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## 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)

2008

Department of the Treasury  
Internal Revenue Service

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

Open to Public Inspection

For the 2008 calendar year, or tax year beginning Sep 1, 2008, and ending Aug 31, 2009

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See specific instructions.	<b>C</b> Name of organization WOMENS WAY		<b>D</b> Employer Identification Number 23-1989161
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 123 SOUTH BROAD ST Suite 1399		<b>E</b> Telephone number (215) 985-3328
		City, town or country State ZIP code + 4 PHILADELPHIA PA 19109		<b>G</b> Gross receipts \$ 2,000,728.
		<b>F</b> Name and address of principal officer MELISSA WEILER GE 123 S BROAD ST, STE 1399 PHILA PA 19109		
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c) ( 3 ) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'No,' attach a list (see instructions) <b>H(c)</b> Group exemption number		
<b>J</b> Website: <u>womensway.org</u>				
<b>K</b> Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>L</b> Year of Formation 1977		<b>M</b> State of legal domicile PA

## Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>WOMEN'S WAY RAISES MONEY AND PUBLIC AWARENESS TO FIGHT FOR AND ACHIEVE WOMEN'S EQUALITY, SAFETY, SELF-SUFFICIENCY AND REPRODUCTIVE FREEDOM THROUGH WOMEN-CENTERED FUNDING, ADVOCACY AND EDUCATION.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	23
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	23
Revenue	5 Total number of employees (Part V, line 2a)	5	10
	6 Total number of volunteers (estimate if necessary)	6	200
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	
	8 Contributions and grants (Part VIII, line 1b)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	1,672,710.	1,663,349.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	26,775.	-61,681.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 7e, 8c, 9c, 10c, 11c, 12e)	-100,592.	-107,400.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,598,893.	1,494,268.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	658,853.	637,312.
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	486,194.	582,314.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) <u>158,017.</u>		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	206,070.	286,665.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,351,117.	1,506,291.
	19 Revenue less expenses. Subtract line 18 from line 12	247,776.	-12,023.
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	1,443,336.	1,473,227.
	22 Net assets or fund balances. Subtract line 21 from line 20	147,959.	151,615.
		1,295,377.	1,321,612.

## Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.		
	Signature of officer <u>Melissa Weiler Gerber</u> Type or print name and title Executive Director	Date 4/1/10	
Paid Preparer's Use Only	Preparer's signature <u>Mary Scout</u> MARY SCOUT, CPA	Date 03/17/10	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 Boscarelli & Zaiss, P.C. 57 South Main Street Yardley PA 19067		Preparer's identifying number (see instructions) EIN <u>(856) 273-8855</u>
			Phone no <u>(856) 273-8855</u>
	May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

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

1 Briefly describe the organization's mission:

WOMEN'S WAY SERVES NEARLY 150,000 WOMEN, GIRLS, AND FAMILIES EACH YEAR THROUGH FUNDING, ADVOCACY, AND EDUCATION PROGRAMS AND EVENTS. SINCE  
See Form 990, Page 2, Part III, Line 1 (continued)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ 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 ☒ 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 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 \$ 445,270. including grants of \$ 310,146.) (Revenue \$ 0.)

EACH YEAR, WOMEN'S WAY ALLOCATES CRITICAL OPERATING FUNDS TO SIX MEMBER AGENCIES ADDRESSING A BROAD CONTINUUM OF CORE ISSUES THAT IMPACT WOMEN OF ALL AGES, RACES AND SOCIOECONOMIC BACKGROUNDS, WITH A PARTICULAR FOCUS ON ORGANIZATIONS PROVIDING SERVICES TO LOW-INCOME WOMEN AND THEIR FAMILIES. MEMBER AGENCIES PROVIDE SERVICES AND ADVOCATE AROUND ISSUES OF ADULT BASIC EDUCATION, TENANT AND CONSUMER TRAINING, RAPE CRISIS INTERVENTION, DOMESTIC ABUSE COUNSELING, HEALTH CARE OPTIONS, LEGAL RIGHTS, AND AGING SUPPORTS. MEMBER AGENCIES INCLUDE: CHOICE, COMMUNITY WOMEN'S EDUCATION PROJECT, DOMESTIC ABUSE PROJECT OF DELAWARE COUNTY, SUPPORTIVE OLDER WOMEN'S NETWORK, TENANT UNION REPRESENTATIVE NETWORK, AND WOAR.

4b (Code ) (Expenses \$ 479,983. including grants of \$ 310,146.) (Revenue \$ 0.)

LAUNCHED IN 2006, THE COMMUNITY WOMEN'S FUND IS AN OPEN GRANT-MAKING PROGRAM FOR AGENCIES THAT PROVIDE SERVICES TO WOMEN, GIRLS AND FAMILIES IN THE REGION. COMMUNITY WOMEN'S FUND GRANTS CAN BE USED FOR GENERAL OPERATING EXPENSES OR PROJECT SUPPORT. THE FUND IS UNIQUELY COMMUNITY-DRIVEN WITH GRANT RECOMMENDATIONS MADE BY A COMMITTEE OF COMMUNITY MEMBERS. ANNUAL FUNDING PRIORITIES ARE SHAPED BY A SIGNATURE WOMEN'S ISSUES SUMMIT POPULATED BY DIVERSE COMMUNITY LEADERS, WHO PROVIDE FEEDBACK ABOUT THE MOST PRESSING AND UNDER-FUNDED ISSUES FACING WOMEN AND GIRLS.

4c (Code: ) (Expenses \$ 283,107. including grants of \$ 2,020.) (Revenue \$ 0.)

CURRENT EDUCATION AND ADVOCACY COMMUNICATION INITIATIVES INCLUDE OUTREACH AROUND WOMEN'S WAY'S SIGNATURE RESEARCH REPORT, A CHANGE OF PACE: ACCELERATING WOMEN'S PROGRESS, WHICH PROVIDES A SOBERING REGIONAL VIEW OF THE CUMULATIVE EFFECTS OF POVERTY WAGES, SCARCE AFFORDABLE HOUSING, CHILDCARE AND HEALTH CARE, THREATS OF VIOLENCE, AND INSUFFICIENT SOCIAL SUPPORTS FOR WOMEN STRUGGLING TO ATTAIN ECONOMIC SELF-SUFFICIENCY AND SECURITY FOR THEMSELVES AND THEIR FAMILIES. REGULAR ELECTRONIC IMPACT INITIATIVES CHALLENGE CONSTITUENTS TO TAKE ACTION ON IMPORTANT ISSUES. MONTHLY ELECTRONIC NEWSLETTERS, CALLED FEmails, KEEP CONSTITUENTS INFORMED OF EVENTS AND NEWS THAT ARE OF INTEREST TO THE WOMEN'S COMMUNITY. WOMEN'S WAY'S WEBSITE FEATURES EVENT LISTINGS, JOB OPENINGS, AND  
See Form 990, Page 2, Part III, Line 4c (continued)

4d Other program services (Describe in Schedule O.)

(Expenses \$ 16,109. including grants of \$ 15,000.) (Revenue \$ 0.)

