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Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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

Open to Public Inspection

A	or the	2009 calendar year, or tax year beginning JUL 1, 2009 and o	و ending	UN 30, 2010			
В	heck if	Please use IRS AMERICAN ASSOCIATION OF UNIVERSITY		D Employer identification number			
_	Addres	is label or MOMEN TNC					
F	□Name	type	_	52-6037388			
	_ change Initial return		Room/suite	E Telephone number			
F	Termin	I Canada I	1100111/30110	(202) 785-7700			
X	- ated Amend return	tions City or town, state or country, and ZIP + 4		G Gross receipts \$ 53,884,960.			
	Applic			H(a) Is this a group return			
	pendir			for affiliates? Yes X No			
		SAME AS C ABOVE		H(b) Are all affiliates included? Yes No			
1	ax-exe	empt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527		If "No," attach a list. (see instructions)			
JI	Vebsit	e: ► WWW.AAUW.ORG		H(c) Group exemption number			
K	orm of	organization X Corporation Trust Association Other ▶	L Year	of formation 1958 M State of legal domicile DC			
P	art I	Summary					
ě		Briefly describe the organization's mission or most significant activ <mark>ities: THE I</mark>					
and		UNIVERSITY WOMEN, INC ADVANCES EQUITY FOR	R_WOME	N AND GIRLS THROUGH			
er	2	Check this box If the organization discontinued its operations of dispos	ed of more	Than 25% of its net assets.			
Š	3	Number of voting members of the governing body (Part VI, line 1a)		(O) 3 14			
જ		Number of independent voting members of the governing body (Patty), linှီရှ် Ab	2 1 201	10/1 1 1 71			
ties	i	Total number of employees (Part V, line 2a)		$\frac{1}{2}$			
Ę	•	Total number of volunteers (estimate if necessary)	EN, L				
દુસ્	1	Total group amounted business revenue morn rait vin, colorini (c), inipplia		10			
(C)	b	Net unrelated business taxable income from Form 990-T, line 34	- T	7b 27,598. Prior Year Current Year			
2	8	Contributions and grants (Part VIII line 1h)		4,638,521. 8,347,226.			
	1	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		122,440. 367,848.			
ʧ.	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		<4,973,420.> 4,221,335.			
٣	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	ļ	585,616. 376,593.			
PR	i	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		373,157. 13,313,002.			
1 Ud Revenue MV Dactivities & Governance		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		3,051,187. 3,263,077.			
خرا		Benefits paid to or for members (Part IX, column (A), line 4)					
<u>_</u>		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,493,778. 5,016,397.			
	1	Professional fundraising fees (Part IX, column (A), line 11e)		21,920. 207,213.			
IN7 Expenses	Ь	Total fundraising expenses (Part IX, column (D), line 25) 1,371,89	93.				
úì	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		2,435,235. 4,569,544.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		8,002,120. 13,056,231.			
	19_	Revenue less expenses. Subtract line 18 from line 12		<7,628,963.> 256,771.			
Net Assets or Fund Balances				ginning of Current Year End of Year			
sets	20	Total assets (Part X, line 16)	1	07,379,408. 118,357,586.			
ag A	21	Total liabilities (Part X, line 26)		6,167,675. 6,446,393.			
Ž	22	Net assets or fund balances. Subtract line 21 from line 20	1	01,211,733. 111,911,193.			
P	art II	Signature Block					
		Under penalties of persury, I declare that I have examined this return, including accompanying schedules an and complete Declaration of preparer tother than afficen is based on all information of which preparer has a	id statements, any knowledge	and to the best of my knowledge and belief, it is true, correct,			
		$(\mathcal{A} \cup \mathcal{A} $		1 3/16/11			
Sig		Signafury of officer		Date Date			
LINDA HALLMAN, CAE, EXECUTIVE DIRECTOR							
		Type or print name and title	<u> </u>				
	-	Preparer's Date	Ch	eck if Preparer's Identifying number			
Pai	1	lf- ployed ► [] (see instructions)					
	parer's	signature 7/12 Firm's name (or DROLET & ASSOCIATES, P.L.L.C	1011	EIN ▶			
use Unity yours in self-employed), 1901 L STREET, NW #250							
		address, and ZIP+4 WASHINGTON, DC 20036		Phone no ► 202-822-0717			
Ma	y the If	RS discuss this return with the preparer shown above? (see instructions)		X Yes No			
		4-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the se	parate ins				

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN. 52-6037388 Form 990 (2009) Page 2 Part III Statement of Program Service Accomplishments Briefly describe the organization's mission: AAUW ADVANCES EQUITY FOR WOMEN AND GIRLS THROUGH ADVOCACY, EDUCATION, PHILANTHROPY AND RESEARCH. Did the organization undertake any significant program services during the year which were not listed on X Yes No the prior Form 990 or 990-EZ? If "Yes." describe these new services on Schedule O. X Yes No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.) (Expenses \$ 3,548,506. including grants of \$) (Revenue \$ (Code: OUTREACH: OUTREACH INCLUDES MEMBER RECRUITMENT AND RETENTION; MAINTENANCE OF THE TOLL-FREE MEMBER PHONE NUMBER (CONNECT); AND THE MAINTENANCE OF MEMBER RECORDS. (Expenses \$ 2,040,261. including grants of \$ 1,589,106.) (Revenue \$ AMERICAN FELLOWSHIPS - AWARDS FOR WOMEN WHO ARE CITIZENS OR PERMANENT RESIDENTS OF THE U.S. AND ARE IN THE FINAL YEAR OF WRITING THEIR DISSERTATIONS, CONDUCTING POSTDOCTORAL RESEARCH OR PREPARING COMPLETED RESEARCH FOR PUBLICATION DURING THE FISCAL YEAR. SELECTED PROFESSIONS FELLOWSHIPS ARE AWARDED TO WOMEN PURSUING A FULL-TIME COURSE OF STUDY IN ONE OF THE DESIGNATED DEGREE PROGRAMS WHERE WOMEN'S PARTICIPATION TRADITIONALLY HAS BEEN LOW. APPLICANTS ARE EVALUATED BY PANELS OF REVIEWERS, EXPERTS REPRESENTING ALL ACADEMIC DISCIPLINES AND ARE SELECTED ON THE BASIS OF THEIR SCHOLARLY EXCELLENCE AND EVIDENCE OF THEIR COMMITTMENT TO WOMEN'S ISSUES IN THEIR FIELD OF STUDY OR IN THE COMMUNITY. 1,300,254. including grants of \$ 723,958.)(Revenue \$ (Code) (Expenses \$ 4c RESEARCH AND PROJECT GRANTS - AWARDS ARE MADE IN TWO CATEGORIES, CAREER DEVELOPMENT AND COMMUNITY ACTION. CAREER DEVELOPMENT GRANTS ARE AWARDED TO AMERICAN WOMEN WHO ARE PREPARING FOR RE-ENRTY INTO THE WORKFORCE, MAKING CAREER CHANGES, OR SEEKING CAREER ADVANCEMENT. APPLICANTS FOR CAREER DEVELOPMENT GRANTS MUST HAVE COMPLETED THEIR MOST RECENT DEGREE

AT LEAST FIVE YEARS PRIOR TO APPLYING FOR THE AWARD. COMMUNITY ACTION

ORGANIZATIONS FOR PROJECTS DESIGNED TO IMPROVE CONDITIONS FOR WOMEN AND GIRLS IN LOCAL COMMUNITIES. APPLICATIONS FOR BOTH TYPES OF GRANTS ARE REVIEWED BY PANELS OF EXPERTS IN THE ACADEMIC DISCIPLINE, PROFESSIONAL

950,013.)(Revenue\$

Form 990 (2009)

GRANTS ARE MADE TO INDIVIDUALS OR NON-PROFIT, COMMUNITY-BASED

932002
90200Z
02-04-10

4e

FIELD, OR COMMUNITY ISSUE.

(Expenses \$ 3,452,053. including grants of \$

Total program service expenses ▶\$ 10,341,074.

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

Part IV Checklist of Required Schedules

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 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 VIII. 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 botain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, XI, XII, and XIII. A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E				Yes	No
2 Is the organization equired to complete Schedule 6, Schedule of Contributions? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II Section 901(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 901(c)(3) organizations. Did the organizations is the organization subject to the section 603(c) notice and reporting requirement and proxy tax/ II "Yes," complete Schedule C, Part III Both 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 II Did the organization report and areas, or historic attractures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, instancell treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit reports, or other inspotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit report, or other langibutions envices? If "Yes," complete Schedule D, Part V, IV Did the organization report an amount for investments - other securities in Part X, line 10 If If Yes," complete Schedule D, Part V, IV Did the organization report an amount for investments - other securities in Part X, line 10 If If Yes," complete Schedule D, Part X, IV Did the organization report an amount for other liabilities in Part X, line 10 If If Yes," complete Schedule D, Part X, IV Did the organization report an amount for other liabilities in Part X,	1	• • • • • • • • • • • • • • • • • • • •			
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 II Section 501(c)(3), organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(3), organizations. Did the organizations is bubyect to the section 603(6) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Political Complete Schedule C, Part III Section 501(c)(3), 501(c)(5), and 501(c)(6), organizations. Is the organization subject to the section 603(6) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical resaures, or other similar assets? If "Yes," complete Schedule D, Part IV Did the organization maintain collections of works of art, historical resaures, or other similar assets? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount for investments of the section of the schedule D, Part IV II is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII A 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 15? If "Yes," complete Schedule D, Part XII. 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 X. Did the organization subsch		i de la companya de l			
public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6035(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization may do nor advised funds or any sumilar 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 Did the organization meant any donor advised time seement, including assements to pressive open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21; serve as a cuistodian for amounts not listed in Part X; or provide cried to conseiling, dibit management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV II Is the organization when were to any of the following questions "Yes"? If so, complete Schedule D, Part IV, IVII, IVII, IV, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII. 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 other liabilities 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 X. Did the organization report an amount for other liabilities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete S			_2_	<u> </u>	
4 Section 501(c)(3), 501(c)(3), and 501(c)(6), organization engage in lobbying activities? If "Yes," complete Schedule C, Part II section 501(c)(4), 501(c)(5), and 501(c)(6) organizations is the organization subject to the section 603(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III but 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 II but the organization receive or hold a conservation essement, including assements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II but the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV but 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 but to the organization in epot of the following questions "Yes?" If so, complete Schedule D, Part IV is 1s the organization and save trial and the following questions "Yes?" If so, complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part	3				v
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B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V, permanent, or pussive displaying the part X, line 16 permanent, or pussive schedule D, Part V, viii, Viii, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V, as applicable Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part Vi. 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 Vii. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X. 2 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X. 12 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 II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III Did the organization report on Part IX, column (A), line 3, more than \$5,000 of	•		7		X
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Schedule D, Parts XI, XII, and XIII. 12	12				
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the United States? b 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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report 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 II 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1a 1	12		12		Х
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20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19		10		×
20 Bid the digamentation operate one of more needstate in Troop complete concession	20	·			
	20	DIO THE OTGANIZATION OPERATE ONE OF MIOTE HOSPITAIS FILE TES, COMPRETE SCREEURE IT		990	_

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Form 990 (2009) WOMEN, INC.

