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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)

2009

OMB No 1545-0047

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

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	For t	he 2009 calen	dar year, o	or tax year begi	nning		, 20	009, and	d ending	9			,		
В	Check	if applicable		C Name of organi	zation						D Employ	yer ideni	ification Num	nber	
		ddress change	Please use IRS label	RACHEL'S	NETWORK.	INC.					31-	1644	905		
		•	or print		eet (or PO box if		livered to stre	et addr)	Room/su	ute	E Teleph				
		ame change	or type See					01 000.7			•			_	
	⊢ In	iitial return	specific Instruc-	1200 18th		N.W.			310		(20	2) 6	<u>59-084</u>	6	
	LJ T	ermination	tions.	City, town or co	ountry		Si	tate ZIP	code + 4						
	A	mended return		WASHINGTO	N			C 20	0036		G Gross	eceipts	\$ 839,	101	
	\square_{A}	pplication pending.	F Name a	and address of princip	al officer					H(a) Is this a	group retui	rn for aff	ilıates?	Yes	X No
			WINSOME N	(CTNTY)QU		SAMEAS	C ABOVE			H(b) Are all				Yes	□ No
		c-exempt statu			(insert no.)		47(a)(1) or		527	If 'No,'	attach a list	(see ins	structions)	_	_
÷		•				1 145	47 (a)(1) 01								
<u> </u>				elsnetwork		1		r:		H(c) Group				-	
K		n of organization	X Corpora	ation Trust	Association	Other -		L Year	of Formati	on 1999	9 M s	State of	egal domicile	DE	
Pa	art I	Summa													
	1	Briefly describ	be the org	janization's miss	sion or most sig	gnificant a	ctivities	SEE	ATTA	CHED S	TATEME	ENT A	<u> </u>		
•															
Ĕ															
Activities & Governance	1														
Š	2	Check this bo	x ► [[if the organization	on discontinue	tuts opera	tions or de	sposed	of more	than 259	 % of its as	 ssets			
ŏ	3			bers of the gove		•		оросса	0		or no a		13		
≪5 €	4			t voting member				ne 1b)					11		
Ę	5			vees (Part V, lin			,	•				\vdash	6	,	
₹	6			ers (estimate if	•								13		
¥c	7a			usiness revenue		. Icolumn	(C), ine 12					7a			0.
		-		taxable income								7b			
	-	THOU GITTI CHARGE	040111000	taxable meemle		, iiiio o	<u> </u>			Τ	·	' ' '			
_	_				***					<u> </u>	rior Year		Curre		
3 2010 Revenue	8			ts (Part VIII, line						-	676,8				347.
$\mathbb{Z}_{\mathbb{F}}$	9	-		ue (Part VIII, line					-	35,9				750.	
കൂ		10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)								25,1				702.	
₩	11	Other revenue	e (Part VII	II, column (A), lı	nes 5, 6d, 8c, 9	9c, 10c, aı	nd 11e)					351.			252.
<u>. </u>	12	Total revenue	– add Iır	nes 8 through 11	(must equal P	art VIII, co	olumn (A),	line 12)	<u> </u>	744,7	116.	{	823 <i>,</i>	051.
\equiv	13	Grants and si	mılar amo	ounts paid (Part	IX, column (A)	, lines 1-3)								
	14	Benefits paid	to or for r	nembers (Part I	X, column (A),	line 4)									
SCANNED EXPENSES	15			sation, employe			nn (A) line	es 5-10))	-	395,5	21		449	773.
				~~~~ <u>~~~~~~</u>			(. 7)	,	,		155,7			,	
<b>€</b> #				fees REC							155,/	78.			<del></del>
₹\$	þ	Total fundrais	ing expen	ses (Part IX, co	lumn (D), line	%M► _		127,	<u>945.</u>						]
۳	17	Other expense	es (Part I)	X, Column (A), k	nes 11a-11d, 1	(1)-241)					210,1	.58.	3	357,	479.
$\mathbb{Q}_{\mathcal{I}}$	18	Total expense	s Add Im	es 3-17 (must	equal Part IX	column (A	(), line 25)				761,4	57.			252.
				Subtract line 1			,,				-16,7				799.
- 2		TREVENUE 1033	САРСИЗСО			<del>-</del> 1				<del> </del>		T			
Assets or Balancos	۱				en ut					Begin	ning of Y			of Ye	
a de	20	Total assets (		•	_						763,7				972.
\$ E	21	Total liabilities	s (Part X,	line 26)	<b>/</b> )						5,9	77.		9,	443.
z				nces. Subtract li	ine 💋 from line	e 20					757,7	51.	7	782,	529.
Pa	rt II	Signatu	are Bloc	:k /	/										
<u> </u>		Under panalties	s of perjury	declare that I have of Declaration of prepa	examined this return	n, including a	ccompanying	schedules	and state	ments, and	to the best o	f my kno	wledge and b	elief. it	is
		true, correct, a	nd complete	Declaration of prepa	rer (officer than office	er) is based (	on all'informa	tion of wh	ich prepar	er has any k	nowledge				
Sig	ın		×11.	-8011A	Mari					1	L-1	1 - 7	(1)	)	
He	re	Signature	of officer					•		Dat	<u> </u>	<u> </u>			
			) -	3-15	2 2 4	OO-	<u>-</u>	- ^ -	_						
		Turana	int name and	15-N21	20P1	<u> </u>	<u> 25 10 i</u>	<u> </u>	k						
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				<b>.</b>		0		Date		Ch sel	eck if	Pri	eparer's ident e instructions	litying n S)	umber
Pai		Preparer's									ployed ►	X			
Pre		signature	<b>•</b>	1000	r (. L			5	/10 //	· o					
	rer's	Firm's name (o	r Lane	& Compan	v, CPAs				-/-	<del></del>					
Us		vours if self-		N Street		e 320			•	EI	u <b>&gt;</b>				
On	ıy	employed), address, and			MAY DUTE	320	DC 22	036				/200	1 462	CE ^	
	. 41	ZIP_+ 4		nington				036		Ph	one no	(202			
May	tne l	KS discuss this	s return w	ith the preparer	snown above?	(see instr	ructions)						X Yes		No_