4e Total program service expenses ► \$ 1,224,469. (Must equal Part IX, Line 25, column (B).)

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
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		X
4 <b>Section 501(c)(3) organizations</b> Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	X	
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> 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	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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
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		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		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, VII, VIII, IX, or X as applicable	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	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		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		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		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		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H		X
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	X	
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		X
23 Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J		X
24a 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 complete Schedule K. If 'No,' go to question 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I		X
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		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		X
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		X

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

	Yes	No
<b>28</b> During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
<b>a</b> 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)? <i>If 'Yes,' complete Schedule L, Part IV</i>	<b>28a</b>	X
<b>b</b> Have a family member who had a direct or indirect business relationship with the organization? <i>If 'Yes,' complete Schedule L, Part IV</i>	<b>28b</b>	X
<b>c</b> 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? <i>If 'Yes,' complete Schedule L, Part IV</i>	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	<b>29</b>	X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>	<b>32</b>	X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>	<b>34</b>	X
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	<b>35</b>	X
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	<b>36</b>	X
<b>37</b> 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? <i>If 'Yes,' complete Schedule R, Part VI</i>	<b>37</b>	X

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**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1 a</b>	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.	4	
<b>1 b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
<b>1 c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2 a</b>	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.	10	
<b>2 b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).	X	
<b>3 a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
<b>3 b</b>	If 'Yes,' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.		
<b>4 a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>4 b</b>	If 'Yes,' enter the name of the foreign country. See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts.		
<b>5 a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5 b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5 c</b>	If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
<b>6 a</b>	Did the organization solicit any contributions that were not tax deductible?		X
<b>6 b</b>	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7 a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	X	
<b>7 b</b>	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	X	
<b>7 c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7 d</b>	If 'Yes,' indicate the number of Forms 8282 filed during the year.		
<b>7 e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7 f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7 g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7 h</b>	For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
<b>8</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
<b>9</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>		
<b>9 a</b>	Did the organization make any taxable distributions under section 4966?		X
<b>9 b</b>	Did the organization make any distribution to a donor, donor advisor, or related person?		X
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>10 a</b>	Initiation fees and capital contributions included on Part VIII, line 12.		
<b>10 b</b>	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>11 a</b>	Gross income from other members or shareholders.		
<b>11 b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12 a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12 b</b>	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.		

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

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.

	Yes	No
<b>1 a</b> Enter the number of voting members of the governing body	23	
<b>1 b</b> Enter the number of voting members that are independent	23	
<b>2</b> 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?		X
<b>3</b> 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?		X
<b>4</b> Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
<b>5</b> Did the organization become aware during the year of a material diversion of the organization's assets?		X
<b>6</b> Does the organization have members or stockholders?		X
<b>7 a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
<b>7 b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body?	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	X	
<b>9 a</b> Does the organization have local chapters, branches, or affiliates?		X
<b>b</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?		
<b>10</b> 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	X	
<b>11</b> 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		X

**Section B. Policies**

	Yes	No
<b>12 a</b> Does the organization have a written conflict of interest policy? If 'No,' go to line 13	X	
<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	X	
<b>13</b> Does the organization have a written whistleblower policy?	X	
<b>14</b> Does the organization have a written document retention and destruction policy?	X	
<b>15</b> 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:		
<b>a</b> The organization's CEO, Executive Director, or top management official?	X	
<b>b</b> Other officers of key employees of the organization?		X
Describe the process in Schedule O (see instructions)		
<b>16 a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</b> 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?		

**Section C. Disclosures**

**17** List the states with which a copy of this Form 990 is required to be filed ▶ See States Form 990 Filed In \_\_\_\_\_

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website    ☒ Another's website    ☒ Upon request

**19** Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

▶ Mary E Scout    123 S BROAD ST, STE 1399    Phila    PA    19109    (215) 985-3322

**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****1 a** 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) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOANNE BERWIND DIRECTOR	1.50	X						0.	0.	0.
LYNDA BYRD DIRECTOR	0.70	X						0.	0.	0.
DA QUANA CARTER DIRECTOR	1.00	X						0.	0.	0.
SHERRI HOPE CULVER DIRECTOR	0.50	X						0.	0.	0.
DEBORAH DE LAURO DIRECTOR	0.30	X						0.	0.	0.
ANNA MARIA DI DIO DIRECTOR	1.30	X						0.	0.	0.
ANN LANAHAN GILL DIRECTOR	1.70	X		X				0.	0.	0.
BETH GLASSMAN DIRECTOR	1.70	X						0.	0.	0.
ELAYNE HOWARD DIRECTOR	1.70	X		X				0.	0.	0.
DUANE INGRAM DIRECTOR	1.30	X						0.	0.	0.
ELIZABETH IRELAND DIRECTOR	1.00	X						0.	0.	0.
CELIA JOSEPH DIRECTOR	0.50	X						0.	0.	0.
MARY KOHART DIRECTOR	0.70	X						0.	0.	0.
DONNA LAANSMA DIRECTOR	0.70	X						0.	0.	0.
EMILY LAWRENCE DIRECTOR	1.70	X		X				0.	0.	0.
PHIL LORD DIRECTOR	1.00	X						0.	0.	0.
ALLEN MODEL DIRECTOR	1.30	X						0.	0.	0.



**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont.)**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ELIZABETH MURPHY DIRECTOR	1.30	X						0.	0.	0.
WILLIAM STASSEN DIRECTOR	0.50	X						0.	0.	0.
PENNY STOKER DIRECTOR	0.50	X						0.	0.	0.
JANE STORERO DIRECTOR	1.30	X						0.	0.	0.
DIANE APFELBAUM TOLL DIRECTOR	1.30	X						0.	0.	0.
SARA WOODS DIRECTOR	1.00	X		X				0.	0.	0.
MELISSA WEILER GERBER DIRECTOR	35.00					X		100,508.	0.	16,601.
<b>1 b Total</b>								100,508.	0.	16,601.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization **1**

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of Services	(C) Compensation
NONE		

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization **1**



**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).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	637,312.	637,312.		
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				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	108,706.	70,659.	21,741.	16,306.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	377,837.	270,961.	57,688.	49,188.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	5,374.	3,821.	822.	731.
9 Other employee benefits	49,614.	35,268.	7,610.	6,736.
10 Payroll taxes	40,783.	28,607.	6,881.	5,295.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	12,000.	8,448.	1,908.	1,644.
d Lobbying				
e Prof fundraising svcs. See Part IV, ln 17				
f Investment management fees	3,712.	2,614.	590.	508.
g Other	500.	330.	87.	83.
12 Advertising and promotion				
13 Office expenses	3,236.	2,277.	515.	444.
14 Information technology	12,098.	8,513.	1,925.	1,660.
15 Royalties				
16 Occupancy	55,185.	39,895.	7,920.	7,370.
17 Travel	4,073.	2,945.	565.	563.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,997.	2,710.	0.	287.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	5,840.	4,110.	929.	801.
23 Insurance	10,724.	7,547.	1,706.	1,471.
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.)				
a <u>BK, CREDIT CARD &amp; PAYROLL FEES</u>	6,480.	4,571.	1,023.	886.
b <u>COMMUNICATIONS</u>	64,878.	55,103.	7,239.	2,536.
c <u>EVENTS &amp; PROGS PRESENTED</u>	14,687.	13,797.	547.	343.
d <u>PHOTOCOPY EXP</u>	4,536.	3,192.	722.	622.
e <u>POSTAGE EXPS</u>	25,523.	13,885.	2,041.	9,597.
f All other expenses	60,196.	7,904.	1,346.	50,946.
25 Total functional expenses. Add lines 1 through 24f.	1,506,291.	1,224,469.	123,805.	158,017.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

