

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



DLN: 93493046015573

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

Open to Public

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012 Name of organization AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC D Employer identification number B Check if applicable Address change 52-6037388 Doing Business As E Telephone number Name change (202) 785-7700 Initial return Number and street (or P O box if mail is not delivered to street address) **G** Gross receipts \$ 28,150,155 1111 16TH STREET NW Terminated Amended return City or town, state or country, and ZIP + 4 WASHINGTON, DC 20036 Application pending Name and address of principal officer **H(a)** Is this a group return for LINDA D HALLMAN CAE affiliates? 1111 16TH STREET NW WASHINGTON, DC 20036 H(b) Are all affiliates included? If "No," attach a list (see instructions) Tax-exempt status **▼** 501(c)(3) Group exemption number 🕨 H(c) Website: ► WWW AAUW ORG K Form of organization ✓ Corporation ✓ Trust ✓ Association ✓ Other ► L Year of formation 1958 M State of legal domicile DC Summary Part I Briefly describe the organization's mission or most significant activities AAUW ADVANCES EQUITY FOR WOMEN AND GIRLS THROUGH ADVOCACY, EDUCATION, PHILANTHROPY AND Activities & Governance 2 Check this box 🚩 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . 15 Number of independent voting members of the governing body (Part VI, line 1b) . 15 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . 5 123 **6** Total number of volunteers (estimate if necessary) 6 178 7a 25.549 7a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 7b 21,414 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 5,884,776 8 7,434,672 Program service revenue (Part VIII, line 2g) . 577,780 332,975 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 3,014,866 2,529,389 10 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 356.617 271.217 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 11,383,935 9,018,357 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 3,805,959 4,420,141 Benefits paid to or for members (Part IX, column (A), line 4) . . . 14 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 Expenses 5,749,237 6,340,792 Professional fundraising fees (Part IX, column (A), line 11e) . . . 262,363 309,531 16a ь Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,564,029 5,956,557 5,369,916 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 15,774,116 16,440,380 Revenue less expenses Subtract line 18 from line 12 . -4,390,181 -7,422,023 LAssets or id Balances **Beginning of Current End of Year** Year 121,517,471 130,869,060 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) 7,318,061 7,564,777 123,550,999 113,952,694 22 Net assets or fund balances Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 20<u>13-02-15</u> Signature of officer Sign Here LINDA D HALLMAN CAE EXECUTIVE DIRECTOR Type or print name and title Check if Preparer's taxpayer identification number signature MATT JOHNSON self-(see instructions) Paid employed 🕨 P00440444 Preparer's DROLET & ASSOCIATES PLLC Firm's name (or yours

1901 L STREET NW 250

WASHINGTON, DC 20036 May the IRS discuss this return with the preparer shown above? (see instructions) .

if self-employed), address, and ZIP + 4

Use Only

EIN > 52-2057543

Phone no (202) 822-0717

▼Yes 「No

Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
<u> </u>	WADVANCES EQUITY FOR WOMEN AND GIRLS THROUGH ADVOCACY, EDUCATION, PHILANTHROPY AND RESEARCH
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 5,116,663 including grants of \$) (Revenue \$ 6,213) OUTREACH AS A MEMBERSHIP ORGANIZATION, THE VAST MAJORITY OF AAUW'S WORK ON BEHALF OF WOMEN AND GIRLS IS MEMBER SERVICES WITH MORE THAN 1000 BRANCHES, AND 30,000 PLUS NON-BRANCH MEMBERS, AND 700 COLLEGE/UNIVERSITY PARTNER/MEMBERS, PROVISION OF MATERIALS TO SUPPORT THEIR ACTIVITIES, PROGRAMS, EVENTS, PHILANTHROPY, AND ADVOCACY, AS WELL AS RECRUITMENT, ENGAGEMENT AND RETENTION, ARE AAUW'S PRIMARY ACTIVITIES THESE ENTAIL CONSTANT COMMUNICATION THROUGH PERSONAL VISITS, PHONE CALLS, WEBINARS, TELECONFERENCES, EMAIL, MAIL, ANNUAL REPORTS, AAUW OUTLOOK MAGAZINE, MULTIPLE SPECIAL INTEREST MONTHLY NEWSLETTERS, OUR AAUW WEBSITE AND LOCALIZED WEBSITES PROVIDED TO BRANCHES WE ALSO HAVE A ROBUST ELECTRONIC MEDIA EFFORT, WITH BLOGS, TWEETS, FACEBOOK, LISTSERVES, OP EDS, LITES, PINTEREST, ACTION NETWOR 2-MINUTE ACTIVIST, TO KEEP ISSUES FOR AND ABOUT WOMEN AND GIRLS IN FRONT OF THE GENERAL PUBLIC, OUR MEMBERS, PUBLIC OFFICIALS AND THE MEDIA
	(Code) (Expenses \$ 2,513,330 including grants of \$ 2,096,319) (Revenue \$ 41,965)
4b	AMERICAN FELLOWSHIPS - THE FELLOWSHIPS PROVIDE 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 DEGRE PROGRAMS WHERE WOMEN'S PARTICIPATION TRADITIONALLY HAS BEEN LOW
 4с	(Code) (Expenses \$ 1,421,555 including grants of \$ 1,228,000) (Revenue \$ 25,440)
	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 WOME 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 THIS LIVES OF WOMEN AND GIRLS IN THE FELLOW'S COUNTRY OF ORIGIN UP TO SIX FELLOWSHIPS ARE RENEWABLE FOR A SECOND YEAR
	(Code) (Expenses \$ 1,364,877 including grants of \$ 931,307) (Revenue \$)
	RESEARCH AND PROJECT GRANTS - THESE AWARDS ARE MADE IN TWO CATEGORIES, CAREER DEVELOPMENT AND COMMUNITY ACTION CAREER DEVELOPMENT GRANTS ARE AWARDED TO AMERICAN WOMEN WHO ARE PREPARING FOR RE-ENTRY 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 GRANTS ARE MADE TO INDIVIDUALS OR NON-PROFIT, COMMUNITY-BASED ORGANIZATIONS FOR PROJECTS DESIGNED TO IMPROVE CONDITIONS FOR WOMEN AND GIRLS IN LOCAL COMMUNITIES
	(Code) (Expenses \$ 1,235,348 including grants of \$) (Revenue \$ 5,100)
	(Code) (Expenses \$ 1,235,348 including grants of \$) (Revenue \$ 5,100) ADVOCACY THE PUBLIC POLICY AND GOVERNMENT RELATIONS FUNCTION INCLUDES TRAINING AND TECHNICAL ASSISTANCE, ISSUE ANALYSIS AND VOTER EDUCATION
	(Code) (Expenses \$ 592,460 including grants of \$) (Revenue \$ 223,465)
	MEETINGS AND CONVENTION - THE MEETINGS AND CONVENTION FUNCTION INCLUDES ACTIVITIES RELATING TO THE CONVENTION HELD BY AAUW IN ODD- NUMBERED FISCAL YEARS AND OTHER EDUCATIONAL CONFERENCES OR SYMPOSIA INCLUDING THE NATIONAL CONFERENCE FOR COLLEGE WOMEN STUDENT LEADERS (NCCWSL)
	(Code) (Expenses \$ 483,207 including grants of \$ 63,063) (Revenue \$ 211,792) OTHER PROGRAMS - THE GENERAL PROGRAMS FUNCTION INCLUDES ACTIVITIES RELATING TO BASIC PROGRAMS AND SERVICES THAT SUPPORT EQUITY FOR WOMEN AND GIRLS
	(Code) (Expenses \$ 445,436 including grants of \$) (Revenue \$ 1,000)
	ELEANOR ROOSEVELT FUND - THE FUND PROVIDES SUPPORTIVE RESEARCH FOR AAUW'S PUBLICATIONS INCLUDING WHY SO FEW? WOMEN IN SCIENCE, TECHNOLOGY, ENGINEERING, AND MATHEMATICS, THE SIMPLE TRUTH ABOUT GENDER PAY GAP, AND WHERE THE GIRLS ARE
	(Code) (Expenses \$ 287,875 including grants of \$ 101,452) (Revenue \$) LEGAL ADVOCACY FUND (LAF) - LAF SUPPORTS PROGRAMS TO COMBAT SEX AND GENDER DISCRIMINATION, INCLUDING FUNDING FOR LEGAL CASES IN HIGHER EDUCATION AND THE WORKPLACE, COMMUNITY AND CAMPUS PROGRAMS, VARIOUS RESEARCH REPORTS, A LAWYER REFERRAL NETWORK AND ONLINE ADVOCACY TOOLS AND RESOURCES
4d	Other program services (Describe in Schedule O) (Expenses \$ 4,409,203 including grants of \$ 1,095,822) (Revenue \$ 441,357)
<u>4e</u>	Total program service expenses \$\displays 13 460 751