	1 990 (2009) RACHEL'S NETWORK, INC.	31-164490	5 Page	
Pa	rt III Statement of Program Service Accomplishments	<u> </u>		
1	Briefly describe the organization's mission			
	SEE ATTACHED STATEMENT A			
				_
				· <b>-</b>
				· <b>-</b>
				_
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 X No	
	If 'Yes,' describe these new services on Schedule O.	_	_	
2	Did the organization cease conducting, or make significant changes in how it conducts, any program service		Yes X No	
3		»' L	162 EJ 140	
	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	on 501(c)(3)	
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and all expenses, and revenue, if any, for each program service reported.	ocations to other	s, the total	
	expenses, and revenue, if any, for each program service reported.			
			<del></del>	_
4:	a (Code) (Expenses \$ 187,638. including grants of \$ 0.) (Re	evenue \$	0.	)
				•
	NETWORKING - SEE ATTACHED STATEMENT B			· <b>–</b>
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	1 (O.1)		0.	
41	b (Code:) (Expenses \$ 201,312. including grants of \$ 0.) (Re	evenue \$	<u> </u>	,
	LEADERSHIP DEVELOPMENT & PLACEMENT - SEE ATTACHED			_
	STATEMENT B			_
				-
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4	c (Code ⁻) (Expenses \$192,145. including grants of \$0.) (Re	venue \$	<u>0.</u>))
	OUTREACH PROGRAMS - SEE ATTACHED STATEMENT B			
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	100			_
40	1 Other program services. (Describe in Schedule O)			
	(Expenses \$ 14,565. including grants of \$ 0.) (Revenue \$		0.)	_
4	e Total program service expenses ► 595,660.			_
				_

Form 990 (2009) RACHEL'S NETWORK, INC.

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	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		x
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		<u>x</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
•	• Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI			
•	• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	 Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII 			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX			
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
	 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If'Yes,' complete Schedule D, Part X 			
	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		x
12/	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		х
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ŧ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		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	15		<u>x</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		<u>x</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		<u>x</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		x
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		<u>x</u>

Form 990 (2009) RACHEL'S NETWORK, INC.

Part IV Checklist of Required Schedules (continued)

	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		x
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		x
١	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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?	24c		
•	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		<u>x</u>
ı	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		<u>x</u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		<u>x</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		<u>x</u>
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
i	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		x
•	c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		_ <u>x</u> _
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		<u> </u>
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>x</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		<u>x</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		<u>x</u>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		<u>x</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		<u>x</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		<u>x</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
BAA		Form	990 (2009)

amounts due or received from them)

12a

Statements Regarding Other IRS Filings and Tax Compliance Part V No Yes 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. 1 a 8 Information Returns Enter -0- if not applicable **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 10 Х (gambling) winnings to prize winners? 2a 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 6 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b x Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3 a X b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3 b 4a 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) 4a x **b** If 'Yes,' enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х 5b Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? X 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6Ь 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7 a provided to the payor? Х 7 b b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7е x benefit contract? 7 f X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make any distribution to a donor, donor advisor, or related person? 9Ь 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter 11 a a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against 11 b

BAA Form 990 (2009)

12 b

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

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

Form 990 (2009) RACHEL'S NETWORK, INC. 31-1644905 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. **Governing Body and Management** Section A. No Yes 1 a Enter the number of voting members of the governing body 1a|13 16 11 **b** Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 4 X 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 5 Did the organization become aware during the year of a material diversion of the organization's assets? X 6 Х 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the х 7 a governing body? 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a X a The governing body? Х **b** Each committee with authority to act on behalf of the governing body? 8b 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** (This Section B requests information about policies not required by the Internal Revenue Code) No_ Ye<u>s</u> 10a Does the organization have local chapters, branches, or affiliates? 10a X b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with those of the organization? 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 X 11 A Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b X to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c X 13 Does the organization have a written whistleblower policy? 13 14 X 14 Does the organization have a written document retention and destruction policy? 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? X a The organization's CEO, Executive Director, or top management official 15 a 15 b X **b** Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable 16a X entity during the year? **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 16b status with respect to such arrangements? Section C. Disclosures List the states with which a copy of this Form 990 is required to be filed ▶ 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 18 inspection. Indicate how you make these available. Check all that apply X Upon request Own website Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial 19 statements available to the public

BAA

1200 18TH STREET, N.W., #310 WASHINGTON DC 20036 (202) 659-0846

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of 'key employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did not	compens	ate an	ıy cı	ırreı	nt of	ficer,	dired	ctor, or trustee.		
(A)	(B) (c)							(D)	(E)	(F)
Name and Trtle	Average hours per week	o advid a tristee or director	S such property of	Off F	al key employee	High est coincersated employee	y) Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		a	÷			Ž Š				
MOLLY ROSS					-			:		
DIRECTOR	1.00	х						0.	0.	0.
CAROLYN WEINBERGER										
DIRECTOR	1.00	Х						0.	0.	0.
JOCELYN SLADEN							l			
DIRECTOR	1.00	Х					_	0.	0.	0.
CAROLINE GABEL										
DIRECTOR	1.00	Х			_			0.	0.	0.
MARIANNE GABEL										
DIRECTOR	1.00	X			_			0.	0.	<u> </u>
ANN HUNTER-WELBORN										
DIRECTOR	1.00	Х						0.	0.	<u> </u>
RENEE_INGOLD										_
DIRECTOR	1.00	Х			<u> </u>			0.	0.	0.
FA LIDDELL										_
DIRECTOR	1.00	X						0.	0.	<u> </u>
ADELAIDE PARK GOMER								_		_
DIRECTOR	1.00	Х	Ш		_			0.	0.	0.
LISA RENSTROM DIRECTOR	40.00	x						9,167.	0.	0.
WINSOME MCINTOSH							_	,		
PRESIDENT	40.00			X				150,000.	0.	0.
IRENE CROWE										
VICE CHAIR	1.00			X				0.	0.	0.
KATHY BORGEN										
SECRETARY	1.00			X	<u> </u>			0.	0.	0.
				_						
			ш	_						F 000 (0000)

