

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



Form **990-EZ** 

2009

OMB No 1545 1150

Department of the Treasury Internal Revenue Service

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

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form
990 All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year
may use this form may use this form

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

Open to Public Inspection

	Α	For the 2009 calendar year, or tax year beginning , 2009, and en	nding ,
	<u>B_</u>	Check if applicable C	D Employer identification number
		Address change   Please use IRS   Oregon Women Lawyers	93-0994040
		Name change label or PO Box 40393	E Telephone number
		Initial return Sype Portland, OR 97240	' '
	$\sqcup$	Termination See Specific	503-595-7826
		Amended return Instructions.	F Group Exemption
	Ш	Application pending	Number
		<ul> <li>Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).</li> </ul>	G Accounting method. X Cash Accrual Other (specify)
	1	Website: ► www.oregonwomenlawyers.@@	H Check ► X if the organization is <b>not</b> required to attach Schedule B (Form 990,
		Tax-exempt status (check only one) —   X   501(c) ( 6 )	990-EZ, or 990-PF)
		Check ► If the organization is not a section 509(a)(3) supporting organization and its gi	ross receipts are normally <b>not</b> more than
		\$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses	s to file a return, be sure to file a complete return
		Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file For instead of Form 990-EZ	<u> </u>
	Pa	······································	
		1 Contributions, gifts, grants, and similar amounts received	1 29,849.
		Program service revenue including government fees and contracts	2 51,106.
		3 Membership dues and assessments	3 122,537.
		4 Investment income	4 682.
		5a Gross amount from sale of assets other than inventory 5a	
		b Less cost or other basis and sales expenses 5b	
	Ë	c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from in 5a)	5c
	KH>MZD	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, chec	ck here ► □
		a Gross revenue (not including \$of contributions	
	E	reported on line 1) 6a	
		b Less. direct expenses other than fundraising expenses 6b	
		c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	
		7a Gross sales of inventory, less returns and allowances 7a	
		b Less cost of goods sold 7b	
		c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c
		8 Other revenue (describe > See Statement 1	) 8 14,850.
		9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	FCEIVED ▶ 9 219,024.
		10 Grants and similar amounts paid (attach schedule)	10
0	E	11 Benefits paid to or for members	<u>0</u> 11
2010	P	12 Salaries, other compensation, and employee benefits  13 Professional fees and other navments to independent contractors	$0 \vee 15 2010   912   65,257.$
₹1	E	10 Trolessional lees and other payments to independent contractors	$ \alpha $ 13 3, 292.
- √==4	S E	14 Occupancy, rent, utilities, and maintenance	CDE 117 - 14 6,000.
ت	š		GDEN. UT 115 47, 102.
DE		16 Other expenses (describe ► See Statement 2	) 16 82,235.
		17 Total expenses. Add lines 10 through 16	<b>► 17</b> 203,886.
	A	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 15,138.
SCANNED	NS ES TE	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agr figure reported on prior year's return)	ree with end-of-year 19 149,449.
Z	' Ť	20 Other changes in net assets or fund balances (attach explanation) See St	tatement 3 <b>20</b> 514.
3		21 Net assets or fund balances at end of year. Combine lines 18 through 20	<b>►</b> 21 165,101.
$\widetilde{\mathcal{S}}$	Pa	rt II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more	
		(See the instructions for Part II )	(A) Beginning of year (B) End of year
	22	Cash, savings, and investments	146,662. 22 163,247.
	23	Land and buildings	23
	24	Other assets (describe • See Statement 4 )	4,988. 24 3,560.
	25		151,650. 25 166,807.
	<del>\_</del> 26.	,	2,201. 26 1,706.
K		Net assets or fund balances (line 27 of column (B) must agree with line 21)	149,449. 27 165,101.
1)6	BA/	For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.	Form <b>990-EZ</b> (2009