art IV	Checklist o	f Reauired	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 instructions)? 💋	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		No
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	Yes	
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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 temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "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	Yes	
С	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	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	Yes	
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, Part 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, Part III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	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	Yes	
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	Yes	
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 questions 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		
С	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		No
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," 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 owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
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		No
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		No
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	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	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	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
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	

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
а	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a			
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			
Ī	gaming (gambling) winnings to prize winners?	1c	Yes	
a	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1		
		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	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 or securities	4a		
	account)?	44		No
D	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			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
	Tries to fine 3a of 3b, and the organization merionin 5000 iv.	5c		
1	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit any contributions that were not tax deductible?			
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	<u> </u>			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		No
f	contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	\vdash		140
y	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	Í I		
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
a	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		
)	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities ————————————————————————————————————			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources 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?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	1		
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
C	Enter the aggregate amount of reserves on hand 13c			
la	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		140
•	ir rea, naari med a roim 729 to leboli tileae baymenta" (1 - No. Drovide an exblanation iii 3Cliebine D	. 4	. ,	

Form 990 (2011) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for Part VI a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax 1a 15 Enter the number of voting members included in line 1a, above, who are 1b 15 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any Νo 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Nο filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Νo 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Yes Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Yes or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes Each committee with authority to act on behalf of the governing body? Yes 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 Νo Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Yes 10a Did the organization have local chapters, branches, or affiliates? . **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt 10b Yes 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing Yes the form? **b** Describe in Schedule O the process, if any, used by the organization to review the Form 990 . **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes b Were officers, directors or trustees, and key employees required to disclose annually interests that could give Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes Did the organization have a written whistleblower policy? 13 Yes 13 14 Did the organization have a written document retention and destruction policy? 14 Yes 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? a The organization's CEO, Executive Director, or top management official 15a Yes 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 16a Νo **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed AL, AK, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY, LA, $\mathsf{ME}, \mathsf{MD}, \mathsf{MA}, \mathsf{MI}, \mathsf{MN}, \mathsf{MS}, \mathsf{NH}, \mathsf{NJ}, \mathsf{NM}, \mathsf{NY}, \mathsf{NC}, \mathsf{ND},$ OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, HI,MO
- 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 made these available. Check all that apply

organization's exempt status with respect to such arrangements?

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization MIA PIANSAY 1111 16TH STREET NW

16b

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

- ◆ 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

◆ 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) (C) A verage Position (do not chec more than one box, unless person is both an officer and a director/trustee)					x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	related organizations
(1) CAROLYN GARFEIN PRESIDENT	21 00	Х						0	0	0
(2) PATRICIA HO VICE PRESIDENT	11 00	Х						0	0	0
(3) CONNIE HILDEBRAND SECRETARY	11 00	Х						0	0	0
(4) MILDRED HOFFLER-FOUSHEE FINANCE VP	16 00	Х						0	0	0
(5) KATHY ANTHON DIRECTOR	6 00	х						0	0	0
(6) AMY BLACKWELL DIRECTOR	6 00	х						0	0	0
(7) KATHRYN BRAEMAN DIRECTOR	6 00	х						0	0	0
(8) SANDRA CAMILLO DIRECTOR	6 00	Х						0	0	0
(9) KATHLEEN CHA DIRECTOR	11 00	Х						0	0	0
(10) CHARMEN GOEHRING-FOX DIRECTOR	6 00	х						0	0	0
(11) DOT MCLANE DIRECTOR	6 00	х						0	0	0
(12) BETSY MCDOWELL DIRECTOR	6 00	Х						0	0	0
(13) PEGGY RYAN WILLIAMS DIRECTOR	6 00	х						0	0	0
(14) JULIA T BROWN DIRECTOR	6 00	х						0	0	0
(15) DAVID KIRKWOOD DIRECTOR	11 00	х						0	0	0
(16) LINDA HALLMAN EXECUTIVE DIRECTOR	55 00			Х				239,955	1,990	25,461
(17) JILL PIERCE COO	55 00				х			200,213	2,280	23,422

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

(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and	
	hours for related organizations in Schedule O)	Individual trustiee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former		MISC)	related organizations	
(18) CYNTHIA MILLER CHIEF OF MKTG & COMM	37 50				х			157,141	0	18,322	
(19) FONG-CHING CHENG DIR OF INFORM TECH	45 00					х		128,473	0	16,342	
(20) LISA MAATZ DIR OF PUBLIC POLICY	45 00					х		165,847	0	19,658	
(21) CHRISTINE JONES DIR OF MEMBERSHIP	45 00					х		113,032	0	14,227	
(22) MARIAANNA A PIANSAY DIRECTOR OF FINANCE	46 00					х		109,798	1,046	14,559	
(23) GLORIA BLACKWELL DIR OF FELLOW & GRANTS	45 00					х		104,924	0	11,692	
1b Sub-Total	<u> </u>		<u> </u>	<u> </u>	<u> </u>		<u> </u> ▶				
c Total from continuation sheets t							-				
							P	1,219,383	5,316	143,683	
Total number of individuals (inclusion) \$100,000 of reportable compens	-				ted a	bove) who	received more tha	n		

			Yes	No		
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	3		Νo		
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					
	ındıvıdual	4	Yes			
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for					
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		No		

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 Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
CHAPMAN CUBINE ADAMS & HUSSEY 1600 WILSON BLVD STE 300 ARLINGTON, VA 22209	FUNDRAISING CONSULTANT	328,829
RUBINO & MCGEEHIN CHARTERED 6905 ROCKLEDGE DR STE 1200 BETHESDA, MD 208171818	CFO PROFESSIONAL SERVICES	205,573
HELIOS HR 1925 ISSAC NEWTON SQ STE 200 RESTON, VA 20190	HR CONSULTING	192,740
MERCURY PUBLISHING SERVICES 1300 PICCARD DRIVE ROCKVILLE, MD 208504303	OUTLOOK MAGAZINE	127,445
Total number of independent contractors (including but not limited to those listed above)	who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \(\mathbb{\textsf{F}} \)4

