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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047
2012

2012 Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

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

6/1/2012 and ending 5/31/2013 For the 2012 calendar year, or tax year beginning D Employer identification number C Name of organization Check if applicable U.S. National Committee for U.N. Women Doing Business As Address change 54-1244401 Number and street (or PO box if mail is not delivered to street address) E Telephone number Name change Initial return 1120 20th Street NW 500 North (202) 469-8732 City, town or post office, state, and ZIP code Terminated 20036 G Gross receipts \$ 775.465 Washington DC Amended return F Name and address of principal officer Yes X No H(a) Is this a group return for affiliates? Application pending Maggie Forster Schmitz 1120 20th Street NW, Washington, DC 20036 H(b) Are all affiliates included? If "No," attach a list (see instructions) X | 501(c)(3) Tax-exempt status 501(c) (4947(a)(1) or) < (insert no) Website: ▶ www.unifem-usnc.org H(c) Group exemption number ▶ 5714 K Form of organization X Corporation Trust Association Other > L Year of formation M State of legal domicile 1983 VA Part I Summary 1 Briefly describe the organization's mission or most significant activities Provide education and other activities within the United States in support of the United Nations Development Fund for Women Activities & Governance If the organization discontinued its operations or disposed of more than 25% of its net assets Check this box ▶ Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2012 (Part V, line-2a) 5 1 6 50 Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 **Current Year** Contributions and grants (Part VIII, line 1h) 766,890 OGDEN Program service revenue (Part VIII, line 2g) 19.781 10 **2**.410 4,605 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 372.394 771,495 12 13 198,500 630,877 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 51.707 52.047 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 113,055 80.728 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 763,652 18 363,262 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 9,132 7,843 19 Revenue less expenses Subtract line 18 from line 12 End of Year **Beginning of Current Year** 268,873 284,735 20 Total assets (Part X, line 16) 21 27,255 29,195 Total liabilities (Part X. line 26) Net assets or fund balances Subtract line 21 from line 20 255,540 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 Sign Here 8-27-2013 Type or print name and title Print/Type preparer's name Preparer's signature Check X [₹] Paid 8/21/2013 self-employed P00009906 Hacul Howard Levine :Preparer Firm's EIN ► 95-3535569 Firm's name > Howard J Levine C PA **Use Only** 818-994-5562 Firm's address ▶ 16600 Sherman Way #280, Van Nuys, Phone no Yes May the IRS discuss this return with the preparer shown above? (see instructions)

Form 9	90 (2012)	U.S. National Committee for U.N. Women	54-1244401	Page 2
Pai	rt III	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		
•		I will an end offer a structure within the Hertard Otatas in accompant of the Hertard		
	Ivalions			
				
2		organization undertake any significant program services during the year which were not listed on	□ vaa	X No
		r Form 990 or 990-EZ?	Yes	✓ NO
		describe these new services on Schedule O		
3		organization cease conducting, or make significant changes in how it conducts, any program		
	service		Yes	X No
		describe these changes on Schedule O		
4	Describ	be the organization's program service accomplishments for each of its three largest program services,	, as measured by	
	expens	es Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allo	cations to others	,
	the tota	l expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 737,481 including grants of \$ 630,877) (Revenue	e \$	
		t to chapters throughout the United States by providing informational materials, a web site,		
		gs and conferences		
		·		
4b	(Code) (Expenses \$ including grants of \$) (Revenue	a\$)

4c	(Code) (Expenses \$ including grants of \$) (Revenue	 e.\$)
	,5555	/ Lapaness V		′
			·	
				· • • • • • • • • • • • • • • • • • • •
				·
4d	Other p	rogram services (Describe in Schedule O)		
	(Expen)	
4e	Total p	rogram service expenses > 737,481		

art	Officerial of required confedence		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	4		X
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	-		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		х
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
1	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, line 10? If "Yes," complete Schedule D, Part VI	11a	X	
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		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11d		X
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a	х	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	120		
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
3	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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, Parts I and IV.	14b		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		х
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
7	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 (see instructions)	17		X
8	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		x
9	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		х
0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

54-1244401 Form 990 (2012) U.S. National Committee for U.N. Women Page 4 Part IV Checklist of Required Schedules (continued) No Yes Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II 21 Х 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 27 If "Yes," complete Schedule I, Parts I and III 22 Х Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated Х 23 employees? If "Yes," complete Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction Х 25a with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 Х Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 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) Х a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b Х Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) 28c was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II
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

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O

Form **990** (2012)

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Form 990 (2012)

Fart	Check if Schedule O contains a response to any question in this Part V			П
	Check in Contraction of Contraction of Contraction and Advantage of Contraction o		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			_
	gaming (gambling) winnings to prize winners?	1c	Χ	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<u>3b</u>		-
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4.		x
	account)?	4a		├^
	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
	required to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year			J
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e_ 7f		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		├^
	If the organization received a contribution of qualified intellectual property, did the organization file 70fff 6699 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u> 7h		1
	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.			
	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		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			į
	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 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)	12a		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes." enter the amount of tax-exempt interest received or accrued during the year 12b	124		╁
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a	 	\vdash
	Note. See the instructions for additional information the organization must report on Schedule O			\vdash
	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand		L_	<u>L</u>
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI

54-1244401 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI.