Part VII Section A. Officers, Directors, Trust (A)	(B)	l	<u> </u>		c)	C3,	all	(D)	(E)	(F	
Name and Title	Average	Posi	tion (•	hat a	ipply)		, ,	1	•
	hours per week	or director	Institutional trustee	Officer	Key employee	Highest compensated emptoyee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estirr amount comper from organi and re organiz	nsation i the zation elated
									-		
										_	_
								. <u>.</u>			
				i							
1 b Total							>	24,167.	0.		0
2 Total number of individuals (including but not limited from the organization ►	to those	liste	ed a	ibov	e) w	/ho	rece	ived more than \$1	00,000 in reportabl	e compens	ation
 3 Did the organization list any former officer, director of on line 1a? If 'Yes,' complete Schedule J for such ind 4 For any individual listed on line 1a, is the sum of report the organization and related organizations greater that individual 	<i>lividual</i> ortable d	com	ens	satio	n ar	nd o	ther	compensation fro	m	3	x X
5 Did any person listed on line 1a receive or accrue cor rendered to the organization? If 'Yes,' complete Schei	npensa	tion	fron	n an	y ur	rela	ated	organization for se	ervices	5	x
Section B. Independent Contractors		Ju						-			
 Complete this table for your five highest compensated compensation from the organization. 	d indepe	ende	nt co	ontra	∍cto	rs tl	nat r	eceived more than	\$100,000 of		
(A) Name and business address								(B) Description o	f Services	(C) Compensa	ition
							\dashv				
				_							
2 Total number of independent contractors (including bu \$100,000 in compensation from the organization ►	ut not lir	nited	d to	thos	e lis	sted	abo	ve) who received	more than		

<u> </u>	sit viii Statement of Revenue	T			-	Γ :
	·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
· S	1a Federated campaigns 1a			TOTOTICO		312, 313, 01 314
A ST	b Membership dues 1b 330,07	79				
윤	c Fundraising events	~				
R A	d Related organizations	\dashv				
5 ₹	e Government grants (contributions)	-+				
SS §	e dovernment grants (contributions)	\dashv				
PROGRAM SERVICE REVENUE ONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 432,26	58.				
Z S	g Noncash contribns included in Ins 1a-1f \$					
<u>8 </u>	h Total. Add lines 1a-1f	•	762,347.			
Ä	Business Code	•				
E E	2a MEETING REGISTRATION FEES 9999999		34,750.	34,750.	0.	0.
2	b				· - ·	
Š	c		_			
SER	d		_			
¥	e					
SGR	f All other program service revenue					-
<u>~</u>	g Total. Add lines 2a-2f	•	34,750.			
	3 Investment income (including dividends, interest and					
	other similar amounts)	•	18,076.	0.	0.	18,076.
	4 Income from investment of tax-exempt bond proceeds	•				
	5 Royalties	•				
	(i) Real (ii) Personal					
	6a Gross Rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7a Gross amount from sales of (i) Securities (ii) Other					
	assets other than inventory 15,676.					
	b Less cost or other basis					
	and sales expenses 16,050.					
	c Gain or (loss) -374.					
	d Net gain or (loss)	•	-374.	0.	0.	-374.
JE I	8a Gross income from fundraising events					·
	of contributions reported on line 1c)					
8	See Part IV, line 18					
OTHER REVEN	b Less: direct expenses	\dashv	1			
6	c Net income or (loss) from fundraising events	┰				
	9a Gross income from gaming activities					
	b Less: direct expenses					_
ı	c Net income or (loss) from gaming activities	•				
	10a Gross sales of inventory, less returns and allowances					
- 1	b Less: cost of goods sold b					
ŀ	c Net income or (loss) from sales of inventory	•				
Ì	Miscellaneous Revenue Business Code					
	11a RAN REIMBURSEMENT 9999999		8,252.	8,252.	0.	0.
	b		·	, ===-		<u></u>
	c	\neg				
	d All other revenue	\neg				
J	e Total. Add lines 11a-11d	•	8,252.		<u>-</u>	-
	12 Total revenue. See instructions	▶	823,051.	43,002.	0.	17,702.
			,	,		

Part IX | Statement of Functional Expenses

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

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

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1			САРСИВОВ	goneral expenses	CAPCHISCS
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3					
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	150,000.	100,503.	15,702.	33,795.
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	248,667.	166,611.	26,031.	56,025.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	5,947.	3,985.	623.	1,339.
9	Other employee benefits	16,300.	11,577.	1,476.	3,247.
10	Payroll taxes	28,859.	20,298.	2,649.	5,912.
11	· · · · · · · · · · · · · · · · · · ·		20,230.	2,029.	5,912.
	Management				
	Legal	5,168.	4,919.	78.	171.
	Accounting	19,355.	0.	19,355.	0.
	Lobbying	23,333.		15,333.	
	Prof fundraising svcs See Part IV, In 17				
	Investment management fees		,		
	1 Other	70,895.	69,827.	335.	733.
	Advertising and promotion	70,033.	03,027.		733.
13	Office expenses	76,853.	68,742.	2,592.	5,519.
14	Information technology	23,484.	18,504.	1,556.	3,424.
15	Royalties	23,101.	10,501.	1,330.	3,424.
16	Occupancy	62,808.	43,896.	5,949.	12,963.
17	Travel	22,929.	21,286.	501.	1,142.
	Payments of travel or entertainment expenses for any federal, state, or local public officials	22,323.	21,200.	301.	1,124.
19	Conferences, conventions, and meetings	53,731.	52,575.	370.	786.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,519.	0.	5,519.	0.
	Insurance	7,775.	6,700.	315.	760.
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	BANK CHARGES	340.	0.	340.	0.
b	DUES & SUBSCRIPTIONS	2,935.	2,935.	0.	0.
c	MISCELLANEOUS	60.	42.	6.	12.
d	CULTIVATION	5,627.	3,260.	237.	2,130.
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	807,252.	595,660.	83,634.	127,958.
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational				
BAA	campaign and fundraising solicitation				Form 990 (2009)
					. 5 555 (2003)