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Form 990 (2008)

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>ASSETS</b>	1 Cash – non-interest-bearing		1	
	2 Savings and temporary cash investments	470,560.	2	620,954.
	3 Pledges and grants receivable, net	448,248.	3	373,205.
	4 Accounts receivable, net		4	
	5 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)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	41,769.	9	33,842.
	10a Land, buildings, and equipment: cost basis	51,941.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	24,999.	10c	26,942.
	11 Investments – publicly-traded securities	446,228.	11	400,645.
	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	17,542.	15	17,639.
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	1,443,336.	16	1,473,227.	
<b>LIABILITIES</b>	17 Accounts payable and accrued expenses	10,543.	17	17,804.
	18 Grants payable	113,509.	18	109,362.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	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	23,907.	25	24,449.
	26 <b>Total liabilities.</b> Add lines 17 through 25	147,959.	26	151,615.
<b>NET ASSETS OR FUND BALANCES</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29 and lines 33 and 34.</b>			
	27 Unrestricted net assets	914,041.	27	1,002,521.
	28 Temporarily restricted net assets	381,336.	28	319,091.
	29 Permanently restricted net assets		29	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, and equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 <b>Total net assets or fund balances.</b>	1,295,377.	33	1,321,612.
	34 <b>Total liabilities and net assets/fund balances.</b>	1,443,336.	34	1,473,227.

**Part XI Financial Statements and Reporting**

- 1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If 'Yes' to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
- 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?

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

BAA

Form 990 (2008)



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions and membership fees received (Do not include 'unusual grants'.)	1,220,990.	1,266,863.	1,542,778.	1,672,710.	1,663,349.	7,366,690.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
<b>3</b> 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.						
<b>4 Total.</b> Add lines 1-3	1,220,990.	1,266,863.	1,542,778.	1,672,710.	1,663,349.	7,366,690.
<b>5</b> 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)						
<b>6 Public support.</b> Subtract line 5 from line 4						7,366,690.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>7</b> Amounts from line 4	1,220,990.	1,266,863.	1,542,778.	1,672,710.	1,663,349.	7,366,690.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	11,169.	23,288.	23,024.	20,355.	17,187.	95,023.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>11 Total support.</b> Add lines 7 through 10						7,461,713.
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	

**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(c)(3) organization, check this box and stop here ☐**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	98.73%
<b>15</b> Public support percentage for 2007 Schedule A, Part IV-A, line 26f.	<b>15</b>	93.33%

**16a 33-1/3 support test – 2008.** If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ☒**b 33-1/3 support test – 2007.** If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ☐**17a 10%-facts-and-circumstances test – 2008.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ☐**b 10%-facts-and-circumstances test – 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ☐**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

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Schedule A (Form 990 or 990-EZ) 2008

**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.)

**Section A. Public Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6</b> <b>Total.</b> Add lines 1-5						
<b>7a</b> Amounts included on lines 1, 2, 3 received from disqualified persons						
<b>b</b> 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						
<b>c</b> Add lines 7a and 7b						
<b>8</b> <b>Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13</b> <b>Total support.</b> (add lines 9, 10c, 11, and 12.)						
<b>14</b> <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2007 Schedule A, Part IV-A, line 27g	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	<b>18</b>	%

**19a 33-1/3 support tests – 2008.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

**b 33-1/3 support tests – 2007.** If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

**Part IV** **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

[illegible]



**SCHEDULE C**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**

► **To be completed by organizations described below.**

► **Attach to Form 990 or Form 990-EZ.**

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

**If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: complete Part I-A only.

**If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

Employer identification number

WOMENS WAY

23-1989161

**Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.**  
See the instructions for Schedule C for details.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ► \$
- 3 Volunteer hours

**Part I-B To be completed by all organizations exempt under section 501(c)(3).**  
See the instructions for Schedule C for details.

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If 'Yes,' describe in Part IV

**Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).**  
See the instructions for Schedule C for details.

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$
- 3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b ► \$
- 4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's own internal funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

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

**Schedule C (Form 990 or 990-EZ) 2008**

**Part II-A** To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

- A** Check ☐ if the filing organization belongs to an affiliated group
- B** Check ☐ if the filing organization checked box A and 'limited control' provisions apply

<b>Limits on Lobbying Expenditures –</b> (The term 'expenditures' means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
<b>1 a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)		2,837.	
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)		1,033.	
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)		3,870.	
<b>d</b> Other exempt purpose expenditures		1,502,421.	
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)		1,506,291.	
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns		225,315.	
If the amount on line 1e, column (a) or (b) is Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000	<b>The lobbying nontaxable amount is</b> 20% of the amount on line 1e \$100,000 plus 15% of the excess over \$500,000. \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000. \$1,000,000.		
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)		56,329.	
<b>h</b> Subtract line 1g from line 1a Enter -0- if line g is more than line a		0.	
<b>i</b> Subtract line 1f from line 1c Enter -0- if line f is more than line c		0.	
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
<b>Calendar year (or fiscal year beginning in)</b>	<b>(a) 2005</b>	<b>(b) 2006</b>	<b>(c) 2007</b>	<b>(d) 2008</b>	<b>(e) Total</b>
<b>2 a</b> Lobbying non-taxable amount	200,707.	214,868.	210,112.	225,315.	851,002.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					1,276,503.
<b>c</b> Total lobbying expenditures	593.	285.	1,928.	3,870.	6,676.
<b>d</b> Grassroots non-taxable amount	50,177.	53,717.	52,528.	56,329.	212,751.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					319,127.
<b>f</b> Grassroots lobbying expenditures	593.	285.	1,915.	2,837.	5,630.

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Schedule C (Form 990 or 990-EZ) 2008

**Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)).** See the instructions for Schedule C for details.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
i Other activities? If 'Yes,' describe in Part IV			
j Total lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).** See the instructions for Schedule C for details.

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?		

**Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, question 3 is answered 'Yes.'** See Schedule C Instructions for details.

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5	

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i.  
Also, complete this part for any additional information

**Part IV** Supplemental Information *(continued)*

**SCHEDULE D  
(Form 990)**Department of the Treasury  
Internal Revenue Service

Name of the organization

**Supplemental Financial Statements****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.**

OMB No 1545-0047

**2008****Open to Public  
Inspection**

Employer identification number

WOMENS WAY

23-1989161

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts** Complete if  
the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	1.	
2 Aggregate contributions to (during year)	5,900.	
3 Aggregate grants from (during year)	15,000.	
4 Aggregate value at end of year	7,291.	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? ☒ Yes ☐ No

**Part II Conservation Easements** Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets**  
Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 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):

- a ☐ Public exhibition  
 b ☐ Scholarly research  
 c ☐ Preservation for future generations

- d ☐ Loan or exchange programs  
 e ☐ Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 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 ☐ No

**Part IV 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 on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table

- c Beginning balance  
 d Additions during the year  
 e Distributions during the year  
 f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV.