Part IV Checklist of Required Schedules (continued)

		T	V	Na
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		Yes	No
- '	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? If "Yes," complete			
	Schedule J	23	Х	
24a		25		
	last day of the year, 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		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception: Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	270		
·	any tax-exempt bonds?	24c		
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	240		
Z.Ja	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
_		230		
U	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	Ì		
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	230		
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30_		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		_X
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		X
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	X	
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> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			<u>.</u> _
	If "Yes," complete Schedule R, Part V, line 2	36		X.
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			١,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	├	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O.	38	X	0000:
		Form	99U (2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
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 2a 71			
b	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?	3a	X	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь	X	
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	ļ	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.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	ļ	X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
_	Tax Shelter Transaction?	5c	-	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	_		v
	any contributions that were not tax deductible?	6a	 	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6 L		
7	were not tax deductible?	6b	ļ	
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			1
a	provided to the payor?	7a		Х
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	 -		
•	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	ļ	<u></u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	ļ	ļ.,,,,,
8	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	ļ	ļ
9	Sponsoring organizations maintaining donor advised funds.	_		
а	Did the organization make any taxable distributions under section 4966? N/A Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9a	-	_
b	, , , , ,	9ь	ļ	
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
a	,	1		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter:	1		
11	Gross income from members or shareholders N/A 11a	1		
a h	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
Ü	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			1
		Form	990	(2009)

52-6037388

Page 6

Part VI 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.

<u>Sec</u>	tion A. Governing Body and Management					
	•		1	[Yes	No
1a	Enter the number of voting members of the governing body	1a		14		
b	Enter the number of voting members that are independent	<u>1b</u>		14		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?			3	X	
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 99	00 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts?		5		Х
6	Does the organization have members or stockholders?			6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	embei	s of the			
	governing body?			7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	rsons	?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken	durin	g the year			
	by the following:					
	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		<u> </u>
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Code.)			
					Yes	No
	Does the organization have local chapters, branches, or affiliates?			10a	Х	
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chap	ters, affiliates,		v	
	and branches to ensure their operations are consistent with those of the organization?			10b	X	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	lling ti	ne form?	11	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				. ·	
	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	uld gr	ve rise		v	
	to conflicts?			12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	res,	аевспре	40-	х	
40	In Schedule O how this is done			12c	X	
13	Does the organization have a written whistleblower policy?			13	X	
14	Does the organization have a written document retention and destruction policy?	_		14		
15	Did the process for determining compensation of the following persons include a review and approve		naepenaent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			450	X	
	The organization's CEO, Executive Director, or top management official			15a 15b	X	
D	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			190	1	
16~		ment	with a			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangel taxable entity during the year?	Hent	WILLI C	16a	•	Х
h	if "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	luate	its participation			 -
•	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org		•			
	exempt status with respect to such arrangements?			16b	•	
Sec	tion C. Disclosure			1		
17	List the states with which a copy of this Form 990 is required to be filed PAL, AK, AR, AZ, C	Ά,	CO,CT,FL,	GA, II	,KS	, KY
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-					
-	public inspection. Indicate how you make these available. Check all that apply.	,	. , ,			
	X Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflic	t of interest policy	, and fina	ancial	
	statements available to the public.		- 4			
20	State the name, physical address, and telephone number of the person who possesses the books a	nd re	cords of the organ	nization:	-	
	MIA PIANSAY - (202) 785-7700 1111 16TH STREET, NW, WASHINGTON, DC 20036					
	TILL TOTAL DIRECTION OF THE PROPERTY OF THE PR					

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 organization'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."

Check this box if the organization did not compensate any current officer, director, or trustee.

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average	(C) Position						(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	(check all that apply) top agram partial interpretation from the organization (W-2/1099-MISC) compensation from the organization (W-2/1099-MISC)		compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations					
CAROLYN GARFEIN	15.00	Ī.,								
PRESIDENT	15.00	X					_	0.	0.	0.
GAIL NORDMOE	E 00	v	ļ					0.	0.	0
VICE PRESIDENT MILDRED HOFFLER-FOUSHEE	5.00	X				-	-	0.	0.	0.
FINANCE VP	10.00	Х	ļ					0.	0.	0.
JACQUELINE LITTLETON	10.00	Α.	┢	-		-		0.		<u> </u>
SECRETARY	10.00	X						0.	0.	0.
KATHY ANTHON	10.00		\vdash	-	-	 	<u> </u>	•		
DIRECTOR	2.00	х						0.	0.	0.
KATHLEEN CHA			_	<u> </u>						
DIRECTOR	5.00	Х						0.	0.	0.
CONNIE HILDEBRAND		1							-	
DIRECTOR	5.00	X						0.	0.	0.
LINDA TOZIER										-
DIRECTOR	2.00	X						0.	0.	0.
DAVID KIRKWOOD										
DIRECTOR	10.00	X						0.	0.	0.
ALICIA HETMAN									_	_
DIRECTOR	10.00	X		_				0.	0.	0.
BETSY MCDOWELL										
DIRECTOR	5.00	X				ļ	<u> </u>	0.	0.	0.
KRYS WULFF		 								•
DIRECTOR	5.00	X	_	├		<u> </u>	├	0.	0.	0.
MARCIA CAPRIOTTI	2 00	U			İ	l	1		0.	
DIRECTOR	2.00	X	-		_	<u> </u>	├	0.	0.	0.
PATRICIA HO DIRECTOR	5.00	\ .		}				0.	0.	0.
LINDA HALLMAN	3.00	^	├—	 	\vdash	├	├	<u> </u>	0.	0.
EXECUTIVE DIRECTOR	55.90			Х				215,432.	1,446.	24,769.
JILL PIERCE	33.70	+-	\vdash	 ^	-	\vdash	\vdash	213/132.	1/1100	~ - , , , , , , ,
CHIEF OF STRATEGIC ADV	48.40					X		173,249.	1,163.	20,218.
FONG-CHING CHENG		\vdash	\vdash		 	 	 			
DIR. OF INFORM. TECH.	37.90					X		135,739.	0.	15,350.
022007 02-04-10	 	•					•	· · · · · · · · · · · · · · · · · · ·	·	Form 990 (2009)

Form 990 (2009) WOMEN, 3	NC.								52-6037	388	P	age 8
Part VII Section A. Officers, Directors, T	rustees, Key Eı	mplo	yee	s, a	nd l	ligh	est	Compensated Employ	rees (continued)			
(A)	(B)		(C)					(D)	(E)		(F)	
Name and title	Average hours per week	Individual trustee or director		Pos	that			Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	con f org an	stimate mount other opensa- from the ganizate d relati anizate	of ation ie tion ted
LISA MAATZ							 -					
DIR. OF PUBLIC POLICY	39.10	ļ. <u>.</u> .				X	<u> </u>	149,694.	2,023.	1	7,7	84.
SEOK NG ASSOC DIR OF IT	34.10					X		105,199.	0.	1	0,3	42.
CHRISTINE JONES DIR OF MEMBERSHIP	43.40					х		109,907.	0.		3,4	
Total Total number of individuals (including but	not limited to the	nose	liste	ed al	bove	e) wl	ho re	889,220 •	<u> </u>	10	1,9	07.
compensation from the organization				-					· · · · · · · · · · · · · · · · · · ·		Yes	No
3 Did the organization list any former office	•		, ke	y en	nplo	yee,	or h	nighest compensated er	mployee on	3	res	X

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

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

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to

the organization? *If* "Yes," complete Schedule J for such person Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
ACT	GRANT APPLICATION	
P.O. BOX 4072, IOWA CITY, IA 52243-4072	PROCESSING	233,056.
PILLSBURY WINTHROP SHAW PITTMAN		
P.O. BOX 601240, CHARLOTTE, NC 28260-1240	LEGAL SERVICES	208,582.
RUBINO & MCGEEHIN, CHARTERED, 6903		
ROCKLEDGE DR., SUITE 1200, BETHESDA, MD	ACCOUNTING SERVICES	203,140.
ACTION MAILERS	DIRECT MAILING	-
90 COMMERCE DRIVE, ASTON, PA 19014	SERVICES	138,955.
2 Total number of independent contractors (including but not limited to those lis	ted above) who received more than	
\$100,000 in compensation from the organization		

Form 990 (2009) WOMEN, INC. 52-6037388 Page 9 Part VIII Statement of Revenue (D) (A) (B) (C) Revenue excluded from Related or Unrelated Total revenue tax under sections 512, 513, or 514 exempt function business revenue revenue Contributions, gifts, grants and other similar amounts 1a 1 a Federated campaigns 1b 3,046,116. Membership dues 10 Fundraising events 1d d Related organizations 306,504. 1e e Government grants (contributions) f All other contributions, gifts, grants, and 11 4,994,606 similar amounts not included above 24,171 g Noncash contributions included in lines 1a-1f \$ 8,347,226. h Total. Add lines 1a-1f Business Code 900099 228,811. 228,811 2 a CONFERENCE REVENUE Program Service 130,790. 130,790. APPLICATION FEES 900099 8,247 900099 8,247. SUBSCRIPTIONS f All other program service revenue 367,848. g Total. Add lines 2a-2f \triangleright investment income (including dividends, interest, and 2424436. 2,424,436 other similar amounts) Income from investment of tax-exempt bond proceeds 4 41,975. 41,975. 5 Royalties (ii) Personal (ı) Real 550,509. 6 a Gross Rents 426,177. b Less: rental expenses 124,332. c Rental income or (loss) 124,332. 124,332. d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (II) Other 41942680 assets other than inventory b Less: cost or other basis 40145781 and sales expenses 1796899. c Gain or (loss) **▶** 1,796,899. 1796899. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 178,519. 178,519. 11 a OTHER INCOME 900099 **b** ADVERTISING REVENUE 31,767. 31,767. 541800 d All other revenue 210,286. Total. Add lines 11a-11d 4387642. 13313002. 546,367. 31,767. Total revenue. See instructions

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WOMEN, INC.

