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Form **990**

Department of the Treasury 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)

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

2010

Open to Public Inspection

Tyes No Yes No Instructions) e of legal domicile
O 530,339 Yes No
O 530,339 Yes No
Yes No Yes No : instructions)
Yes No Yes No instructions)
Yes No Yes No instructions)
F Yes F No : instructions) · ▶
F Yes F No : instructions) · ▶
instructions)
instructions)
b -
of legal domicile
e of legal domicile
e of legal domicile
16
16
6
225
0
0
Current Year
1,318,168
2,490
86,010 4,240
4,240
1,410,908
872,150
0
286,760
,
,
0
240,595
240,595 1,399,505
286,760 0 240,595 1,399,505 11,403 End of Year
240,595 1,399,505 11,403 End of Year
240,595 1,399,505 11,403 End of Year 4,096,982
240,595 1,399,505 11,403 End of Year
5

May the IRS discuss this return with the preparer shown above? (see instructions)

Par			ce Accomplishmen			v
1	Briefly describe the o	rganızatıon's mıssıon				
	_		, .		s the number of women committ	eed to philanthropy in
orde	r to strengthen commun	ıty and demonstrate t	he impact that can resu	t from informe	ed, focused grant-making	
2	Did the organization u the prior Form 990 or	· -	nt program services dur	ing the year w		es 🔽 No
	If "Yes," describe thes	e new services on Scl	nedule O			
3	Did the organization coservices?	- -	ake significant changes	ın how it cond		es 🔽 No
	If "Yes," describe thes	e changes on Schedu	le O			
4	Section 501(c)(3) and	l 501(c)(4) organizatio	_)(1) trusts are	rgest program services by expe required to report the amount o rvice reported	
4a	(Code) (Expenses \$	605,507 including g	rants of \$	475,000) (Revenue \$)
	services In 2010, WWF m	nade 5 grants totaling \$475		bers invest more	s focusing on the arts, education, envir than 2,000 hours annually in the proce	
4b	(Code) (Expenses \$	405,776 including g	rants of \$	373,150) (Revenue \$)
	country Each member's g	rant recommendations are		ntees are 501(c)	qualified nonprofit organizations through (3) organizations in good standing All	
	(Code) (Expenses \$	130,507 including g	rants of \$) (Revenue \$	2,490)
		tional events were attende			r knowledge of philanthropy practices a ave 225 active committee members an	
	Other program service	es (Describe in Sche	dule O) See also Additi	onal Data for	Description	
	(Expenses \$	56,626 incli	uding grants of \$	24,00	OO) (Revenue \$)
	Total program service	e expenses l+\$	1.198.416			

Additional Data

Software ID: Software Version:

EIN: 91-1754933

Name: Washington Women's Foundation

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other progra	ım services				
(Code) (Expenses \$	56,626	including grants of \$	24,000) (Revenue \$)
Grant initiatives community partn	These initiatives provide a deeper	level of inq dagrant ea	uiry through an advanced ch year to a nonprofit prog	ant process, WWF is offering three new curriculum of hands-on grant making gram in each of the three new areas Di	We work with

Part IV	Checklist of	Required	Schedules
---------	---------------------	----------	-----------

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Νο
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
b	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.	11b		No
c	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.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		Νο
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
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? <i>If</i> "Yes," complete Schedule F, Parts I and IV	14b		No
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 U S? If "Yes," complete Schedule F, Parts II and IV	15		No
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 U S ? If "Yes," complete Schedule F, Parts III and IV.	16		Νο
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? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νο
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 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		Νο
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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		Νο
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			
		28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		Νο
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? <i>If</i> "Yes," complete Schedule R, Part I	33		Νο
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		N o
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Νo
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		. [
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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			
ь	return			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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		No
b	If "Yes," enter the name of the foreign country ►			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
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 provided to the payor?	7a		N o
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	file Form 8282?	7c		N o
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f 7g		N o
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	79 7h		
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		
9	Sponsoring organizations maintaining donor advised funds.	-		
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
	facilities			
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from members or shareholders			
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
D	year			
13				
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
h	Enter the amount of reserves the organization is required to maintain by the states			
	ın which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
L	If "Vac " has it filed a Form 720 to report these payments? If "No " provide an evalenction in Schoolile O	1/h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νο
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No
Ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure	100		
17	List the States with which a copy of this Form 990 is required to be filed ►WA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website.			