Pa	rt X	Balance Sheet					
	•				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			121,589.	1	129,063
- [2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors and highest compensated employees. Complete Part I	s, trust II of Sc	ees, key employees, chedule L		5	
	6	Receivables from other disqualified persons (as define	ed unde	er section 4958(f)(1))			
		and persons described in section 4958(c)(3)(B) Comp	olete P	art II of Schedule L		6	
\$	7	Notes and loans receivable, net				7	
SSEFS	8	Inventories for sale or use				8	
5	9	Prepaid expenses and deferred charges				9	6,043
	10 a	Land, buildings, and equipment, cost or other basis.	10a	36,808.			
		Complete Part VI of Schedule D					
١	b	Less accumulated depreciation	10 ь	15,576.	9,948.	10 c	21,232
ı	11	Investments – publicly-traded securities			632,191.	11	635,634
١	12	Investments – other securities. See Part IV, line 11				12	
ı	13	Investments - program-related. See Part IV, line 11				13	
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11		15			
١	16	Total assets Add lines 1 through 15 (must equal line	763,728.	16	791,972		
T	17	Accounts payable and accrued expenses		5,977.	17	9,443	
ŀ	18	Grants payable			18		
-	19	Deferred revenue			19		
:	20	Tax-exempt bond liabilities		[20	
3	21	Escrow or custodial account liability Complete Part IV	√ of Sc	hedule D		21	
ו ו	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified personal compensated employees.					
ı I		of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated thi	rd par	ties		23	
	24	Unsecured notes and loans payable to unrelated third	parties	;		24	
	25	Other liabilities Complete Part X of Schedule D				25	
1	26	Total liabilities. Add lines 17 through 25			5,977.	26	9,443
<u>, </u>		Organizations that follow SFAS 117, check here	X aı	nd complete lines			
		27 through 29 and lines 33 and 34.	_				
1	27	Unrestricted net assets			757,751.	27	782,529
	28	Temporarily restricted net assets				28	=
	29	Permanently restricted net assets			,	29	
}		Organizations that do not follow SFAS 117, check her	and complete				
- 1		lines 30 through 34.		_			
	30	Capital stock or trust principal, or current funds		30			
- 1	31	Paid-in or capital surplus, or land, building, and equipi		31			
<u>`</u>	32	Retained earnings, endowment, accumulated income,		32			
BALAZCES	33	Total net assets or fund balances		Ţ	757,751.	33	782,529
E	34	Total liabilities and net assets/fund balances		ļ	763,728.	34	791,972

BAA

Form **990** (2009)

-orm 990 (2009) RACHEL'S NETWORK, INC.	31-1644905	Pa	age 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 X Cash Accrual Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	х	l
b Were the organization's financial statements audited by an independent accountant?	2 b		Х
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversit review, or compilation of its financial statements and selection of an independent accountant?	ight of the audit,	х	
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year we consolidated basis, separate basis, or both	ere issued on a		
X Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	ı ın the Sıngle		x
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo to or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	he required audit		

Form 990 (2009)

BAA

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

2009

Open to Public Inspection

ame	of the	organization							Employe	r identifica	tion number		
RAC	HE	L'S NETWORK,								64490			
Par	t I	Reason for Pu	blic Charity Statu	ıs (All organizations	must o	comple	ete this	part.) See i	nstruct	ions		
he o	orga	nization is not a priv	ate foundation because	se it is. (For lines 1 throu	gh 11, c	heck on	y one b	ox.)					
1		A church, convention	on of churches or asso	ociation of churches desc	ribed in	section	170(b)(1	χΑχί).					
2	П	A school described	in section 170(b)(1)(A	A)(ii). (Attach Schedule E	:)								
3	П			organization described i		n 170(b)	X1XAXii	i).					
4	П	A medical research	organization operate	d in conjunction with a ho	ospital de	escribed	ın secti	on 170	(b)(1)(A)	(iii). Ente	er the hosp	tal's	
	_	name, city, and sta	te	,	•					• •	·		
5			erated for the benefit	of a college or university	owned o	r operat	ed by a	govern	mental i	ınıt desci	ribed in sec	tion	
6				jovernmental unit describ									
7	X	in section 170(b)(1)	(A)(vi). (Complete Pa			_	ernment	al unit	or from t	the gene	ral public d	escrib	ed
8	님	•		70(b)(1)(A)(vi). (Complete		-							
9	Ц	from activities relations	ed to its exempt funct	 more than 33-1/3 % of lons — subject to certain ss taxable income (less somplete Part III) 	exception	ons, and	(2) no r	nore th	an 33-1/	3 % of its	s support fi	om gr	oss
10	П	•	* * * * *	exclusively to test for put	olic safet	v See s	ection 5	509(a)(4).				
11		An organization org	janized and operated orted organizations d	exclusively for the benefit escribed in section 509(a	t of, to p)(1) or s	erform t ection 5	he funct 09(a)(2)	ions of,	or carry	out the 09(a)(3).	purposes of Check the	f one box tl	or nat
		_		ation and complete lines		-				<u> </u>	T	O.U	
	\Box	a ∐ Type I	b ∐ Type II	c ∐ Type II		_	_			ال ه	Type III—		
е	Ш	than foundation ma 509(a)(2)	nagers and other thar	ganization is not controlle n one or more publicly su	ed directi pported	y or indi organiza	rectly by ations de	one or	more d In secti	on 509(a	ed persons i)(1) or sec	otner tion	
f		If the organization recheck this box	received a written dete	ermination from the IRS t	hat is a	Type I,	Гуре II о	r Type	III suppo	orting org	anızatıon,		
g		Since August 17, 20	006, has the organizat	tion accepted any gift or	contribu	ition fror	n any of	the foll	owing p	ersons?			
												Yes	No
		below, the go	verning body of the su	controls, either alone or to apported organization?	ogether v	with pers	sons des	cribed	ın (ıı) ar	ıd (ııı)	11 g (i)		
		(ii) a family mem	ber of a person desc	ribed in (i) above?							11 g (ii)		
		(iii) a 35% control	lled entity of a person	described in (i) or (ii) ab	ove?						11 g (iii)		
h		Provide the following	g information about th	ne supported organization	าร								
	(i)	Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat (i) listed	ls the tion in col d in your erning ment?		nzation in (i) of	organizat (i) organi	Is the tion in col zed in the S ?	(vii) Amour	t of Sup	port
					Yes	No	Yes	No	Yes	No			
		-											
				-	<u> </u>	ļ			-				
					ļ <u> </u>								_
			_								•	•	_
					<u> </u>					 			
						1							

