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DLN: 93493107000204

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public

A Fo	r the 2	2012 cale	endar year, or tax year beginning	07-01-2012 , 2012, and ending 06	-30-2013		_	•
B Che	eck if ap	pplicable	C Name of organization AMERICAN ASSOCIATION OF UNIVER	SITY WOMEN INC		D Empl	oyer iden	tification number
☐ Add	ress ch	ange	Doing Business As			52-6	037388	
∏ Naı	me char	nge	Doing business As					
Init	ıal retur	m		all is not delivered to street address) Room/	suite	E Teleph	none numb	er
	mınated		1111 16TH STREET NW			(202)785-7	700
_	ended r		City or town, state or country, and Z WASHINGTON, DC 20036	IP + 4		(,	
M App	lication	pending				G Gross	receipts \$	32,234,415
			F Name and address of prin- LINDA D HALLMAN CAE	cıpal officer	H(a)	Is this a grou	p return i	
			1111 16TH STREET NW			affiliates?		┌ Yes No
			WASHINGTON, DC 20036		Н(Ь)			led?
——— т Та	x-exem	pt status	▼ 501(c)(3)	nsert no)	_	If "No," attac	halıst (see instructions)
		·	/W A A U W O R G		H(c)	Group exemp	tion num	ber ►
				_			<u> </u>	
			Corporation Trust Association	Other ►	L Ye	ar of formation 1	958 M 9	State of legal domicile DC
Ра	rt I		mary					
Governance	Ι 4	AAUWA		N AND GIRLS THROUGH ADVOCA MEN AND GIRLS TO REACH THEI				OPY AND
over	2 (Check th	nis box 析 if the organization dis	continued its operations or disposed	d of more	than 25% of it	s net ass	sets
భ శ	3 1	Number	of voting members of the governi	ng body (Part VI, line 1a)			3	15
Activities &	l			f the governing body (Part VI, line 1			4	15
蓋	l			alendar year 2012 (Part V, line 2a)			5	151
æ	6 1	Γotal nur	mber of volunteers (estimate if ne	ecessary)			6	345
				art VIII, column (C), line 12			7a	24,053
	b !	Net unre	lated business taxable income fr	om Form 990-T, line 34			7b	20,496
		C t	h	- 11	-	Prior Year	776	Current Year
≗	8			ne 1 h)	·	5,884	,776	10,639,038
Ravenue	10			(A), lines 3, 4, and 7d)		2,529		2,348,552
æ	11		· ·	lines 5, 6d, 8c, 9c, 10c, and 11e)			,217	230,440
	12			(must equal Part VIII, column (A), lı	0.019	257	13,885,466	
	13			IX, column (A), lines 1–3)		9,018		3,815,768
	14			X, column (A), line 4)		7,720	0	0
	15		·	e benefits (Part IX, column (A), lines				
Expenses		5-10)				6,340		7,178,207
<u>₹</u>	16a		sional fundraising fees (Part IX,		·	309	,531	343,830
Д	b 17		ndraising expenses (Part IX, column (D)	, line 25) ► 1,366,000 lines 11a-11d, 11f-24e)		5,369	916	6,866,070
	18			it equal Part IX, column (A), line 25)		16,440		18,203,875
	19		•	L8 from line 12		-7,422		-4,318,409
<u> 동</u> 영			·		_	ginning of Curre		End of Year
Not Assets or Fund Balances	20	Totals	assets (Part X, line 16)			Year 121,517	471	127,532,461
AB.	21		rabilities (Part X, line 26)		` <u>.</u>	7,564		7,563,573
35	22			ine 21 from line 20		113,952		119,968,888
Pai	t II		ature Block			,	-	, -,
my kı	nowled	ige and l		mined this return, including accompa plete Declaration of preparer (other				
		****				2014-04-17		
Sign		Signature of officer Da						
Here	=		A HALLMAN CAE EXECUTIVE DIRECTOR or print name and title					
		17	rint/Type preparer's name	Preparer's signature	Date	Check If	PTIN	
			WAN SHIN	1 reparer s signature	Date	CHECK II	P010604	