**Part V 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					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ☐ %  
 b Permanent endowment ☐ %  
 c Term endowment ☐ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations  
 (ii) related organizations

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4 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	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		51,941.	24,999.	26,942.
e Other				

**Total.** Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ☐ 26,942.

BAA

Schedule D (Form 990) 2008

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other -----		
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Total. (Column (b) should equal Form 990 Part X, col. (B) line 12 ) ▶		

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
<b>Total</b> <i>Column (b) (should equal Form 990, Part X, Col (B) line 13)</i>		

(a) Description	(b) Book value
CASH SURRENDER VALUE LIFE INSURANCE	7,868.
SECURITY DEPOSIT	9,771.
<b>Total.</b> <i>Column (b) Total (should equal Form 990, Part X, col.(B), line 15)</i>	17,639.

(a) Description of Liability	(b) Amount
Federal Income Taxes	
LIABILITY FOR AGENCY TRANSACTIONS	5,371.
TENANT SECURITY DEPOSITS	450.
DEFERRED RENT	18,628.
<b>Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25)</b>	<b>24,449.</b>

BAA TEEA3303 10/29/08 Schedule D (Form 990) 2008

**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1,494,268.
2	Total expenses (Form 990, Part IX, column (A), line 25)	1,506,291.
3	Excess or (deficit) for the year Subtract line 2 from line 1	-12,023.
4	Net unrealized gains (losses) on investments	38,258.
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net). Add lines 4-8	38,258.
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	26,235.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	1,589,223.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	38,258.
b	Donated services and use of facilities	2b	60,409.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	98,667.
3	Subtract line 2e from line 1	3	1,490,556.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	3,712.
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	3,712.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,494,268.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	1,562,988.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	60,409.
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	60,409.
3	Subtract line 2e from line 1	3	1,502,579.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	3,712.
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	3,712.
5	Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)	5	1,506,291.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

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**Part XIV** Supplemental Information *(continued)*

Department of the Treasury  
Internal Revenue Service

► Must be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

'OMB No 1545-0047

**Open to Public  
Inspection**

Name of the organization

WOMENS WAY

Employer identification number

23-1989161

<b>Part I</b>	<b>Fundraising Activities.</b> Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.
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**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- |  |  |
|--|--|
| <input type="checkbox"/> Mail solicitations      | <input type="checkbox"/> Solicitation of non-government grants |
| <input type="checkbox"/> Email solicitations     | <input type="checkbox"/> Solicitation of government grants     |
| <input type="checkbox"/> Phone solicitations     | <input type="checkbox"/> Special fundraising events            |
| <input type="checkbox"/> In-person solicitations |  |

**2a** Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes ☐ No

**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 990EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>Total</b>						

**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.

[illegible]

**Part II Fundraising Events.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

REVENUE		(a) Event #1 DINNER (event type)	(b) Event #2 FALL GALA (event type)	(c) Other Events NONE (total number)	(d) Total Events (Add col. (a) through col. (c))
	1 Gross receipts	326,797.	192,600.		519,397.
	2 Less Charitable contributions	277,182.	156,350.		433,532.
	3 Gross revenue (line 1 minus line 2)	49,615.	36,250.		85,865.
DIRECT EXPENSES	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs	7,180.			7,180.
	7 Other direct expenses	105,081.	81,004.		186,085.
	8 Direct expense summary Add lines 4- through 7 in column (d)				193,265.
	9 Net income summary. Combine lines 3 and 8 in column (d)				-107,400.

**Part III Gaming.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
	1 Gross revenue				
DIRECT EXPENSES	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary Combine lines 1 and 7 in column (d)				

9 Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states?

b If 'No,' Explain:

YES NO

9a

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

10a

b If 'Yes,' Explain:

11 Does the organization operate gaming activities with nonmembers?

11

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

12

**13** Indicate the percentage of gaming activity operated in**a** The organization's facility**13a** %**b** An outside facility**13b** %**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 contact with a third party from whom the organization receives gaming revenue?**15a****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. ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided: ▶ \_\_\_\_\_

☐ Director/officer☐ Employee☐ Independent contractor**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** 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: ▶ \$ \_\_\_\_\_

**SCHEDULE I**  
**(Form 990)**

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

OMB No. 1545-0047

**2008**

Department of the Treasury  
Internal Revenue Service

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

Open to Public  
Inspection

Name of the organization

WOMENS WAY

Employer identification number

23-1989161

**Part I General Information on Grants and 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?

☒ Yes ☐ No

**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II 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 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 ☐

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
CHOICE							
1233 LOCUST ST							
PHILA PA 19107	23-1894084	501 (C) (3)	51,691.				OPERATING SUPP
COMMUNITY WOMEN'S EDUCATI							
2801 FRANKFORD AVE							
PHILA PA 19134	23-2239625	501 (C) (3)	51,691.				OPERATING SUPP
DOMESTIC ABUSE PROJ							
14 W 2ND ST							
MEDIA PA 19063	23-2053144	501 (C) (3)	51,691.				OPERATING SUPP
SUPPORTIVE OLDER WOMEN'S							
4100 MAIN ST							
PHILA PA 19120	22-2629856	501 (C) (3)	51,691.				OPERATING SUPP
TENANT UNION REPRESENTATI							
1315 WALNUT ST							
PHILA PA 19107	25-1635266	501 (C) (3)	51,691.				OPERATING SUPP
WOMEN ORGANIZED AGAINST R							
1617 JEK BLVD							
PHILA PA 19103	23-1909487	501 (C) (3)	51,691.				OPERATING SUPP
INTERFAITH HOSPITALITY NE							
7047 GERMANTOWN AVE							
PHILA PA 19119	23-2633807	501 (C) (3)	13,000.				THERAPUTIC SER
PEOPLE'S EMERGENCY CENTER							
325 N 39 ST							
PHILA PA 19104	23-2017882	501 (C) (3)	13,000.				TEEN PROGRAM

**2** Enter total number of section 501(c)(3) and government organizations

32

**3** Enter total number of other organizations

0

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

TEEA3901 12/19/08

Schedule I (Form 990) 2008

**SCHEDULE I-1**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)**

▶ Attach to Form 990 to list additional information for  
Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