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization Carla Lewis

2100 - 24th Ave S 330 Seattle, WA 98144

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

Check if Schedule O contains a response to any question in this Part VII

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

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

per week (describe hours 의 보기 기계	the ion and
week (describe hours for related organizations in Schedule O) Week (describe hours for related organizations in Schedule O)	
(1) Anne Farrell Chair 4 00 X X 0 0 0	0
(2) Katherine Janeway Vice Chair 4 00 X X X 0 0 0	0
(3) MaryAnn Ekman Treasurer 2 00 X X X 0 0 0	0
(4) Donna Lou Secretary 2 00 X X X 0 0 0	0
(5) Rhoda Altom Director 2 00 X 0 0	0
(6) Carol Lewis Director 2 00 X 0 0	0
(7) Judi Beck Director 2 00 X 0 0	0
(8) Pamela McCabe Director 2 00 X 0 0	0
(9) Grace Chien 2 00 X 0 0	0
(10) Gail Ransom Director 2 00 X 0 0	0
(11) Mary Stevens Director 2 00 X 0 0	0
(12) Kaycee Krysty Director 2 00 X 0 0	0
(13) Laura Midgley 2 00 X 0 0	0
(14) Alison Wilson 2 00 X 0 0 0	0
(15) Judith Runstead 2 00 X 0 0	0
(16) Colleen Willoughby 2 00 X 0 0	0

\$100,000 in compensation from the organization **F**0

Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours	A verage Position (check all Reportable Reportable			(F) Estima amount of	ted fother						
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)		compens from t organizati relate organiza	he on and ed
(17) Carla Lewis President	40 00			х				87,500		0		4,800
(18) Michele Rudnick CFO	10 00			х				20,000		0		C
1b Sub-Total							►					
c Total from continuation sheet					•	*		107 500		\perp		4.000
d Total (add lines 1b and 1c) . Total number of individuals (ind \$100,000 in reportable compe	cluding but not lin	nıted to	thos	e lıs) who	107,500 received more tha	n (<u>' </u>		4,800
											Yes	No
3 Did the organization list any for on line 1a? If "Yes," complete St								or highest compensa	ated employee	3		No
4 For any individual listed on line organization and related organi individual										4		Νο
5 Did any person listed on line 1 services rendered to the organ									r individual for	5		No
Section B. Independent Co	ntractors											
1 Complete this table for your fiv	e highest comper		ndep	ende	ent o	ontra	tors	that received more	than			
\$100,000 of compensation fro	m the organizatio (A) ame and business add							Descri	(B) ption of services		(C) Compen	
2 Total number of independent cor	ntractors (includin	na but n	ot lin	nıteo	l to	those	ıste	d above) who receiv	ed more than			

	(2010)					P	age 9
t VIII	Statement of Revenu	ie		(A) Total revenue	or		exclude from tax under sectior
							512, 513, o 514
<u>⊈</u> 1a	Federated campaigns	1a					
and ouner similar amounts to be a feet of the feet of	Membership dues	. 1b					
ੇ	Fundraising events	. 1c					
ਜ਼ੋਂ ਰ	Related organizations						
Ē∣ĭ	Government grants (contributions)						
ಶ∣ ^e	- · · · · · · · · · · · · · · · · · · ·	1e				<u> </u>	ļ
를 f	All other contributions, gifts, grants, similar amounts not included above	and 1f	1,318,168				
<u> </u>			77,127				
본 h	Total. Add lines 1a-1f			1,318,168			
			Business Code				
2a b c d e	Education Event Fees		611600	2,490	2,490		
ь			011000	2,150	2,130		
d							
e							
٠	All other program service rev	vanua					
'	An other program service rev	ende					
g	Total. Add lines 2a-2f			2,490			
3	Investment income (includin						
	and other similar amounts)			60,676			60,
4	Income from investment of tax-exe						
5	Royalties						
		(ı) Real	(II) Personal				
	Gross Rents Less rental						
	expenses						
c	Rental income or (loss)						
d	Net rental income or (loss)						
		(ı) Securities	(II) O ther				
7a	Gross amount from sales of	144,765					
	assets other than inventory						
Ь	Less cost or	119,431					
	other basis and sales expenses						
	Gain or (loss)	25,334					
d	Net gaın or (loss)			25,334			25,
8a	Gross income from fundraisir	ng events					
	(not including \$						
	of contributions reported on l						
	See Part IV, line 18	а					
	Lace direct evenence						
	Less direct expenses Net income or (loss) from fun						
		ctivities See Part IV, line 19 . a	,				
	Less direct expenses		ь				
	Net income or (loss) from ga	_					
10	a Gross sales of inventory, les	S					
	returns and allowances .						
		a					
	Less cost of goods sold .						
c	Net income or (loss) from sa Miscellaneous Revenue	es of inventory F	Business Code				-
11-			900099	4,240			4,,
	Other Fees		300033	1,240			''
	- -						
(<u></u>					
	d All other revenue	•					
°	Total. Add lines 11a-11d .	· · · · · · · · · •		4,240			
12	Total revenue. See Instruction	ons	ŀ				