Form 99			(Davidson					P a g e 9
Part	/ 	Statement o	r Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
#\$ #	1a	Federated cam	paigns 1a					
준	Ь	Membership du	es 1b	2,931,103				
ું.≝	C	Fundraising eve	ents 1c					
<u>∓</u> _ <u>=</u>	d		zations 1d					
ă Sim	e	Government grants		46,155	ļ			
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no	butions included in	2,907,518				
္မ	h	Total. Add lines	s 1a-1f	🛌	5,884,776			
<u> </u>				Business Code				
æm	2a	CONFERENCE REV	ENUE	900099	223,465	223,465		
æ	b	APPLICATION FEES	<u> </u>	900099	109,510	109,510		
AC.	C							
Ser.	d							
E	e							
Program Service Revenue	f	All other progra	am service revenue					
<u>~</u>	g	Total. Add lines	s 2a – 2f		332,975			
	3		ome (ıncludıng dıvıden	-				
			ar amounts)	F	2,227,685			2,227,685
	4		stment of tax-exempt bond	proceeds	18,207			18,207
	5	Royalties	(ı) Real	(II) Personal	10,207			10,207
	6a	Gross rents	473,044	(II) I ersonar				
	ь	Less rental	427,583					
	l c	expenses Rental income	45,461					
	d	or (loss) Net rental inco	l me or (loss)		45,461			45,461
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	19,005,919					
	b	Less cost or other basis and	18,704,215					
	c	sales expenses Gain or (loss)	301,704					
	d	Net gain or (los			301,704			301,704
ė	8a	Gross income f events (not inc	rom fundraising					
Other Revenue		\$ of contributions See Part IV, lin	reported on line 1c)					
ā	ь	Less direct ex	penses b					
δ	С	Net income or ((loss) from fundraising	events 🕨				
	9a	Gross income f See Part IV, lin	rom gaming activities ie 19 a					
	Ь		penses b					
	10a	Net income or (Gross sales of returns and allo		vities				
	b		a oods sold b	entory •				
	С	Miscellaneous	(loss) from sales of inv s Revenue	Business Code				
	11a	OTHER INCOM		900099	182,000	182,000		
	ь	ADVERTISING		541800	25,549		25,549	
	c	V ERITOTING						
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d		207 540			
	12	Total revenue.	See Instructions .	•	207,549 9,018,357	514,975	25,549	2,593,057

Part IX Statement of Functional Expenses

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

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

	heck if Schedule O contains a response to any question in this Part IX)	(D)
	ot include amounts reported on lines 6b, o, 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 United States See Part IV, line 21	311,142	311,142		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	4,051,999	4,051,999		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	57,000	57,000		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	520,013	416,009	62,401	41,603
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	4,759,255	3,890,193	501,758	367,304
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	343,745	281,609	35,710	26,426
9	Other employee benefits	339,839	279,614	33,785	26,440
10	Payroll taxes	377,940	308,378	40,305	29,257
11	Fees for services (non-employees)				
а	Management				
b	Legal	187,028	121,495	12,254	53,279
c	Accounting	41,267		41,267	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	309,531			309,531
f	Investment management fees	86,932		86,932	
g	Other	608,143	240,601	334,852	32,690
12	Advertising and promotion	131,089	124,227		6,862
13	Office expenses	1,888,937	1,375,995	104,882	408,060
14	Information technology	525,805	452,299	56,981	16,525
15	Royalties				
16	Occupancy	122,312	84,636	29,646	8,030
17	Travel	342,366	226,539	81,915	33,912
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	471,780	365,094	68,938	37,748
20	Interest	3,767	1,770	1,829	168
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	486,409	396,882	51,873	37,654
23	Insurance	51,430	42,297	5,292	3,841
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	BLDG REPAIR & MAINT	144,483	118,890	14,829	10,764
b	TEMPORARY EMPLOYEE FEES	65,240	37,264	27,842	134
c	SECURITY GUARD SERVICES	45,541	37,159	4,857	3,525
d	STAFF TRAINING & DEVELO	41,247	19,389	17,813	4,045
e					
f	All other expenses	126,140	220,270	-200,361	106,231
25	Total functional expenses. Add lines 1 through 24f	16,440,380	13,460,751	1,415,600	1,564,029
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 1 1.738.676 2 1,133,114 2 3 931,011 3 51,459 294.846 151.559 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 8 9 215,299 9 232.933 Prepaid expenses and deferred charges 13,234,329 Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10a 10b 7,062,501 b Less accumulated depreciation 6,309,012 10c 6,171,828 109,522,857 101,067,627 11 11 12,156,664 12,081,786 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 306,257 15 15 21,603 130,869,060 16 121,517,471 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 1,417,581 17 1,015,804 17 Accounts payable and accrued expenses . 18 3.763.552 18 4.398.439 19 1,002,203 19 1,114,349 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 1,134,725 25 1,036,185 D 26 7,318,061 26 7,564,777 **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 10,421,198 27 5,497,264 Unrestricted net assets 34,261,149 28 28,917,489 28 Temporarily restricted net assets Fund 29 78.868.652 29 79,537,941 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 123.550.999 33 113.952.694 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 130.869.060 34 121.517.471

1.6	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		9,0	18,357
2	Total expenses (must equal Part IX, column (A), line 25)	2			140,380
3	Revenue less expenses Subtract line 2 from line 1	3		-7,4	122,023
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		123,5	50,999
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-2,1	.76,282
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		113,9	52,694
Pai	** The contains a response to any question in this Part XII			৮	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		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 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 its Schedule O		2 c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ssued			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis				
За	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?	е	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

h

Name of the organization

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.

Inspection **Employer identification number**

52-6037388 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization 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 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). 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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry 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 Type III - Other c Type III - Functionally integrated Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(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?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organizati col (i) orga in the U	on in anized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

(i) a person who directly or indirectly controls, either alone or together with persons described in (ii)

and (III) below, the governing body of the the supported organization?

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

(ii) a family member of a person described in (i) above?

Yes

11g(i)

11g(ii)

11g(iii)