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Part IX Statement of Functional Expenses

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

	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 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and		·		······································					
	organizations in the U.S. See Part IV, line 21	274,260.	274,260.							
2	Grants and other assistance to individuals in									
	the U.S. See Part IV, line 22	2,854,817.	2,854,817.							
3	Grants and other assistance to governments,									
	organizations, and individuals outside the U.S.									
	See Part IV, lines 15 and 16	134,000.	134,000.							
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees	263,036.	197,277.	36,824.	28,935.					
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
_	persons described in section 4958(c)(3)(B)	2 056 275	2 076 006	- FAO 024	120 555					
7	Other salaries and wages	3,956,275.	2,976,886.	548,834.	430,555.					
8	Pension plan contributions (include section 401(k)	367,613.	277,673.	50 214	20 726					
_	and section 403(b) employer contributions)	133,636.		50,214. 18,225.	39,726. 14,424.					
9	Other employee benefits	295,837.		40,467.	32,002.					
10 11	Payroll taxes	293,037.	223,300.	40,407.	32,002.					
	Fees for services (non-employees): Management									
a b	Legal	272,122.	101,611.	121,028.	49,483.					
	Accounting	82,535.	101,011.	76,735.	5,800.					
	Lobbying	02/0001		70,7331	3,000.					
	Professional fundraising services See Part IV, line 17	207,213.			207,213.					
f	Investment management fees									
	Other	618,149.	223,586.	344,887.	49,676.					
12	Advertising and promotion	35,125.			320.					
13	Office expenses	1,491,907.		75,453.	246,764.					
14	Information technology	302,004.	283,736.	16,283.	1,985.					
15	Royalties									
16	Occupancy	589,779.	440,207.	85,856.	63,716.					
17	Travel	227,827.	117,102.	79,348.	31,377.					
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	206,183.		34,442.	8,573.					
20	Interest	8,325.	4,351.	3,344.	630.					
21	Payments to affiliates	100 000	262 664							
22	Depreciation, depletion, and amortization	483,393.		67,092.	52,637.					
23	Insurance	52,356.	38,714.	8,038.	5,604.					
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	BLDG REPAIR & MAINTENAN	146,009.	109,845.	20,265.	15,899.					
b	TEMPORARY EMPLOYEE FEES	109,519.	103,977.	2,376.	3,166.					
С	EQUIPMENT RENTAL & MAIN	67,407.		9,356.	7,340.					
d	MISCELLANEOUS	57,629.		7,706.	839.					
е	STAFF TRAINING & DEVELO	57,267.		23,783.	6,023.					
f	All other expenses	<237,992.		<327,292.						
25	Total functional expenses. Add lines 1 through 24f	13,056,231.	10,341,074.	1,343,264.	1,371,893.					
26	Joint costs. Check here if following			T						
	SOP 98-2. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation		<u> </u>		5 000 (000)					

WOMEN, INC.

Form 990 (2009)

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Pa	rt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1.	Cash · non-interest-bearing			1	
	2	Savings and temporary cash investments		531,674.	2	730,340.
	3	Pledges and grants receivable, net		1,734,124.	3	809,677.
	4	Accounts receivable, net	105,338.	4	303,092.	
	5	Receivables from current and former officers, directors, tru-	stees, key			
		employees, and highest compensated employees. Comple	te Part II			
	1	of Schedule L			5	
	6	Receivables from other disqualified persons (as defined un				
		4958(f)(1)) and persons described in section 4958(c)(3)(B).	Complete			
		Part II of Schedule L			6	
ş	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
ĕ	9	Prepaid expenses and deferred charges		269,056.	9	85,574.
	10a	Land, buildings, and equipment: cost or other				<u> </u>
			13,035,440.			
	ь	Less: accumulated depreciation 10b	6,538,184.	6,788,882.	10c	6,497,256.
	11	Investments - publicly traded securities	, ,	86,570,508.	11	98,898,089.
	12	Investments - other securities. See Part IV, line 11	9,892,413.	12	11,018,995.	
	13	Investments · program-related See Part IV, line 11	5 / 55 2 / 52 5 5	13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	1,487,413.	15	14,563.	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		107,379,408.	16	118,357,586.
	17	Accounts payable and accrued expenses		887,516.	17	1,077,327.
	18	Grants payable	3,123,682.	18	3,257,932.	
	19	Deferred revenue		917,142.	19	936,395.
	20	Tax-exempt bond liabilities			20	
s	21	Escrow or custodial account liability. Complete Part IV of S	chedule D	• • •	21	· · · · · · · · · · · · · · · · · · ·
Liabilities	22	Payables to current and former officers, directors, trustees				THE THEORY OF THE TAXABLE PROPERTY.
Ē		highest compensated employees, and disqualified persons				
Ë		of Schedule L	complete r art ii		22	
	23	Secured mortgages and notes payable to unrelated third p	arties		23	
	24	Unsecured notes and loans payable to unrelated third part			24	
	25	Other liabilities. Complete Part X of Schedule D	103	1,239,335.	25	1,174,739.
	26	Total liabilities. Add lines 17 through 25		6,167,675.	26	6,446,393.
		Organizations that follow SFAS 117, check here	X and complete	- /		- , ,
S		lines 27 through 29, and lines 33 and 34.	and complete			
ဦ	27	Unrestricted net assets		13,327,579.	27	13,335,898.
alar	28	Temporarily restricted net assets		10,797,656.	28	20,744,546.
Ä	29	Permanently restricted net assets		77,086,498.	29	77,830,749.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here	▶ ☐ and			
Ĕ	1	complete lines 30 through 34.				
ts c	30	Capital stock or trust principal, or current funds			30	
SSe	31		and		31	
ξ	32	Paid-in or capital surplus, or land, building, or equipment fur Retained earnings, endowment, accumulated income, or or			32	
Ž	1	Total net assets or fund balances	iner lunds	101,211,733.	33	111,911,193.
	33			107,379,408.	34	118,357,586.
	34	Total liabilities and net assets/fund balances		101/3/3/400.	34	110,337,300.

Form **990** (2009)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2009) WOMEN, 52-6037388 Page 12 Part XI Financial Statements and Reporting Yes No Accounting method used to prepare the Form 990: Cash X 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 X b Were the organization's financial statements audited by an independent accountant? 2b c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, X review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: Separate basis X 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 in the Single Audit

Form **990** (2009)

3a

X

Act and OMB Circular A-133?

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC.

Employer identification number 52-6037388

Pa	rt I	Reason 1	for Public Chari	ity Status (All organiz	ations mus	st complet	e this part	.) See inst	ructions.			
1		ganization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).										
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,										
-		city, and state:										
5		•		benefit of a college or ur	niversity ov	vned or on	erated by	a governr	mental unit	describ	ed in	
•		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)										
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
-	X											
•		-	b)(1)(A)(vi). (Comple	•			3 0			90	, , , , , , , , , , , , , , , , , , ,	
8		•		ection 170(b)(1)(A)(vi). ((Complete	Part II.)						
9	一	-		eives: (1) more than 33 1			om contril	butions, m	nembershii	o fees, ai	nd gross receipts from	
				nctions · subject to certa								
				axable income (less sect								
			509(a)(2). (Complete			,		4 00 0	, o.gu			
10				perated exclusively to te	st for publi	c safety. S	ee sectio	n 509(a)(4	J).			
11	\equiv	•	•	perated exclusively for th	•	•			-	out the	purposes of one or	
	_	=	= :									
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.											
	a Type b Type c Type Ty											
е												
		-		han one or more publicly		-						
f		If the organiza	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III			
		_	ganization, check th			•						
g			•	rganization accepted ar	ny gift or co	ontribution	from any	of the follo	owing pers	sons?		
_				rectly controls, either al							Yes No	
				pported organization?							11g(i)	
		(ii) A family	member of a persor	described in (i) above?							11g(ii)	
			•	person described in (i) of		∍?					11g(iii)	
h		• •	•	about the supported or								
(i)	Name	of supported	(II) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did you	notify the	(vi) Is		(vii) Amount of	
(.)		inization	E	organization (described on lines 1-9	in col (I) lis	sted in your	organizat	ion in col	organization (i) organization	ed in the l	support	
	J-			above or IRC section	governing	document?	(i) of your	support?	" US	?		
				(see instructions))	Yes	No	Yes	No	Yes	No		
					ļ							
										1		
			· · · · · · · · · · · · · · · · · · ·								· · · · · · · · · · · · · · · · · · ·	
					ļ				1			
									ļ			

LHA 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

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

Schedule A (Form 990 or 990-EZ) 2009 WOMEN, INC.

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(Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 8347226.24499239. 3973161. 3825410. 3714921. 4638521. include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 3973161. 3825410. 3714921. 4638521. 8347226.24499239. 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, 292,625. column (f) 24206614. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) 3973161. 3825410. 3714921 4638521. 8347226.24499239. 7 Amounts from line 4 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties 3016920.29097911. 8852737. 7631043. 3594628. 6002583. and income from similar sources Net income from unrelated business activities, whether or not the 31,767. 31,767. business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 10,482 50,052. 80,944. 169,858. 178,519 489,855. assets (Explain in Part IV.) 54118772. 11 Total support. Add lines 7 through 10 888,603. 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 44.73 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 38.79 15 % 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright X$ 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 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Pa	rt III Support Schedule for C	Organizations	Described in	Section 509(a	(Complete only	If you checked the bo	ox on line 9 of Part I
Sec	ction A. Public Support	<u>- </u>	, <u></u>	Ţ · · · · · · · · · · · · · · · · · · ·	,		
Cale	endar year (ôr fiscal year 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 any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						l .
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
•	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
4							
	ization'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						
6	Total. Add lines 1 through 5					_	
7 a	Amounts included on lines 1, 2, and			ł			
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that			Ì	İ		
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
$\overline{}$	ction B. Total Support		<u> </u>		<u> </u>		
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6	107 2000	<u> </u>		17,200		
	Gross income from interest,			-			
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income				-	 	
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b				 	 	
11	Net income from unrelated business activities not included in line 10b,				ļ		
	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)					<u> </u>	
13	Total support (Add lines 9, 10c, 11, and 12)	<u></u>	<u> </u>	<u></u>			
14	First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3) organiz	ation,
	check this box and stop here						▶□
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15				column (f))		15	%
16	Public support percentage from 2008	Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Inve						
	Investment income percentage for 20					17	%
18	Investment income percentage from			, (//		18	%
	a 33 1/3% support tests - 2009. If the			on line 14, and lin	e 15 is more than		
	more than 33 1/3%, check this box a	-					▶□
	33 1/3% support tests - 2008. If the		•	• •			and
ľ	• •	-					 . ▶ ┌─┐
00	line 18 is not more than 33 1/3%, che		· ·	· ·			
20	Private foundation. If the organization	an ara not check a	DOX ON line 14, 19	oa, or 190, check t	ilis dox and see in	อแนะแบทร	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2009

Open to Public inspection

Department of the Treasury Internal Revenue Service to organizations exempt from modific tax ender scotion out (c) and scotio

Complete if the organization is described below.