	990 (2010)				Page 10
Par					
	Section 501(c)(3) and 501(c)(4) organizations must			(D)	
	Il other organizations must complete column (A) but are not required to o		(B) (C), and	(D).	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV $\!$	872,150	872,150		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	112,300	50,819	43,075	18,406
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	146,594	128,214	14,213	4,167
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	5,554	5,439	115	
10	Payroll taxes	22,312	15,536	4,924	1,852
а	Fees for services (non-employees) Management				
ь	Legal				
с	Accounting	31,190		31,190	
d	Lobbying	·		·	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	36,725		36,725	
g g	Other	17,544	16,130	1,034	380
12	Advertising and promotion	17,311	10,130	1,031	300
13	Office expenses	43,147	33,104	9,317	726
14	Information technology	1,428	833	· · ·	720
15	Royalties	1,420	033	310	,,
16	Occupancy	26,068	19,269	4,973	1,826
17	Travel	2,936	2,853	4,973	39
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	2,930	2,633	44	39
19	Conferences, conventions, and meetings	31,035	29,190	578	1,267
20	Interest	31,033	23,130	5.0	1,20,
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,579	9,298	2,400	881
23	Insurance	2,523	1,865	481	177
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of	2,323	1,003	401	177
_	line 25, column (A) amount, list line 24f expenses on Schedule O) Uncollectible Pledges	19,700		19,700	
_		,	4 900	 	226
b	Training & Conference F	5,740 4,274	4,899 4,178	615 70	226
c C		,	,		
d	Dues and subscriptions	3,620	3,333	210	77
e	All abban ayranga	2.005	1 201	530	20:
f	All other expenses	2,086	1,306	579	201
25	Total functional expenses. Add lines 1 through 24f	1,399,505	1,198,416	170,759	30,330
26	Joint costs. Check here ►				
	commended additional campaign and landidisting solicitation	ı	I		

Part X Balance Sheet (A) (B) Beginning of year End of year 150.026 283,382 1 Cash—non-interest-bearing 1.078.735 2 Savings and temporary cash investments 1,405,905 2 67.219 25,447 3 3 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Assets 6 7 Notes and loans receivable, net 8 Prepaid expenses and deferred charges 2,240 9 1,450 10a Land, buildings, and equipment cost or other basis Complete Part 37.738 10a VI of Schedule D 10b 31.448 ь Less accumulated depreciation 18,869 **10c** 6,290 2.701.678 11 2.273.265 11 12 Investments—other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 16 3,917,524 16 4,096,982 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 14,755 17 10,801 17 Accounts payable and accrued expenses . 18 351,000 18 297,667 20.000 20.000 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities Complete Part X of Schedule D 26 385.755 26 328.468 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 523.173 627,714 Temporarily restricted net assets 28 613,938 28 739,694 Fund 2,394,658 29 2,401,106 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 3,531,769 3,768,514 33 Total net assets or fund balances 33 34 Total liabilities and net assets/fund balances 3.917.524 4.096.982 34