Name of the organization		Employer identification number					
WOMENS WAY		23-1989161					
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part I.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
ENDOW-A-HOME 3721 MIDVALE AVE PHILA PA 19129	23-1727133	501 (C) (3)	7,500.				CASE MGMT SER
A CHANCE TO HEAL FDN 115 WEST AVE JENKINGOWN PA 19046	20-2547268	501 (C) (3)	10,000.				OPERATING SUPP
CAREER WARDROBE 1211 CHESTNUT ST PHILA PA 19107	23-2900156	501 (C) (3)	8,000.				OPERATING SUPP
EAST SIDE NEIGHBORHOOD CO 301 E 9TH ST CHESTER PA 19013	42-1540777	501 (C) (3)	8,000.				VIOLENCE PREVE
EQUALITY ADVOCATES PA 1211 CHESTNUT ST PHILA PA 19107	23-2848883	501 (C) (3)	10,000.				LEGAL CLINIC
INTERIM HOUSE 333 W UPSAL ST PHILA PA 19119	23-7271716	501 (C) (3)	10,000.				ENHANCED JOB R
LA COMUNIDAD HISPANA 314 E STATE ST KENNET SQUARE PA 19348	23-2041915	501 (C) (3)	8,000.				EMPOWERMENT PR
MATERNITY CARE COALITION 2000 HAMILTON ST PHILA PA 19130	23-2200410	501 (C) (3)	10,000.				MOM MOBILE PRO
NURSE FAMILY PARTNERSHIP 260 S BROAD ST PHILA PA 19102	01-0560081	501 (C) (3)	16,000.				PRE-NATAL PROG

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)**

▶ Attach to Form 990 to list additional information for  
Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

Name of the organization  <b>WOMENS WAY</b>	Employer identification number <b>23-1989161</b>
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part I.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
VICTIM SERVICES OF MONTGO 18 W AIRY ST NORRISTOWN PA 19401	23-1967228	501 (C) (3)	12,500.				DEVELOP DATA B
COMMUNITY WOMEN'S EDUCATI 2801 FRANKFORD AVE PHILA PA 19134	23-2239625	501 (C) (3)	14,000.				COMPUTER EQUIP
GARAGE COMMUNITY & YOUTH PO BOX 1158 KENNET SQUARE PA 19348	10-1117967	501 (C) (3)	10,000.				GIRL TALK PROG
ALICE PAUL INSTITUTE 128 HOOTON RD MT LAUREL NJ 08054	22-2545683	501 (C) (3)	8,860.				TEACHERS INSTI
CHOICE 1233 LOCUST ST PHILA PA 19107	23-1894084	501 (C) (3)	10,000.				EMERGENCY OPER
COMMUNITY CONCERNS #13 2721 W CECIL B MOORE AVE PHILA PA 19121	23-1867692	501 (C) (3)	12,257.				ANTI-VIOLENCE
DOMESTIC ABUSE PROJECT 14 W 2ND ST MEDIA PA 19063	23-2053144	501 (C) (3)	12,500.				ECONOMIC EMPOW
MOUNTAIN MEADOW 1315 SPRUCE ST PHILA PA 19107	23-2280225	501 (C) (3)	10,000.				SUMMER CAMP PR
WOMEN'S MEDICAL FUND PO BOX 59555 PHILA PA 19102	23-1727133	501 (C) (3)	20,000.				OPERATING SUPP

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

Department of the Treasury  
Internal Revenue Service

Name of the organization

WOMEN'S WAY

Employer Identification number

23-1989161

Part I	Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)
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[illegible]

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations





**Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

Name of the Organization

Employer Identification number

## WOMENS WAY

23-1989161

**Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

[illegible]

**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.

OMB No 1545-0047

**2008**

Open to Public  
Inspection

Name of the organization

WOMENS WAY

Employer identification number

23-1989161

Pt VI-A, Line 10 WOMEN'S WAY'S FINANCE COMMITTEE THOROUGHLY REVIEWS  
Pt VI-A, Line 10 THE FORM 990 AND THEN PRESENTS THE RETURN TO THE  
Pt VI-A, Line 10 BOARD OF DIRECTORS FOR ITS REVIEW AND APPROVAL PRIOR  
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Pt XI, Line 2c THE FINANCE COMMITTEE REGULARLY REVIEWS THE RELATIONSHIP WITH  
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Name of the organization

WOMENS WAY

Employer identification number

23-1989161

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

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
  - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

Type or print  File by the due date for filing your return. See instructions.	Name of Exempt Organization <b>WOMEN'S WAY</b>	Employer identification number <b>23 1989161</b>	
	Number, street, and room or suite no. If a P.O. box, see instructions <b>123 SOUTH BROAD STREET, SUITE 1399</b>		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>PHILADELPHIA, PA 19109</b>		

**Check type of return to be filed** (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

- The books are in the care of ► **MARY SCOUT, CONTROLLER**

Telephone No. ► ( **215** ) **985-3322** FAX No. ► ( **215** ) **985-3369**

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . . . . . If this is for the whole group, check this box ☐ . . . . . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **APRIL 15**, 20**10**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year 20 . . . . . or
- ☒ tax year beginning **SEPTEMBER 1**, 20**09**, and ending **AUGUST 31**, 20**09**

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Schedule O (Form 990), Supplemental Information to Form 990  
**Form 990, Page 2, Part III, Line 1 (continued)**

Briefly describe the organization's mission.

1977, WOMEN'S WAY HAS PUT OVER 22 MILLION DOLLARS TO WORK TO ENHANCE  
THE LIVES OF WOMEN AND FAMILIES AND TO PROVIDE VITAL SUPPORT AND  
ASSISTANCE TO THE AGENCIES THAT SERVE THEM. IN ADDITION, WOMEN'S  
WAY RAISES A POWERFUL VOICE FOR WOMEN THROUGH A COORDINATED EDUCATION  
AND ADVOCACY PROGRAM THAT AIMS TO CREATE MEANINGFUL SOCIAL CHANGE  
FOR WOMEN, GIRLS, AND THEIR FAMILIES.

Schedule O (Form 990), Supplemental Information to Form 990  
**Form 990, Page 2, Part III, Line 4c (continued)**

RESEARCH REPORTS, AND PROVIDES INFORMATION ABOUT RESOURCES AVAILABLE TO  
THOSE SEEKING SERVICES. CRITICAL PLACEMENTS OF PIECES ABOUT WOMEN'S WAY'S  
WORK AND THE WORK OF FUNDED AGENCIES APPEAR IN LOCAL MEDIA OUTLETS ALONG WITH  
IMPORTANT COMMENTARIES.

Schedule O (Form 990), Supplemental Information to Form 990  
**Form 990, Page 2, Part III, Line 4d (continued)**

**4d** Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 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.

Code: _____	Description: <u>WOMEN FOR SOCIAL INNOVATION IS A DONOR ADVISED FUND OF</u>
Expenses <u>16,109.</u>	<u>WOMEN'S WAY THAT ANNUALLY AWARDS A GRANT TO A SOCIAL</u>
Grants Of <u>15,000.</u>	<u>ENTREPRENEUR WITH AN INNOVATIVE APPROACH TO SOLVING</u>
Revenue <u>0.</u>	<u>AN INTRACTABLE PROBLEM IMPACTING WOMEN, GIRLS AND/OR</u>
	<u>FAMILIES IN THE GREATER PHILADELPHIA REGION. WOMEN'S WAY</u>
	<u>STAFF SUPPORT WSI CONTRIBUTORS IN THEIR WORK TO RAISE FUNDS AND</u>
	<u>SOLICIT AND REVIEW GRANT PROPOSALS. EACH WSI CONTRIBUTOR HAS A</u>
Code: _____	Description: <u>VOTE IN SELECTING THE FINALIST FOR THE GRANT. WSI'S RECOMMENDATION</u>
Expenses _____	<u>IS BROUGHT TO WOMEN'S WAY'S BOARD FOR FINAL APPROVAL.</u>
Grants Of _____	
Revenue _____	

Form 990, Page 6, Line 17  
**States Form 990 Filed In**

Pennsylvania  
New Jersey

**Miscellaneous Statement**

PAGE 3, PART III- PRIMARY EXEMPT PURPOSE:

WOMENS WAY RAISES MONEY AND PUBLIC AWARENESS  
TO FIGHT FOR AND ACHIEVE WOMEN'S EQUALITY, SAFETY,  
SELF-SUFFICIENCY AND REPRODUCTIVE FREEDOM THROUGH  
WOMEN-CENTERED FUNDING, ADVOCACY AND EDUCATION.