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

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

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

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

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

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

•	Section 501(c)(4), (5), or (6) organiza				
Nan	ne of organization AMERICA	N ASSOCIATION OF	UNIVERSITY	E	mployer identification number
	WOMEN,	INC.			52-6037388
Pa	art I-A Complete if the org	janization is exempt unde	er section 501(c)	or is a section 52	7 organization.
1	Provide a description of the organiz	ation's direct and indirect political	ıl campaign activities i	n Part IV.	
2	Political expenditures			l	> \$
3	Volunteer hours				
Pε	art I-B Complete if the org	<u>janization is exempt unde</u>	er section 501(c)	3).	
1	Enter the amount of any excise tax	incurred by the organization unde	er section 4955		> \$
2	Enter the amount of any excise tax	incurred by organization manage	rs under section 4955)	> \$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720 f	or this year?		Yes No
48	a Was a correction made?				Yes No
_	If "Yes," describe in Part IV.		.: 504/ \		244 1/01
ــــــا	······································	janization is exempt unde			
	Enter the amount directly expended	, , ,	•		> \$
2	Enter the amount of the filing organ	ization's funds contributed to oth	er organizations for se	ection 527	
_	exempt function activities			ļ	> \$
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here ar	nd on Form 1120-POL	,	
	line 17b	44 44 PA L C III			P\$
	Did the filing organization file Form	•			Yes No
5	Enter the names, addresses and en		•	•	• •
	For each organization listed, enter t that were promptly and directly deli	•		•	
	(PAC). If additional space is needed		1112411011, 30011 43 4 30	odrate segregated forte	or a political action committee
_	· · · · · · · · · · · · · · · · · · ·	(b) Address	(a) EIN	(d) Amount poid fro	m (e) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization's	
				funds. If none, enter	-0 promptly and directly
					delivered to a separate
					political organization. If none, enter -0
—					
			<u> </u>		

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

Schedule C (Form 990 or 990-EZ) 2009

Sched	lule C (Form 990 or 990-EZ) 2009	WOME	N, INC	•		52-6	037388 Page 2
	II-A Complete if the org	anizatio	on is exer	npt under section	on 501(c)(3) and fil		
	(election under sec	tion 501	l (h)).				
A Ch	eck 🕨 🗓 if the filing organizat	tion belon	gs to an affil	lated group.			
B Ch	eck 🕨 🔲 if the filing organization	tion check	red box A an	d "limited control" pr	ovisions apply.		
			bying Exper neans amou	nditures nts paid or incurred)	(a) Filing organization's totals	(b) Affiliated group totals
1 a	Total lobbying expenditures to influ	ence pub	olic opinion (d	grass roots lobbying)			
	Total lobbying expenditures to influ					230,000.	
	Total lobbying expenditures (add li		=	, , , , , , , , , , , , , , , , , , , ,		230,000.	
d	Other exempt purpose expenditure	es	•			12,826,231.	
	Total exempt purpose expenditure		s 1c and 1d)		13,056,231.	
f	Lobbying nontaxable amount. Ente	er the amo	ount from the	following table in bo	th columns.	802,812.	
Γ	If the amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable am	nount is:		
- 1	Not over \$500,000	` '	20% of	the amount on line 1e	.		
Γ	Over \$500,000 but not over \$1,000	0,000		0 plus 15% of the ex			
Γ	Over \$1,000,000 but not over \$1,5	00,000			cess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,	000,000	\$225,00	0 plus 5% of the exce	ess over \$1,500,000.		
	Over \$17,000,000		\$1,000,0	000			
9	Grassroots nontaxable amount (en	ter 25% c	of line 1f)			200,703.	
h	h Subtract line 1g from line 1a. If zero or less, enter ·0·			0.			
i	Subtract line 1f from line 1c. If zero	or less, e	nter -0-			0.	
j	lf there is an amount other than ze	ro on eithe	er line 1h or l	line 11, did the organiz	ation file Form 4720	_	
	reporting section 4911 tax for this	year?				L	Yes No
				raging Period Under			
					n do not have to com		
	CO				es 2a through 2f on pa	age 4.)	
		Lobi	bying Exper	iditures During 4-Ye	ar Averaging Period	1	,
(Calendar year (or fiscal year beginning in)	(a)	2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying nontaxable amount			,,, ,, ,,, ,,, ,,, ,, ,,		802,812.	802,812.
	Lobbying ceiling amount						1 004 010
	(150% of line 2a, column(e))						1,204,218.
_ с	Total lobbying expenditures		_			230,000.	230,000.
d	Grassroots nontaxable amount		************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	200,703.	200,703.
	Grassroots ceiling amount (150% of line 2d, column (e))						301,055.
					l .	ŀ	

Schedule C (Form 990 or 990-EZ) 2009

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2009 WOMEN, INC.

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Part II-B	Complete if the orga	anization is exemp	ot under section 501(c)(3) and has NOT filed Form 5768
	(election under sect	tion 501(h)).	

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1I)? c Media advertisements? d Malings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? R Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities If Yes, 'describe in Part IV Total. Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If Yes, 'enter the amount of any tax incurred under section 4912 of If Yes, 'enter the amount of any tax incurred by organization managers under section 4912 of If Yes, 'enter the amount of any tax incurred by organization managers under section 4912 of If Yes, 'enter the amount of any tax incurred by organization managers under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only inclused ascenditures of \$2,000 or less? 3 Did the organization make only inclused expenditures of \$2,000 or less? 3 Did the organization argue to carryover lobbying and political expenditures from the prior year? 1 Dues, assessments and similar amounts from members Section 15(c)(6), foother the provise the section 501(c)(4), section 501(c)(5), or section 501(c)(6) or BOTH Part IIII-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 15(g) onnodecutible lobbying and political)(5), or se	ection	No
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? if Y'es', 'describe in Part IV' j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? bif 'Y'es', 'enter the amount of any tax incurred under section 4912 c if 'Yes,' enter the amount of any tax incurred under section 4912 c if 'Yes,' enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 at the filing organization incurred a section 4912 at the filing organization incurred a section 4912 at the filing organization incurred a section 4912 at the filing organization incurred a section 4912 at the filing organization incurred a section 4912 at the filing organization incurred a section 4912 at the filing organization incurred a section 4912 at the filing organization incurred a section 501(c)(6), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expensitions for which the section 527(f) tax was paid). 2 Did the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures o	1 2 3)(5), or so	Yes	
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i Other activities? If "Yes," describe in Part IV j Total. Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filling organization incurred a section 4912 tax, did if file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Vers substantially all (90% or more) dues received nondeductible by members? 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible lobbying and political expenditure next year? T Taxable amount of lobbying and political expenditures (see instructions) 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Separt IV Supplemental Information	1 2 3)(5), or so	Yes	
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5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information	4		
	5		
complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this p			
	, line 1ı. Als	o, complete	e this p
, , , , , , , , , , , , , , , , , , ,	•		
, <u> </u>			
	 		
or any additional information.		2b 2c 3	2b 2c 3

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC.

Employer identification number 52-6037388

Par	Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
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 donor advisors in	writing that the assets held in donor adv	sed funds
	are the organization's property, subject to the organization's	s exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	e conferring
	Impermissible private benefit?		Yes No
Par	Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply)	
	Preservation of land for public use (e.g., recreation or	pleasure) Preservation of an h	istorically important land area
	Protection of natural habitat	Preservation of a cer	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
þ	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by th	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	asement is located	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	<u> </u>
	violations, and enforcement of the conservation easements	it holds?	Yes No
	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements durin	g the year ► \$
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conserva-	tion easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describe	s the organization's accounting for
,,	conservation easements.		· · · · · · · · · · · · · · · · · · ·
Par	t III Organizations Maintaining Collections of		Other Similar Assets.
	Complete if the organization answered "Yes" to Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of p	ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these	items.	
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and bala	nce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education,	or research in furtherance of public service	ce, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financ	
	the following amounts required to be reported under SFAS	116 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		► \$ ► \$

		INC.				<u>52-60</u>	<u> 37388</u>	Page	<u> 2</u>
Par	t III Organizations Maintaining C	collections of Art, Hist	orical Tre	easures, or C	ther S	Similar Asse	ts (contil	nued)	
3	Using the organization's acquisition, accession (check all that apply): Public exhibition				a signif	icant use of its	collection	items	
a				hange programs					
Ь	Scholarly research	e []	Other						—
С	Preservation for future generations								
4	Provide a description of the organization's co					-	t XIV.		
5	During the year, did the organization solicit o	•		•	mılar ass	sets	-		
	to be sold to raise funds rather than to be ma						_ Yes	<u></u>	<u> </u>
	Escrow and Custodial Arrange reported an amount on Form 990, Par	t X, line 21.					9, or 		_
1a	Is the organization an agent, trustee, custodi	an or other intermediary for	contribution	s or other assets	not incl	uded	_		
	on Form 990, Part X?						」Yes	N	No
þ	If "Yes," explain the arrangement in Part XIV	and complete the following	able:		-				
					L		Amount		
C	Beginning balance				L	1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance				L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 21?					Yes	P	Vo
	If "Yes," explain the arrangement in Part XIV.								
Par	† V Endowment Funds. Complete it	f the organization answered	"Yes" to For	m 990, Part IV, II	ne 10.				
	·	(a) Current year (b) P	rior year	(c) Two years bad	ck (d)	Three years back	(e) Four	years ba	<u>ck</u>
1a	Beginning of year balance		16937.				<u></u>		
b	Contributions	744,251.1,26							
С	Net investment earnings, gains, and losses	13017718.2,15	9,866.						
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	13017718.2,15	9,866.						
f	Administrative expenses								
g	End of year balance	77830749. 770	86498.						
2	Provide the estimated percentage of the year	r end balance held as:					,		
а	Board designated or quasi-endowment	%							
b	Permanent endowment ► 100.00	%							
С	Term endowment ▶	 %							
3a	Are there endowment funds not in the posse	ssion of the organization tha	at are held a	nd administered	for the c	organization	_		
	by:							Yes N	lo
	(i) unrelated organizations						3a(i)	7	X
	(ii) related organizations						3a(ii)	7	X
b	If "Yes" to 3a(ii), are the related organizations	s listed as required on Scheo	dule R?				3ь		
4	Describe in Part XIV the intended uses of the	organization's endowment	funds						
Par	t VI Investments - Land, Building	gs, and Equipment. Se	e Form 990.	, Part X, line 10.					
	Description of investment	(a) Cost or other	(b) Cost	or other (c) Accui	mulated	(d) Book	value	
	·	basis (investment)	basis ((other)	depred	ation			
1a	Land		3,35	7,226.			3,357	,220	5.
ь	Buildings		7,81	5,533.	5,21	7,974.	2,597	,559	9 .
	Leasehold improvements			9,734.		3,941.		793	
d	Equipment			4,057.		6,396.	147	7,66	$\overline{1}$.
е	Other	•		8,890.		9,873.	89	0,01	7.
	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part X, colur	nn (B), line 1	O(c).)		>	6,497	7,256	5.