Pal	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1.4	10,90
2	Total expenses (must equal Part IX, column (A), line 25)	2		•	399,50
3	Revenue less expenses Subtract line 2 from line 1	3			11,40
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3,5	31,76
5	Other changes in net assets or fund balances (explain in Schedule O)	5		2	225,34
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		3,7	768,51
Par	T XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			F	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	ie •	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	Separate basis Consolidated basis Both consolidated and separated 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 Act and OMB Circular A-133?	_	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b		

Employer identification number

SCHEDULE A Public

(Form 990 or 990EZ)

Name of the organization

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

2010

Open to Public Inspection

vasiii	ington v	Worlding Condition	91-1754933	3
Pa	rt I	Reason for Public Charity Status (All organizations must complete	this part.) See inst	ructions
he o	organı	nization is not a private foundation because it is (For lines 1 through 11, check only	one box)	
1	Γ	A church, convention of churches, or association of churches described in sectio	n 170(b)(1)(A)(i).	
2	Γ	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)		
3	Γ	A hospital or a cooperative hospital service organization described in section 170	(b)(1)(A)(iii).	
4	Γ	A medical research organization operated in conjunction with a hospital describe hospital's name, city, and state	d in section 170(b)(1) ((A)(iii). Enter the
5	Γ	An organization operated for the benefit of a college or university owned or operat	ed by a governmental	unit described in
		section 170(b)(1)(A)(iv). (Complete Part II)		
6	Γ	A federal, state, or local government or governmental unit described in section 17	'0(b)(1)(A)(v).	
7	⊽	An organization that normally receives a substantial part of its support from a go described in section 170(b)(1)(A)(vi) (Complete Part II)	ernmental unit or fron	n the general public
8	Γ	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)		
9	Γ	An organization that normally receives (1) more than 331/3% of its support from	contributions, membe	rship fees, and gross
		receipts from activities related to its exempt functions—subject to certain excep	ions, and (2) no more	than 331/3% of
		its support from gross investment income and unrelated business taxable income	(less section 511 tax	k) from businesses
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Compl	ete Part III)	
10	Г	An organization organized and operated exclusively to test for public safety Sees	section 509(a)(4).	
11	Γ	An organization organized and operated exclusively for the benefit of, to perform to one or more publicly supported organizations described in section 509(a)(1) or some of the box that describes the type of supporting organization and complete lines 11 a Type I b Type II c Type III - Functionally into	ection 509(a)(2) See e through 11h	
e	Γ	By checking this box, I certify that the organization is not controlled directly or in other than foundation managers and other than one or more publicly supported or section 509(a)(2)		
f		If the organization received a written determination from the IRS that it is a Type check this box	I, Type II or Type III	supporting organization,
g		Since August 17, 2006, has the organization accepted any gift or contribution fro	m any of the	
		following persons? (i) a person who directly or indirectly controls, either alone or together with person	ine described in (ii)	Yes No
		and (III) below, the governing body of the the supported organization?	ms described in (ii)	11g(i)
		(ii) a family member of a person described in (i) above?		11g(ii)
		(iii) a 35% controlled entity of a person described in (i) or (ii) above?		11g(iii)