Total

## Schedule I (Form 990) - Part IV - Supplemental Information (continued)

**Schedule I (Form 990) - Part IV - Supplemental Information (Continuation Sheet)**

Pt I Line 2	OPERATING GRANTS, ARE REQUIRED TO SUBMIT ANNUALLY A DETAILED REPORT AND
Pt I Line 2	UPDATED FINANCIAL INFORMATION. MEMBER AGENCIES MUST REPORT ON AGENCY
Pt I Line 2	OPERATIONS AND MANAGEMENT, PERFORMANCE GOALS, CLIENT DEMOGRAPHICS, SERVICE
Pt I Line 2	DELIVERY, FISCAL HEALTH, AND LEGAL COMPLIANCE. MEMBER AGENCIES ALSO MUST
Pt I Line 2	SUBMIT ANNUAL FINANCIAL STATEMENTS AND TWO YEARS' OF BUDGET COMPARED
Pt I Line 2	TO ACTUAL INCOME AND EXPENSES. FOLLOWING WOMEN'S WAY'S REVIEW OF THESE REPORTS,
Pt I Line 2	ITS DIRECTOR OF GRANTMAKING AND AGENCY RELATIONS AND A WOMEN'S WAY BOARD MEMBER
Pt I Line 2	MEET WITH THE FUNDED AGENCY'S EXECUTIVE DIRECTOR AND ONE OF ITS BOARD OFFICERS
Pt I Line 2	TO DISCUSS THIS REPORT.



**WOMEN'S WAY**  
**FINANCIAL STATEMENTS**  
**YEAR ENDED AUGUST 31, 2009**

**WOMEN'S WAY  
YEAR ENDED AUGUST 31, 2009**

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Financial statements:	
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Statement of functional expenses	5
Statement of cash flows	6
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**Independent Auditors' Report**

Board of Directors  
WOMEN'S WAY  
Philadelphia, PA

We have audited the accompanying statement of financial position of WOMEN'S WAY ("the Organization") as of August 31, 2009 and the related statements of activities and changes in net assets, functional expenses and cash flows for the year then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and the significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of WOMEN'S WAY as of August 31, 2009 and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

*Shechtman Marks Devor PC*

November 2, 2009

**WOMEN'S WAY**  
**STATEMENT OF FINANCIAL POSITION**  
**AUGUST 31, 2009**

**ASSETS**

Current assets:

Cash and cash equivalents	\$ 620,954
Investments	408,513
Contributions receivable, net of allowance for uncollectible accounts of \$8,939	187,458
Workplace campaigns receivable, net of allowance for uncollectible accounts of \$13,483	126,947
Prepaid expenses and other	<u>33,842</u>

Total current assets	<u>1,377,714</u>
----------------------	------------------

Other assets:

Contributions receivable, net of current portion	58,800
Security deposit	9,771
Furniture and equipment, net of accumulated depreciation of \$24,999	<u>26,942</u>

Total assets	<u><u>\$ 1,473,227</u></u>
--------------	----------------------------

## LIABILITIES AND NET ASSETS

### Current liabilities:

Accounts payable and accrued expenses	\$ 17,804
Liability for agency transactions	5,371
Subtenant's security deposits	450
Grants payable	<u>109,362</u>

Total current liabilities 132,987

### Other liability,

Deferred rent	<u>18,628</u>
---------------	---------------

Total liabilities 151,615

### Net assets:

Unrestricted	856,208
Unrestricted, board designated	<u>146,313</u>

Total unrestricted net assets 1,002,521

Temporarily restricted 319,091

Total net assets 1,321,612

Total liabilities and net assets \$ 1,473,227

The accompanying notes are an integral part of these financial statements.

**WOMEN'S WAY**  
**STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS**  
**YEAR ENDED AUGUST 31, 2009**

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
Operating support and revenue:			
2009 campaign results:			
Workplace campaigns	\$ 289,901	\$ -	\$ 289,901
Individuals	646,926	112,500	759,426
Corporations and foundations	229,226	8,000	237,226
Total campaign contributions	<u>1,166,053</u>	<u>120,500</u>	<u>1,286,553</u>
Advocacy activities and special events:			
Annual dinner (\$324,297 less expenses of \$112,261)	<u>212,036</u>	<u>2,500</u>	<u>214,536</u>
Fall Gala:			
Revenue	95,900	96,700	192,600
Net assets released from restrictions - Fall Gala	89,700	(89,700)	-
Expenses	(81,004)	-	(81,004)
Fall Gala, net	<u>104,596</u>	<u>7,000</u>	<u>111,596</u>
Other events	<u>2,703</u>	<u>-</u>	<u>2,703</u>
	<u>319,335</u>	<u>9,500</u>	<u>328,835</u>
Other income:			
Management fee	766	-	766
Net assets released from restrictions - Other	<u>192,245</u>	<u>(192,245)</u>	<u>-</u>
Total operating support and revenue	<u>1,678,399</u>	<u>(62,245)</u>	<u>1,616,154</u>
Expenses:			
Program services:			
Member agencies	457,630	-	457,630
Community Women's Fund	493,023	-	493,023
Educational Outreach & Advocacy	297,622	-	297,622
Women for Social Innovation	16,109	-	16,109
Supporting services:			
Management and administration	148,299	-	148,299
Fundraising	150,305	-	150,305
Total expenses	<u>1,562,988</u>	<u>-</u>	<u>1,562,988</u>
Change in net assets from operations	<u>115,411</u>	<u>(62,245)</u>	<u>53,166</u>

**WOMEN'S WAY**  
**STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS (CONTINUED)**  
**YEAR ENDED AUGUST 31, 2009**

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
Non-operating support and gains:			
Interest and dividends, net of investment fees	13,475	-	13,475
Net realized and unrealized losses on investments	<u>(40,406)</u>	<u>-</u>	<u>(40,406)</u>
Change in net assets from other activities	<u>(26,931)</u>	<u>-</u>	<u>(26,931)</u>
Total change in net assets	88,480	(62,245)	26,235
Net assets, beginning of year	<u>914,041</u>	<u>381,336</u>	<u>1,295,377</u>
Net assets, end of year	<u><u>\$ 1,002,521</u></u>	<u><u>\$ 319,091</u></u>	<u><u>\$ 1,321,612</u></u>

The accompanying notes are an integral part of these financial statements.