Sect	ion A. Governing Body and Management	· · · · · · · · · · · · · · · · · · ·	•		<u> </u>
	ton 7 it do to thing body and management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 2	1		
	If there are material differences in voting rights among members of the governing body, or				
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O			1	
b	Enter the number of voting members included in line 1a, above, who are independent	1b 2	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	hip with	_		
	any other officer, director, trustee, or key employee?		2		Х
3	Did the organization delegate control over management duties customarily performed by or under	the direct		ĺ	
	supervision of officers, directors, or trustees, or key employees to a management company or other	r person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's a	issets?	5		Х
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint			
	one or more members of the governing body?		7a	X	ļ
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	1	1	,	
0	stockholders, or persons other than the governing body?		7b	X	├
8	Did the organization contemporaneously document the meetings held or written actions undertakened the year by the following:	n auring			
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	x	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	00	 ^	
_	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	acrica	9]	x
Sect	ion B. Policies (This Section B requests information about policies not required by the	Internal Revenue)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	Х	
b	If "Yes," did the organization have written policies and procedures governing the activities of such of		1		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	re filing the form?	11a	X	ļ
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990				ا لہ ۔۔۔
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could go		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If ' describe in Schedule O how this was done.	res, "	40-		
13	Did the organization have a written whistleblower policy?		12c	X	Х
14	Did the organization have a written document retention and destruction policy?	•	14	Х	 ^-
15	Did the process for determining compensation of the following persons include a review and appro-	val by	14	 ^	
. •	independent persons, comparability data, and contemporaneous substantiation of the deliberation				·
а	The organization's CEO, Executive Director, or top management official		15a	X	
b	Other officers or key employees of the organization		15b	Х	
	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 arrang	ement			
	with a taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeg	juard			_
	the organization's exempt status with respect to such arrangements?		16b		
	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed See Attached States \$200.4 control of the ball of the ba				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990)- i (Section 501(c)(s)s only	/)	
	available for public inspection. Indicate how you made these available. Check all that apply X Own website. X Another's website. X Upon request. Other (ex.)	nlain in Schadula (1)			
19	X Own website X Another's website X Upon request Other (ex Describe in Schedule O whether (and if so, how), the organization made its governing documents,	olain in Schedule O) conflict of interest			
	policy, and financial statements available to the public during the tax year	Commict of litterest			
20	State the name, physical address, and telephone number of the person who possesses the books	and records of the			
	organization Susan Cutri	(202) 939-2	675		
	1120 20th Street, NW. Suite 500 North, Washington, DC 20036		:		

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Form	990	/2012	١

U.S. National Committee for U.N. Women

(2012)	O O National Committee for O 14 Women		<u> </u>	, ago
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highe	st Compe	nsated	
	Employees, and Independent Contractors			
	Check if Schedule O contains a response to any question in this Part VII	<u>. </u>	<u> </u>	<u> </u>

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position (do not check more than one box, unless person is both an officer and a director/trustee) Former Former Former Former Institutional trustee or director			Position check more than one ess person is both an		Position (do not check more than one box, unless person is both an officer and a director/trustee)		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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Maggie Forster Schmitz	10 00												
President	0 00	X	╙	X	<u>L</u> .			0					
(2) Terry Brackett	5 00												
Membership V P	0 00	Х	<u> </u>	X				0					
(3) Francine Brown	5 00												
Strategic Planning VP	0 00	X	_	X	_			0					
(4) Kay Colson	5 00			Ì									
Fund Develop VP	0 00	X	_	X	$ldsymbol{ld}}}}}}$	L		0					
(5) Mary Dailey	5 00												
Secretary	0 00	X	_	X	<u> </u>			0					
(6) Lucinesse Hamilton	5 00				İ								
Treasurer	0 00	X	<u> </u>	X				0					
(7) Stephanie Block	5 00												
Social Media VP	0 00	X	<u> </u>	X	<u> </u>			0					
(8) Allison Asplin	5 00	1											
Director	0 00	X	 	<u> </u>	<u> </u>			0					
(9) Robyn Beavers	5 00												
Director	0 00	X	igspace	<u> </u>	<u> </u>			0					
(10) Francine Cerami	5 00	Ì											
Director	0 00	X	╙	<u> </u>	_	L		0					
(11) Neale Godfrey	5 00								,				
Director	0 00	X	├	<u> </u>	<u> </u>		<u> </u>	0					
(12) Jean Jewell	5 00							_					
Director	0 00	X	\vdash	 	_	 	_	0					
(13) Iyabo Obasanjo	5 00							_					
Director	0 00		<u> </u>	├	<u> </u>			0					
(14) Youngee Overly	5 00				l			_					
Director	0 00	Х		<u> </u>	<u> </u>			0					