No

Support Schedule for Organizations Described in IRC 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 th	e organization i	fails to qualify ι	under the tests	listed below, ple	ease cor	mplete F	Part III.)
	ection A. Public Support		_	_				
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	011	(f) Total
	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	3,714,92	1 4,638,521	. 8,347,226	7,434,692	5,884,776		30,020,136
	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							
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a	3,714,92	1 4,638,521	8,347,226	7,434,692	5	,884,776	30,020,136
	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							361,892
6	Public Support. Subtract line 5 from line 4							29,658,244
	ection B. Total Support							
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20:		(f) Total
7	Amounts from line 4	3,714,921	4,638,521	8,347,226	7,434,692	5,	.884,776	30,020,136
8	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties and income from similar sources	7,631,043	3,594,628	3,016,920	2,772,692	2,	632,004	19,647,287
9	Net income from unrelated business activities, whether or not the business is regularly carried on			31,767	25,031		25,549	82,347
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	80,944	169,858	178,519	294,300		182,000	905,621
11	Total support (Add lines 7 through 10)							50,655,391
12	Gross receipts from related activit					12		1,535,083
13	First Five Years If the Form 990 is check this box and stop here		·	, third, fourth, or f	ifth tax year as a	501(c)(3) organız	ation, ▶┌
	ection C. Computation of Pu			11 (5)				
14	Public Support Percentage for 201	•		II column (t))		14		58 550 %
15	Public Support Percentage for 201	•	•			15		50 640 %
b	33 1/3% support test—2011. If the and stop here. The organization qu 33 1/3% support test—2010. If the box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization of the organization is 10% or more, and if the organization is 10% or more,	alifies as a publice organization did in qualifies as a per —2011. If the org	ly supported orga not check the bo ublicly supported anization did not	inization x on line 13 or 16 organization check a box on lir	5a, and line 15 is 3 ne 13, 16a, or 161	33 1/3% o	or more, o	► ▼
	in Part IV how the organization me organization	ets the "facts and	d cırcumstances"	test The organiz	ation qualifies as	a publicly	y support	ed ▶厂
b	10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part IV how the organiza	nızatıon meets th	e "facts and circi	ımstances" test,	check this box an	d stop he	re.	
18	supported organization Private Foundation If the organizations							▶□ ▶□
								. ,

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (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 persons Amounts 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 (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) 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 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 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 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. 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

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

33 1/3% support tests-2010. 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

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).							
	Facts And Circumstances Test							
	Explanation							

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493046015573

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

◆ 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) or Form 990-EZ, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization Employer identification number AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC 52-6037388 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 ┌ Yes 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Yes

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

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

P	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) an	d filed Form 5768	(election
	expenses, and share of excess lobb	, , ,	d group member's name	, address, EIN
<u>B</u>	Check I if the filing organization checked bo Limits on Lobbying E (The term "expenditures" means an		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	169,000	
C	Total lobbying expenditures (add lines 1a and 1	b)	169,000	
d	O ther exempt purpose expenditures		16,184,448	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	16,353,448	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	967,672	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		

\$225,000 plus 5% of the excess over \$1,500,000

~	Grassroots	nontavable	amount (a	ntor 250/a	of line 1f)

Over \$1,500,000 but not over \$17,000,000

Over \$17,000,000

h Subtract line 1g from line 1a If zero or less, enter -0-

i Subtract line 1f from line 1c If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

\$1,000,000

┌ Y	es	┌ No
-----	----	------

241,918

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

	Lobbying Expenditures During 4-Year Averaging Period										
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total					
2a	Lobbying non-taxable amount		802,812	938,956	967,672	2,709,440					
b	Lobbying ceiling amount (150% of line 2a, column(e))					4,064,160					
c	Total lobbying expenditures		230,000	235,000	169,000	634,000					
d	Grassroots non-taxable amount		200,703	234,739	241,918	677,360					
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,016,040					
f	Grassroots lobbying expenditures				lula C (Farma 200 c						

_	edule C (Form 990 or 990-EZ) 2011				Page 3		
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT f	iled Fo	orm 57	768 		
		(a)		(a)		(b)
		Yes	No	Am	ount		
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						
а	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?						
е	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	O ther activities? If "Yes," describe in Part IV						
j	Total lines 1c through 1i		_				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b	If "Yes," enter the amount of any tax incurred under section 4912						
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), d	or sect	tion		
			_	Y	es No		
1	Were substantially all (90% or more) dues received nondeductible by members?			1			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2			
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3			
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				tion		
1	Dues, assessments and similar amounts from members	1					
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).						
а	Current year	2a					
b	Carryover from last year	2b					
C	Total	2c					
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4					
5	Taxable amount of lobbying and political expenditures (see instructions)	5					

Part IV Supplemental Information

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

Identifier | Return Reference | Explanation

DLN: 93493046015573

OMB No 1545-0047

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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Name of the organization Employer identification number AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC 52-6037388 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ✓ Yes conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during

	,,		
	the taxable year 🕨		
4	Number of states where property subject to conservation easement is located 🛌		
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	┌ Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨	·	
7	A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year		
	▶- \$		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	┌ Yes	┌ No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, a balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that described		

the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

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

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

3	Using the organization's accession and othe									<u>ontinuea)</u>
,	items (check all that apply)	r records, check an	y 01 ti	ile ioii	iowing t	nacare a signin	Jane C	ise of its confection	"	
а	Public exhibition		d	Г	Loan	r exchange pro	grams	5		
b	Scholarly research		е	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's copart XIV	ollections and expla	ıın ho	w the	y furthe	r the organizatio	n's e	xempt purpose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								Yes	┌ No
Par	TELL TELL TELL TELL TELL TELL TELL TELL				_		ed "Y	es" to Form 99	0,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					cions or other as	sets	not	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follov	wing t	able			1 8		
c	Designing belongs						1c	Amo	unt	
d	Beginning balance Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990 Part X lin	e 212	,					Yes	
	If "Yes," explain the arrangement in Part XI\		C 21.					,	163	, 140
	rt V Endowment Funds. Complete		n ans	swere	ad "Yes	s" to Form 99() Pa	rt IV line 10		
	Endownence and complete	(a)Current Year)Prior		(c)Two Years Ba		1)Three Years Back (e) Four	Years Back
1a	Beginning of year balance	111,821,928		97	,223,972	87,108,	997	113,106,308		
b	Contributions	1,247,092		1	,446,631	744,	251	1,918,746		
C	Investment earnings or losses	-398,349		17	,985,838	13,022,	327	-23,377,357		
d	Grants or scholarships									
e	Other expenditures for facilities and programs	5,487,125		4	,834,513	3,651,	503	4,538,700		
f	Administrative expenses									
g	End of year balance	107,183,546		111	,821,928	97,223,	972	87,108,997		
2	Provide the estimated percentage of the year	r end balance held	as							
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment 🕨 74 210 %									
c	Term endowment ► 25 790 %									
3a	Are there endowment funds not in the posse	ssion of the organiz	ation	that a	are held	and administer	ed for	the		
	organization by							[- · · ·	Yes	+
	(i) unrelated organizations		•					3a(i)		No
	(ii) related organizations						•	3a(ii)	1	No
ь 4	Describe in Part XIV the intended uses of the	•						3b		
	t VI Land, Buildings, and Equipme					0				
1 4.	Description of property	one see rollings	,0,10	(a)	Cost or	other (b)Cost or		(c) Accumulated depreciation	(d) B	ook value
	Land				•	3 3	57,226			3,357,226
	Buildings		-			-	15,533	<u> </u>		2,076,524
	Leasehold improvements		•				21,030			542,930
	Equipment						22,330	<u> </u>		153,216
	Other						18,210	<u> </u>		41,932
	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990. Part X. colui	- mn (B), line	10(c).)			· · · · · · · · · · · · · · · · · · ·		6,171,828
	(, , , , , , , , , , , , , , , , , , ,	, ., .,	, -,					Schedule D (Form 9	

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b)Book value	d of valuation f-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)Other		_
(A) LIGHTHOUSE DIVERSIFIED FUND, LTD	11,698,878	F
(B) MINERAL RIGHTS	382,908	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		d of valuation
(a) Description of investment type	(b) Book value	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, Irr		
(a) Descrip		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
SECURITY DEPOSITS	71,287	
POOLED INCOME FUNDS	302,568	
CHARITABLE GIFT ANNUITIES	584,423	
OBLIGATIONS UNDER CAPITAL LEASE	11,068	
IRA SWEEPSTAKES	15,629	
DEFERRED RENT	51,210	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	1,036,185	
	-,-50,100	