h		Provide the following information about the supported organization(s)		±±9(···/
"		Frovide the following information about the supported organization(s)		
		(iii) (iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		organization in organization in col (i) of your col (i) organization in granization in col (ii) organization in col (ii) organization in col (ii) organization in col (ii) organization in col (iii) org		e Ion In anized	(vii) A mount of support	
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	under Part III. If the	e organization	rails to qualify u	inder the tests ii	stea below, pie	ase co	mpiete P	art III.)
	ection A. Public Support endar year (or fiscal year beginning	<u> </u>	T					
Care	in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	2,927,10	1,373,430	1,506,061	1,427,451		1,318,168	8,552,212
	grants ")							
2	Tax revenues levied for the organization's benefit and either							
	paid to or expended on its							
3	behalf The value of services or facilities							
,	furnished by a governmental unit to							
_	the organization without charge	2,927,10	1,373,430	1,506,061	1,427,451		1,318,168	8,552,212
4 5	Total. Add lines 1 through 3 The portion of total contributions	2,927,10	1,373,430	1,300,001	1,427,431		1,310,100	6,332,212
,	by each person (other than a							
	governmental unit or publicly							17,768
	supported organization) included on line 1 that exceeds 2% of the							17,700
	amount shown on line 11, column							
_	(f) Public Support. Subtract line 5							
6	from line 4							8,534,444
S	ection B. Total Support							
Cale	endar year (or fiscal year	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
7	beginning in) • A mounts from line 4	2,927,102	1,373,430	1,506,061	1,427,451		.,318,168	8,552,212
8	Gross income from interest,							
	dividends, payments received on	164,416	248,331	76,724	70,581		60,676	620,728
	securities loans, rents, royalties and income from similar	101,110	210,331	70,721	70,301		00,070	020,720
	sources							
9	Net income from unrelated business activities, whether or							
	not the business is regularly							
	carried on							
10	Other income Do not include gain or loss from the sale of							
	capital assets (Explain in Part		302	4,444	2,765		4,240	11,751
	IV)							
11	Total support (Add lines 7 through 10)							9,184,691
12	Gross receipts from related activit		•			12		20,548
13	First Five Years If the Form 990 is check this box and stop here	for the organizat	ion's first, second	, third, fourth, or fi	fth tax year as a 5	501(c)(:	3) organız	ation, ▶┌
S	ection C. Computation of Pul							
14	Public Support Percentage for 201	•		11 column (f))		14		92 920 %
15	Public Support Percentage for 200	9 Schedule A, Pa	irt II, line 14			15		93 130 %
16a	33 1/3% support test—2010. If the and stop here. The organization quantum				ne 14 is 33 1/3%	or more	e, check th	nis box ► ✓
ь	33 1/3% support test—2009. If the	•	, ,,		a, and line 15 is 3	3 1/3%	or more, o	- ,
_	box and stop here. The organizatio							► □
17a	10%-facts-and-circumstances test is 10% or more, and if the organiza							
	in Part IV how the organization me			· · · · · · · · · · · · · · · · · · ·		-	•	ed
	organization	2000 1545		shook a bay and	12 16- 16-	1 7	ad luma	► □
D	10%-facts-and-circumstances test 15 is 10% or more, and if the orga	_						
	Explain in Part IV how the organiza							. —
18	supported organization Private Foundation If the organization	uon did not chast	rahovon lina 19	16a 16h 17a ar	17h chack this	nov and	500	► □
10	instructions	.ioii uiu iiot ciieci	Ca DOX OII IIIIe 13,	104, 100, 1/4 01	170, CHECK HIIS I	JUX allu	3 C C	▶ □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that 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) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a 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 c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) 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

