>		
		. <u>-</u>		
				=
			<del></del>	
		···		<del>.</del> .
	umn (b) Total (should equal Form 990, Part X, c			<u> </u>
Part X	Other Liabilities (See Form 990, Part			
	(a) Description of Liability	(b) Amount		
Federal In	come Taxes			
	·			
		<del> </del>		
		" " "		
		<del></del>		
Takel C.	Ch Total Cabauld agus Form 000 Book V I (D) In - Of			
	nn (b) Total (should equal Form 990, Part X, col (B) line 25)	ation's financial statemen	to that reports the argonization's tick	dity for upportain the
positions	V, provide the text of the footnote to the organiz under FIN 48	ation's financial statemen	ts that reports the organization \$ liab	

Schedule D (Form 990) 2008 POLISH WOMEN'S ALLIANCE OF AMERICA

36-4480318

Page 3

	dule D (Form 990) 2008 POLISH WOMEN S ALLIANCE OF A			36-44803	18 Page <b>4</b>
Par		1 990 to l	Inancial Statement	<u>:s</u>	1 000 015
	Total revenue (Form 990, Part VIII,column (A), line 12)			<u> </u>	1,066,645.
	Total expenses (Form 990, Part IX, column (A), line 25)			<u> </u>	66,426.
	Excess or (deficit) for the year Subtract line 2 from line 1  Net unrealized gains (losses) on investments			<u> </u>	1,000,219.
5	Donated services and use of facilities			<u> </u>	
6	Investment expenses			<u> </u>	
-	Prior period adjustments			<del>                                     </del>	
	Other (Describe in Part XIV) SEE PART XIV				-25,195.
	Total adjustments (net) Add lines 4-8			-	-25,195.
	Excess or (deficit) for the year per financial statements. Combine line	s 3 and 9			975,024.
	t XII Reconciliation of Revenue per Audited Financial S		ts With Revenue pe	r Return	
1	Total revenue, gains, and other support per audited financial statemen	nts		1	1,066,645.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				<del></del>
а	Net unrealized gains on investments		2a	(4	
b	Donated services and use of facilities		2b		
c	Recoveries of prior year grants		2c ·	]	
d	Other (Describe in Part XIV)		2d		
	Add lines 2a through 2d.			2e	
	Subtract line 2e from line 1		• •	3	1,066,645.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investments expenses not included on Form 990, Part VIII, line 7b		4a		
b	Other (Describe in Part XIV)		4b		
_	Add lines 4a and 4b			4c	
	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part			5	1,066,645.
	t XIII   Reconciliation of Expenses per Audited Financial	Stateme	ents With Expenses		
	Total expenses and losses per audited financial statements			1	66,426.
	Amounts included on line 1 but not on Form 990, Part IX, line 25.				
	Donated services and use of facilities		2a		
	Prior year adjustments		2b		
	Losses reported on Form 990, Part IX, line 25		2c	<u> </u>	
	Other (Describe in Part XIV)		2d		
	Add lines 2a through 2d			2e	66 126
	Subtract line 2e from line 1		1 1	3	66,426.
	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investments expenses not included on Form 990, Part VIII, line 7b		45	,	
	Other (Describe in Part XIV)		4a 4b	<del> </del>	
	Add lines 4a and 4b		40	4c	
_	Total expenses Add lines 3 and 4c (This should equal Form 990, Pai	rt I line 18	٠,	5	66,426.
	t XIV   Supplemental Information	iti, iine ic	<u>' /</u>		00,420.
iine 4	plete this part to provide the descriptions required for Part II, lines 3, 5, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines  PART III, LINE 4 - DESCRIPTION OF ORGANIZATION'S CO THE ORGANIZATION HAS A COLLECTION OF PAINTINTHE POLISH AMERICAN COMMUNITY.	2d and 4b  PLLECTION  NGS_THA	ONS AND HOW FURT	HERS EXEN	IET.PURPO
 	TEEA3304L 1:	2/23/08		Schadule	<b>D</b> (Form 990) 2008
DAA	1EEA3304L 1	E-2100		Jonedale	. <del>_</del>

BAA

Schedule D	(Form 990) 2008	Page 5
Part XIV	Supplemental Information (continued)	
•		
_		
	·	
	·	
	·	
	<del>.</del>	

# SCHEDULE I

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22.
 Attatch to Form 990.

2008

OMB No 1545 0047

Open to Public Inspection

× **&** (h) Purpose of grant or assistance Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on Form **Employer identification number** X Yes 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use 36-4480318 (g) Description of non-cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? SEE PART IV (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section if applicable 2 Enter total number of section 501(c)(3) and government organizations Part I General Information on Grants and Assistance (b) EIN POLISH WOMEN'S ALLIANCE OF AMERICA 3 Enter total number of other organizations 1 (a) Name and address of organization or government Name of the organization 111

Schedule I (Form 990) 2008

TEEA3901L 12/19/08

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

Page 2 Schedule I (Form 990) 2008 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. (f) Description of non-cash assistance Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information 36-4480318 (e) Method of valuation (book, FMV, appraisal, other) OTHER GRANTS ARE MADE ONLY TO ESTABLISHED AND REPUTABLE ORGANIZATIONS THAT THE BOARD THE ORGANIZATION DISBURSES THE GRANT FUNDS DIRECTLY TO EDUCATIONAL INSTITUTIONS (d) Amount of non-cash assistance PART I, LINE 2 - GRANTMAKER'S DESCRIPTION OF HOW GRANTS ARE USED 55,500. (c) Amount of cash grant POLISH WOMEN'S ALLIANCE OF AMERICA 113 ORDER TO SUBSTANTIATE THE USE OF THE FUNDS. (b) Number of recipients (a) Type of grant or assistance IS FAMILIAR WITH. Schedule I (Form 990) 2008 SCHOLARSHIPS Part III 1 BAA

#### SCHEDULE O (Form 990)

## **Supplemental Information to Form 990**

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► 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.