WASHINGTON, DC 20036

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

Firm's address 1901 L STREET NW 250

Paid

Preparer

Use Only

Firm's EIN 🕨 52-2057543

Phone no (202) 822-0717

✓ Yes No

Par	t III		Program Service O contains a respons	_		rt III		
	WADV						, PHILANTHROPY	AND RESEARCH AAUW
	OVVENS	S ALL WOMEN AND	GIRES TO REACTI	TIETK HIGH	ILST FOTENTIA	\ L		
2	the pr	or Form 990 or 990	rtake any significant D-EZ? ew services on Sche				re not listed on	
3	Did th	ne organization ceas	e conducting, or mak	e sıgnıfıcan			ny program • • • • •	
	If "Ye	s," describe these c	hanges on Schedule	0				
4	exper	nses Section 501(c	i's program service a)(3) and 501(c)(4) or evenue, if any, for eac	ganızatıons	are required to i			
4a	(Code	e) (Expenses \$	3,487,786	ıncludıng grants of	\$	200) (Revenue \$)
	GENE NATIO	RAL PUBLIC, IN ORDER 1 ONAL AND LOCAL LEVELS	TO ADVANCE EQUITY FOR	WOMEN AND	GIRLS THROUGH ED SSENTIAL TO ENGAG	UCATION, PHILANT SE WITH AAUW'S 1	THROPY AND RESEARCH 70,000 MEMBERS, SUPP	WITH MEMBERS AND THE IMPLEMENTED AT THE ORTERS AND ACTIVISTS, MORE
	(Code	<u> </u>) (Expenses \$	2,604,582	ıncludıng grants of	ф Q-	73,946) (Revenue \$	1
4b	RESE PROT POLIC THEIF BRAN NON- YEAR FELLC	ARCH AND PROJECTS - F TECT THEM FROM DISCRI CIES THAT BENEFIT THEM R LIVES AND POTENTIAL CHES, AND AAUW STATE DEGREE RESEARCH PRO TO WOMEN WHO COMPI	RESEARCH AND PROJECT! IMINATION AND ABUSE, P 4 AND THEIR FAMILIES AN R & P GRANTS INCLUDES E ORGANIZATIONS, AS WE	S (R & P) GRA ROMOTE EDUC ID BREAK THR G COMMUNITY LL AS LOCAL C DUCATION AND TIONAL FELLO	NTS FUND PROGRAM CATIONAL AND WORI OUGH BARRIERS TH ACTION ONE AND TO OMMUNITY-BASED M DEQUALITY FOR WO WSHIP THESE GRAM	. MS AND RESEARCH (PLACE OPPORTUN AT PREVENT ,THEI NO-YEAR GRANTS IONPROFIT ORGAN MEN AND GIRLS I ITS SUPPORT COM	TO ADVANCE EQUITY F ITTY AND ACHIEVEMENT, R FAMILIES AND COMMI THAT PROVIDE FUNDS I IZATIONS, TO SUPPORT NTERNATIONAL PROJECT MUNITY-BASED PROJEC	, ADVOCATE FOR PUBLIC JNITIES FROM OPTIMIZING FO INDIVIDUALS, AAUW INNOVATIVE PROGRAMS OR F GRANTS ARE AWARDED EACH TS THAT BUILD ON THE
	(Code	<u> </u>) (Expenses \$	2,412,220	ıncludıng grants of	\$ 1.70	92,847) (Revenue \$	106,310)
40	AMER POST WOM	RICAN FELLOWSHIPS - AM DOCTORAL OR DISSERTA	MERICAN FELLOWSHIPS AF	RE AWARDED T ANTS TO PREP	TO WOMEN WHO AR PARE RESEARCH FOR	E CITIZENS OR PEI R PUBLICATION SE	RMANENT RESIDENTS OF LECTED PROFESSIONS F	F THE UNITED STATES FOR FELLOWSHIPS ARE AWARDED TO
	(Code) (Eunange &	1,371,225	ıncludıng grants of	.	50,434) (Revenue \$	214,917)