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

Schedule A (Form 990 or 990-EZ) 2009

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 (a) 2005 (c) 2007 (d) 2008 (b) 2006 (e) 2009 (f) Total beginning in) Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ') 712,763 762,347 3,998,195. 709,049. 1,035,465 778,571 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge 712,763 762,347. 3,998,195. 709,049. 1,035,465 778,571 Total. Add lines 1-through 3 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 686,706. shown on line 11, column (f) Public support. Subtract line 5 3,311,489. from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ► (d) 2008 (e) 2009 (a) 2005 (b) 2006 (c) 2007 (f) Total 3,998,195. 778,571 712,763 762,347 7 Amounts from line 4 709,049. 1,035,465 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 18,076 26,963 41,127 25,541 117,739. 6,032 similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of čapital assets (Explain in 6,491 12,307 6,625 6,851 8,252 40,526. Part IV.) Total support. Add lines 7 through 10 4,156,460. 12 Gross receipts from related activities, etc. (see instructions) 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 79.67% 14 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 79.51% 16a 33-1/3 support test - 2009. 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 - 2008. 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 - 2009 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 - 2008. 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

Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

	(Complete only if you chec	ked the box on iir	ie 9 01 Part I.)	<u>- </u>			<u> </u>
	tion A. Public Support			I	 	1	<u> </u>
	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')						
	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					-	
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
C	: Add lines 7a and 7b				<u></u>		
8	Public support (Subtract line			,			
	7c from line 6.)						
Sec	tion B. Total Support	_					
Cale	ndar year (or fiscal yr beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
	Total support. (add Ins 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is organization, check this box and	s for the organiza	tion's first, second	d, third, fourth, or	fifth tax year as a	section 501(c)	(3)
	tion C. Computation of Pub						
	Public support percentage for 200			12 column (6)		15	5 %
			.,	: 13, column (1 <i>))</i>			
	Public support percentage from 2						6
	tion D. Computation of Inv				- (0)		7 0/
	Investment income percentage fo				ın (t))	1	
	Investment income percentage fro				line 15 "	11 	
	33-1/3 support tests – 2009. If the more than 33-1/3%, check this bo	x and stop here.	The organization	qualifies as a pub	licly supported or	ganization	▶⊔
0	33-1/3 support tests – 2008. If the is not more than 33-1/3%, check	e organization did this box and stop	here. The organiz	ation qualifies as	a publicly suppor	ted organization) • []
20	Private foundation. If the organiz	ation did not ched	k a box on line 14	l, 19a, or 19b, ch	eck this box and s	ee instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2009

Schedule	A (Form	990 or 990-	EZ) 2009	RACHEL'S	NETWORK,	INC.		31	-1644905	Page 4
Part IV	Supp	lemental	Informat	tion. Comple	te this part	to provid	le the explanati y other additior	ons require	d by Part II,	line 10;
	T art	ii, iiie i7	a 01 17D,		1110 12.11	Ovide an	y other addition		011. 000 1113	
Other	Incom	e Part	II, Li	ne 10			<u>-</u>			
Descr	<u>iption</u>	: REIMB	URSED_E	EXPENSES_						
2005:	<u>6491.</u>									
2006:	12307	<u></u>								
2007:	6625.									
2008:	<u>6851.</u>									
2009:	8252.									
						- -				
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	<u>-</u> -									

TEEA0404 02/05/10

Schedule A (Form 990 or 990-EZ) 2009

BAA

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public Inspection Employer Identification number

RA	CHEL'S NETWORK, INC.			31	-1644905	
Pa	rt I Organizations Maintaining Don	or Advised Funds or Oth	er Similar Funds o	or Accoun	ts Complete	e ıf
	the organization answered 'Yes'	to Form 990, Part IV, line	e 6.		,	
		(a) Donor advised	funds	(b) Funds	s and other acc	counts
1	Total number at end of year			•		
2	Aggregate contributions to (during year)			•		
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and do funds are the organization's property, subject			lvised	Yes	☐ No
6	Did the organization inform all grantees, done used only for charitable purposes and not for purpose conferring impermissible private ben	the benefit of the donor or donor	g that grant funds may or advisor or for any oth	be ner	∏Yes	∏No
Pa	rt II Conservation Easements Comp		nswered 'Yes' to F	orm 990. F	Part IV. line	7.
1						-
·	Preservation of land for public use (e.g.,	•	Preservation of an	historically in	mportant land a	area
	Protection of natural habitat	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Preservation of cer	_	-	
	Preservation of open space					
2	- 	ion held a qualified conservation	n contribution in the for	m of a conse	ervation easem	nent on the
			L	Hel	ld at the End o	f the Year
	a Total number of conservation easements		L	2a		
	b Total acreage restricted by conservation ease		L	2b		
	c Number of conservation easements on a cert	ified historic structure included i	n (a)	2c		
	d Number of conservation easements included	• •	L	2d		
3	Number of conservation easements modified,	transferred, released, extinguis	shed, or terminated by	the organizat	tion during the	tax
	year ▶					
4	Number of states where property subject to c	onservation easement is located				
5	and enforcement of the conservation easeme	nt it holds?		of violations,	Yes	☐ No
6	Staff and volunteer hours devoted to monitoring the year ► Amount of expenses incurred in monitoring, i					_
	during the year ►			\$		-
8	Does each conservation easement reported of 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?				Yes	☐ No
9	include, if applicable, the text of the footnote conservation easements	to the organization's financial st	atements that describe	s the organi	zation's accour	e sheet, and nting for ————————————————————————————————————
Pa	rt III Organizations Maintaining Coll Complete if the organization an	ections of Art, Historical swered 'Yes' to Form 990	Treasures, or Oth , Part IV, line 8.	er Similar	Assets	
1	a If the organization elected, as permitted unde treasures, or other similar assets held for put the text of the footnote to its financial stateming	olic exhibition, education, or rese	revenue statement and earch in furtherance of	l balance she public servic	eet works of art e, provide, in f	t, historical Part XIV,
	b If the organization elected, as permitted unde treasures, or other similar assets held for put amounts relating to these items:	olic exhibition, education, or rese	enue statement and ba earch in furtherance of	ance sheet v public servic	works of art, his e, provide the	storical following
	(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 a amounts required to be reported under SFAS	art, historical treasures, or other 116 relating to these items	similar assets for final	ncıal gaın, pr	ovide the follo	wing
	a Revenues included in Form 990, Part VIII, lin	e 1			►\$	
	b Assets included in Form 990, Part X				► \$	