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15						
16	Public support percentage from 2009 Schedule A, Part III, line 15	16						
S	ection D. Computation of Investment Income Percentage							
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17						
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18						

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

DLN: 93493208011511

OMB No 1545-0047

Open to Public Inspection

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.

Name of the organization **Employer identification number** Washington Women's Foundation

Par				1754933			
			ınds	or Acco	unts. (Comple	te if th
_	organization answered "Yes" to Form 99	(a) Donor advised funds		b) Funds	and oth	eraccou	ınts
٦	Fotal number at end of year	113		· •			
	Aggregate contributions to (during year)	360,265					
1	Aggregate grants from (during year)	372,150					
1	Aggregate value at end of year	113,500					
	ے Did the organization inform all donors and donor advis funds are the organization's property, subject to the c		or advi	sed		✓ Yes	Ги
	Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bene conferring impermissible private benefit				<u> </u>	✓ Yes	Ги
1	Conservation Easements. Complete	f the organization answered "Yes" to	Forn	າ 990, P	art IV, I	ıne 7.	
	Purpose(s) of conservation easements held by the or Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualif	on or pleasure) Preservation of an Preservation of a c	ertifie	d historic	structur		a
	easement on the last day of the tax year	F					
		-		Held a	at the En	d of the	Year
	Total number of conservation easements	-	2a				
	Total acreage restricted by conservation easements	. .	2b				
	Number of conservation easements on a certified his	` '	2c				
	Number of conservation easements included in (c) ac	quired after 8/17/06	2d				
	Number of conservation easements modified, transfe the taxable year ►	rred, released, extinguished, or terminated	d by th	e organız	ation du	rıng	
	Number of states where property subject to conserva	tion easement is located ►					
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		ling of	violation		☐ Yes	ΓN
	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easeme	ents d	ırıng the	year ►		
	A mount of expenses incurred in monitoring, inspectir	g, and enforcing conservation easements	durıng	the yea	r ► \$		
	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sect	tion			Yes	ΓN
	In Part XIV, describe how the organization reports co						
1	balance sheet, and include, if applicable, the text of the text of the organization's accounting for conservation easem	ne footnote to the organization's financial ents	staten	nents tha	t describ	es	
1	balance sheet, and include, if applicable, the text of t	ne footnote to the organization's financial ents ns of Art, Historical Treasures, o	staten	nents tha	t describ	es	
t	balance sheet, and include, if applicable, the text of the text of the organization's accounting for conservation easem TII Organizations Maintaining Collection	ne footnote to the organization's financial lents ns of Art, Historical Treasures, o Yes" to Form 990, Part IV, line 8. 116, not to report in its revenue statement for public exhibition, education or researc	or Otlent and hin fu	nents than	t describ	sets.	е,
t	balance sheet, and include, if applicable, the text of the organization's accounting for conservation easem III Organizations Maintaining Collection Complete if the organization answered " If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held	ne footnote to the organization's financial ents ns of Art, Historical Treasures, organization and the second sec	or Otlent and hin fuems	nents than the service shadeness the service sheet	illar As sheet wo e of public	rks of c service	e,
t	balance sheet, and include, if applicable, the text of the organization's accounting for conservation easem Organizations Maintaining Collection Complete if the organization answered " If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its finite organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide.	ne footnote to the organization's financial ents ns of Art, Historical Treasures, organization and the second sec	or Otlent and hin fuems	nents that ner Sim balance : rtherance ance shee	illar As sheet wo e of public	rks of c service of art,	
* t	balance sheet, and include, if applicable, the text of the organization's accounting for conservation easem Organizations Maintaining Collection Complete if the organization answered " If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its finite organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	ne footnote to the organization's financial ents ns of Art, Historical Treasures, organization and the second sec	or Otlent and hin fuems	nents that ner Sim balance: therance nnce sheel rance of	sheet wo of public set works	rks of c service	
t	balance sheet, and include, if applicable, the text of the organization's accounting for conservation easem Organizations Maintaining Collection Complete if the organization answered " If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its finite organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1	ne footnote to the organization's financial tents ns of Art, Historical Treasures, organization's financial tents Yes" to Form 990, Part IV, line 8. 116, not to report in its revenue statement or public exhibition, education or research ancial statements that describes these its formula to report in its revenue statement and sublic exhibition, education, or research in the interest of the statement of the interest of	or Otlont and hin fuems and bala furthe	balance: rtherance rance of	sheet wo e of public tworks public se	rks of c service of art, ervice,	
• t	balance sheet, and include, if applicable, the text of the organization's accounting for conservation easem Organizations Maintaining Collection Complete if the organization answered " If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its finite organization elected, as permitted under SFAS historical treasures, or other similar assets held for 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 If the organization received or held works of art, historical treasures are not provided to the second content of the	ne footnote to the organization's financial tents ns of Art, Historical Treasures, organization's financial tents Yes" to Form 990, Part IV, line 8. 116, not to report in its revenue statement or public exhibition, education or research ancial statements that describes these its formula to report in its revenue statement and sublic exhibition, education, or research in the interest of the statement of the interest of	or Otlont and hin fuems and bala furthe	balance: rtherance rance of	sheet wo e of public se public se	rks of c service of art, ervice,	