	TREK	R PROGRAMS - OTHER F AND TECH SAVVY CAMP PUS AND LEADERSHIP PR	S, MEMBER LEADERSHIP	T HER, \$TART	\$MART, CAMPUS AG IIP TRAINING AAUW	CTION PROJECTS, 'ENGAGES COLLEG	STUDENT ADVISORY CO SE STUDENTS, MIDDLE A	UNCIL, STEM EDUCATION, TECH ND HIGH SCHOOL GIRLS IN THE RAMS FOR MEMBERS AND
	(Code	<u> </u>) (Expenses \$	1,358,004	ıncludıng grants of	d 1)
	ADVO ADVA FORW AND I	CACY - ADVOCACY INCL NCE OUR WORK TO EMP VARD POLICIES THAT BR MEMBER WORK ACROSS EN AND GIRLS AT THE L	UDES AAUW'S POLICY INT POWER WOMEN AND GIRL EAK THROUGH EDUCATIO THE COUNTRY TO VOICE	TIATIVES TO C S WITH THE N NAL AND ECON AAUW PUBLIC AD AND COLLA	ONNECT AND RALLY MEMBER-ENDORSED NOMIC BARRIERS FO POLICY POSITIONS ABORATE WITH COAL	ADVOCATES AT TH PUBLIC POLICY PR PR WOMEN AAUW AND RAISE AWARE	HE LOCAL, STATE, NATIO ROGRAM AS OUR GUIDE, PUBLIC POLICY AND GO ENESS AND ACTION ON I	NAL, AND GLOBAL LEVELS TO AAUW USES EFFORTS TO PUSH VERNMENT RELATIONS STAFF ISSUES OF IMPORTANCE TO IE AWARENESS AND ACTIVISM
	CONV MAJO VARIE ADVO ACRO	INGS AND CONVENTIONS /ENTIONS, AND THE NAT R NATIONAL SPEAKERS, ETY OF ACTIVITIES TO AL CACY, PUBLIC EDUCATION	LEARNS ABOUT ISSUES TI DVANCE WOMEN AND GIR DN, LEADERSHIP TRAINING	COLLEGE WOMI HAT ARE IMPO LS AND PREPA G, EFFECTIVE	EN STUDENT LEADER RTANT FOR WOMEN RE LOCAL LEADERS PHILANTHROPY, ETC	LATED TO THE AAL RS (NCCWSL) THE AND GIRLS AND T FOR THEIR COMPL NCCWSL ANNUA	BIENNIAL CONVENTION HEIR FAMILIES AND REC EX ROLES IN A WIDE DI LLY UNITES NEARLY 100	561,126) DN, ANNUAL STATE BRINGS MEMBERS TO HEAR CEIVE TRAINING ON A WIDE VERSITY OF AREAS, INCLUDING O COLLEGE WOMEN FROM O IMPROVE THEIR CAMPUSES
			\	4 400 4	maked		24.260.175	
	RESE	RNATIONAL FELLOWSHIPS ARCH FOR PUBLICATION		IEN WHO ARE	NOT CITIZENS OR P	TDOCTORAL OR DI ERMANENT RESIDI	ENTS OF THE UNITED ST	FOR GRANTS TO PREPARE TATES PREFERENCE IS GIVEN D ANNUALLY SINCE 1917
	(Code	<u> </u>) (Expenses \$	669,601	ıncludıng grants of	<u> </u>) (Revenue \$	1
	ELEAN OUR	NOR ROOSEVELT FUND - CUTTING-EDGE WORK IN	AAUW CONDUCTS GROUI	NDBREAKING F L DISCUSSION	RESEARCH ON ISSUE ON A WIDE RANGE	S RELATED TO GE OF TOPICS THAT I	NDER EQUITY IN EDUCA	TION AND THE WORKPLACE RREPRESENTATION OF WOMEN
	10 '		\	200 407	maludana · · · ·	ф	00.714.) (0	
	HARA	L ADVOCACY FUND (LAF) SSMENT, ABUSE AND AS) (Expenses \$) - LAF COMBATS WORKPI SAULT LAF SUPPORTS WO AND PROVIDES TRAVEL O	ORKPLACE-BAS	ED LEGAL CASES W	GENDER DISCRI) TO PREVENT SEXUAL TICULARLY THOSE IN ACADEMIC
4d		-	(Describe in Schedul 6,208,361 includi		f\$ 1	.148,775) (Re	venue \$	776,043)
<u>4e</u>	Tota	l nrogram service ex	rnoncoc la 1	4 712 949				