Schedule D (Form 990) 2009 RACH						31-16		Page 2
Part III Organizations Mainta	ining Colle	ctions	of Art, Histo	orica	l Treasures, o	r Other Similar As	sets (con	tınued)
3 Using the organization's acquisitive items (check all that apply):	ion accession	and othe	_	_	_	nat are a significant use	of its collec	tion
a Public exhibition			_		change programs			
b Scholarly research			e U Other					 -
c Preservation for future gener		4			£			
4 Provide a description of the orga Part XIV			·	-	J	. , .	e in	
5 During the year, did the organiza assets to be sold to raise funds r	ather than to t	eceive o	ained as part of	f the c	rical treasures, or organization's colle	ection?	Yes	No
Part IV Escrow and Custodia 9, or reported an amount	al Arrangen ount on Forr	nents (n 990,	Complete if on Part X, line	organ 21.	iization answe	red 'Yes' to Form S	990, Part	IV, line
1a Is the organization an agent, trus included on Form 990, Part X?						r assets not	Yes	No
b If 'Yes,' explain the arrangement	ın Part XIV ar	nd comp	lete the followin	g tabl	e:			
. Dan en hala							Amount	
c Beginning balance						1c		
d Additions during the yeare Distributions during the year						1 d		
f Ending balance						1 f		
2a Did the organization include an a	mount on Forn	n 990. F	Part X. line 21?			_ '''	Yes	No
b If 'Yes,' explain the arrangement		550, .	G.(74, III.O Z.)				□	
Part V Endowment Funds Co		rganıza	ation answer	ed 'Y	es' to Form 99	0, Part IV, line 10		
	(a) Current	year	(b) Prior yea	r	(c) Two years bac	k (d) Three years back	(e) Four	years back
1 a Beginning of year balance								
b Contributions								
c Net Investment earnings, gains, and losses					< ×			
d Grants or scholarships								
 Other expenditures for facilities and programs 			· · · · · · · · · · · · · · · · · · ·					
f Administrative expenses								
g End of year balance								
2 Provide the estimated percentage	-	nd balar	nce held as					
a Board designated or quasi-endow			*					
b Permanent endowment ►								
c Term endowment ►								
3a Are there endowment funds not in organization by:	n the possessi	on of the	e organization tl	nat are	e held and admini	stered for the	Y	es No
(i) unrelated organizations							3a(i)	
(ii) related organizations							3a(ii)	
b If 'Yes' to 3a(II), are the related o							3b	
4 Describe in Part XIV the intended						1 10		
Part VI Investments-Land, B						· · · · · · · · · · · · · · · · · · ·		
Description of investment	į		or other basis vestment)		Cost or other pasis (other)	(c) Accumulated Depreciation	(d) Boo	k Value
1 a Land								
b Buildings	1							
c Leasehold improvements].							
d Equipment	-				36,808.	_15,576.		21,232.
e Other	- (-1)	-1.5	200 5 131		(D) 1 - 10(1)			01 000
Total. Add lines 1a through 1e (Column	ı (a) must equ	ai rorm	уу и, Рап X, со	iumn ((B), IINE [U(C))			<u>21,232.</u>
BAA						Sche	uule v (Forn	n 990) 2009

	0) 2009 RACHEL'S NETWORK		31-1644905	Page 3
Part VII Investm	nents-Other Securities See	Form 990, Part X, line	12.	
(a) Descrip (inclu	otion of security or category ding name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Financial derivatives				
Closely-held equity int	terests			
Other				
~ ~ ~ ~ ~ ~ ~ ~ .				
	qual Form 990 Part X, col (B) line 12)			
	nents-Program Related (Se	<u>e Form 990, Part X, line</u>	e 13)	
(a) Desci	ription of investment type	(b) Book value	(c) Method of valuation	
			Cost or end-of-year market value	
				
				
				
				
	ual Form 990, Part X, Col (B) line 13.)			
Part IX Other A	ssets (See Form 990, Part >			
	(a)	Description	(b) Book va	iue
				
	· · ·			
				
	ust equal Form 990, Part X, col (B),		<u> </u>	
	iabilities (See Form 990, Pa	The state of the s	T	 -
	Description of Liability	(b) Amount		
Federal Income Taxes	·	<u> </u>	4	ĺ
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		-	-	1
			4	
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			-	Ī
<u> </u>			-	ļ
			_	
			_	ļ
Total. (Column (b) must equ	ual Form 990, Part X, col. (B) line 25)			
0 FINI 40 Factoria Ia	Dank VIV		ancial statements that reports the organization's ligh	dia.