Name of the organization POLISH WOMEN'S ALLIANCE OF AMERICA CHARITABLE AND EDUCATIONAL FOUNDATION	Employer identification number 36-4480318
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION	· <b></b>
THE_ORGANIZATION_WAS_FORMED_FOR_THE_PURPOSE_OF_CHARITABLE,_EDUC	ATIONAL, CULTURAL AND
SCHOLARLY PURPOSES. THE FUND WILL PROVIDE SCHOLARSHIPS TO THOS	E STUDENTS WHO WILL
BENEFIT POLONIA AND THE POLISH COMMUNITY AND GIVE PRIDE TO AMER	RICANS OF POLISH
DESCENT.	
THE_FUND_WILL_ALSO_SUPPORT_CULTURAL_ORGANIZATIONS, _EDUCATIONAL_	INSTITUTIONS,
DISASTER_RELIEF_ORGANIZATIONS_AND_OTHER_CHARITABLE_ORGANIZATION	I <u>S</u>
FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS	
THE FORM 990 IS PREPARED BY AN INDEPENDENT CPA FIRM. THE PREPARED	RED FORM 990 IS
FORWARDED TO THE ORGANIZATION'S PRESIDENT FOR HER REVIEW. THE	PRESIDENT IS
AUTHORIZED BY THE ORGANIZATION'S BOARD TO REVIEW AND SIGN THE	FORM 990.
	<del> </del>

TEEA4901L 12/19/08

2008

# SCHEDULE D, PART XIV - SUPPLEMENTAL INFORMATIONPAGE 6

POLISH WOMEN'S ALLIANCE OF AMERICA CHARITABLE AND EDUCATIONAL FOUNDATION

36-4480318

SCHEDULE D, PART XI, LINE 8
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

UNREALIZED LOSS ON INVESTMENTS

TOTAL \$ -25,195.

#### Form **8868** (Rev April 2009)

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

► File a separate application for each return.

Internal Revenue	Service	File a separate application for each return.		
If you are	e filing for an Automatic 3-Mont	h Extension, complete only Part I and check this be	ox	► X
-	=	tomatic) 3-Month Extension, complete only Part II		
		ady been granted an automatic 3-month extension		
		sion of Time. Only submit original (no cor		
		d requesting an automatic 6-month extension - che		·
All other corp income tax r		s), partnerships, REMICS, and trusts must use Form	n 7004 to request a	n extension of time to file
returns noted the additiona Form 990-T.	d below (6 months for a corporat il (not automatic) 3-month exten	electronically file Form 8868 if you want a 3-month ion required to file Form 990-T). However, you can sion or (2) you file Forms 990-BL, 6069, or 8870, gi lly completed and signed page 2 (Part II) of Form 8 e-file for Charities & Nonprofits	not file Form 8868 e roup returns, or a co	electronically if (1) you want omposite or consolidated
_	Name of Exempt Organization		Er	mployer identification number
Type or print	POLISH WOMEN'S ALLIA	ANCE OF AMERICA		
	CHARITABLE AND EDUCA		3	6-4480318
File by the due date for	Number, street, and room or suite number	f If a P O box, see instructions		
filing your return See	6643 N NORTHWEST HW			
instructions	City, town or post office, state, and ZIP co	de For a foreign address, see instructions		
	CHICAGO, IL 60631-13	360	·	
	of return to be filed (file a separa	ate application for each return)	-	
X Form 990	)	Form 990-T (corporation)	Form 4720	
Form 990	)-BL	Form 990-T (section 401(a) or 408(a) trust)	Form 5227	
Form 990	)-EZ	Form 990-T (trust other than above)	Form 6069	
Form 990	)-PF	Form 1041-A	Form 8870	
Telephone If the orga If this is f check this the exten	anization does not have an officior a Group Return, enter the org s box ► . If it is for part of sion will cover.	FAX No Factor of business in the United States, check to place of business in the United States, check to planization's four digit Group Exemption Number (Glithe group, check this box Figure and attach a list to the group.	EN) If this with the names and	
		ths for a corporation required to file Form 990-T) ex		
	3/15 , 20 10 , to file ension is for the organization's r	the exempt organization return for the organizatio eturn for	n named above	
▶	calendar year 20 or			
► X	tax year beginning 8/01		_09_	
2 If this ta	ax year is for less than 12 month	is, check reason: Initial return Final	return Char	nge in accounting period
<b>3a</b> If this a nonrefu	pplication is for Form 990-BL, 99 ndable credits. See instructions	90-PF, 990-T, 4720, or 6069, enter the tentative tax	, less any	3a \$ 0.
<b>b</b> If this a made 1	pplication is for Form 990-PF or nclude any prior year overpaymo	990-T, enter any refundable credits and estimated ent allowed as a credit	tax payments	зь \$ 0.
deposit See inst	with FTD coupon or, if required, tructions	3a. Include your payment with this form, or, if requ by using EFTPS (Electronic Federal Tax Payment	System)	3c \$ 0.
Caution. If you asyment instr	ou are going to make an electron ructions	ic fund withdrawal with this Form 8868, see Form 8	3453-EO and Form 8	
BAA For Priv	vacy Act and Paperwork Reduct	ion Act Notice, see instructions.	* * * / Sm Sa	Form <b>8868</b> (Rev 4-2009)

DEC 15 2009