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see 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^{\bullet}	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 1	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 2	8		No
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		No
10	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 $\sqrt{2}$	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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	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	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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 and XII	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 and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	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	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 United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts 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 (see instructions)	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 hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	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 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, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	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 lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, 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		No
27	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		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 direct or indirect owner? If "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	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		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, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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	35b		
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 11b and 19?	38	Yes	

	Charles Cabadula O combana a managana ba anu musabun in thua Dant V			г
	Check if Schedule O contains a response to any question in this Part V	•	Yes	. l No
1	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 16			,40
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
3	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			
,	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	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		103	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
	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			
	We a the community of a marky to a marky had been about the transport of any time of the term of the t	F-		NI.
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		N o
		5b		IN
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
•	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 as charitable contributions?			
,	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).	OD		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7 c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	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 cars, boats, airplanes, or other vehicles, did the organization file a 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.	-		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
)	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		
	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		
	Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states			
	ın which the organization is licensed to issue qualified health plans			
		14-	 	N.
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14h		No

Form 990 (2012) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax 1a 15 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 **b** Enter the number of voting members included in line 1a, above, who are 15 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Yes 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 Νo Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Νo Yes 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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following **b** 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 Νo Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Yes **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b Yes affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 11a Yes **b** Describe in Schedule O the process, if any, used by the organization to review this 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 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12c** Yes 13 Yes 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 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 organization's exempt status with respect to such arrangements? Section C. Disclosure List the States with which a copy of this Form 990 is required to be filed►AL , AK , AR , CA , CO , CT , FL , GA , IL , KS , KY , ME , MD , MA, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR,

- PA, RI, SC, TN, UT, VA, WA, WV, WI, HI, DC, LA, MI
- 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
- 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 during the tax year
- 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 WASHINGTON, DC (202) 785-7700

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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, or 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) A verage hours per week (list any hours for related	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-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	MISC)	organization and related organizations
(1) CAROLYN GARFEIN	21 00	, , , , , , , , , , , , , , , , , , ,								
PRESIDENT	1 00	X						0	0	0
(2) PATRICIA HO	11 00	Ţ,,						_	_	_
VICE PRESIDENT	1 00	X						0	0	0
(3) CONNIE HILDEBRAND	11 00	†								
SECRETARY	1 00	X						0	0	0
(4) MILDRED HOFFLER-FOUSHEE	16 00									
FINANCE VP	1 00	X						0	0	0
(5) KATHY ANTHON	6 00									
		х						0	0	0
DIRECTOR (6) AMY BLACKWELL	1 00									
		x						0	0	0
DIRECTOR (7) KATHRYN BRAEMAN	1 00									
	6 00	х						0	0	0
DIRECTOR (8) SANDRA CAMILLO	1 00	-								
(6) SANDRA CAMILLO	6 00	x						0	0	0
DIRECTOR	1 00				_					
(9) KATHLEEN CHA	11 00	l x						0	0	0
DIRECTOR	1 00									
(10) CHARMEN GOEHRING-FOX	6 00	l x						0	0	0
DIRECTOR	1 00							ŭ	Ŭ	
(11) DOT MCLANE	6 00	x						0	0	0
DIRECTOR	1 00	L^			L			<u> </u>		
(12) BETSY MCDOWELL	6 00	,								
DIRECTOR	1 00	X						0	0	0
(13) PEGGY RYAN WILLIAMS	6 00									
DIRECTOR	1 00	X						0	0	0
(14) JULIA T BROWN	6 00									
DIRECTOR	1 00	X						0	0	0
(15) DAVID KIRKWOOD	11 00									
DIRECTOR	1 00	Х						0	0	0
(16) LINDA HALLMAN	54 00									
				Х				237,466	4,398	60,381
EXECUTIVE DIRECTOR (17) JILL PIERCE	1 00 54 00				\vdash					
				х				210,898	3,906	31,413
C00	1 00				1	1	l	ı		