Schedule D (Form 990) 2009

WC	MEN.	. INC
***	TILLIN .	· TIAC

Part VII Investments - Other Securities. Se	e Form 990, Part X, line 12			
(a) Description of security or category (including name of security)	(b) Book value	(c) N	ethod of valua nd-of-year mar	
Financial derivatives				
Closely-held equity interests				
Other				
LIGHTHOUSE DIVERSIFIED FUND,				
LTD.	10,760,986.			
MINERAL RIGHTS	258,009.	END-OF-YEAR	MARKET	VALUE
			<u>-</u>	
		<u>-</u>		
			<u>-</u> .	
T-1-1 (0-1/1-)	11,018,995.			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12) ► Part VIII Investments - Program Related. So	 			
Fart viii investments - Program Related. Se			lethod of valua	tion:
(a) Description of investment type	(b) Book value	, ,	nd-of-year mar	
		,		
		, ,		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)	45			
Part IX Other Assets. See Form 990, Part X, line	Description			(b) Book value
(4)	Description			(5) 2001 14100
				·
Total. (Column (b) must equal Form 990, Part X, col (B) line			•	·
Part X Other Liabilities. See Form 990, Part X,	line 25.			
1 (a) Description of liability		(b) Amount		
Federal income taxes		40.050		
SECURITY DEPOSITS		40,858.		
POOLED INCOME FUNDS		417,146.		
CHARITABLE GIFT ANNUITIES OBLIGATIONS UNDER CAPITAL LEA	CF -	50,367.		
IRA SWEEPSTAKES	NOE	18,175.		
ING OWEELDIANED		10,113.		
Total. (Column (b) must equal Form 990, Part X, col (B) line	25)	1,174,739.		
C. File 40 Francis is Bot VIV provide the text of the fee	A	financial statements that		

uncertain tax positions under FIN 48. 932053 02-01-10

	dule D (Form 990) 2009 WOMEN, INC.			52-	<u>603/388</u>	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Finan	cial State	ment	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		13,313,	002.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		13,056,	231.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		256,	771.
4	Net unrealized gains (losses) on investments		4		10,442,	689.
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			_
8	Other (Describe in Part XIV.)		8			
9	Total adjustments (net). Add lines 4 through 8		9		10,442,	689.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 an	d 9	10		10,699	
	t XII Reconciliation of Revenue per Audited Financial Stateme		nue per F	Return		
1	Total revenue, gains, and other support per audited financial statements			1	24,181,	868.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a 10,44	2,689.	.		
b	Donated services and use of facilities	2b		1		
c	Recoveries of prior year grants	2c		1		
_	Other (Describe in Part XIV)	2d		1 1		
d	·	20		ا ۱	10 442	680
e	Add lines 2a through 2d			2e	10,442,	170
3	Subtract line 2e from line 1			3	13,739,	119.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1				
а	investment expenses not included on Form 990, Part VIII, line 7b	4a	<u> </u>	4 1		
b	Other (Describe in Part XIV.)	4b <42	6,177.		.406	100
С	Add lines 4a and 4b			4c		<u>,177.</u> >
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	13,313,	<u>,002.</u>
Par	t XIII Reconciliation of Expenses per Audited Financial Statem	ents With Expe	nses per	Retu		
1	Total expenses and losses per audited financial statements			1	13,482,	408.
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		_		
С	Other losses	2c				
d	Other (Describe in Part XIV.)	2d 42	6,177.	.] [
е	Add lines 2a through 2d	<u> </u>		2e	426	177.
3	Subtract line 2e from line 1			3	13,056	231.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			-		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b		1		
_	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	13,056	
***************************************	t XIV Supplemental Information			1.3	13,030	201.
		II linna da anal di Da		lb and	Oh: Dort V. line	4: Dort
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II					4, ran
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp RT V, LINE 4: THE ENDOWMENT FUNDS ARE MAIN			olliona	imornation.	
<u>r M</u>	CI V, BINE 4: THE ENDOWMENT FONDS ARE HAIN	TRINED TO	TOND			
SCI	OLARSHIPS AND GRANTS FOR THE AMERICAN AND	ΤΝΨΕΡΝΔΨΤ	ONAL F	ent.t.	OWSHIPS	_
501	IODANOITED AND GNANTO FOR THE AMERICAN AND	INILIMATI	ONAL I	יייייי	OWBILLO	
РΔΙ	RT X: ON JULY 1, 2009, THE ORGANIZATION AD	OPTED THE				
1111	CI A. ON COLL IT 20037 IND ORGINIZATION IND	OTTED TILE				
PRO	OVISIONS OF FINANCIAL ACCOUNTING STANDARDS	BOARD (FA	SB) AC	COU	NTING	
STA	ANDARDS CODIFICATION (ASC) 740, INCOME TAX	ES (ASC 74	0). AS	SC 7	40 REQU	IRES
THA	AT A TAX POSITION BE RECOGNIZED OR DERECOG	NIZED BASE	D ON A	A		
" MC	ORE-LIKELY-THAN-NOT" THRESHOLD. THIS APPLI	ES TO POSI	TIONS		EN OR	
				Sched	lule D (Form 9	90) 2009

932054 02-01-10

Schedule D (Form 990) 2009 WOMEN, INC. 52-603/388 Page 5
Part XIV Supplemental Information (continued)
EXPECTED TO BE TAKEN IN A TAX RETURN. THE IMPLEMENTATION OF ASC 740 HAD NO
IMPACT ON THE ORGANIZATION'S FINANCIAL STATEMENTS. THE ORGANIZATION DOES
NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE, OR REFLECT, ANY UNCERTAIN
TAX POSITIONS.
TAX YEARS FROM JUNE 30, 2007 THROUGH THE CURRENT YEAR REMAIN OPEN FOR
EXAMINATION BY THE FEDERAL AND STATE TAX AUTHORITIES.
PART XII, LINE 4B - OTHER ADJUSTMENTS:
RENTAL EXPENSE \$426,177
ALINIAL BALBAGE V420/177
PART XIII, LINE 2D - OTHER ADJUSTMENTS:
RENTAL EXPENSES \$426,177

Schedule F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

2009 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization AMERICAN ASSOCIATION OF UNIVERSITY

Employer identification number

grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

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

 Activities per Region. (I (a) Region 	(b) Number of	(c) Number of	dditional space is needed.) (d) Activities conducted in region	(e) If activity listed in (d)	(f) Total
,,, ,	offices	employees or	(by type) (i.e., fundraising,	is a program service,	expenditures
	in the region	agents in	program services, grants to	describe specific type	for region
		region	recipients located in the region)	of service(s) in region	
			GRANTS TO RECIPIENTS	AMERICAN FELLOWSHIP	
SOUTH AMERICA	0	0	LOCATED IN REGION	GRANT	20,000
RUSSIA & THE NEWLY	_		GRANTS TO RECIPIENTS	INTERNATIONAL FELLOWSHIP	
INDEPENDENT STATES	0	0	LOCATED IN REGION	GRANT	18,000
		ł.	GRANTS TO RECIPIENTS	INTERNATIONAL FELLOWSHIP	
SOUTH ASIA	0	0	LOCATED IN REGION	GRANT	18,000
	-				
			GRANTS TO RECIPIENTS	INTERNATIONAL FELLOWSHIP	
SUB-SAHARAN AFRICA	0	0	LOCATED IN REGION	GRANT	18,000
				INTERNATIONAL AND	
EUROPE (INCLUDING			GRANTS TO RECIPIENTS	AMERICAN FELLOWSHIP	
ICELAND & GREENLAND)			LOCATED IN REGION	GRANTS	60,000
· · · · · · · · · · · · · · · · · · ·					
Totals	• c	0			134,000

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

Schedule F (Form 990) 2009

52-6037388

Page 2

Schedule F (Form 990) 2009 WOMEN, INC.

art il Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any	recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000
P	

(i) Method of valuation (book, FMV, appraisal, other) (h) Description of non-cash assistance (g) Amount of non-cash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by of cash grant | cash disbursement (f) Manner of (e) Amount the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (d) Purpose of grant Use Schedule F-1 (Form 990) if additional space is needed. (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization

Schedule F (Form 990) 2009

Enter total number of other organizations or entitles

52-6037388

Page 3

AMERICAN ASSOCIATION OF UNIVERSITY

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Schedule F (Form 990) 2009

WOMEN, INC.

Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
AMERICAN DISSERTATION FELLOWSHIP	EUROPE	1	20,000	20,000.ELECTRONIC WIRE TRANSFER	.0		
AMERICAN DISSERTATION FELLOWSHIP	SOUTH AMERICA	1	20,000.	20,000.ELECTRONIC WIRE TRANSFER	0.		
INTERNATIONAL PELLOWSHIPS	EUROPE	2	40,000.	40,000.ELECTRONIC WIRE TRANSFER	0.		
	RUSSIA	1	18,000.	18,000.ELECTRONIC WIRE TRANSFER	0.		
-	SOUTH ASIA	1	18,000.	18,000.ELECTRONIC WIRE TRANSFER	0.		
	SUB-SAHARAN AFRICA	1	18,000.	18,000.ELECTRONIC WIRE TRANSFER	.0		

Schedule F (Form 990) 2009 WOMEN, INC. 52-603/388 Page 4
Part IV Supplemental Information Complete this part to provide the information required in Part I, line 2, and any additional information.
SCHEDULE F, PART I, LINE 2: FOR MONIES AWARDED THROUGH AAUW INC'S.
INTERNATIONAL FELLOWSHIPS PROGRAM, FELLOWS ARE REQUIRED TO GIVE AN
ACCOUNTING TWICE DURING THE FELLOWSHIP YEAR. SUCH ACCOUNTING MAY INCLUDE
PROJECT PROGRESS, INSTITUTIONAL CERTIFICATION OF GOOD STANDING,
TRANSCRIPTS AND BUDGET EXPENDITURES. RECEIPT OF THE SECOND FELLOWSHIP
PAYMENT IS CONTINGENT UPON THE SUBMISSION OF A SATISFACTORY MID-YEAR
REPORT, INCLUDING FINANCIALS. FELLOWS ARE ALSO REQUIRED TO REQUEST, IN
ADVANCE, ANY CHANGES TO THEIR PROJECT PLAN AND BUDGET, WHICH ARE APPROVED
BY THE PROGRAM OFFICER TO ENSURE THEY MEET FELLOWSHIP GUIDELINES.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
 ▲ Attach to Form 990 or Form 990-EZ.

2009

Open To Public

Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY

Employer identification number

52-6037388 WOMEN. INC. Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations J Solicitation of non-government grants Internet and email solicitations Solicitation of government grants X Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or X Yes No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did (v) Amount paid (vi) Amount paid (i) Name of individual fundraiser have custody or control of contributions? (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) FUNDRAISING Yes No ADAMS HUSSEY & ASSOC. CONSULTING 665,061 96,800. 568,261. Х TELEMARKETING/MEMB TELEFUND, INC. ERSHIP DEVELOPMENT Х 86,338. 80,627. 5,711. TELEMARKETING/MEMB <11,187.> **OUTREACH ASSOCIATES** ERSHIP DEVELOPMENT X 18,600. 29,787. GORDON & SCHWENKMEYERTELEMARKETING/MEMB ERSHIP DEVELOPMENT X 0. 0. 0. INC. 769,999. 207,214. **Total** 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing. AL, AK, AR, AZ, CA, CO, CT, DC, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, HI

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

Schedule G (Form 990 or 990-EZ) 2009

AMERICAN ASSOCIATION OF UNIVERSITY Schedule G (Form 990 or 990-EZ) 2009 WOMEN, INC. 52-6037388 Page 2 Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (event type) (event type) (total number) Gross receipts 2 Less: Charitable contributions 3 Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Combine line 3, column (d), and line 10

Kevenue			(a) Bingo)		ıll tabs/in rogressiv		(c	Other g	aming		Total g (a) thro		
2	1 G	ross revenue												
Ses	2 C	ash prizes												
	3 N	oncash prizes		:							-			
Direct Expenses	4 R	ent/facility costs												
	5 0	ther direct expenses												
		olunteer labor	YesNo	%	Ye		%		Yes No	%				
	7 D	rrect expense summary. Add lines 2 through	5 in column (d)							>	(
_	<u>8 N</u>	et gaming income summary. Combine line 1	, column (d), an	d line 7						<u> </u>			1	
										<u> </u>	<u> </u>		Yes	No
	Enter	the state(s) in which the organization operat	es gaming activ	ities: _	states?						<u> </u>	9a	Yes	No
a	Enter Is the		es gaming activ	ities: _	states?							9a	Yes	No
а	Enter Is the	the state(s) in which the organization operat	es gaming activ	ities: _	states?							9a	Yes	No
a b	Enter Is the If *No	the state(s) in which the organization operat organization licensed to operate gaming act o," explain:	es gaming activ	ities: _ f these		dunna	the tax	year?				9a 10a	Yes	No
a b Oa	Enter Is the If *No	the state(s) in which the organization operat	es gaming activ	ities: _ f these		during b	the tax y	year?					Yes	No
a b Oa b	Enter Is the If "No Were If "Yes	the state(s) in which the organization operate organization licensed to operate gaming action," explain: any of the organization's gaming licenses res," explain:	es gaming activities in each c	f these		during b	the tax y	year?				10a	Yes	No
a b Oa b	Enter Is the If "No Were If "Yes	the state(s) in which the organization operatorganization licensed to operate gaming action," explain: any of the organization's gaming licenses re	es gaming activities in each of the control of the	f these	erminated				y formed				Yes	No

Schedule G (Form 990 or 990-EZ) 2009 WOMEN, INC. 52-6	603738	8 Pa	age 3
		Yes	No
13 Indicate the percentage of gaming activity operated in:			
a The organization's facility	<u>%</u>		
b An outside facility	%		
Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
Name ▶	_		
Address	_		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount			
of gaming revenue retained by the third party 🕨 \$	•		
c If "Yes," enter name and address of the third party:			
Name ▶	_		
Address	_		
16 Gaming manager information:			
Name ▶			
Gaming manager compensation ▶ \$:		
Description of services provided			
	_		
Director/officer Employee Independent contractor			
17 Mandatory distributions:			
a is the organization required under state law to make charitable distributions from the gaming proceeds to			
retain the state gaming license?	17a		
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
organization's own exempt activities during the tax year ▶ \$			L

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE I (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047

|--|

Department of the Treasury Internal Revenue Service	Comp	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.	nanswered "Yes" on Fo ► Attach to Form 990.	on Form 990, Par n 990.	I IV, line 21 or 22.		Open to Public Inspection
Name of the organization AMERICAN WOMEN, II	ICAN ASSOCIATION	ON OF UNIVERSITY	RSITY				Employer identification number 52-6037388
Part i General Information on Grants and Assistance	Grants and Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	records to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the select	:
criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ts or assistance?	toring the use of grant	funds in the United	l States.			A Yes No
art #	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	d Organizations in the	United States. Co	omplete if the orga	nization answered "Y	es" to Form 990, Part	IV, line 21, for any
recipient that received in	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	s box if no one recipien	t received more tha	an \$5,000 Use Pa	1 IV and Schedule I-1	(Form 990) if addition	al space is needed
1 (a) Name and address of organization or government	nzation (b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AAUW RED WING AREA 30065 82 AVENUE							
CAMMON FALLS, MN 55009	93-1024757	501(C)(4)	7,000.	0			COMMUNITY ACTION GRANT
AGNES SCOTT COLLEGE 141 E. COLLEGE AVE DECATUR, GA 30030	58-0566116	501(C)(3)	6,000.	.0			COMMUNITY ACTION GRANT
CARTHAGE COLLEGE 2001 ALFORD PARK DRIVE KRNOSHA WI 53140	37-0661496	501(C)(3)	6,670	0			COMMUNITY ACTION GRANT
COLLEGE AND COMMUNITY PELLOWSHIP 365 STH AVENUE ROOM 5113 NEW YORK, NY 10016		501(0)(3)	7,000.	0.			COMMUNITY ACTION GRANT
	36-2594972	501(¢)(3)	7,000.	0			COMMUNITY ACTION GRANT
DEL NORTE SCHOOLS 1055 NINTH ST DEL NORTE, CO 81132	84-6001899	501(C)(3)	7,000.	0.			COMMUNITY ACTION GRANT
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations	01(c)(3) and government o	rganizations					A 24.
1	ork Reduction Act Notice	, see the Instructions	ructions for Form 990.				Schedule I (Form 990) 2009

52-6037388

WOMEN, INC.

Schedule I (Form 990) 2009 WOMEN, INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

Use Part IV and Schedule I-1 (Form 990) ii additional space is needed.	(b) Nimber of	(c) Amount of	(d) Amount of non-	(e) Method of valuation	(f) Description of non-cash assistance
(a) Type of grant of assistance	recipients	cash grant	cash assistance	(book, FMV, appraisal, other)	
AMERICAN FELLOWSHIP	99	1,234,500.	0.	N/A	
SELECTED PROFESSION FELLOWSHIPS	21	314, 606.	0	۷/x	
INTERNATIONAL FELLOWSHIP	3.7	710,000.	0	N/A	
CAREER DEVELOPMENT GRANTS	49	476,112.	.0	N/A	
COMMUNITY ACTION GRANTS 2 12,878. U.N/A Part IV Supplemental Information. Complete this part to provide the information required in Part I. line 2, and any other additional information.]	12,878.	0 . Ine 2, and any other	0.N/A ner additional information.	
	IS AND GRA	GRANTEES ARE	REQUIRED	TO GIVE AN	
ACCOUNTING TWICE DURING THE GRANT/FELLO	FELLOWSHIP	IP PERIOD.		SUCH ACCOUNTING MAY	
INCLUDE PROJECT PROGRESS, INSTITUTIONAL		CERTIFICATION OF	G00D	STANDING,	
TRANSCRIPTS AND BUDGET EXPENDITURES	S. RECEIPT	OF THE	SECOND GRA	SECOND GRANT/FELLOWSHIP	
PAYMENT IS CONTINGENT UPON THE SUE	SUBMISSION	OF A SATIS	SATISFACTORY MI	MID-TERM	
INCLUDING FINANCIALS.	GRANTEES AND	FELLOWS	ARE ALSO RE	REQUIRED TO	
REQUEST, IN ADVANCE, ANY CHANGES 1	TO THEIR	PROJECT PL	PLAN AND BUD	BUDGET, WHICH	
ARE APPROVED BY THE PROGRAM OFFICER	R TO ENSURE	THEY	MEET GRANT/	GRANT/FELLOWSHIP	
GUIDELINES.					

Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

► Attach to Form 990 to list additional information for Continuation Sheet for Schedule I (Form 990) Schedule I (Form 990), Part III or Part III.

OF UNIVERSITY

AMERICAN ASSOCIATION

Name of the organization

WOMEN, INC.