Total revenue (Form 990, Part VIII, column (A), line 12)

1

2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
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	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Part	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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a		
b	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	
3	Subtract line 2e from line 1	3	
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		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	leturn
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts 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		
b	Other (Describe in Part XIV) 4b		
C	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
Par	t XIV Supplemental Information		
Car	polate this part to provide the descriptions required for Part II Junes 2. F. and 9. Part III Junes 1 a and 4. Pa	r+ 1\/ L	noc 1 h and 2 h

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

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 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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ENDOWMENT FUNDS ARE MAINTAINED TO FUND SCHOLARSHIPS AND GRANTS FOR THE AMERICAN AND INTERNATIONAL FELLOWSHIPS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		THE ORGANIZATION REQUIRES THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED BASED ON A "MORE-LIKELY-THAN-NOT" THRESHOLD THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN THE ORGANIZATION DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE, OR REFLECT, ANY UNCERTAIN TAX POSITIONS THE ORGANIZATION'S IRS FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, AND IRS FORMS 990-T, EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN AND RELATED STATE FILINGS ARE SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAXING AUTHORITIES, GENERALLY FOR THREE YEARS AFTER THEY WERE FILED

DLN: 93493046015573

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury

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.

Open to Public **Inspection**

Internal Revenue Service Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC

Employer identification number

52-6037388

Part I	General Information on Activities Outside the United States. Complete if the organization answe	red
	'Yes" to Form 990, Part IV, line 14b.	

1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or			
	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award			
	the grants or assistance?	Yes	Γ	No

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

	Officed States					
3	Activites per Region (Use Part	V ıf addıtıonal s	space is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	INTERNATIONAL FELLOWSHIP GRANT	20,000
	SUB-SAHARAN AFRICA	0	0		OTHER AWRADS	7,000
	EUROPE (INCLUDING ICELAND & GREENLAND)	0	0		AMERICAN FELLOWSHIP GRANT	30,000
2-	Sub-total	0	0			57,000
	Total from continuation sheets to Part I	0	-			0
c	Totals (add lines 3a and 3b)	0	0			57,000
	rivacy Act and Paperwork Reduction	n Act Notice, see	the Instructions	for Form 990. Cat	No 50082W Schedu	ıle F (Form 990) 2011

Pai	Part IV,	line 15, for any	sistance to Organ recipient who recesspace is needed.	nizations or Entiti erved more than \$5,	es Outside the Ur ,000. Check this box	nited States. Comp x if no one recipient	plete if the organiza received more thai	tion answered "Yes' n \$5,000	' to Form 990, ▶ 厂
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nur tax-exempt by	mber of recipie y the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	as . •	
3	Enter total nur	mber of other o	organizations or en	tities					(Form 990) 2011

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. Use Part V if additional space is needed. (c) Number of (d) A mount of (e) Manner of cash (f) A mount of (g) Description (h) Method of (a) Type of grant or (b) Region recipients cash grant disbursement non-cash of non-cash valuation assistance (book, FMV, assistance assistance appraisal, other) INTERNATIONAL EUROPE 20,000 ELECTRONIC WIRE 1 **FELLOWSHIPS** KINCLUDING TRANSFER ICELAND & GREENLAND) -OTHER AWRADS SUB-SAHARAN 7,000 ELECTRONIC WIRE 1 AFRICA - ANGOLA, TRANSFER AMERICAN EUROPE 30,000 ELECTRONIC WIRE 1 FELLOWSHIP GRANT (INCLUDING TRANSFER ICELAND & GREENLAND)

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	굣	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	[ত	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	া	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	া	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	ন	Νo

Schedule F (Form 990) 2011

Part V Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		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 PAY MENT IS CONTINGENT UPON THE SUBMISSION OF A SATISFACTORY MIDYEAR 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 F (Form 990) 2010

DLN: 93493046015573

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

6800 OWENSMOUTH

CANOGA PARK, CA

CHAPMAN CUBINE

ADAMS & HUSSEY

1600 WILSON BLVD 300

ARLINGTON, VA 22209

AVE

91303

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury Internal Revenue Service

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. See separate instructions.

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC

Employer identification number

52-6037388

Part I Fundraising	JACTIVITIES. Complete if the o	rganiza	tion ans	swered "Yes" to Fo	rm 990, Part IV, II	ne 17.
1 Indicate whether the	organization raised funds through a	ny of the	following	g activities Check a	ll that apply	
a 🔽 Mail solicitations		e	Г s₀	licitation of non-gov	ernment grants	
b Internet and e-m	ail solicitations	f	Г s₀	lıcıtatıon of governm	ent grants	
c 🔽 Phone solicitatio	ns	g	┌ Sp	ecial fundraising eve	ents	
d	ations					
	have a written or oral agreement wit ted in Form 990, Part VII) or entity					Γ _{Yes} Γ N
	nighest paid individuals or entities (t least \$5,000 by the organization					
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
GORDON & SCHWENKMEYER INC 360 N SEPULVEDA BLVD 1055	TELEMARKETING/MEMBERSHIP DEVELOPMENT		No	74,216	77,853	-3,637
EL SEGUNDO, CA 90245						
TELEFUND INC PO BOX 2366	TELEMARKETING/MEMBERSHIP DEVELOPMENT		No	20,876	47,691	-26,815
DENVER, CO 802012366						
COMNET MARKETING GROUP INC 1214 STOWE AVE	TELEMARKETING/MEMBERSHIP DEVELOPMENT		No	9,008	7,296	1,712
MEDFORD, OR 97501						
HADDIC DIDECT	TELEMARKETING/MEMBERSHIP					

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

Νo

Νo

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,

FUNDRAISING

CONSULTING

111,404

7,304

11,955

161,600

306,395

-4,651

-161,600

Part I	Fundraising Events. Commore than \$15,000 on Form				
		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		(event type)	(event type)	(total number)	(4)
1 2	Gross receipts				
2	Less Charitable				
3	contributions Gross income (line 1				
	minus line 2)				
4	Cash prizes				
5	Non-cash prizes				
6	Rent/facility costs				
. 7	Food and beverages				
8	Entertainment				
9	Other direct expenses .				
10	Direct expense summary Add lir	nes 4 through 9 in colum	an (d)	.	(
111	•	_	• •		,
art I	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		i tes lo foilii 990, Pa	rt IV, iiile 19, or repo	orted more than
		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	Gross revenue				
2	Cash prizes				
3	Non-cash prizes				
1 4					
4	Rent/racinty costs				
5	Other direct expenses				
6	Volunteer labor	┌ Yes		┌ Yes	
		Г №	ΓNο	Γ No	_
7	Direct expense summary Add line	s 2 through 5 in columr	n (d)		(
8	Net gaming income summary Com	ndine lines 1 and 7 in co	olumn (a)	<u> </u>	
	nter the state(s) in which the organiz				
Is	the organization licensed to operate	e gamıng actıvıtıes ın ea	ch of these states?		· Fyes Fno
b If	"No," Explain				
 a W	ere any of the organization's gaming				
	"Yes," Explain				- , res , NO