TEEA0803L 01/30/10



	990-EZ(2009) Oregon Women La	wyers		93	-099	94040	Page 2
Par	- <del> </del>			ions.)	/Dog	Expenses	_
Desc	is the organization's primary exempt purpose? Ed cribe what was achieved in carrying out the ribe the services provided, the number of			ncise manner, each	501 (d   orgai   4947	uired for sectior c)(3) and (4) nizations and se (a)(1) trusts, op	ection
prog	Conducted continuing educ members, (approximately 1	cation seminars and	training sess	ions for	for o	thers)	
	professionals.						
29	Produced a quarterly news		ceSheet" which		28 a		
	distributed to women lawy professional associations (Grants \$ ) If the			<u>nd legal</u> 	29 a		
30	See Statement 6				234		
	(Grants \$ ) If th	is amount includes foreign gr		<del>-</del> -	30 a		
31	Other program services (attach schedule	See Statement 7 is amount includes foreign gr		▶ □	31 a		
32	Total program service expenses (add lin		anta, check here	<u> </u>	32		
Par			nplovees. List each o	ne even if not con		ated (See the i	nstrs )
	(a) Name and address	(b) Title and average hours per week devoted to position		(d) Contributions employee benefit plan deferred compensa	to ns and	(e) Expense a and other allow	ccount
See	Statement 8		38,400.		0.		0.
					:		
					:		
					-		
						<del></del>	
BAA		TEEA0812L (	01/30/10			Form 990-EZ	(2009)

Par	t V Other Information (Note the statement requirements in the instrs for Part V.)			
	•		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		Х
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35 a	х	
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b	Χ	
	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		Х
	Enter amount of political expenditures, direct or indirect, as described in the instructions  Did the organization file Form 1120-POL for this year?	37 b		Х
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38 a		Х
b	If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A	:		
39	Section 501(c)(7) organizations. Enter.			
a	Initiation fees and capital contributions included on line 9	-		
ь	Gross receipts, included on line 9, for public use of club facilities.  39b  N/A			
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under.	]		
	section 4911 ► N/A , section 4912 ► N/A , section 4955 ► N/A	1		
	17/11, Section 43/2 17/11, Section 43/3 17/11	1		
ь	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year or is it 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	40ь		
_		700		······································
	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e		Х
41	List the states with which a copy of this return is filed None			
42 a	The organization's			
	books are in care of ► Linda Tomassi Telephone no ► 503-59	5-78	326	
	Located at ► PO Box 40393 Portland OR ZIP + 4 ► 97240			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a		Yes	No
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If 'Yes,' enter the name of the foreign country			
			- 1	
		1		
	<u> </u>	- 1	1	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.	1	- 1	
_	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	40.	1	v
·		42c		<u>X</u>
	If 'Yes,' enter the name of the foreign country.			
			_	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	,	<b>-</b> [ ]	N/A
	and enter the amount of tax-exempt interest received or accrued during the tax year			N/A
	_		Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead			
- •	of Form 990-EZ	44	ĺ	Х
45	Is any related organization a controlled onth, of the assessment within the manager of section 5300 (1993)	$\neg \neg$	T	
	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	45		Х
BAA	TEEA0812L 01/30/10 For	m <b>990</b>	-EZ (	2009)

1	46-49b and complete the table	ction 494/(a)(1) no s for lines 50 and 5	nexempt charitat 51.	ole trusts must answer	questic	ons	
46 Did t	he organization engage in direct or indirec	t notitical campaign acti	vities on behalf of or i	n opposition to candidates		Yes	No
for public office? If 'Yes,' complete Schedule C, Part I							
<ul> <li>47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II</li> <li>48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E</li> </ul>							
	dule E	48					
	he organization make any transfers to an	•	elated organization?		49 a		
	es,' was the related organization a section	3			49 b		
50 Com	plete this table for the organization's five h loyees) who each received more than \$100	nighest compensated en	oployees (other than o	fficers, directors, trustees a	nd key		
	) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp accoun	t and	 ;
	==						
<del></del>							
51 Com	plete this table for the organization's five to pensation from the organization. If there is	none, enter 'None.' 					
	(a) Name and address of each independent conti	ractor paid more than \$100,000		(b) Type of service	(c) Compe	ensation	1
					···		
		- <b></b>					
					<del></del>		
<b>d</b> Total	I number of other independent contractors	each receiving over \$10	00,000	· · · · · · · · · · · · · · · · · · ·			
		·					
	Under penalties of penjury, I declare that I have examine, correct land complete. Declaration of preparer (	nined this return, including acco (other than officer) is based on	mpanying schedules and sta all information of which prepa	tements, and to the best of my know arer has any knowledge	ledge and b	elief, it	IS
	N/h			1	_		
Sign	Signature of other			11,12,13 Date	)		
Here	Linda Toma	ssi Execu	tive Dire				
	Type or print name and title	sol crem	tupe Dill	CIN			
	11/1/		Date , ,	Check if Prepa	rer's Identify	ing Nur	mber
Paid Pre-	Preparer's signature		11/10/11	self   X N/A			
parer's	Firm's name (or Mary H. Steele,	LTC, EA					
Use	yours if self employed), address, and			EIN ► N/	'A		
Only	ZIP+4   POTTIANG, OR 97	292-6448		Phone no ► (503)	261-0	$\overline{}$	
	RS discuss this return with the preparer shi	own above? See instruc	tions	<u> </u>	163		No
BAA					Form 990	-EZ (	2009)