**WOMEN'S WAY**  
**STATEMENT OF FUNCTIONAL EXPENSES**  
**YEAR ENDED AUGUST 31, 2009**

	Program Services			Supporting Services		
	Member Agencies	Community Women's Fund	Educational Outreach & Advocacy	Women for Social Innovation	Management and Administration	Fundraising
Salaries	\$ 81,900	\$ 108,184	\$ 151,536	\$ -	\$ 79,429	\$ 65,494
Payroll taxes	7,135	9,002	12,470	-	6,881	5,295
Employee benefits	10,113	12,380	16,596	-	8,432	7,467
Total personnel	99,148	129,566	180,602	-	94,742	78,256
Grants	310,146	310,146	2,020	15,000	-	-
Bank, credit card, payroll fees	1,438	1,507	1,626	-	1,023	886
Communications	3,584	4,140	47,379	-	7,239	2,536
Computer and website maintenance	2,640	2,782	3,091	-	1,925	1,660
Conferences and meetings	622	619	1,469	-	-	287
Events and programs	865	2,099	10,833	-	547	343
Fees to workplace campaign organizers	-	-	-	-	-	32,255
Insurance	2,340	2,467	2,740	-	1,706	1,471
Office supplies	706	744	827	-	515	444
Photocopier	990	1,043	1,159	-	722	622
Postage and equipment rental	2,950	3,521	7,414	-	2,041	9,597
Printing and stationery	754	794	883	-	550	474
Professional fees	15,908	16,769	18,628	-	11,600	10,003
Program materials and supplies	61	108	675	1,109	-	2,050
Provision for uncollectible pledges	-	-	-	-	15,479	-
Rent, including operating expenses	12,484	13,071	14,340	-	7,920	7,370
Repairs and maintenance	15	16	18	-	11	10
Telephone	1,077	1,135	1,261	-	785	677
Travel and memberships	628	1,152	1,165	-	565	563
Total before depreciation	456,356	491,679	296,130	16,109	147,370	149,504
Depreciation	1,274	1,344	1,492	-	929	801
Total expenses	\$ 457,630	\$ 493,023	\$ 297,622	\$ 16,109	\$ 148,299	\$ 150,305
						\$ 1,562,988

The accompanying notes are an integral part of these financial statements.



**WOMEN'S WAY**  
**STATEMENT OF CASH FLOWS**  
**YEAR ENDED AUGUST 31, 2009**

Cash flows from operating activities:	
Change in total net assets	\$ 26,235
Adjustments to reconcile change in total net assets to net cash provided by operating activities:	
Decrease in allowance for uncollectible accounts	(8,581)
Depreciation	5,840
Change in deferred rent	992
Net realized and unrealized losses on investments	40,406
Decrease in operating assets:	
Contributions receivable	81,147
Workplace campaigns receivable	2,477
Prepaid expenses and other	7,927
(Decrease) increase in operating liabilities:	
Accounts payable and accrued expenses	7,261
Subtenant's security deposits	(450)
Grants payable	<u>(4,147)</u>
Net cash provided by operating activities	<u>159,107</u>
Cash flows from investing activities:	
Purchase of investments	(218,280)
Proceeds from sale of investments	223,360
Purchase of furniture and equipment	<u>(13,793)</u>
Net cash used in investing activities	<u>(8,713)</u>
Net increase in cash and cash equivalents	150,394
Cash and cash equivalents, beginning of year	<u>470,560</u>
Cash and cash equivalents, end of year	<u><u>\$ 620,954</u></u>

The accompanying notes are an integral part of these financial statements.

**WOMEN'S WAY  
NOTES TO FINANCIAL STATEMENTS  
YEAR ENDED AUGUST 31, 2009**

1. Organization:

WOMEN'S WAY ("Organization", herein), a not-for-profit organization, raises money for women-centered funding, advocacy, and education to achieve women's equality, safety, economic self-sufficiency, and reproductive freedom. As the nation's oldest women's funding federation, it grants critical operating funds to its member agencies and, through its Community Women's Fund, to women-led, women-focused regional social services organizations addressing a broad continuum of issues that impact women of all ages, races, and socioeconomic backgrounds.

Programs, in addition to funding, include production of an unprecedented research report on the pace of progress for women; hosting an annual women's conference on women's leadership; monthly electronic initiatives about issues of importance to women, girls, and families; technical assistance to grantees; a monthly electronic newsletter about events and news relating to the Organization's work and the work of its funded agencies; and development of future leaders and philanthropists through the Young Women's Initiative. Funding from the Organization supports programs that advocate adult basic education, tenant and consumer training, rape crises intervention, domestic abuse counseling, healthcare options, legal rights, aging supports and more.

2. Summary of significant accounting policies:

Basis of accounting:

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board in its Statement of Financial Accounting Standards (SFAS) No. 117, *Financial Statements of Not-for-Profit Organizations*. Under SFAS No. 117, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Net assets:

Net assets are categorized according to externally (donor) imposed restrictions. A description of the net asset categories is as follows:

Unrestricted net assets - are those assets that are available for the support of operations and whose use is not externally restricted.

Unrestricted, board designated net assets - are those assets that are available for the support of operations and whose use is not externally restricted but requires board approval.

Temporarily restricted net assets - are those assets whose use by the Organization has been limited by donors to a specific time period or purpose.

**WOMEN'S WAY**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED AUGUST 31, 2009**

2. Summary of significant accounting policies (continued):

Net assets (continued):

Permanently restricted net assets - are those assets that the donor stipulates must be maintained by the Organization in perpetuity. The Organization has no permanently restricted net assets.

Contributions:

Contributions received are recorded as unrestricted, temporarily or permanently restricted support depending on the existence and/or nature of any donor restrictions.

Contributions, including unconditional promises to give, are recognized as revenue in the period when the promise to give is received. Contributions that are restricted by the donor are recorded as increases in unrestricted net assets if the restrictions are met or expire within the fiscal year in which the contributions are received. All other donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending upon the nature of the restrictions. When a restriction is met, temporarily restricted net assets are released to unrestricted net assets.

Conditional promises to give are recognized as contribution revenue when the conditions on which they depend are substantially met.

In-kind contributions:

The Organization records donated materials and donated services that create or enhance non-financial assets. Services that require specialized skills are recorded when provided by individuals possessing those skills that would otherwise need to be purchased. In-kind contributions are recorded at their fair market value at the time of receipt and are included in the financial statements as revenue and expense.

Use of estimates:

The preparation of financial statements in conformity with generally accepted accounting principles in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from these estimates.

Cash and cash equivalents:

The Organization considers all highly liquid debt instruments purchased with an original maturity of three months or less, which are not intended to be held for investment purposes, to be cash equivalents.