Page 8

Р	art VII Section A. Officers, Directors, Tr	ustees, Key Em	ploye	es,	and	Hi t	ghes	t Co	ompensated Em	ployees (contin	ued)		
(C)													
	(A)	(B)	Position (B) (do not check more than one (D) (E							(E)		(F)	
	Name and title	Average hours per				irect	ıs both or/trust	ee)	Reportable compensation	Reportable compensation		stimate mount (
		week (list any hours for					g 풀	ğ	from the	from related		other	hon
		related	Individual to	ğ	Officer	y em	hest	Former	organization	organizations (W-2/1099-MISC)		rom the	
		organizations below dotted	or a	onal		lg Q	ee con		(W-2/1099-MISC)			ganızatı ıd relati	
		line)	Individual trustee or director	Institutional trustee		8	pen				org	anızatı	ons
			"	8			Highest compensated employee						
(15)	Carol Poteat-Buchanan	5 00		├	\vdash	-	-	_	-				
Dire		0 00							ol				
(16)	Kım Randle	5 00	_										
Dire	ctor	0 00	X						0				
	Grace Richardson		1										
Dire		0 00		 	<u> </u>	_		_	0				
Dire	Caroline Slobodzian	5 00 0 00	1										
	Ann Trainor	5 00		-	-	├			0				
Dire		0 00	1						o				
(20)	Lorı Vandermeir	5 00					,				•	-	
Dire	ctor	0 00				<u> </u>			0				
	Luz VanMeek					l .			_				
Dire		0 00	X	-					0				
(22)													
(23)	-												
(24)													
				_									
(25)	·												
1b	Sub-total	<u> </u>	L	<u> </u>				▶	0	0			O
C	Total from continuation sheets to Part VII, S	ection A						•	o	0			
d	Total (add lines 1b and 1c)							>	0	0			0
2	Total number of individuals (including but not lii		ted a		•	/ho	recei	ved	more than \$100,	,000 of			
	reportable compensation from the organization	<u> </u>			0								
3	Did the organization list any former officer, dire	otor or trustoo	kov o	mnl	.		r biak		componented	İ		Yes	No
J	employee on line 1a? If "Yes," complete Sched		•	•	oye	e , o	riigi	iesi	compensated		- 3		Ã
4	For any individual listed on line 1a, is the sum of				n a	nd c	other	con	nensation from				
•	the organization and related organizations great	•	•						•	,			
	ındıvıdual				-,		,				4		X
5	Did any person listed on line 1a receive or acci	ue compensation	n fror	n ar	ıy u	nrel	ated	orga	anization or indiv	idual			
	for services rendered to the organization? If "Y				-			_			5_		Х
	tion B. Independent Contractors												
1	Complete this table for your five highest compe										•		
	compensation from the organization Report co	impensation for t	ne ca	aien	aar	yea	r ena	ıng	with or within the	e organization's t	ах		
	(A)				-				(B)		(C)	
	Name and business add	ress							Description of serv	rices C	-	sation	
None													0
													0
													0
													0
2	Total number of independent contractors (inclu	ding but not limit	ed to	tho	se li	sted	d abo	ve)	who received				
_	more than \$100,000 of compensation from the	_				• •		-,					

Part VIII Statement of Revenue

		Check if Schedule O contain	s a response to a	any question in th	is Part VIII			
		······································	· · ·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
y y	1a	Federated campaigns	1a					
rant	b	Membership dues	1b	35,127				
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events	<u>1c</u>					
Sifts lar/	d	Related organizations	<u>1d</u>					
ns, (е	Government grants (contribution						
utio	f	All other contributions, gifts, gra			·			1
g ţ		similar amounts not included ab		731,763				
Con	g	Noncash contributions included in	lines 1a-1f. \$		700 000		İ	
	h	Total. Add lines 1a-1f		Business Code	766,890		-	
Program Service Revenue	20			Busiliess Code		-		
eve	2a b						 	
9 9	C							-
Ž	d			****			1	
Š	e							
grar	f	All other program service revenue	.е.				· · · · · · · · · · · · · · · · · · ·	
Pro		Total. Add lines 2a–2f				********	1	
	3	Investment income (including di	vidends, interest,	and				
		other similar amounts) .		. ▶	3,012			3,012
	4	Income from investment of tax-e	exempt bond prod	ceeds . ►				
	5	Royalties		▶_				
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)		<u></u>		. =-	_	
	d	Net rental income or (loss)		. ▶			ļ <u>. </u>	
	7a	Gross amount from sales of	(ı) Securities	(II) Other				
		assets other than inventory.	5,563	,				4
	b	Less cost or other basis	1					
		and sales expenses	3,970					İ
	C	Gain or (loss)	1,593	·				4.500
	d	Net gain or (loss) .		<u> </u>	1,593			1,593
ø	8a	Gross income from fundraising						
חַנ	Oa	events (not including \$						
eve		of contributions reported on line	1c)					
٦ ٦		See Part IV, line 18	. a					
Other Revenue	Ь	Less direct expenses	b					
ŏ	c	Net income or (loss) from fundra	aising events .		-		-	
	9a	Gross income from gaming activ	=					
		See Part IV, line 19	а					
	b	Less direct expenses	b				_	
	С	Net income or (loss) from gamin	ig activities	. >				
	10a	Gross sales of inventory, less						
		returns and allowances	а					
	b	Less cost of goods sold	b					1
	С	Net income or (loss) from sales	of inventory	>				
		Miscellaneous Revenue		Business Code	1			
	11a						ļ · ·	
	b							
	С						 	4
	d	All other revenue					 	
	e	Total. Add lines 11a-11d .		•	774 400			4.605
	12	Total revenue. See instructions			771,495		I.	4,605