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	checl c, unle n office rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F Estim amount comper from	ated of other isation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organiz and re organiz	lated
(18)	FONG-CHING CHENG	45 00					x		134,143	(17,016
	OF INFORM TECH LISA MAATZ	0 00 44 00										
` ,	F PUBLIC POLICY						x		173,999	3,955	į	20,919
	CHRISTINE JONES	1 00 45 00										
VP OF	- MEMBERSHIP	0 00					X		119,132	C		14,796
(21)	MARIAANNA A PIANSAY	44 00					х		116,521	2,648		15,374
	CTOR OF FINANCE	1 00					ļ	Ш	110,021			
` '	GLORIA BLACKWELL DF FELLOW & GRANTS	45 00 0 00					х		110,050	C		12,211
								\vdash				
1b	Sub-Total						<u> </u> ►				<u> </u>	
C	Total from continuation sheets to P	art VII. Section A		•			⊢					
d							►		1,102,209	14,907		172,110
2	Total number of individuals (includin \$100,000 of reportable compensation				ed al	bove	e) who	rece	eived more than			
3	Did the organization list any former on line 1a? If "Yes," complete Schedui			e, ke	y em	nplo	yee, o	r hıg	hest compensate	d employee	Yes	No
4	For any individual listed on line 1a, is organization and related organization individual											No
5	Did any person listed on line 1a rece services rendered to the organization								_	idividual for		No
Se	ection B. Independent Contra	ctors										
1	Complete this table for your five high compensation from the organization	nest compensated									s tax year	
		(A) nd business address								(B) on of services	(C Comper)
	MAN CUBINE ADAMS & HUSSEY 1600 WILSON								FUNDRAISING C			339,359
	NO COMPANY CHARTERED 6905 ROCKLEDGE I DUCTION MANAGEMENT GROUP 7160 COLUMBI					1046			PRINTERS FOR N	INTING SERVICES MEMBERSHIP		225,055
	Total number of independent contractors \$100,000 of compensation from the o		not lim	ıted t	o th	iose	listed	dabo	ove) who received	more than		

Part \	ДЩ	Statement o						r age s
		Check If Sched	ule O contains a respor	nse to any question T		· · · ·		· · · · · · · · · · · · · · · · · · ·
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
v	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	es 1b	2,899,926				
9 0 0	c	Fundraising eve	ents 1c					
f§. FA	d		zations 1d					
niga Gi	e	Government grants						
ms, Sin								
uği e iği	f	sımılar amounts no	ons, gifts, grants, and 1f ot included above	7,739,112				
를	g	Noncash contribute 1a-1f \$	ons included in lines	27,779				
ng u	h	Total. Add lines	s 1a-1f		10,639,038			
				Business Code				
Шe	2a	CONFERENCE REV	'ENUE	900099	561,126	561,126		
9. 26.	Ь	APPLICATION FEES	<u> </u>	900099	106,310	106,310		
Program Serwde Revenue	С				,	,		
ž	d	•						
Ø E	e							
⊈a.	f	All other progra	am service revenue					
š	g	Total. Add lines	s 2a-2f		667,436			
	3		ome (including dividen					
		and other simil	ar amounts)	🟲 📗	2,249,838			2,249,838
	4		stment of tax-exempt bond	proceeds	13,883			13,88
	5	Royalties	(ı) Real	(II) Personal	15,665			13,555
	6a	Gross rents	541,694	(ii) i ciscilai				
	Ь	Less rental expenses	564,107					
	c	Rental income	-22,413					
	d	or (loss) Net rental inco	me or (loss)		-22,413			-22,413
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	17,883,556					
	ь	Less cost or other basis and	17,784,842					
		sales expenses						
	d	Gain or (loss)	98,714	<u> </u>	98,714			98,714
	8a			· · · · •				,
Other Revenue		events (not inc \$	luding s reported on line 1c)					
ā	.		a					
돌	c b		penses b (loss) from fundraising	events .				
_			rom gaming activities	evenes : : p				
			ne 19					
	ь	Loos direct ov	a					
	°		penses b (loss) from gaming acti	vities				
	10a	Gross sales of returns and allo	inventory, less					
		1	a .					
	b c	_	oods sold b (loss) from sales of inv	entory				
	٣	Miscellaneous		Business Code				
	11a	OTHER INCOM		900099	214,917	214,917		
	ь	ADVERTISING	-	541800	24,053		24,053	
	С							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d	🕨	238,970			
	12	Total revenue.	See Instructions .	🛌	13,885,466	882,353	24,053	2,340,022
	J				13,003,400	002,333	24,033	2,340,02