Schedule D (Form 990) 2009	RACHEL'S NETWORK, INC.		31-1644905	Page 4
Part XI Reconciliation	of Change in Net Assets from Forn	n 990 to Financial Staten	nents	
1 Total revenue (Form 990,	Part VIII,column (A), line 12)			
2 Total expenses (Form 990), Part IX, column (A), line 25)			
3 Excess or (deficit) for the	year Subtract line 2 from line 1			
4 Net unrealized gains (loss	ses) on investments			
5 Donated services and use	of facilities			
6 Investment expenses			<u></u>	
7 Prior period adjustments				
8 Other (Describe in Part X	V)			
9 Total adjustments (net). A	dd lines 4 through 8			
10 Excess or (deficit) for the	year per audited financial statements. Comb	ine lines 3 and 9		
Part XII Reconciliation	of Revenue per Audited Financial S	Statements With Revenu	e per Return	
 Total revenue, gains, and 	other support per audited financial statemen	ts	1	
2 Amounts included on line	1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains on in	ivestments	2 a		
b Donated services and use	of facilities	2b		
c Recoveries of prior year g	rants	2c		
d Other (Describe in Part X	V)	2 d		
e Add lines 2a through 2d			2e	
3 Subtract line 2e from line	1		3	
4 Amounts included on Form	n 990, Part VIII, line 12, but not on line 1.			
a Investments expenses no	t included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part X	V)	4b		
c Add lines 4a and 4b			4c	
5 Total revenue Add lines 3	and 4c. (This must equal Form 990, Part I,	line 12.)	5	
Part XIII Reconciliation	of Expenses per Audited Financial	Statements With Expen	ses per Return	
1 Total expenses and losses	s per audited financial statements		1	
2 Amounts included on line	1 but not on Form 990, Part IX, line 25:			
a Donated services and use	of facilities	2a		
b Prior year adjustments		2b		
c Other losses		2c		
d Other (Describe in Part XI	v)	2 d		
e Add lines 2a through 2d			2 e	
3 Subtract line 2e from line	1		3	
4 Amounts included on Forr	n 990, Part IX, line 25, but not on line 1:			
a Investments expenses no	included on Form 990, Part VIII, line 7b	4a]	
b Other (Describe in Part XI		4b		
c Add lines 4a and 4b	•	•	4c	
5 Total expenses Add lines	3 and 4c (This must equal Form 990, Part I,	line 18)	5	
Part XIV Supplemental		,		
Complete this part to provide th line 4, Part X, line 2, Part XI, linformation.	e descriptions required for Part II, lines 3, 5, ne 8, Part XII, lines 2d and 4b; and Part XIII,	and 9, Part III, lines 1a and 4; lines 2d and 4b Also complete	Part IV, lines 1b and 2b, Pa this part to provide any add	rt V, Iitional

Schedule D	(Form 990) 2009 Supplementa	RACHEL'S	NETWORK,	INC.	31-1644905	Page 5
Part XIV	Supplementa	I Information	(continued	0		
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

RACHEL'S	NETWORK,	INC.	31-1644905
Pt_VI-A,	Line 8b	COMMITTEE MEETINGS WERE NOT DOCUMENTED BECAUSE	
		COMMITTEES DO NOT FINALIZED DECISIONS ON BEHALF	<u>of</u>
		THE ENTIRE GOVERNING BODY. MEMBERS OF COMMITTEE	S PRESENT
		RECOMMENDATIONS TO THE FULL GOVERNING BODY FOR	FINAL
		APPROVAL.	
Pt_VI-B,	Line 11A	COPIES OF THE 990 ARE DISTRIBUTED TO THE BOARD	OF
		DIRECTORS DURING A BOARD MEETING BEFORE BEING F	ILED.
Pt_VI-B,	Line 15	THE PRESIDENT IS REVIEWED ANNUALLY BY THE BOARD	CHAIR
		AND VICE CHAIR, SERVING AS THE COMPENSATION COM	MITTEE.
		THEY USE COMPARABILITY DATA FOR SALARY REVIEWS.	
		THE STAFF IS REVIEWED BY SENIOR MANAGEMENT. SAL	ARY
		REVIEWS ARE BASED ON PERFORMANCE, THE ORGANIZAT	ION'S
		ABILITY TO PAY, AND COMPENSATION SURVEYS.	
Pt_VI-C,	Line 19	RACHEL'S NETWORK'S GOVERNING DOCUMENTS, FINANCIA	AL
		STATEMENTS, AND CONFLICT OF INTEREST POLICY ARE	·
		ARE AVAILABLE FOR PUBLIC INSPECTION UPON REQUES	T <u>.</u>
Pt_VI-B,	Line 12c	RACHEL'S NETWORK HAS NOT YET FOUND ITSELF IN AN	Y_INSTANCE
		WHERE THERE MAY BE A POTENTIAL CONFLICT OF INTE	REST;
		THEREFORE REGULAR MONITORING HAS NOT BEEN NECES:	SARY.
Pt_VI-A,	Line 2	CAROLINE GABEL AND MARIANNE GABEL ARE SISTERS.	
	 _		
			

TEEA4901 07/17/09

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2009

OMB No 1545-0047

Schedule R (Form 990) (2009) (F)
Direct controlling
entity (F)
Direct controlling
entity Open to Public Inspection Identification of Related Tax-Exempt Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because it had **Employer identification number** N/A 31-1644905 (E)
Public charity status (if section 501(c)(3)) (E) End-of-year assets N/A Part I Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) (D) Exempt Code section Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990. (**D)** Total income TEEA5001 02/05/10 501(c)4 (C) Legal domicile (state or foreign country) (C)
Legal domicile (state or foreign country) 1200 18TH STREET NW, STE 310, WASHINGTON DC 20036 TAKE POLITICAL ACTION DC EMPOWERS FUNDERS TO BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (B) Primary activity (B) Primary activity one or more related tax-exempt organizations during the tax year.) (A) Name, address, and EIN of related organization (A) Name, address, and EIN of disregarded entity RACHEL'S ACTION NETWORK 27-0072154 RACHEL'S NETWORK, INC Department of the Treasury Internal Revenue Service Name of the organization Part II

Page 2

Schedule R (Form 990) 2009 RACHEL'S NETWORK, INC.

Part III Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) 31-1644905

Name, address, and EIN of Primary Activity Legal Durect Controlling entity related organization related organization (state or form) assets and EIN of Primary Activity Country) Controlling entity country (state or form) assets and EIN of State or form tax under from tax un		one or more rel	ated orga	anizations treat	ed as a partnersni	— because it nad one of more related organizations treated as a partnersnip during the tax year.)	ar.)			•
related organization domicule controlling entity income (related, cacucided form to workington to country) sections 512-514)	(A) Name, address, and EIN of		(C)	(0) Direct	(E) Predominant	-	(G) Share of end-of-year	(H) Dispropor-	Code V-UBI	(J) General or
(State or foreign from tax under sections 512-514)	related organization		domicile	controlling entity	income (related,		assets	tionate	amount in box	managkng
Country Sections 512-514			(state or		unrelated, excluded			allocations?	20 of Schedule	partner?
			country)	•	sections 512-514)			Yes No	(Form 1065)	Yes No
								:		
				·	_					
				•						