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3			
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No			
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity					
	formed to administer charitable (gamıng?		· · · · F Yes F	- No			
13	Indicate the percentage of gamii	ag activity operated in		1 1				
a				13a				
b								
14		f the person who prepares the organiza						
	Name ►							
	Address ►							
	revenue?	ntract with a third party from whom the			_ No			
		ed by the third party 🟲 \$						
С	If "Yes," enter name and address	S						
	Name 🟲							
	Address ►							
16	Gaming manager information							
	Name 🟲							
	Gaming manager compensation I	\$ \$						
	Description of services provided 🟲							
17 a		Employee er state law to make charitable distribu		· · ·	- No			
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-			
_		activities during the tax year > \$		hadala C /				
Par	t IV Complete this part to property instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see				
	Identifier	ReturnReference	Explana	tion				
		•	•					

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I (Form 990)

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

► Attach to Form 990

Governments and Individuals in the United States

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

2011

OMB No 1545-0047

pen to Public Inspection

DLN: 93493046015573

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC

Employer identification number

52-6037388

Part I General Information							
 Does the organization maintain the selection criteria used to a Describe in Part IV the organiz 	ward the grants or as:	sistance?					✓ Yes
Describe in Part IV the organizPart II Grants and Other A	<u> </u>				nnlete if the organ	nization answered "V	es" to
Form 990, Part IV, lir Part IV and Schedule	ne 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000.	. Use
(a) Name and address of organization or government	(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 gran
See Additional Data Table							
2 Enter total number of section 5	01(c)(3) and governr	nent organizations list	ed in the line 1 table .				34
3 Enter total number of other orga	anızatıons lısted ın th	e line 1 table				<u> ► </u>	2
			_	0			/

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
(1) AMERICAN FELLOWSHIP	71	1,657,000		FMV	
(2) SELECTED PROFESSION FELLOWSHIPS	25	409,319		FMV	
(3) INTERNATIONAL FELLO WSHIP	62	1,208,000		FMV	
(4) CAREER DEVELOPMENT GRANTS	64	673,472		FMV	
(5) COMMUNITY ACTION GRANTS	2	13,193		FMV	
(6) OTHER AWARDS	16	48,778		FMV	

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S		SCHEDULE I, PART I, LINE 2 FELLOWS AND GRANTEES ARE REQUIRED TO GIVE AN ACCOUNTING TWICE DURING THE GRANT/FELLOWSHIP PERIOD SUCH ACCOUNTING MAY INCLUDE PROJECT PROGRESS, INSTITUTIONAL CERTIFICATION OF GOOD STANDING, TRANSCRIPTS AND BUDGET EXPENDITURES RECEIPT OF THE SECOND GRANT/FELLOWSHIP PAYMENT IS CONTINGENT UPON THE SUBMISSION OF A SATISFACTORY MID-TERM REPORT, INCLUDING FINANCIALS GRANTEES AND 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 GRANT/FELLOWSHIP GUIDELINES

Schedule I (Form 990) 2011

Software ID: Software Version:

EIN: 52-6037388

Name: AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(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
AFRICAN SERVICES COMMITTEE INC 429 W 127TH STREET NEW YORK, NY 10027	34- 3749744	501(C)(3)	6,360		FMV		COMMUNITY ACTION GRANT
BOYS AND GIRLS CLUBS OF SOUTH ALABAMA INC1102 GOVERNMENT STREET MOBILE, AL 36604	63- 0414826	501(C)(3)	7,000		FMV		COMMUNITY ACTION GRANT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(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
CON MI MADRE1 UNIVERSITY STATION D3500 AUSTIN,TX 78712	26- 2034766	501(C)(3)	6,750		FMV		COMMUNITY ACTION GRANT
EDWARDS STREET FELLO WSHIP CENTERPO BOX 17532 HATTIESBURG, MS 39404	64- 0698304	501(C)(3)	5,982		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(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
GLOBAL GIRL MEDIA4203 JACKSON AVE CULVER CITY, CA 90323	91- 2154834	501(C)(3)	7,000		FMV		COMMUNITY ACTION GRANT
ILLUMINATION EDUCATION4621 SOUTH COOPER ST STE 131-279 ARLINGTON,TX 76017	27- 3742915	501(C)(3)	7,000		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(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
IRVINGTON HIGH SCHOOL PARENT TEACHER STUDENT ASSOCIATION199 LAFAYETTE AVENUE PIEDMONT, CA 94611	94- 3126100	501(C)(3)	6,998		FMV		COMMUNITY ACTION GRANT
LYNCHBURG COLLEGE1501 LAKESIDE DRIVE LYNCHBURG, VA 24501	54- 0505922	501(C)(3)	7,000		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(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
MINNESOTA INDIAN WOMEN'S RESOURCE CENTER 2300 15TH AVENUE SOUTH MINNEAPOLIS, MN 55404	41- 1500950	501(C)(3)	6,000		FMV		COMMUNITY ACTION GRANT
ROOM AT THE INN 3415 BRIDGELAND DRIVE BRIDGETON, MO 63044	43- 1831334	501(C)(3)	5,500		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(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
SAINT LOUIS UNIVERSITY SPONSORED PROGRAMS3700 WEST PINE MALL FUSZ HALL ST LOUIS, MO 63108	43- 0654872	501(C)(3)	6,934		FM∨		COMMUNITY ACTION GRANT
SKILLPOINT ALLIANCE201 EAST 2ND STREET - SUITE B AUSTIN,TX 78702	74- 2704188	501(C)(3)	7,000		FM∨		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(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
SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE FOUNDATION CAMPUS BOX 1007 EDWARDSVILLE,IL 62026	37- 1019805	501(C)(3)	5,596		FMV		COMMUNITY ACTION GRANT
SISTERS IN SPIRIT INC110 WALTER WAY SUITE 68 STOCKBRIDGE,GA 30281	26- 3333141	501(C)(3)	7,000		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(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
ABOUT-FACEPO BOX 77665 SAN FRANCISCO, CA 94107	26- 2768240	501(C)(3)	9,940		FM∨		COMMUNITY ACTION GRANT
FITCHBURG STATE UNIVERSITY160 PEARL STREET FITCHBURG, MA 01420	04- 6002284	501(C)(3)	10,000		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(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
GEORGIA GWINNETT COLLEGE FOUNDATION1000 UNIVERSITY CENTER LANE LAWRENCEVILLE, GA 30043	20- 5107997	501(C)(3)	10,000		FMV		COMMUNITY ACTION GRANT
GIRL SCOUTS OF SOUTHERN ARIZONA 4300 E BROADWAY BLVD TUCSON AZ 85711	86- 0098917	501(C)(3)	9,986		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIRL SCOUTS OF THE NORTHWESTERN GREAT LAKES4693 NORTH LYNNDALE DRIVE APPLETON, WI 54913	39- 1016314	501(C)(3)	10,000		other) FMV		COMMUNITY ACTION GRANT
GIRLS OUTDOOR LEADERSHIP DEVELOPMENT909 4TH AVE SEATTLE WA 98104	91- 0482710	501(C)(3)	7,500		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(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
IAMAS INC711 HABERSHAM RD VALDOSTA, GA 31602	20- 5059227	501(C)(3)	10,000		FMV		COMMUNITY ACTION GRANT
LATINASLATINOS AL EXITOPO BOX 93531 DES MOINES,IA 50393	27- 0933503	501(C)(3)	10,000		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	valuation (book, FMV,	(g) Description of non-cash	(h) Purpose of grant or assistance
					appraisal, other)	assistance	
MIDDLE TENNESSEE STATE UNIVERSITY 1301 EAST MAIN ST MTSU BOX X161 MURFREESBORO,TN 37132	62- 0695507	501(C)(3)	10,000		FM∨		COMMUNITY ACTION GRANT
MUSEUM OF ARTS AND SCIENCES352 S NOVA ROAD DAYTONA BEACH,FL	59- 1022050	501(C)(3)	10,000		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(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,	(g) Description of non-cash	(h) Purpose of grant or assistance
					appraisal, other)	assistance	
SAFE CONNECTIONS2165 HAMPTON AVENUE ST LOUIS, MO 63139	43- 1077667	501(C)(3)	10,000		FMV		COMMUNITY ACTION GRANT
SPRINGFIELD SCHOOL DISTRICT 19525 MILL STREET SPRINGFIELD, OR 23219	93- 6000575	501(C)(3)	8,796		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(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
ST VINCENT'S ACADEMY207 E LIBERTY ST SAVANNAH, GA 31401	58- 0566228	501(C)(3)	6,600		FMV		COMMUNITY ACTION GRANT
STRONG WOMEN STRONG GIRLS262 WASHINGTON STREET SUITE 602 BOSTON, MA	20- 2321377	501(C)(3)	10,000		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(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
WHITTIER COLLEGE CENTER FOR ENGAGEMENT WITH COMMUNITIESPO BOX 634 13406 E PHILADELPHIA ST WHITTIER, CA 90608	95- 1664048	I 501(C)(3)	9,700		FMV		COMMUNITY ACTION GRANT
YOUNG WOMEN EMPOWEREDPYE GLOBALPO BOX 1681	90- 0429162	501(C)(3)	10,000		FMV		COMMUNITY ACTION GRANT