**WOMEN'S WAY**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED AUGUST 31, 2009**

2. Summary of significant accounting policies (continued):

Contributions and workplace campaigns receivable:

Contributions and workplace campaigns receivable are stated at the amount management expects to collect from balances outstanding at year end. An allowance is based on historical experience and management's analysis of collectability. As of August 31, 2009, the allowance consisted of \$8,939 and \$13,483 for contributions and workplace campaigns, respectively.

Investments:

Investments are stated at fair value based on published market rates. Unrealized gains and losses are included in changes in net assets. Investment income and gains restricted by a donor are reported as increases in unrestricted net assets if the restrictions are met (either by passage of time or by use) in the reporting period in which the income and gains are recognized.

Furniture and equipment and depreciation:

Furniture and equipment is stated at cost. Major additions and betterments are capitalized and ordinary maintenance and repairs, which do not improve or extend the life of the respective assets, are expensed as incurred. Upon sale or retirement, the cost of the asset and the related accumulated depreciation are removed from the accounts and the resulting gain or loss, if any, is included in changes in net assets. Donated assets are recorded at fair value at the date of donation. Depreciation is recorded by the straight-line method over the estimated useful lives of the assets, 5 to 7 years.

Grants expended:

The Organization incurred grant expense under contracts with its member agencies and through an open grant making process for its Community Women's Fund. Total grants expended for the year were \$637,312.

Functional expenses:

The cost of providing the various programs and other activities has been summarized on a functional basis in the statement of activities and changes in net assets and in the statement of functional expenses. Expenses that cannot be directly attributed to a specific program are allocated across program and supporting services based upon estimates by management.

**WOMEN'S WAY**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED AUGUST 31, 2009**

2. Summary of significant accounting policies (continued):

Income taxes:

The Organization is exempt from federal and state income taxes under IRC Section 501(c)(3) and similar state laws. As a result, no provisions are made for federal and state income taxes. The Organization is not a private foundation.

The Organization has elected to defer the adoption of FASB Interpretation No. 48 ("FIN 48"), *Accounting for Uncertainty in Income Taxes*, as permitted, until fiscal years beginning after December 15, 2008. FIN 48 requires entities to evaluate, measure, recognize and disclose any uncertain income tax positions taken on their respective returns. Management is currently evaluating the impact of FIN 48 on its financial statements. Until it adopts FIN 48, the Organization accounts for any uncertain tax positions in accordance with FASB Statement No. 5, *Accounting for Contingencies*, which is the governing standard for recognition of tax-related contingencies.

3. Contributions receivable:

The Organization received a three-year grant during the year ended August 31, 2008 and a three-year grant during the year during the year ended August 31, 2009. These grants will provide support for capacity building within the Organization and to fund book awards, respectively. Contributions are discounted to their fair value. Valuation of the future contributions receivable takes place at the time of contribution. In addition, the Organization received certain grants during the year ended August 31, 2009, which are also included in contributions receivable and are all due within one year as of August 31, 2009.

Gross unconditional promises to give	\$ 256,597
Less unamortized discount	( 1,400 )
Less allowance for uncollectible accounts	( 8,939 )
	<u>246,258</u>
Amounts due:	
Within one year	187,458
Within two to three years	<u>58,800</u>
	\$ <u>246,258</u>

4. Fair value measurements:

The Organization's investments are reported at fair value in the accompanying financial statements as follows:

**WOMEN'S WAY**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED AUGUST 31, 2009**

4. Fair value measurements (continued):

	Fair Value as of August 31, 2009			
	Level 1	Level 2	Level 3	Total
Equity securities	\$ 174,805	\$ -	\$ -	\$ 174,805
Fixed income securities	225,840	-	-	225,840
Cash surrender value of life insurance policy	-	7,868	-	7,868
Total, investments	<u>\$ 400,645</u>	<u>\$ 7,868</u>	<u>\$ -</u>	<u>\$ 408,513</u>

SFAS No. 157, *Fair Value Measurements*, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices included within Level 1, and Level 3 inputs have the lowest priority. The Organization uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Organization measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 3 inputs are used only when Level 1 or Level 2 inputs are not available.

5. Deferred rent obligation:

The Organization received several months of free rent in its office lease. The lease also contains fixed rent increases each year. As a result, the Organization calculated the full obligation due under the lease and divided it by the number of months in the lease to arrive at a monthly rent expense. The difference between the amount paid and the rent expense incurred as of August 31, 2009 totaled \$18,628 and is shown as a deferred rent obligation in the accompanying financial statements.

6. Temporarily restricted net assets:

Temporarily restricted net assets are available for the following purposes:

2010 Fall Gala	\$ 96,700
Education and Advocacy	181,000
Ernesta D. Ballard Book Event	29,600
Women for Social Innovation	7,291
Other	<u>4,500</u>
	<u>\$ 319,091</u>

**WOMEN'S WAY**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED AUGUST 31, 2009**

7. Unrestricted net assets, board designated:

Unrestricted net assets, board designated consists of contributions that have been made to fund internal programs and operations of the Organization. There is no related endowment.

8. In-kind contributions:

Revenue and expenses include donated legal services of \$60,407, which benefited the administration and programs of the Organization.

9. Commitments:

Office lease commitments:

The Organization entered into a lease that began in February 2007 to rent office space through April 2017. The following is a schedule of future minimum rent payments required as of August 31, 2009.

<u>Year ending August 31,</u>	
2010	\$ 60,475
2011	61,267
2012	62,060
2013	62,852
2014	63,644
Thereafter	<u>173,502</u>
	\$ <u><u>483,800</u></u>

The Organization's lease calls for an annual assessment for any change in operating expense and real estate tax over the lease base line in addition to annual rents.

Rent expense for the year ended August 31, 2009 was \$55,185, which is shown net of rent received from subtenants of \$8,250.

Equipment lease commitments:

The Organization leases office equipment under non-cancelable leases expiring at various times through February 2012. The related lease expense for the year ended August 31, 2009 was \$16,359.

**WOMEN'S WAY**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
**YEAR ENDED AUGUST 31, 2009**

9. Commitments (continued):

Equipment lease commitments (continued):

The following is a schedule of future minimum lease commitments under non-cancelable equipment leases with initial or remaining terms in excess of one year as of August 31, 2009.

<u>Year ending August 31,</u>	
2010	\$ 14,423
2011	8,603
2012	<u>1,392</u>
	\$ <u>24,418</u>

10. Ernesta D. Ballard endowment fund:

A fund has been established at The Philadelphia Foundation for the benefit of WOMEN'S WAY called the Ernesta D. Ballard Fund for WOMEN'S WAY. Assets of the fund at June 30, 2009 were \$890,839. These assets are subject to the Foundation's ultimate control and absolute discretion. The Organization is currently receiving distributions based on the net income of the assets.

11. Employee benefit plan:

The Organization sponsors a 403(b) defined contribution plan for eligible employees who have been employed for more than one year. The Organization contributes 50% of employee elective deferrals up to 1.5% of employee compensation. The total contribution for the year ended August 31, 2009 was \$2,697.

12. Subsequent events:

The Organization has evaluated events and transactions for potential recognition or disclosure in the financial statements through November 2, 2009, the date on which the financial statements were available to be issued.