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must complete all	columns All other or	ganizations must co	omplete column (A)	
	Check if Schedule O contains a response to any	question in this Part I	Χ		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	630,877	630,877		
2	Grants and other assistance to individuals in the				
	United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				·····
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages	42,144	35,822	4,214	2,108
7 8	Pension plan accruals and contributions (include	42,144	33,022	7,217	2,100
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits .	6,460	5,491	646	323
10	Payroll taxes	3,443	2,927	344	172
11	Fees for services (non-employees)	0, 1.0			
	Management .				
b	Legal				
c	Accounting	14,350	10,893	3,457	
d	Lobbying .				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	1,071		1,071	
g	Other (If line 11g amount exceeds 10% of line 25, column				
•	(A) amount, list line 11g expenses on Schedule O)	2,692	2,692		
12	Advertising and promotion .				
13	Office expenses	1,513	1,286	151	76
14	Information technology	10,365	9,329	1,036	
15	Royalties .				
16	Occupancy	9,522	8,094	952	476
17	Travel	7,587	6,449	759	379
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	5.004	2 220	2.560	
19	Conferences, conventions, and meetings	5,904	3,336	2,568 109	
20	Interest	109		109	_
21 22	Payments to affiliates Depreciation, depletion, and amortization	4,017	3,414	603	
23	Insurance .	6,287	3,144	3,143	
24	Other expenses Itemize expenses not covered	0,207		0,110	
2-7	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	Bank charges	3,042	2,282	760	
b	Postage	1,385	1,177	139	69
C	Printing	10,923	9,831	546	546
d	Registration fees and dues	1,300	349	951	
е	All other expenses Miscellaneous	661	88	394	179
25	Total functional expenses. Add lines 1 through 24e	763,652	737,481	21,843	4,328
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)	i l			

Part X Balance Sheet

U.S. National Committee for U.N. Women

		Check if Schedule O contains a response to	any qu	uestion in this Part X	· · · · · · · · · · · · · · · · · · ·		
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			48,678	1	66,079
	2	Savings and temporary cash investments		119,025	2	105,690	
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net			4		
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compens					
	١.	Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified personal (250/2/2012)					
		4958(f)(1)), persons described in section 4958(c)(3)(B), a					
w		sponsoring organizations of section 501(c)(9) voluntary e		es' beneficiary			
šet	l _	organizations (see instructions) Complete Part II of Sche	dule L	· -		6	
Assets	7	Notes and loans receivable, net		-		7	,-
	8	Inventories for sale or use		-		8	
	9	Prepaid expenses and deferred charges	1	, -	5,651	9	8,852
	10a	Land, buildings, and equipment cost or	1				
	١.	other basis Complete Part VI of Schedule D	10a	21,673			
	l b	Less accumulated depreciation	10b	16,005	9,685	10c	5,668
	11	Investments—publicly traded securities		-	85,834	11	98,446
	12	Investments—other securities See Part IV, line				12	
	13	Investments—program-related See Part IV, line	•		13	· · · · · · · · · · · · · · · · · · ·	
	14	Intangible assets		14			
	15 16	Other assets See Part IV, line 11	-1 1 1	,,, <u> </u>	000.070	15	204.725
	17	Total assets. Add lines 1 through 15 (must equ	ai iine .	34)	268,873	16	284,735
	18	Accounts payable and accrued expenses	12,716	17	3,230		
	19	Grants payable Deferred revenue	}	14 520	18	25.065	
	20	Tax-exempt bond liabilities .		<u> </u>	14,539	19 20	25,965
	21	· · · · · · · · · · · · · · · · · · ·	2o# I\/	of Sobodulo D		21	
S	22	Escrow or custodial account liability Complete I Loans and other payables to current and former				21	4,
Liabilities	22	trustees, key employees, highest compensated		· · · · · · · · · · · · · · · · · · ·			
Ē		disqualified persons Complete Part II of Sched		yees, and		22	
Ľ.	23	Secured mortgages and notes payable to unrela		erd narties		23	 -
	24	Unsecured notes and loans payable to unrelate		· ·		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	-				
		Part X of Schedule D .		, complete		25	
	26	Total liabilities. Add lines 17 through 25			27,255	26	29,195
		Organizations that follow SFAS 117 (ASC 958	8) che	ck here ► X and			
es		complete lines 27 through 29, and lines 33 ar	•	ck liefe P A and			
Ĕ	27	Unrestricted net assets			190,494	27	169,871
<u>3</u>	28	Temporarily restricted net assets .		}	51,124	28	85,669
Р	29	Permanently restricted net assets		}	51,124	29	05,009
Fund Balances	- "	•					
ō		Organizations that do not follow SFAS 117 (ASC958), complete lines 30 through 34.	check i	nere and			
ets	30	Capital stock or trust principal, or current funds		· ·		30	
SS	31	Paid-in or capital surplus, or land, building, or ea	guipme	ent fund		31	-
Net Assets	32	Retained earnings, endowment, accumulated in				32	
Z	33	Total net assets or fund balances			241,618		255,540
	34	Total liabilities and net assets/fund balances		F	268.873		284.735