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section

2009	Federal Statements	Page 1
	Oregon Women Lawyers	93-0994040
Statement 1 Form 990-EZ, Part I, Line 8 Other Revenue		
Advertising		Total \$ 14,850. \$ 14,850.
Statement 2 Form 990-EZ, Part I, Line 16 Other Expenses		
Advertising and Promotion Depreciation Dues, fees Information Technology Insurance Office Expenses Outside Services Program costs Rebates to chapters Supplies Taxes & Licenses		\$ 3,447. 1,427. 934. 673. 1,661. 3,310. 608. 60,133. 3,653. 1,614. 1,701.
Travel Workers Comp Insurance		2,690. 384. Total \$ 82,235.
Statement 3 Form 990-EZ, Part I, Line 20 Other Changes In Net Assets O	r Fund Balances	
Previous period voided ch	necks	Total \$ 514.  514.
Statement 4 Form 990-EZ, Part II, Line 24 Other Assets		
Machinery and Equipment Miscellaneous Prepaid Expenses and Defe	erred Charges	Beginning       Ending         \$ 2,648. \$ 1,861.         385. 699.         1,955. 1,000.         Total \$ 4,988. \$ 3,560.

2009

#### Federal Statements

Page 2

**Oregon Women Lawyers** 

93-0994040

Statement 5 Form 990-EZ, Part II, Line 26 **Total Liabilities** 

Accounts Payable and Accrued Expenses

Beginning \_\_\_\_Ending 2,201. \$ 1,706. Total ₹ 2,201.  $\overline{1,706}$ .

Statement 6 Form 990-EZ, Part III, Line 30 **Statement of Program Service Accomplishments** 

Coordinated the Contract Lawyer Referral Service, which offers education on the topic of working as contract lawyer or sole practitioner and provides referrals and networking for contract lawyers.

Statement 7 Form 990-EZ, Part III, Line 31 Statement of Program Service Accomplishments

Description

Program Service <u>Expenses</u>

Grants

Supported eleven local chapters throughout Oregon which organized professional networking activities, ČLEs, and educational events for member and non-member legal professionals.

Includes Foreign Grants:

Provided printed membership directory to members, which includes contact information and practice area for each member and an index arranged by geography, practice area, and foreign language skills.

Includes Foreign Grants: No

Distributed 22 bi-weekly electronic newsletters to membership, listing OWLS events, educational and  $\,$ networking opportunities, and member accomplishments.
Includes Foreign Grants: No

Operated listserve for membership, providing referrals, mentoring, and networking opportunities.

Includes Foreign Grants: No

Recognized outstanding accomplishments in the promotion of women and minorities in the law by awarding the Justice Betty Roberts and Judge Mercedes Deiz awards. Held annual awards dinner attended by more than 400 people.

Includes Foreign Grants: No

Provided leadership education and training to membership through monthly leadership gatherings, mentoring circles, lecture series and book clubs.