(a) Name and address of organization or government	(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
BURKE LLCBURKE LLC 1000 POTOMAC STREET NW WASHINGTON, DC 20007	20- 3210492	501(C)(3)	14,500		FMV		OTHER AWARDS & STIPENDS
UNIV OF CENTRAL FLORIDAPROPOSAL CONTRACT MGR 12201 RESEARCH PARKWAY ORLANDO,FL 328263246	59- 2924021	501(C)(3)	5,000		FMV		OTHER A WARDS & STIPENDS

(a) Name and address of organization or government	(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
MILLERSVILLE UNIVERSITY MCCOMSEY 222 MILLERSVILLE,PA 17551	23- 2397926	501(C)(3)	5,000		FMV		OTHER AWARDS & STIPENDS
SIEGEL & YEE499 14TH STREET SUITE 220 OAKLAND, CA 94612	94- 3193030	501(C)(4)	27,000		FMV		OTHER AWARDS & STIPENDS

<u>-</u>							
(a) Name and address of organization or government	(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
UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION109 KINKEAD HALL LEXINGTON, KY 40506	61- 6033693	1 501((*)(4)	5,000		FMV		OTHER AWARDS & STIPENDS
UNIV OF MICHIGAN4700 HAVEN HALL 505 S STATE ST ANN ARBOR, MI	28- 2662701	501(C)(3)	10,000		FMV		COMMUNITY ACTION GRANT

Compensation Information

DLN: 93493046015573

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

AMI	ERICAN ASSOCIATION OF UNIVERSITY WOMEN INC						
		52-6037388					
Pa	art I Questions Regarding Compensation						
				Yes	Νo		
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person I 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding						
	First-class or charter travel Housing allowance or residence for	-					
	Travel for companions Payments for business use of personal results for business and personal results for business for busi	•					
	Tax idemnification and gross-up payments Health or social club dues or initiation.						
	Discretionary spending account Personal services (e.g., maid, chause)						
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding p reimbursement orprovision of all the expenses described above? If "No," complete Part III to ex		1b				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?						
3	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 Compensation committee Viritten employment contract Independent compensation consultant Compensation survey or study	3					
	Form 990 of other organizations Approval by the board or compensa	tion committee					
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to tor a related organization	he filing organization					
а	Receive a severance payment or change-of-control payment?		4a		No		
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b		Νo		
c	Participate in, or receive payment from, an equity-based compensation arrangement?		4c		Νo		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item i	n Part III					
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.						
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue a compensation contingent on the revenues of	ny					
а	The organization?		5a		Νo		
b	Any related organization?		5b		Νo		
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, line $1a$, did the organization pay or accrue a compensation contingent on the net earnings of	ny					
а	The organization?		6a		Νo		
b	Any related organization?		6b		Νo		
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any not payments not described in lines 5 and 6? If "Yes," describe in Part III	n-fixed	7		No		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that we subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," or in Part III						
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure describe	ad in Regulations	8		No		
_	The feature of and the organization also follow the reputtable presumption procedure describe	a in Negalations	ı		1		

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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)(1)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) LINDA HALLMAN (I)	239,955 1,990	0	0	0	25,252 209	265,207 2,199	0
(2) JILL PIERCE (I)	200,213 2,280	0	0 0	0	23,158 264	223,371 2,544	0
(3) CYNTHIA MILLER (I)	157,141 0	0 0	0 0	0 0	18,322 0	175,463 0	0 0
(4) LISA MAATZ (I)	165,847 0	0 0	0	_	19,658 0	185,505 0	0 0

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2011

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990 or 990-EZ.

Inspection

Name of the organization AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC

Employer identification number

52-6037388

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 3	AAUW, INC DELEGATES CHIEF FINANCIAL OFFICER MANAGEMENT DUTIES TO AN OUTSOURCED PUBLIC ACCOUNTING FIRM
	FORM 990, PART VI, SECTION A, LINE 6	AAUW HAS VOTING MEMBERS (BRANCH AND NATIONAL MEMBERS) AND NON-VOTING MEMBERS (STUDENT AFFILIATES AND COLLEGE/UNIVERSITY PARTNER MEMBERS)
	FORM 990, PART VI, SECTION A, LINE 7A	ON A BIENNIAL BASIS, AAUW MEMBERS ELECT ELEVEN OUT OF THE FIFTEEN BOARD OF DIRECTORS POSITIONS
	FORM 990, PART VI, SECTION A, LINE 7B	ON A BIENNIAL BASIS, AAUW MEMBERS VOTE ON THE PROPOSED BY LAWS REVISIONS, PROPOSED RESOLUTIONS AND PUBLIC POLICY PLATFORMS
	FORM 990, PART VI, SECTION B, LINE 11	FORM 990 IS REVIEWED BY THE CHAIR OF THE FINANCE COMMITTEE, BOARD OF DIRECTORS BEFORE FILING AND SIGNED BY THE EXECUTIVE DIRECTOR
	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 CONDUCTS A YEARLY PERFORMANCE REVIEW OF THE EXECUTIVE DIRECTOR FOR ANY FUTURE RAISES IN COMPENSATION THE EXECUTIVE COMMITTEE COMPARES COMPENSATION LEVELS WITH INDEPENDENT COMPENSATION MARKET SURVEYS OTHER OFFICERS (CHIEF OF STRATEGIC ADVANCEMENT AND THE CHIEF OF MARKETING & COMMUNICATION), AND KEY EMPLOYEES HAVE THEIR ANNUAL PERFORMANCE EVALUATION BETWEEN APRIL AND JUNE COMPENSATION IS DECIDED ON BY THE ED, CSA, CMC AND CFO BASED ON THE ANNUAL PERFORMANCE RATING AND/OR MARKET SURVEYS AND RECOMMENDATIONS OF DEPARTMENTAL DIRECTORS THE OVERALL ORGANIZATION COMPENSATION IS THEN PRESENTED TO THE BOARD OF DIRECTORS THROUGH THE BUDGET APPROVAL PROCESS
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S BY LAWS ARE AVAILABLE IN THE WWW AAUW ORG WEBSITE AUDITED FINANCIAL STATEMENTS ARE AVAILABLE IN THE WEBSITE AND ALSO IN THE ANNUAL REPORT
AVERAGE HOURS PER WEEK FOR RELATED ORGANIZATION	PART VII, SECTION A, COLUMN B	THE BOARD OF DIRECTORS, OFFICERS, KEY EMPLOYEES AND THE DIRECTOR OF FINANCE OF AAUW AVERAGE ONE HOUR PER WEEK ON AAUW ACTION FUND, A RELATED PARTY
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -2,176,282
	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	AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC HAS AN EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE CONSISTS OF -CAROLYN GARFEIN, PRESIDENT -PATRICIA FAE HO, VICE PRESIDENT -MILDRED "MILLIE" HOFFLER-FOUSHEE, FINANCE VICE PRESIDENT -CONNIE HILDEBRAND, SECRETARY -DAVID KIRKWOOD, DIRECTOR -KATHLEEN CHA, DIRECTOR