Form	990 (2012) U.S. National Committee for U.N. Women	5	4-1244401	Pa	ge 12
Par	Reconciliation of Net Assets				
	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		77	1,495
2	Total expenses (must equal Part IX, column (A), line 25)	2		763	3,652
3	Revenue less expenses Subtract line 2 from line 1	3		7	7,843
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		24	1,618
5	Net unrealized gains (losses) on investments	5		- 6	6,079
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule 0)	9	<u> </u>		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		255	5,5 <u>40</u>
Pari	Financial Statements and Reporting				$\overline{}$
	Check if Schedule O contains a response to any question in this Part XII			•	<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	L
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	X Separate basis		i l		
b	Were the organization's financial statements audited by an independent accountant?		2b	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis			_	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			·	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in				<u> </u>
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		1		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
				990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

	me of the organization Employer identification number												
			e for U N Wome					41-1	1 \ C = = :		244401		
Par	_			arity Status (All org tion because it is (For						nstructio	ns		
1	Jigai			ches, or association of		_							
2	Ħ			n 170(b)(1)(A)(ii). (Atta			5555.5		- /(/(-/-				
3	Ħ			ospital service organiza		=	ection 170)(b)(1)(A)	aii).				
4	Ħ	•	•	ion operated in conjun						(1)(A)(iii).	Enter t	he	
•			me, city, and sta										
5		-		the benefit of a college Complete Part II)	e or univer	sity owner	d or opera	ted by a g	governme	ntal unit d	escribe	d	
6		A federal, sta	ate, or local gove	rnment or government	al unit des	scribed in	section 1	70(b)(1)(<i>A</i>	۸)(۷).				
7	X			receives a substantial		support f	rom a gov	ernmenta	al unit or fr	om the ge	eneral p	ublic	
8		A community	trust described	ın section 170(b)(1)(A	.)(vi). (Cor	nplete Pai	rt II)						
9		receipts from support from	activities related gross investmen	receives (1) more that d to its exempt function nt income and unrelate after June 30, 1975 S	ns—subje ed busines	ct to certai s taxable	in exception	ons, and (ess sectio	2) no mor n 511 tax)	e than 33	1/3% 0	f its	\$
10		An organizati	ion organized an	nd operated exclusively	to test fo	r public sa	ifety See	section 5	09(a)(4).				
11		purposes of	one or more pub	nd operated exclusively licly supported organiz	ations de	scribed in	section 50	09(a)(1) o	r section (509(a)(2)	See se	ction	
				t describes the type of									
	a Type I Type II C Type III—Functionally integrated Type III—Non-functionally integrated												
е	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)												
ı	f 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												
g			t 17, 2006, has t	he organization accept	ted any gi	ft or contri	bution froi	m any of t	he				
		(i) A pers	on who directly o	or indirectly controls, e	ither alone	e or togeth	er with pe	rsons des	scribed in	(11)		Yes	No
				erning body of the sup		ganızatıon'	?				11g(i)		
		• •	•	person described in (i) of a person described		u) abaya?					11g(ii)		
h				tion about the support							11g(ıii)		
(i)		of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) is the o	organization sted in your document?	the organ	ou notify lization in of your port?	organiza (i) organi	is the tion in col ized in the S?	(vii) Am	ount of mo support	onetary
					Yes	No	Yes	No	Yes	No			
(A)													
В)													
C)											_		_
D)													
E)													