OMB No 1545-0047 Open to Public

Inspection Employer identification number 52-6037388

COMMUNITY ACTION GRANT COMMUNITY ACTION GRANT COMMUNITY ACTION GRANT COMMUNITY ACTION GRANT COMMUNITY ACTION GRANT COMMUNITY ACTION GRANT COMMUNITY ACTION GRANT COMMUNITY ACTION GRANT (h) Purpose of grant or assistance (g) Description of non-cash assistance Part 1 Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (book, FMV, appraisal, other) (f) Method of valuation 。 ö 。 Ö ö ö o Ö (e) Amount of non-cash assistance 680 9,980 (d) Amount of cash grant 7 000 7 ,000 6,064. 7 000 10,000 10,000 9 (c) IRC section if applicable 77-0492209 501(C)(3) 501(C)(4) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(4) 59-2592229 06-0653116 35-6001673 94-6080527 41-0693979 56-6062081 11-3632924 (P) EIN W.W. WRIGHT EDUCATION BUILDING 201 INSTITUTE FOR COMMUNITY RESEARCH 2 HARTFORD SQUARE W., SUITE 100, N ROSE AVENUE - BLOOMINGTON, IN UNIVERSITY CIRCLE - TURLOCK, CA 101 146 WYLLIS ST. - HARTFORD, CT HAWAII STATE SCIENCE OLYMPIAD (a) Name and address of organization or government CALIFORNIA STATE UNIVERSITY STANISLAUS POUNDATION - ONE 10-27 46TH AVENUE, SUITE 5827 KALANIANOLE HIGHWAY 435 BRYAN BUILDING, UNCG AAUW GREENSBORO BRANCH SIMI VALLEY, CA 93063 LONG ISLAND, NY 11101 GREENSBORO, NC 27412 NORTHFIELD, MN 55057 INDIANA UNIVERSITY HONOLULU, HI 96821 1520 ST. OLAF AVE ST. OLAF COLLEGE 2981 DITCH ROAD AAUW CALIFORNIA ROW NEW YORK 90190 95382 ¥

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Schedule I-1 (Form 990) 2009

1

Department of the Treasury Internal Revenue Service SCHEDULE I-1 (Form 990)

Name of the organization

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public Inspection OMB No 1545-0047

WOMEN, INC.

AMERICAN ASSOCIATION OF UNIVERSITY

Employer identification number 52-6037388

WOLTEN, TINC	٠						2000
Part Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	rizations in the Ur	nited States (Sche	dule I (Form 990), Pa	H.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIRL SCOUTS OF EASTERN OKLAHOMA 2432 E 51ST ST TULSA, OK 74105	73-0579240	501(C)(3)	8,892.	0			COMMUNITY ACTION GRANT
MAPS 4 COLLEGE 13337 SOUTH STREET #574 CERRITOS, CA 90703	26-2915543	501(C)(3)	10,000	0.			COMMUNITY ACTION GRANT
1 5 5 5	93-1242941	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANT
MONTANA NATURAL RESOURCES YOUTH CAMP, INC P.O. BOX 16691 - MISSOULA, MT 59808	81-0477555	501(C)(3)	8,250.	0.			COMMUNITY ACTION GRANT
	54-2148834	501(C)(3)	10,000.	°,			COMMUNITY ACTION GRANT
SAN DIEGO SPACE AND SCIENCE FOUNDATION (DBA REUBEN H. FLEET SCIENCE CENTER) - P.O. BOX 33303 - SAN DIEGO CA 92163	95-6066250	501(C)(3)	9,650	0			COMMUNITY ACTION GRANT
ST. CATHERINE UNIVERSITY 2004 RANDOLPH AVE F-12 SAINT PAUL, MN 55105	41-0695509	501(C)(3)	9,950.	0			COMMUNITY ACTION GRANT
THE GLOBAL VILLAGE PROJECT PO BOX 2200 DECATUR GA 30031	26-4152199	501(C)(3)	10,000.	0			COMMUNITY ACTION GRANT
	10 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		42. [2.2. 000				Sobodule 1.4 (Early 000) 2000

Schedule I-1 (Form 990) 2009

► Attach to Form 990 to list additional information for Continuation Sheet for Schedule I (Form 990) Schedule I (Form 990), Part II or Part III. UNIVERSITY AMERICAN ASSOCIATION OF INC WOMEN, Name of the organization SCHEDULE 1-1 (Form 990)

OMB No 1545-0047
2009
Open to Public Inspection

Inspection **Employer identification number** 52-6037388

COMMUNITY ACTION GRANT COMMUNITY ACTION GRANT COMMUNITY ACTION GRANT COMMUNITY ACTION GRANT COMMUNITY ACTION GRANT (h) Purpose of grant or assistance CAP CASE AF CASE (g) Description of non-cash assistance Part | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) ö o 0 ö Ö ö (e) Amount of non-cash assistance (d) Amount of cash grant 996 6 19,000 10,000 9 700 000 6 9 958 8,354 (c) IRC section if applicable 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) N/A 31-6025986 34-6002924 51-6000297 61-1392497 48-3749844 03-0473183 81-0245851 (P) EIN 6520 GLENRIDGE PARR PLACE, SUITE 6 OFFICE OF SPONSORED PROGRAMS, 1960 UNIVERSITY OF DELAWARE, SCHOOL OF NURSING - 355 MCDOWELL HALL -(a) Name and address of organization or government THE OHIO STATE UNIVERSITY BISHOP & ASSOCIATES, PSC THE UNIVERSITY OF AKRON FOREST GROVE, OR 97116 LOUISVILLE, KY 40222 ALEXANDRIA, VA 22301 10 ROSECREST AVENUE COLUMBUS, OH 43210 302 BUCHTEL COMMON MISSOULA, MT 59802 1130 W. BROADWAY NEWARK, DE 19716 ADELANTE MUJERES AKRON, OH 44325 YWCA MISSOULA 2420 19TH AVE EQUITY LEGAL

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Schedule I-1 (Form 990) 2009

UNIVERSITY
1 OF 1
ASSOCIATION
AMERICAN

52-6037388

Page 2 Schedule I-1 (Form 990) 2009 (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Schedule I-1 (Form 990) 2009 WOMEN, INC. Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.) 0 (d) Amount of non-cash assistance 57,000. 49,721. (c) Amount of cash grant (b) Number of recipients 16. ъ. (a) Type of grant or assistance OTHER AWARDS LAF CASES

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" to Form 990,

2009

OMB No 1545-0047

pen to Public Inspection

Name of the organization

WOMEN.

INC.

► Attach to Form 990. ► See separate instructions.

AMERICAN ASSOCIATION OF UNIVERSITY

Employer identification number 52-6037388

Part I **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, 2 trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. X Written employment contract Compensation committee Independent compensation consultant Compensation survey or study Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? 4a X **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X 4c c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: X 5a a The organization? X 5b b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a a The organization? X 6b **b** Any related organization? If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments Х not described in lines 5 and 6? If "Yes." describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the X 8 initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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Schedule J (Form 990) 2009

Regulations section 53,4958-6(c)?

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC.

Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	1							
		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Bettrement and	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	reported in prior Form 990 or Form 990-EZ
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SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ADVOCACY, EDUCATION, PHILANTHROPY AND RESEARCH.
FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
AS A RESULT OF A PLANNED REORGANIZATION AND RESTRUCTURING BETWEEN THE
AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC. AND AAUW ACTION FUND,
INC. A RELATED 501(C)(4) ORGANIZATION, AND AAUW LEADERSHIP AND TRAINING
INSTITUTE, INC. A RELATED 501(C)(3) ORGANIZATION, THE AMERICAN
ASSOCIATION OF UNIVERSITY WOMEN, INC. ADDED THE FOLLOWING PROGRAMS:
-MEMBERSHIP
-PUBLIC POLICY
-BIENNIAL CONVENTION
-STATE CONVENTIONS
-NCCWSL
FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:
AS A RESULT OF A PLANNED REORGANIZATION AND RESTRUCTURING BETWEEN AAUW,
INC. AND AAUW ACTION FUND, A RELATED 501(C)(4) ORGANIZATION, AND AAUW
LEADERSHIP AND TRAINING INSTITUTE, A RELATED 501(C)(3) ORGANIZATION,
AAUW, INC. PERFORMED MANY OF THE PROGRAM SERVICES IN FY10 THAT WERE
PREVIOUSLY PERFORMED BY THE OTHER ORGANIZATIONS.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
ELEANOR ROOSEVELT FUND - PROVIDING SUPPORTIVE RESEARCH FOR AAUW
PUBLICATIONS INCLUDING WHERE THE GIRLS ARE.
EXPENSES \$ 246565. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC.

OTHER PROGRAMS - COMMUNICATIONS, PUBLICATIONS AND OTHER ACTIVITIES:
RELATING TO KEEPING MEMBERS INFORMED REGARDING THE ISSUES OF INTEREST
TO THE MEMBERS PARTICULARLY THOSE RELATED TO FULFILLING THE
ORGANIZATION'S MISSION.
EXPENSES \$ 350274. INCLUDING GRANTS OF \$ 55513. REVENUE \$ 0.
INTERNATIONAL FELLOWSHIPS - SINCE 1917, AAUW HAS FOSTERED CULTURAL
EXCHANGE AND GLOBAL OUTREACH THROUGH INTERNATIONAL FELLOWSHIPS WHICH
BROADEN THE COMMUNITY OF WOMEN WHO HAVE ACCESS TO ADVANCED STUDY. THE
PROGRAM SUPPORTS WOMEN FROM OTHER COUNTRIES IN FULL-TIME STUDY OR
RESEARCH IN THE UNITED STATES. BOTH GRADUATE AND POSTGRADUATE STUDIES
AT ACCREDITED INSTITUTIONS ARE SUPPORTED FOR WOMEN WHO ARE NOT U.S.
CITIZENS OR PERMANENT RESIDENTS. PREFERENCE IS GIVEN TO WOMEN RESIDING
IN THEIR HOME COUNTRY AT THE TIME OF APPLICATION. SELECTION CRITERIA
INCLUDE AN OUTSTANDING ACADEMIC RECORD, PROFESSIONAL POTENTIAL, AND THE
POTENTIAL OF THE FIELD OF STUDY TO IMPROVE THE LIVES OF WOMEN AND GIRLS
IN THE FELLOW'S COUNTRY OF ORIGIN. UP TO SIX FELLOWSHIPS ARE
RENEWABLE FOR A SECOND YEAR.
EXPENSES \$ 1001422. INCLUDING GRANTS OF \$ 804000. REVENUE \$ 0.
LEGAL ADVOCACY FUND (LAF) - LAF WORKS TO COMBAT SEX DISCRIMINATION IN
HIGHER EDUCATION AND WORKPLACES THROUGH CAMPUS OUTREACH PROGRAMS, AN
ONLINE RESOURCE LIBRARY, AND RESEARCH REPORTS.
EXPENSES \$ 248192. INCLUDING GRANTS OF \$ 90500. REVENUE \$ 0.