efile GRAPHIC print - DO NOT PROCESS | As Filed Data SCHEDULE R | Related Or

DLN: 93493046015573

2011

2011

OMB No 1545-0047

Related Organizations and Unrelated Partnerships

Department of the Treasury Internal Revenue Service

(Form 990)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC				52-603738	entification number		
Part I Identification of Disregarded Entities (Comp	lete if the organization	on answered "Yes	" on Form 990, Pa				
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) E Total income E	(e) ind-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	izations (Complete the tax year.)	ıf the organization	n answered "Yes" (on Form 990, P	art IV, line 34 becau	se it had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity statu (if section 501(c)(3	(f) s Direct controlling o) entity	Section 5 cont	g) 512(b)(13 trolled nization
(1) AAUW ACTION FUND INC						Yes	No
1111 SIXTEENTH STREET NW WASHINGTON, DC 20036 53-0025390	SEE SCHEDULE R, PART VII	DC	501(C)(4)	N	/A N/A		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	,	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproprtionate allocations?		Disproprtionate		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or nging	(k) Percentage ownership
							Yes	No		Yes	No			
												i		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Рптагу activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership

che	edule R (Form 990) 2011		Рa	age 3
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b		No
С	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d		No
e	Loans or loan guarantees by related organization(s)	1e		No
f	Sale of assets to related organization(s)	1f		No
g	Purchase of assets from related organization(s)	1g		No
h	Exchange of assets with related organization(s)	1h		No
i	Lease of facilities, equipment, or other assets to related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets from related organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for related organization(s)	1k		No
1	Performance of services or membership or fundraising solicitations by related organization(s)	11		No
m	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m	Yes	
n	Sharing of paid employees with related organization(s)	1n	Yes	
0	Reimbursement paid to related organization(s) for expenses	10		No
p	Reimbursement paid by related organization(s) for expenses	1 p		No
q	Other transfer of cash or property to related organization(s)	1q		No
r	Other transfer of cash or property from related organization(s)	1r		No
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			

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	
---	---	---	--

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) AAUW ACTION FUND INC	С	200,000	CASH
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on 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) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3)		partners 5 section tot 501(c)(3)		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing 1 partner?		(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No					
				·													

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
NAME OF RELATED	PART II,	PRIMARY ACTIVITY AAUW ACTION FUND ADVANCES EQUITY FOR WOMEN AND GIRLS THROUGH MEMBER ACTIVISM AND VOTER
ORGANIZATION	IDENTIFICATION	MOBILIZATION
AAUWACTION	OF RELATED TAX-	
FUND, INC	EXEMPT	
	ORGANIZATIONS	

Schedule R (Form 990) 2011

Additional Data

Software ID: Software Version:

EIN: 52-6037388

Name: AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC.

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) 4d. Other program services) (Expenses \$ 1,364,877 including grants of \$ 931,307) (Revenue \$ (Code RESEARCH AND PROJECT GRANTS - THESE AWARDS ARE MADE IN TWO CATEGORIES, CAREER DEVELOPMENT AND COMMUNITY ACTION CAREER DEVELOPMENT GRANTS ARE AWARDED TO AMERICAN WOMEN WHO ARE PREPARING FOR RE-ENTRY 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 GRANTS ARE MADE TO INDIVIDUALS OR NON-PROFIT, COMMUNITY-BASED ORGANIZATIONS FOR PROJECTS DESIGNED TO IMPROVE CONDITIONS FOR WOMEN AND GIRLS IN LOCAL COMMUNITIES (Code) (Expenses \$ 1,235,348 including grants of \$) (Revenue \$ 5,100) ADVOCACY THE PUBLIC POLICY AND GOVERNMENT RELATIONS FUNCTION INCLUDES TRAINING AND TECHNICAL ASSISTANCE, ISSUE ANALYSIS AND VOTER EDUCATION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) 4d. Other program services) (Expenses \$ 592,460 including grants of \$) (Revenue \$ (Code 223,465) MEETINGS AND CONVENTION - THE MEETINGS AND CONVENTION FUNCTION INCLUDES ACTIVITIES RELATING TO THE CONVENTION HELD BY AAUW IN ODD-NUMBERED FISCAL YEARS AND OTHER EDUCATIONAL CONFERENCES OR SYMPOSIA INCLUDING THE NATIONAL CONFERENCE FOR COLLEGE WOMEN STUDENT LEADERS (NCCWSL) (Code)(Expenses \$ 483,207 including grants of \$ 63,063) (Revenue \$ 211,792) OTHER PROGRAMS - THE GENERAL PROGRAMS FUNCTION INCLUDES ACTIVITIES RELATING TO BASIC PROGRAMS AND SERVICES THAT SUPPORT EQUITY FOR WOMEN AND GIRLS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) 4d. Other program services) (Expenses \$ 445,436 including grants of \$) (Revenue \$ (Code 1,000) ELEANOR ROOSEVELT FUND - THE FUND PROVIDES SUPPORTIVE RESEARCH FOR AAUW'S PUBLICATIONS INCLUDING WHY SO FEW? WOMEN IN SCIENCE, TECHNOLOGY, ENGINEERING, AND MATHEMATICS, THE SIMPLE TRUTH ABOUT GENDER PAY GAP, AND WHERE THE GIRLS ARE (Code) (Expenses \$ 287,875 including grants of \$ 101,452) (Revenue \$ FUNDING FOR LEGAL CASES IN HIGHER EDUCATION AND THE WORKPLACE, COMMUNITY AND CAMPUS PROGRAMS, VARIOUS

LEGAL ADVOCACY FUND (LAF) - LAF SUPPORTS PROGRAMS TO COMBAT SEX AND GENDER DISCRIMINATION, INCLUDING RESEARCH REPORTS, A LAWYER REFERRAL NETWORK AND ONLINE ADVOCACY TOOLS AND RESOURCES