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

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

Sec	ion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	137,932	134,308	192,955	350,203	766,890	1,582,288
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	427.022	124 200	102.055	350,203	766,890	1,582,288
4 5	Total. Add lines 1 through 3	137,932	134,308	192,955	350,203	700,090	1,562,266
Э	The portion of total contributions by each person (other than a governmental unit						
	or publicly supported organization)						
	included on line 1 that exceeds 2%						
	of the amount shown on line 11,						
	column (f)						693,776
6	Public support. Subtract line 5 from line 4	ļ					888,512
Sect	ion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	137,932	134,308	192,955	350,203	766,890	1,582,288
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar					ļ	
	sources .	3,280	1,462	2,914	2,544		10,200
9	Net income from unrelated business	:					
	activities, whether or not the business is						
	regularly carried on .					_	
10	Other income Do not include gain or	ļ					
	loss from the sale of capital assets						
44	(Explain in Part IV) Total support. Add lines 7 through 10		· · · · · · · · · · · · · · · · · · ·				1,592,488
11 12	Gross receipts from related activities, etc. (se	L netructions)				12	75,029
13	First five years. If the Form 990 is for the org		second third	fourth or fifth t	ا ax vear as a se		70,020
	organization, check this box and stop here	gamzanom s mo	i, 5000ma, ima,	round, or mare	ax your ao a oc	30.1011 00 1(0)(0)	▶□
Sect	ion C. Computation of Public Support	Percentage					
14	Public support percentage for 2012 (line 6, co		d by line 11 col	umn (fi)		14	55 79%
15	Public support percentage from 2011 Schedu			(-,,, -		15	72 57%
16a	33 1/3% support test—2012. If the organiza			ne 13, and line	14 is 33 1/3%		
	and stop here. The organization qualifies as						ightharpoons
b	33 1/3% support test-2011. If the organization	tion did not che	ck a box on line	13 or 16a, and	l line 15 is 33 1	/3% or more, ch	
	box and stop here. The organization qualifie	s as a publicly s	supported organ	nization	•		. ▶∐
17a	10%-facts-and-circumstances test—2012.	If the organizati	on did not ched	k a box on line	13, 16a, or 16t	o, and line 14	
	is 10% or more, and if the organization meets	s the "facts-and	-circumstances	" test, check thi	s box and stop	here. Explain i	n
	Part IV how the organization meets the "facts	s-and-circumsta	nces" test The	organization qu	ualifies as a pul	blicly supported	_
	organization .						▶□
b	10%-facts-and-circumstances test—2011.	•					
	15 is 10% or more, and if the organization me					-	ain in
	Part IV how the organization meets the "facts	s-and-circumsta	nces" test The	organization qu	ualifies as a pul	blicly	. \square
	supported organization	•	•	•		•	▶□
18	Private foundation. If the organization did no	ot check a box o	on line 13, 16a,	16b, 17a, or 17	'b, check this b	ox and see	
	instructions		•				▶

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► See separate instructions.

Name	of the organization			Employer Identification number
บรเ	National Committee for U.N. Women			54-1244401
Part		or Advised Funds or C	Other Similar Fund	ds or Accounts. Complete if
	the organization answered "Yes" t			•
		(a) Donor advised		(b) Funds and other accounts
1	Total number at end of year		··-	
2	Aggregate contributions to (during year)			
3	Aggregate contributions to (during year) Aggregate grants from (during year)			
4	Aggregate value at end of year			
	Did the organization inform all donors and do	nor advisors in writing that	the assets held in do	onor advised
5	_			Yes No
_	funds are the organization's property, subject			
6	Did the organization inform all grantees, don-			
	used only for charitable purposes and not for		donor advisor, of for	
	purpose conferring impermissible private ber			
Part	Conservation Easements. Com	olete if the organization	answered "Yes" to	Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held	by the organization (check	all that apply)	
-	Preservation of land for public use (e.g., reci			an historically important land area
	=	[a certified historic structure
	Protection of natural habitat	Į.	rieservation of	a certifica filotofic ottactale
	Preservation of open space			
2	Complete lines 2a through 2d if the organization	tion held a qualified conser	vation contribution in	the form of a conservation
	easement on the last day of the tax year			
				Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easi			2b
С	Number of conservation easements on a cer			2c
d	Number of conservation easements included		06, and not on a	
	historic structure listed in the National Regist			
3	Number of conservation easements modified	l, transferred, released, ext	inguished, or termina	ated by the organization
	during the tax year			
4	Number of states where property subject to o			
5	Does the organization have a written policy r		toring, inspection, ha	F 1 5 1
	violations, and enforcement of the conservat			Yes No
6	Staff and volunteer hours devoted to monitor	ing, inspecting, and enforce	ing conservation ease	ements during the year
	•			
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing c	onservation easemer	nts during the year
	▶ \$			
8	Does each conservation easement reported	on line 2(d) above satisfy the	he requirements of se	ection
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?			Yes No
9	In Part XIII, describe how the organization re			
	balance sheet, and include, if applicable, the			
	the organization's accounting for conservation	n easements		
Par		ns of Art, Historical Treas	sures, or Other Simi	lar Assets.
	Complete if the organization answered			
1a	If the organization elected, as permitted under			nue statement and balance sheet
·a	works of art, historical treasures, or other sin	nilar assets held for nublic a	exhibition education	or research in furtherance
	of public service, provide, in Part XIII, the tex			
h	If the organization elected, as permitted under			
b	works of art, historical treasures, or other sin			
			exhibition, Education,	or research in former and
	of public service, provide the following amou	_		▶ ¢
	(i) Revenues included in Form 990, Part VIII	, inte i	•	► ¢
_	(ii) Assets included in Form 990, Part X			for financial gain, provide the
2	If the organization received or held works of			
	following amounts required to be reported ur		relating to these item	S • •
а	Revenues included in Form 990, Part VIII, III	ne 1	•	5
b	Assets included in Form 990, Part X		•	. • • • • • • • • • • • • • • • • • • •