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answine 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	Faxable as a Cor ed organizations	poration or Tru treated as a cc	ust (Complete	if the organiz	ered "	es' to Form 990, Pa	ıt √,
(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) (D) (D) (E) Legal domicile (State or foreign controlling entity (C corp., S corp., country)	(D) Direct controlling entity	Type of entity (C corp, S corp, or trust)	l incom	e Share of end-of-year lassets	(H) Percentage ownership
			i				
ВАА		TEEA5002 02/05/10	5/10		İ	Schedule R (Form 990) (2009)	990) (2009)

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			(9)
			(5)
			(4)
			(3)
			(2)
8,252	8,	I, M, N, P	(1) RACHEL'S ACTION NETWORK
eq	(C) Amount involved	(B) Transaction Antipe (a-r)	(A) Name of other organization
		ps and transaction thresholds	2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds
٩×	7 -	-	r Other transfer of cash or property from other organization(s)
	 	1	Other transfer of other transfer of the othe
	1p X		p Reimbursement paid by other organization for expenses
×	10	,	o Reimbursement paid to other organization for expenses
	1n X		n Sharing of paid employees
	1m X		m Sharing of facilities, equipment, mailing lists, or other assets
×	=		I Performance of services or membership or fundraising solicitations by other organization(s)
×	1		k Performance of services or membership or fundraising solicitations for other organization(s)
×	-		j Lease of facilities, equipment, or other assets from other organization(s)
	1:	1	i Lease of facilities, equipment, or other assets to other organization(s)
×	- 4L	•	h Exchange of assets
×		•	a Purchase of assets from other organization(s)
×	11	i	f Sale of assets to other organization(s)
×]e		e Loans or loan guarantees by other organization(s)
×	P.		d Loans of loan guarantees to of for other organization(s)
×	10	_ ,	c Gift, grant, or capital contribution from other organization(s)
×	1 b		b Gift, grant, or capital contribution to other organization(s)
×	1a		a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity
		.V.	1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV.
Ž	Yes		Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Schedule R (Form 990) 2009 RACHEL'S NETWORK, INC.

Part VI Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships.

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	Share of end-of-year assets	(F) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(H) General or managing partner?	al or ging er?
			Yes No	•	Yes No		Yes	N _o
								1
ВАА		TEEA5004 02/05/10		<u> </u>		Schedule R (Form 990) (2009)) (066 u	(6002

⊋∆CHEL	2'	NETWORK	INC

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

4 c	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:	EDUCATION FOR STRATEGIC PHILANTHROPY - SEE	
Expenses	14,565.	ATTACHED STATEMENT B	
Grants Of	0.		_
Revenue	0.		_
			-
			-
			~

Rachel's Network 2009 Federal Form 990 Page 1, part I and page 2, part III, line 1

ORGANIZATION'S EXEMPT PURPOSE

Rachel's Network (RN) promotes women as impassioned leaders and agents of change dedicated to the stewardship of the earth. RN services help broaden members' understanding of and connection to ecological issues, while outreach programs engage a wider audience of environmental advocates and fortify their capacities for leadership.

RACHEL'S NETWORK EIN: 31-1644905

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

NETWORKING

RN seeks to develop a strategic network that promotes collective action and unifies the voices of women committed to environmental protection. In 2009, RN:

- Recruited nine new Carson Council members and maintained a 84% renewal rate among current members
- Organized Washington, DC Annual Meeting three days of substantive briefings & networking events for RN membership with national environmental, political, & philanthropic leaders
- Organized Jackson Hole, WY Retreat three days of substantive briefings & networking events on preserving America's open spaces with leading regional advocates and officials
- Hosted Speaker Series events with Nan Aron of Alliance for Justice, Dr. Frederica Perera of the Columbia Center for Children's Environmental Health, Larry Schweiger of National Wildlife Federation, as well as regional events throughout the year
- Published 9th edition of annual Membership Directory, biennial Green Leaves newsletters, monthly e-newsletters to keep members connected with one another and informed about RN news

TOTAL NETWORKING EXPENSES: \$187,637.67

LEADERSHIP DEVELOPMENT AND PLACEMENT

RN seeks to increase the representation of women environmental advocates on boards of national, regional, and local nonprofit organizations. In 2009, RN:

- Managed board placement inquiries from over 50 national environmental organizations and increased our total placements to 34
- Coordinated consulting service to help members build professional resumes
- Offered fiscal sponsorship fund program to enable eligible members to initiate individual projects
- Created print, online, and video publications profiling members' and organization's achievements

TOTAL LEADERSHIP DEVELOPMENT AND PLACEMENT EXPENSES: \$201,311.67

EDUCATION FOR STRATEGIC PHILANTHROPY

RN seeks to increase the effectiveness of women funders through educational programs. In 2009, RN:

- Conducted educational teleconference calls with environmental, philanthropic, and policy experts, including leaders from Pew Environment Group, Energy and Environment Publishing, Grist.org, Water Advocates, Council on Foundations, and Environmental Working Group
- Disseminated weekly educational listserv and resource publications to keep membership informed about timely environmental/philanthropic issues and extended invitations to external educational/networking events to offer members access to in-depth study of specific issues

• Collaborated with the Natural Resources Defense Council on the ACE program to enable RN members to individually advocate for key environmental protection

TOTAL EDUCATION FOR STRATEGIC PHILANTHROPY EXPENSES: \$14,565.13 OUTREACH PROGRAMS

RN seeks to engage a wider audience of women leaders and environmental advocates by serving as a strategic connector. In 2009, RN:

- Coordinated the Congressional Women's Networking Initiative to create a collegial atmosphere in which women leaders can work together to promote issues important to women, published the 3rd edition of the Congressional Women's Directory, and hosted a Congressional Women's Roundtable on financial literacy
- Partnered with the Environmental Working Group to help raise awareness of the prevalence of toxic chemicals in the human body and co-sponsored a national conference on chemicals regulation
- Coordinated a strategic collaboration with evangelical leaders to bring new voices into the environmental movement

TOTAL OUTREACH PROGRAM EXPENSES: \$192,145.03