Par	••• Organizations Maintaining Co	llections of Art	, His	toric	al Tre	easure	es, or O	<u>ther</u>	· Simila	<u>ir Asse</u>	ts (cc	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th		_		_		e of its o	ollection	ı	
а	Public exhibition		d	Γ	Loan o	rexcha	nge progr	ams				
ь	Scholarly research		e	\sqcap	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	un hov	wthev	further	the ora	anization	's exe	emnt nur	nose in		
•	Part XIV	one cerons and expla		,, ,,,,,,	iaitiiai	the org	umzumon	JUN	cilipt pui	pose III		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								llar	Г	Yes	Г No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar	ements. Comple	ete ıf	the o	rganız	ation a			es" to Fo	orm 990	,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interme	ediary	for co	ntrıbut	ions or	other ass	ets n	ot	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ving ta	ble		_					
										A mou	nt	
c	Beginning balance						<u> </u>	1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1 f				
2a	Did the organization include an amount on F	orm 990, Part X, lin	e 21?							Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	/										
Pa	tt V Endowment Funds. Complete											
		(a)Current Year	(b	Prior Y		(c)Two	Years Back		Three Year	rs Back (e)Four Y	ears Back
1a	Beginning of year balance	2,293,965		1,9	966,131		2,510,35	+				
b	Contributions	237,710			79,668		175,37	+				
С	Investment earnings or losses	279,377			337,153		-602,14	_				
d	Grants or scholarships	72,649			63,776		91,44	2				
e	Other expenditures for facilities and programs											
f	Administrative expenses	36,725			25,212		26,00	6				
g	End of year balance	2,701,678		2.2	, 293,964		1,966,13	4				
_	·	, ,										
2	Provide the estimated percentage of the year	8 000 %	a 5									
а	Board designated or quasi-endowment	0 000 70										
Ь	Permanent endowment ► 89 000 %											
С	Term endowment ► 3 000 %											
3a	Are there endowment funds not in the posse organization by	ssion of the organiz	atıon	that ar	re held	and adr	nınıstered	for t	:he		Yes	No
	(i) unrelated organizations									3a(i)	Yes	110
	(ii) related organizations				·	·				3a(ii)		No
b	If "Yes" to 3a(II), are the related organization				ıle R?			٠. ٠		3b	<u> </u>	<u> </u>
4	Describe in Part XIV the intended uses of th	e organization's end	dowm	ent fun	nds							
Par	t VI Investments—Land, Building	s, and Equipme	nt. S	ee Fo	rm 99	0, Parl	X, line	10.				
	Description of investment				Cost or		(b) Cost or basis (oth			umulated ciation	(d) B	ook value
1a	Land										1	
	Buildings											
	Leasehold improvements										1	
	Equipment										1	
	Other						37	7,738		31,448	+	6,290
	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990. Part X. colur	nn (B), line 1	10(c))			,,,,,,,	<u>.</u> . ▶	51,110	+	6,290
		555, 1416 11, 60141	(5)	,,	(-)-/	• •	· · ·	•		dule D / F	orm 0	90) 2010
									JUIC	ぬぬに レ しし	V: 111 7	, <u>-</u> U11

Investments—Other Securities. See	roi ili 990, Pait X, ilile 12		
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)	(2)2001111111	Cost or end-of-year market v	alue
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
		12	
Part VIII Investments—Program Related. See	: гогиг ээо, rait x, ime . T		
(a) Description of investment type	(b) Book value	(c) Method of valuation	ماليم
		Cost or end-of-year market v	aiue
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, In	e 15.		
(a) Descrip	tion	(b) Book v	alue
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
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Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,410,908
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,399,505
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	11,403
4	Net unrealized gains (losses) on investments	4	225,342
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 - 8	9	225,342
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	236,745
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	1,599,525
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	225,342
3	Subtract line 2e from line 1	3	1,374,183
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 36,725		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	36,725
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,410,908
Par	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per l	
1	Total expenses and losses per audited financial statements	1	1,343,080
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	O
3	Subtract line 2e from line 1	3	1,343,080
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		· · ·
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 36,725		
ь	Other (Describe in Part XIV) 4b 19,700		
С	Add lines 4a and 4b	4c	56,425
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,399,505
Pai	rt XIV Supplemental Information	· · · · · · · · · · · · · · · · · · ·	· · ·

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

Ident if ier	Return Reference	Explanation
Description of Intended Use of Endowment Funds		The Colleen S Willoughby Endowment was established to support the operations of the Washington Women's Foundation in carrying out its mission to educate and expand the pool of women in philanthropy, to build and strengthen community through individual and pooled investments, and to demonstrate the impact that can result from informed, focused grant-making The intent is to ensure the long-term viability and sustainability of the Foundation
Part XIII, Line 4b - Other Adjustments		Loss on uncollectible promises to give 19,700

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Schedule I (Form 990)