Part								ts (continued)	
3	Using the organization's acquisition, access		records, o	check any	of the follow	ing that	are a significant		
	use of its collection items (check all that app	oly)							
а	Public exhibition		d [Loan	or exchange	program	ıs		
b	Scholarly research		е 🗌	Other					
С	Preservation for future generations								
4	Provide a description of the organization's c Part XIII	ollections and	explain h	ow they fu	urther the org	anızatıoı	n's exempt purpo	se in	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than the							Yes I	No
Part	IV Escrow and Custodial Arrange IV, line 9, or reported an amount			_	nization ans	wered '	"Yes" to Form 9	990, Part	
1a	Is the organization an agent, trustee, custod				ributions or of	ther ass	ets not		.
L	included on Form 990, Part X?	and samplets	a tha fallau	waa tabla				∐ Yes ∐ I	No
b	If "Yes," explain the arrangement in Part XIII	and complete	e the lollov	virig table	!		Δ	mount	
С	Beginning balance					1c		anount	
d	Additions during the year				•	1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on F	Form 990. Par	t X, line 21	17				Yes X	No
b	If "Yes," explain the arrangement in Part XIII				as been provi	ded in P	Part XIII		
Part									
rait		Current year	(b) Pro		(c) Two years		(d) Three years back	(e) Four years ba	ack
1a	Beginning of year balance	Curront you.	(3)	,,	(0) 1110) 1110		(-,	1	
b	Contributions								
С	Net investment earnings, gains,								
	and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs		.						
f	Administrative expenses		-						
g	End of year balance		<u> </u>						
2	Provide the estimated percentage of the cur	rent year end		ine 1g, co	olumn (a)) nel	a as			
a	Board designated or quasi-endowment	0/	· <u>%</u>						
b	Temporarily restricted endowment	. <u>%</u> %							
С	The percentages in lines 2a, 2b, and 2c sho								
3a	Are there endowment funds not in the posse	•		n that are	held and adı	minister	ed for the		
-	organization by							Yes I	No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	is listed as red	quired on S	Schedule	R? .			3b	
4	Describe in Part XIII the intended uses of th	e organizatior	's endown	nent fund	s				
Part	VI Land, Buildings, and Equipme	nt. See Forn	n 990, Pa	art X, line	∋ 10.	-			
	Description of property	(a) Cost or of			ost or other is (other)		Accumulated epreciation	(d) Book value	
1a	Land								
b	Buildings								
С	Leasehold improvements					_			
d	Equipment	<u> </u>			1,593		1,593		-000
<u>e</u>	Other		NO Dod V		20,080	<u> </u>	14,412		,668
<u>rotal</u>	. Add lines 1a through 1e (Column (d) must e	equal rorm 95	ιυ, raπ X,	column (i	D), IIII U 10(C)			<u> </u>	,668

(a) Description of scientify or category (colored) and color of medicity sear married value (b) Book value (c) Closely-held equity interests (d) Closely-held equity interests (d) Closely-held equity interests (d) Closely-held equity interests (e) Closely-held equity interests (f) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Description of investment hybrid (g) Interests (g) Description of investment hybrid (g) Interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Closely-held equity interests (g) Description of investment hybrid equity interests (g) Closely Clo	Part VII	Investments—Other Secu	rities. See Form 990, Part X	, line 12.	
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(B) (C)		•			
(B) (C) (D)					
(G) (B) (C)					
(E) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F					
(F). (G) (H) ((D)				
(F)	(E)				
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(2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability			(b) Book value	4	
(3) (4) (5) (6) (7) (8) (9) (10) (11) Total (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability		al income taxes		4	
(4) (5) (6) (7) (8) (9) (10) (11) Total (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability				1	
(5) (6) (7) (8) (9) (10) (11) Total (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability				1	
(6) (7) (8) (9) (10) (11) Total (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability				1	
(7) (8) (9) (10) (11) Total (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability				1	
(8) (9) (10) (11) Total (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability					
(10) (11) Total (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability				4	
(11) Total (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability				4	
Total (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability				4	
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability		(h)		-	
				Inancial statements that reports the org	ianization's liability
for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII					