	Statement of Functional Function				Page 10
	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ions must comp	lete column (A)	
	Check if Schedule O contains a response to any question in this Pa				
Do no	ot include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
7b, 8l	o, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the United States $$ See Part IV, line 21 $$	283,506	283,506		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	3,485,000	3,485,000		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	47,262	47,262		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	553,855	456,944	61,843	35,068
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	5,376,012	4,351,994	709,506	314,512
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	394,256	327,847	44,048	22,361
9	Other employee benefits	423,572	325,704	72,643	25,225
10	Payroll taxes	430,512	356,570	48,473	25,469
11 a	Fees for services (non-employees) Management				
a b	Legal	413,282	152,043	213,321	47,918
c	Accounting	56,647	132,043	56,647	47,910
d	Lobbying	30,047		30,047	
e	Professional fundraising services See Part IV, line 17	343,830			343,830
f	Investment management fees	88,732		88,732	343,030
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on		270.422		F7.716
12	Schedule O)	779,166	379,423	+	57,716
12	Advertising and promotion	71,921	57,642	499	13,780
13 14	Office expenses	2,081,558	1,452,224 478,331	151,766 55,525	477,568 33,263
15	Royalties	367,119	478,331	33,323	33,203
16	·	120 697	105 707	10.055	2.045
17	Occupancy	128,687 482,778	105,787 332,978	19,955 92,991	2,945 56,809
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	402,770	332,976	92,991	30,809
19	Conferences, conventions, and meetings	813,169	717,059	42,159	53,951
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	334,127	271,024	43,516	19,587
23	Insurance	32,337	26,458	4,248	1,631
24	Other expenses Itemize expenses not covered 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	UNRELATED BUSINESS INCO	3,074		3,074	
b	PROPERTY MANAGEMENT SER	232,780	191,004	28,809	12,967
c	CONTRIBUTIONS	164,235	157,159	244	6,832
d	BLDG REPAIR & MAINT	159,337	129,253	21,126	8,958
е	All other expenses	457,121	627,737	-196,226	25,610
25	Total functional expenses. Add lines 1 through 24e	18,203,875	14,712,949	1,904,926	1,586,000
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 ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Pai	rt X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	·
	2	Savings and temporary cash investments	1,738,676	2	1,773,652
	3	Pledges and grants receivable, net	51,459	3	159,086
	4	Accounts receivable, net	151,559	4	215,765
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		_	
ts	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5	
Š	_			6	
Assets	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	222 022	8	457.077
	9	Prepaid expenses and deferred charges	232,933	9	457,377
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 17,300,375			
	Ь	Less accumulated depreciation 10b 7,234,066		10c	10,066,309
	11	Investments—publicly traded securities	101,067,627	11	103,035,727
	12	Investments—other securities See Part IV, line 11	12,081,786	12	11,807,898
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	21,603	15	16,647
	16	Total assets. Add lines 1 through 15 (must equal line 34)	121,517,471	16	127,532,461
	17	Accounts payable and accrued expenses	1,015,804	17	1,796,611
	18	Grants payable	4,398,439	18	3,813,141
	19	Deferred revenue	1,114,349	19	1,132,646
	20	Tax-exempt bond liabilities		20	
8	21	Escrow or custodial account liability Complete Part IV of Schedule D	N.	21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ge		persons Complete Part II of Schedule L		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			
		D	1,036,185	25	821,175
	26	Total liabilities. Add lines 17 through 25	7,564,777	26	7,563,573
S do		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
GD.	27	Unrestricted net assets	5,497,264	27	1,872,914
_ B3	28	Temporarily restricted net assets	28,917,489	28	37,543,273
귤	29	Permanently restricted net assets	79,537,941	29	80,552,701
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
9	30	Capital stock or trust principal, or current funds		30	
Ą	31	Paid-in or capital surplus, or land, building or equipment fund		31	_
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net #	33	Total net assets or fund balances	113,952,694	33	119,968,888
ž	34	Total liabilities and net assets/fund balances	121,517,471	34	127,532,461
	1 -	. State in a state of the state	121,517,771	57	127,002,401

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		13,8	385,466		
2	Total expenses (must equal Part IX, column (A), line 25)	2 18,203,					
3	Revenue less expenses Subtract line 2 from line 1	3			318,409		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			952,694		
5	Net unrealized gains (losses) on investments	5			334,603		
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 O)	9			0		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		119,9	968,888		
Par	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII				. 🔽		
				Yes	No		
1	Accounting method used to prepare the Form 990 Cash 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		Νo		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on					
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both	rate					
	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 audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	ı					
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?	9	3a		No		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b				