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

OMB No 1545-0047

DLN: 93493208011511

Department of the Treasury

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

						Inspect ion
n					Employer identifi	cation number
					91-1754933	
d to award the grant	s or assistance?					▼ Yes
V, line 21 for any	recipient that receiv	ed more than \$5,00	0. Check this box if	no one recipient rece	eived more than \$5,0	
(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
91-0482890	501(c)(3)	9,550				General support
94-3079432	501(c)(3)	8,000				General support
91-0686012	501(c)(3)	10,550				General support
20-4629856	501(c)(3)	92,000				General Support
91-1190193	501(c)(3)	7,800				General Support
94-3131776	501(c)(3)	100,500				General Support
91-0672501	501(c)(3)	103,900				General Support
91-0982116	501(c)(3)	5,000				General Support
20-1051471	501(c)(3)	14,000				General Support
91-1296964	501(c)(3)	100,600				General Support
91-1030929	501(c)(3)	88,000				General Support
91-1425676	501(c)(3)	7,000				General Support
	ntain records to sult to award the grant ganization's proceed the Assistance of the	nation on Grants and Assistance ntain records to substantiate the amount of to award the grants or assistance?		### Part	Initiation on Grants and Assistance Initiative Init	### 1754933 #### 1754933 ##################################

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

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 Each grantee is required to sign a Memorandum of Understanding, that certifies their existing nonprofit corporation status, that requires they notify WWF of any significant changes in its organizational leadership, financial status or key program personnel and that any significant modifications to grant goals, structure or timing must be first communicated to and approved by WWF before grant funds are expended. With the vast majority of our grants being over multiple years, payments after the first year are contingent upon receipt and satisfactory review of the written progress report.

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization Washington Women's Foundation **Employer identification number**

91-1754933

Pa	rt I Types of Property				<u> </u>			
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of determining o amounts		ontribut	ıon
1	Art—Works of art			J				
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
good								
6	Cars and other vehicles .							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded	Х	31	77,127	Market price			
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests .							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts .							
25	O ther ▶ ()							
26	O ther ▶()							
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 received by for which the organization complete	_	= · · · · · · · · · · · · · · · · · · ·		29			
30a	During the year, did the organizatio	n receive	e by contribution any prope	rty reported in Part I, lines	1-28 that it		Yes	No
	must hold for at least three years fi							
	for exempt purposes for the entire					30a		No
b	If "Yes," describe the arrangement					304		
31	Does the organization have a gift a	cceptano	e policy that requires the r	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use the contributions?	nırd partı • • •	es or related organizations	to solicit, process, or sell	non-cash 	32a	Yes	
	If "Yes," describe in Part II If the organization did not report re describe in Part II	venues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2010

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DLN: 93493208011511

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

Supplemental Information to Form 990 or 990-EZ

► Attach to Form 990 or 990-EZ.

Name of the organization Washington Women's Foundation Employer identification number

91-1754933

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		Any woman may be a member of WWF subject to a \$2,500 donation per year. The members may vote for the pooled grantees and the board of directors. There are no stockholders

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		Members elect directors of the organization at the annual meeting by majority vote Directors must be members of the organization

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The board adopted a policy that requires that the finance committee review the form 990 in advance of the 990 filing. Once the finance committee review is complete the draft is circulated to the board for review. Once the finance committee and board review is complete the president signs. A signed copy of the 990 is provided to the full board at the first board meeting following the filing.

ldentifier	Return Reference	Explanation
	· · · · · ·	Annually, each board member is asked to complete a conflict of interest questionnaire disclosing any potential conflicts. Then at each board meeting, directors are asked if there are any changes to their conflict of interests that would affect the business of the foundation. Any changes are documented in the board minutes.

ldentifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 15	The Planning committee of the board is responsible for the review of the President They conduct a review of the president's performance, collect and review comparative data on the president's peers using Council of Foundation data and present their results to the full board in executive session. This is done annually in first quarter

ldentifier	Return Reference	Explanation
	Form 990, Part VI, Section C, line 19	All governing documents are posted on WWF's wiebsite

ldentifier	Return Reference	Explanation
Changes in Net Assets or Fund Balances	Form 990, Part XI, line 5	Net unrealized gains on investments 225,342

	ldentifier	Return Reference	Explanation
I		Form 990, Part XII, Line 2c	There has been no change in the audit committee process