2009	Federal Statements			Page 3
	Oregon Women Lawyers			93-0994040
Statement 7 (continued) Form 990-EZ, Part III, Line 31 Statement of Program Service Accomp	plishments			
				Program Service
Descri	ption		rants	Expenses
	Includes Foreign Grant	s: No		
Organized semi-annual inter-proto help women in the legal protonetworks with others in other protonetworks.	fession build profession	onal		
Recognized workplaces that suppose women and minorities by awarding Award.	port the advancement of ng the Workplace Leader			
Awalu.	Includes Foreign Grant	s: No		
		Total \$	0.	0.
Statement 8 Form 990-EZ, Part IV List of Officers, Directors, Trustees, and Name and Address	nd Key Employees  Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Linda Meng 1221 SW 4th Ave Ste 430 Portland, OR 97204	Board Member \$			
Nancy Cook 494 State St, Ste 445 Salem, OR 97301	Board Member 0	0.	0.	0.
Julia Philbrook 1021 SW 4th Ave Portland, OR 97204	Board Member 0	0.	0.	0.
Frances Roberts Burge 1035 SE Douglas Roseburg, OR 97470	Board Member 0	0.	0.	0.
Cashauna Hill 921 SW Washington #516 Portland, OR 97205	Board Member 0	0.	0.	0.
Kathleen Hansa Rastetter 2051 Kaen Rd Oregon City, OR 97045	Board Member 0	0.	0.	0.

- - - -

20	0	9
----	---	---

## **Federal Statements**

Page 4

**Oregon Women Lawyers** 

93-0994040

# Statement 8 (continued) Form 990-EZ, Part IV List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	
Cynthia Fraser 121 SW Morrison St 11th Flr Portland, OR 97204	Board Member : 0	\$ 0.	\$ 0.	\$ 0.
Heather Weigler 1515 SW 5th Ave Ste 410 Portland, OR 97201	Board Member 0	0.	0.	0.
Bethany Graham 549 SW Mill View Way, Ste 100 Bend, OR 97702	Board Member 0	0.	0.	0.
Leslie W. O'Leary 9755 SW Barnes Rd. Ste 450 Portland, OR 97225	Board Member 0	0.	0.	0.
Jane Yates 975 Oak St, Ste 800 Eugene, OR 97440	Board Member 0	0.	0.	0.
Gwyneth McAlpine 1120 NW Couch St., 10th Flr. Portland, OR 97209	Board Member 0	0.	0.	0.
Linda Tomassi 1038 SE 55th Ave Portland, OR 97215	Executive Direc 3.50	38,400.	0.	0.
Dana Forman 1515 SW 5th Ave Portland, OR 97201	Board Member 0	0.	0.	0.
Shari Gregory 520 SW Yamhill, Suite 1050 Portland, OR 97204	Board Member 0	0.	0.	0.
Megan Livermore 440 E Broadway Ste 300 Eugene, OR 97401	Treasurer 0	0.	0.	0.
Shannon Terry 1163 State St Salem, OR 97301	Board Member 0	0.	0.	0.
Maiya Hall 3000 SE 118th Ave Portland, OR 97266	Board Member 0	0.	0.	0.

20	0	9
----	---	---

## **Federal Statements**

Page 5

**Oregon Women Lawyers** 

93-0994040

# Statement 8 (continued) Form 990-EZ, Part IV List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri- bution to EBP & DC	
Heather Hepburn 549 SW Mill View Way Ste 100 Bend, OR 97702	Board Member 0	\$ 0.	\$ 0.	\$ 0.
Cathey Susman 1585 E 13th Ave Rm 116 Eugene, OR 97403	Board Member 0	0.	0.	0.
Katherine Tennyson 1021 SW Fourth Ave. Portland, OR 97204	Board Member 0	0.	0.	0.
Julia Markley 1120 NW Couch St., 10th Floor Portland, OR 97209	Board Member 0	0.	0.	0.
Adrienne Nelson 1021 SW Fourth Ave Portland, OR 97204	Board Member 0	0.	0.	0.
Concetta Schwesinger 494 State Street, Suite 300 Salem, OR 97301	Vice President 0	0.	0.	0.
Laura Caldera Taylor 888 SW 5th, Ste 300 Portland, OR 97204	President 0	0.	0.	0.
Kendra Matthews 1001 SW 5th Ave., Ste 1400 Portland, OR 97204	Board Member 0	0.	0.	0.
Alice M. Bartelt 6690 SW Dover St Portland, OR 97225	Historian O	0.	0.	0.
Kate Weatherly 1485 Kervon Ct Eugene, OR 97045	Board Member 0	0.	0.	0.
Youlee You 1021 SW Fourth Ave Portland, OR 97204	Board Member 0	0.	0.	0.
Heather Van Meter 888 SW Fifth Ave., Ste. 600 Portland, OR 97204	Vice President 0	0.	0.	0.
	Total	\$ 38,400.	\$ 0.	\$ 0.