efile GRAPHIC print - DO NOT PROCESS

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC

As Filed Data -

DLN: 93493107000204

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Inspection

									52-6037		
Par				blic Charity Sta						ınstruction	s.
The o	rganız			e foundation becaus							
1	<u> </u>			on of churches, or a				section 170	(b)(1)(A)(i)	-	
2	<u></u>			in section 170(b)(1			•				
3	<u> </u>			perative hospital se							
4				n organization operat	ted ın conjun	ction with a	a hospital de	scribed in s	ection 170(b)(1)(A)(iii).	Enter the
5	Г			ty, and state erated for the benefi	t of a college	or univers	ity owned or	operated by	/ a governme	ntal unit des	cribed in
•	ļ			A)(iv). (Complete P		. Or univers	ity owned or	operated by	, a governine	iicai aiiic acs	cribed iii
6	Г				•	tal unit des	cribed in sec	tion 170(h)	(1)(A)(v)		
 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 						from the ae	neral nublic				
8	,	describ	oed in sectio	n 170(b)(1)(A)(vi). described in section	(Complete F	art II)		-	nemear anne or	nom the ge	neral public
9	Г		-	at normally receives			-	-	ibutions, mei	mbership fee	es, and gross
				ities related to its ex							
		ıts sup	port from gr	oss investment inco	me and unre	lated busin	ess taxable i	ncome (les	s section 51	1 tax) from b	ousinesses
		acquire	ed by the org	janızatıon after June	30,1975 S	ee section	509(a)(2).(Complete P	art III)		
10	Γ	Anorg	anızatıon or	ganızed and operated	dexclusively	to test for	public safety	See secti	on 509(a)(4)		
11	Γ	Anorg	anızatıon or	ganized and operated	dexclusively	for the be	nefit of, to pe	rform the fu	nctions of, or	to carry ou	t the purposes of
				ly supported organiz						See section	509(a)(3). Check
				bes the type of supp b Type II c						lan function	ally intograted
_	_		• •	ox, I certify that the	• • •		, -	·	• •		• •
е	1			on managers and ot							
			n 509(a)(2)	J		•	,	J			()()
f				received a written de	etermination	from the I	RS that it is a	a Type I, Ty	pe II, or Typ	e III suppoi	ting organization,
			this box	2006, has the organi	ization accer	ated any git	ft or contribu	tion from an	v of the		I
g			ng persons?		ization acce,	oted any gn	ic or contribu	cion nom an	y of the		
				rectly or indirectly o	ontrols, eith	er alone or	together wit	h persons d	escribed in (i	u)	Yes No
		and (111) below, the	governing body of th	e supported	organizatio	on?			11	.g(i)
		(ii) A f	amıly memb	er of a person descr	ıbed ın (ı) ab	ove?				11	g(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)	above?			11	g(iii)
h		Provide	e the followi	ng information about	the support	ed organiza	ition(s)				
			I				1		1		1
_) Nam uppor		(ii) EIN	(iii) Type of organization	(iv) Is organizati		(v) Did yo	•	(vi) Is		(vii) A mount of monetary
	ganiza			(described on	col (i) lis		in col (i)		col (i) or		support
				lines 1- 9 above	yourgove		suppo		ın the		
				or IRC section	docume	nt?					
				(see instructions))		1					_
				macractions)	Yes	No	Yes	No	Yes	No	
Total			I								

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.)

	ection A. Public Support	ation rails to qu	anny under the	tests listed bele	w, picase com	picte re	<u> </u>				
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	012	(f) Total			
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	4,638,521	8,347,226	7,434,692	5,884,776	10	0,639,038	36,944,253			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities	t and either on its	evenues levied for the ization's benefit and either or or expended on its								
3	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	4,638,521	8,347,226	7,434,692	5,884,776	10,639,038		36,944,253			
	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column							327,168			
6	(f) Public support. Subtract line 5 from line 4							36,617,085			
S	ection B. Total Support										
	endar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total			
7	A mounts from line 4	4,638,521	8,347,226	7,434,692	5,884,776	10	,639,038	36,944,253			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,594,628	3,016,920	2,772,692	2,632,004	2	2,243,539	14,259,783			
9	Net income from unrelated business activities, whether or not the business is regularly carried on		27,598	17,291	21,414		20,496	86,799			
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	169,858	178,519	294,300	182,000		276,078	1,100,755			
11	Total support (Add lines 7 through 10)							52,391,590			
12	Gross receipts from related activit	ies, etc (see inst	ructions)			12		2,068,479			
13	First five years. If the Form 990 is this box and stop here	<u> </u>	<u> </u>				3) organiz				
_ <u>S</u>	ection C. Computation of Pu										
14	Public support percentage for 201	2 (line 6, column	(f) divided by line	11, column (f))		14		69 890 %			
15	Public support percentage for 201	1 Schedule A, Pai	rt II, line 14			15		58 550 %			
16a	33 1/3% support test—2012. If the and stop here. The organization qu				ne 14 is 33 1/3%	or more,	check th	ıs box ▶✓			
	33 1/3% support test—2011. If the box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization Part IV how the organization me	on qualifies as a pu :— 2012. If the orgation meets the "f	ublicly supported anization did not o acts-and-circums	organization check a box on lin stances" test, che	e 13, 16a, or 16l ck this box and s	o, and lin	ie 14 • Explain	►			
b 18	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part IV how the organiza supported organization Private foundation. If the organiza instructions	nization meets the "fation meets the "fa	e "facts-and-cırcı acts-and-cırcums	umstances" test, stances" test The	check this box are organization qua	nd stop l alifies as	nere. a publicly	►			