Par	XI Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements			1	777,574
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				_
а	Net unrealized gains on investments	2a	6,079		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d .			2e	6,079
3	Subtract line 2e from line 1			3	771,495
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1	†		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	771,495
Раг	- · · · · · · · · · · · · · · · · · · ·	ents V	Vith Expenses p	er Retu	
1	Total expenses and losses per audited financial statements	01110 1	Titil Expended p	1	763,652
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				100,002
a	Donated services and use of facilities	2a	ļ		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d .			2e	
3	Subtract line 2e from line 1			3	763,652
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1	1	 	700,002
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b .	[40	l	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	763,652
					700,002
_	XIII Supplemental Information	4 111 1	4		Ob
Part ⁻	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Pai /, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Als				J and 20,
addit	onal information				

Schedule D (Form 990) 2012 U.S. National Committee for U.N. Women

54-1244401

Page 4

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Open to Public OMB No 1545-0047

▶ Attach to Form 990.

Employer identification number 54-1244401 ž

X Yes

Women	
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Committe	
National Committe	

General Information on Grants and Assistance

PartI

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?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990 Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed Part II

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) United Nations Women 304 E 45th St	58-2368165	501(c)(3)	630,877				General support
(2)							
(3)							
(4)							!
(5)					:		
(9)							
(1)							
(8)							
(6)							
(10)							
(11)							
(12)							
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	n 501(c)(3) and go	vernment organization the line 1 table	ations listed in the line 1	table		A A	1
For Paperwork Reduction Act Notice, see the Instructions for Form 990	ce, see the Instruc	tions for Form 990				S	Schedule I (Form 990) (2012)

For Paperwork Reduction Act Notice, see the Instructions for Form 990. (HTA)

Page 2

Schedule I (Form 990) (2012)

Schedule I (Form 990) (2012)

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.

Part III can be duplicated it additional space is needed	al space is needec				
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-					
2					
4					
ક					
9					
7					
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information	ete this part to pro	vide the information	required in Part I, I	ine 2, Part III, column (t), and any other additional
Part I Line 2 Donations to United Nations Women are awarded by the Board of Directors based on the financial condition of the	awarded by the Boar	rd of Directors based c	on the financial condition	on of the	
organization and the terms of a Recognition Agreement with the agency	nt with the agency				
			, 1 1 1 1 1 1 1 1 0 0 0 0 0 0 0 0 0 0 0 0		
	, , , , , , , , , , , , , , , , , , ,				
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
					Schedule I (Form 990) (2012)

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Attach to Form 990 or 990-EZ.

Inspection

Employer identification number

Name of the organization	Employer identification number
U.S. National Committee for U.N. Women	54-1244401
Form 000 Deat // Contrar D.Line 44 The torrestring in reviewed by the Board Broadent	
Form 990 Part VI Section B Line 11 The tax return is reviewed by the Board President,	•
Treasurer, and Finance Chair, then presented to the entire Board prior to filing	
Form 990 Part VI Section B Line 12 Annual disclosure is required for all potential conflicts	
of interest, and an attorney is consulted if any possible conflicts are encountered. Board	
members are expected to abstain from voting and discussion on any matters that may be a	
potential conflict	
Form 990 Part VI Section B Line 15 Compensation is determined by the Board based on	
performance and the financial condition of the organization	·
Form 990 Part VI Section C Line 18 Governing documents, conflict of interest policy and	
financial statements are available upon written request	••••
•••••••••••••••••••••••••••••••	***************************************
	••••

Part VI, Line 17 (990) - States with Which a Copy of this Form 990 is Required to be Filed

	Armed Forces the Americas	Γ	Louisiana		Palau
	Armed Forces Europe	Х	Massachusetts	Х	Rhode Island
X	Alaska	Х	Maryland	Х	South Carolina
X	Alabama	X	Maine		South Dakota
	Armed Forces Pacific		Marshall Islands	X	Tennessee
	Arkansas		Michigan		Texas
	American Samoa	Х	Minnesota		Utah
	Arizona		Missouri	X	Virginia
X	California		Commonwealth of the Northern Mariana Islands		U S Virgin Islands
	Colorado	Х	Mississippi		Vermont
X	Connecticut		Montana	X	Washington
X	District of Columbia	Х	North Carolina	X	Wisconsın
	Delaware	X	North Dakota	X	West Virginia
	Florida		Nebraska		Wyoming
	Federated States of Micronesia	Х	New Hampshire		
X	Georgia	Х	New Jersey		
	Guam		New Mexico		
<u> </u>	Hawaii		Nevada		
L	Iowa	X	New York		
	Idaho		Ohio		
X	Illinois		Oklahoma		
	Indiana		Oregon		
X	Kansas	X	Pennsylvania		
L	Kentucky		Puerto Rico		