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

AMEDICAN ASSOCIATION OF UNIVERSITY

name of the organization		ZIATION OF UNIV		52-6037388
ADVOCACY				
				\$ 0.
MEETINGS AND CO	NVENTIONS			
EXPENSES \$ 5504	01. INCLUDING	G GRANTS OF \$ 0	. REVENUE \$	0.
FORM 990, PART	VI, SECTION A,	LINE 3: AAUW,	INC DELEGATES	CONTROL OVER
MANAGEMENT DUTI	ES TO AN OUTSOU	JRCED PUBLIC AC	COUNTING FIRM	í.
FORM 990, PART	VI, SECTION A,	LINE 6: AS A R	ESULT OF THE	REORGANIZATION
WITH AAUW ACTIO	N FUND, INC., F	AAUW, INC. HAS	MEMBERS AND R	ECEIVES MEMBER
DUES.				
FORM 990, PART	VI, SECTION A,	LINE 7A: THE E	OARD OF DIREC	TORS APPOINTS
THREE AT-LARGE	DIRECTORS, MEME	BERS OF THE BYL	AWS COMMITTEE	, FELLOWSHIPS FUND
ADVISERS, ADDIT	IONAL MEMBERS	TO THE STANDING	COMMITTEES,	MEMBERS OF THE
AWARDS PANELS,	AND AUTHORIZES	SUCH SPECIAL C	OMMITTEES AS	IT DEEMS
NECESSARY.				
FORM 990, PART	VI, SECTION A,	LINE 7B: THE E	SOARD OF DIREC	TORS ADMINISTERS
THE AFFAIRS OF	AAUW, INC.; DET	rermines its po	LICIES AND PR	OGRAMS; EXERCISES
AUTHORITY OVER	THE MANAGEMENT	, ACQUISITION,	AND DISPOSITI	ON OF THE PROPERTY
OF AAUW, INC.;	ACCEPT OR DECL	INE FUNDS AND C	THER GIFTS, B	BEQUESTS, AND
DEVISES FOR THE	GENERAL PURPOS	SES OF AAUW, IN	C.; ESTABLISH	IES FINANCIAL
POLICIES OF AAU	JW, INC.; DETER	MINES PERSONNEI	POLICIES AND	PROCEDURES,
INCLUDING POLIC	CIES REGARDING S	SALARIES AND BE	ENEFITS; APPRO	VES THE BUDGET AND

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC.

Employer identification number 52-6037388

ANY AMENDMENTS; APPROVES THE ENGAGEMENT OF A CERTIFIED PUBLIC ACCOUNTANT TO AUDIT THE BOOKS ANNUALLY; APPROVE THE CRITERIA FOR THE AWARDS PANELS' ACTIVITIES, THE FUNDING OF AAUW, INC. AWARDS, AND THE AWARDS RECIPIENTS; AUTHORIZES THE EXECUTION OF TRUST AGREEMENTS ON BEHALF OF AAUW, INC; AUTHORIZES AAUW, INC. TO ACT AS TRUSTEE OR CO-TRUSTEE OF CHARITABLE REMAINDER TRUSTS (AS DESCRIBED IN SECTION 664 OF THE INTERNAL REVENUE CODE OF 1954, AS AMENDED) FOR WHICH AAUW, INC. IS A CHARITABLE REMAINDERMAN.

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEWED BY THE CHAIR

OF FINANCE COMMITTEE AND SIGNED BY THE EXECUTIVE DIRECTOR AND FORWARDED TO

THE BOARD OF DIRECTORS BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REQUIRES

DIRECTORS AND OFFICERS TO SIGN AN AFFIRMATION OF COMPLIANCE TO DISCLOSE ANY

POTENTIAL SITUATION THAT MAY RAISE CONFLICT OF INTEREST TO THE BOARD OF

DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE DIRECTOR HAS A

CONTRACT WITH THE BOARD OF DIRECTORS REGARDING COMPENSATION. THE BOARD

APPROVES THE COMPENSATION AND PERFORMS A YEARLY PERFORMANCE REVIEW OF THE

EXECUTIVE DIRECTOR FOR ANY FUTURE RAISES IN COMPENSATION. OTHER OFFICERS

(COO) AND KEY EMPLOYEES HAVE THEIR ANNUAL PERFORMANCE EVALUATION BETWEEN

APRIL-JUNE. COMPENSATION IS DECIDED ON BY THE ED, COO AND CFO BASED ON THE

ANNUAL PERFORMANCE RATING AND/OR MARKET SURVEYS AND RECOMMENDATIONS OF

DEPARTMENTAL DIRECTORS.

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AL, AK, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND
OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI,HI
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S BYLAWS ARE
AVAILABLE IN THE WWW.AAUW.ORG WEBSITE. AUDITED FINANCIAL STATEMENTS ARE
AVAILABLE IN THE WEBSITE AND ALSO IN THE ANNUAL REPORT.
PART XI, LINE 2C
THE OVERSIGHT AND SELECTION PROCESS USED BY THE AUDIT COMMITTEE HAS NOT
CHANGED FROM THE PRIOR YEAR.
PART VI, SECTION A, LINE 1A
AAUW, INC HAS AN EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE CONSISTS
OF:
-CAROLYN GARFEIN, PRESIDENT
-GAIL NORDMOE, VP
-MILLIE HOFFLER-FOUSHEE, FINANCE VP
-JACQUELINE LITTLETON, SECRETARY
-PATRICIA HO
-KATHLEEN CHA
PART V, LINE 2A
ALL SALARIES ARE PAID BY THE AAUW, INC. A COMMON PAYMASTER.

SCHEDULE 0

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN. INC.

WOMEN, INC.	52-6037388
PAGE 1, BOX B, AMENDED RETURN	
THE ORGANIZATION'S FORM 990 IS BEING AMENDED TO REFLECT	ADDITIONAL
FUNDRAISING EXPENSES ON THE STATEMENT OF FUNCTIONAL EXPE	NSES, LINE 11E
AND FOR FUNDRAISING ACTIVITIES ON SCHEDULE G, PART I.	
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Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships ► Attach to Form 990.

▶ See separate instructions.

2009 Open to Public Inspection

OMB No 1545-0047

Employer identification number 52-6037388

WOMEN, INC. Name of the organization Parti

AMERICAN ASSOCIATION OF UNIVERSITY

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Direct controlling entity $\boldsymbol{\varepsilon}$ End-of-year assets <u>e</u> Total income ত্ত Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Part H

כואמוויבמווסווא פסווווא מוס נמע לכמויל					
(a)	(q)	(0)	9	(e)	()
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling
of related organization		foreign country)	section	status (if section 501(c)(3))	entity
AAUW ACTION FUND, INC 53-0025390	UNITE GRADUATES FOR				
1111 SIXTEENTH STREET, NW	EDUCATIONAL WORK,				
WASHINGTON, DC 20036	STATISTICAL & OTHER	DISTRICT OF COLUMBIA	501(C)(4)	N/A	N/A
AAUW LEADERSHIP AND TRAINING INSTITUTE -	ENCOURAGE LEADERSHIP				
30-0048027, 1111 SIXTEENTH STREET, NW,	DEVELOPMENT, SKILL BUILDING				
WASHINGTON, DC 20036	AND LIFELONG LEARNING	DISTRICT OF COLUMBIA 501(C)(3)	501(C)(3)	11	N/A
	I				

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

Schedule R (Form 990) 2009

AMERICAN ASSOCIATION OF UNIVERSITY

WOMEN, Schedule R (Form 990) 2009

Identification of Related Organizations Taxable as a Partnership (Complete if 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.) Part III

Page 2

52-6037388

Percentage ownership managing partner? Schedule R (Form 990) 2009 Seneral or Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Ξ Code V-UBI amount in box 20 of Schedule 4.1 (Form 1065) Share of end-of-year assets \in ate allocations? Yes No Disproportion-Ξ Share of total income Share of end-of-year assets Type of entity (C corp, S corp, or trust) Share of total income (d)
(Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> Legal domicile (state or foreign country) Direct controlling entity Primary activity ত্ত Legal domicile (state or foreign country) Q Primary activity 9 Name, address, and EIN of related organization Name, address, and EIN of related organization Part IV

Schedule R (Form 990) 2009

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Note: Complete line 1 if any entity is listed in Parts if, in, or if or tills scriedule.		<u> </u>	
a Doorest of (i) interest (ii) annumes (iii) resulting or (iii) resulting or (iii) resulting (13	×
		÷	×
		+	-
c Gift, grant, or capital contribution from other organization(s)		1c \	4
d I oans or loan guarantees to or for other organization(s)	_	1	×
		٩	×
e Loans of loan guarantees by other organization(s)		2	:
			;
f Sale of assets to other organization(s)		=	x
g Purchase of assets from other organization(s)	•	19	×
h Exchange of assets	-	1	×
i Lease of facilities, equipment, or other assets to other organization(s)	•	1:	×
j Lease of facilities, equipment, or other assets from other organization(s)		t; X	+
k Performance of services or membership or fundraising solicitations for other organization(s)		¥	×
I Performance of services or membership or fundraising solicitations by other organization(s)		=	×
m Sharing of facilities, equipment, mailing lists, or other assets		£	
n Sharing of paid employees		t X	_
 Reimbursement paid to other organization for expenses 		9	×
p Reimbursement paid by other organization for expenses		1p	×
			••••
q Other transfer of cash or property to other organization(s)		19	×
r Other transfer of cash or property from other organization(s)		1	×
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	thresholds.		
(a) (a) Transaction (s) (b) (b) (c) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d		(c) Amount involved	p _e
) AAUW ACTION FUND, INC.		940,	568.
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22 ISS 02-04-10	Schedule R (Form 990) 2009	(Form 99	0) 2009

52-6037388

Page 4

AMERICAN ASSOCIATION OF UNIVERSITY

WOMEN, INC. Schedule R (Form 990) 2009 Part Vi Unrelated Organizations Taxable as a Partnership (Complete if 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 assets 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)	(d) Are all partners section 501(c)(3) organizations? Yes No	(e) Share of end-of- year assets	Disproportonate allocations?	(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner? Yes No
					-		
		:					

Schedule R (Form 990) 2009