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 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						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493107000204

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Political Campaign and Lobbying Activities

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, 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 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 in Part IV 2 Political expenditures 3 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 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes ┌ No 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 function activities 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? 4 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 **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	▶	ıf the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EI	ίΝ,
		expenses	and share of excess lobbying expenditures)	

B Check ► T if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisla	177,000		
С	Total lobbying expenditures (add lines 1a and 1i	177,000		
d	Other exempt purpose expenditures	18,026,875		
e	Total exempt purpose expenditures (add lines 1	c and 1d)	18,203,875	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	1,000,000	
	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		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er-0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	r - 0 -	0	
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did the organization file Form 472	0 reporting	□ Ves □ No

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 (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) Total beginning in) Lobbying nontaxable amount 802,812 938,956 967,672 1,000,000 3,709,440 Lobbying ceiling amount 5,564,160 (150% of line 2a, column(e)) 230,000 235,000 169,000 177,000 Total lobbying expenditures 811,000 Grassroots nontaxable amount 200,703 234,739 241,918 250,000 927,360 Grassroots ceiling amount 1,391,040 (150% of line 2d, column (e)) Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has Notice filed Form 5768 (election under section 501(h)).	ОТ			7 0	ge S
	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	1)		(b)	
activ		Yes	No	1	Amoun	t
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?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
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 505(c)(6).	01(c))(5), (or s		
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over 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 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	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, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

DLN: 93493107000204

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

► 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 ► Attach to Form 990. ► See separate instructions.

Supplemental Financial Statements

Open to Public Inspection

	f the organization N ASSOCIATION OF UNIVERSITY WOMEN INC		Emp	loyer identifica	tion numbe	er
NOTATION.	W MOOGENITOR OF ORTACKSTLL MODIEN THE		52-	6037388		
Part I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990		inds	or Accounts	. Complet	te if the
	organization anonorga record control soci	(a) Donor advised funds		(b) Funds and	other accou	ınts
Tota	al number at end of year					
Agg	regate contributions to (during year)					
Agg	gregate grants from (during year)					
Agg	regate value at end of year					
	the organization inform all donors and donor adviso ds are the organization's property, subject to the or		or advi	ısed	┌ Yes	┌ No
use	the organization inform all grantees, donors, and ded only for charitable purposes and not for the benef referring impermissible private benefit?				┌ Yes	┌ No
rt II	Conservation Easements. Complete if	the organization answered "Yes" to	Forn	n 990, Part IV	/, line 7.	
	pose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space	or education) Preservation of an Preservation of a c	ertifie	d historic struc	ture	
	mplete lines 2a through 2d if the organization held a sement on the last day of the tax year	a qualified conservation contribution in th	ne forn	n of a conservat	tion	
_		<u> </u>		Held at the	End of the	Year
	al number of conservation easements	-	2a			
	al acreage restricted by conservation easements	_	2b			
	mber of conservation easements on a certified histo	· · ·	2c			
	mber of conservation easements included in (c) acc toric structure listed in the National Register	uired after 8/17/06, and not on a	2d			
Nur	mber of conservation easements modified, transferr	red, released, extinguished, or terminated	d by th	ne organization	during	
the	tax year ▶					
Nur	mber of states where property subject to conservat	ion easement is located ►				
	es the organization have a written policy regarding to orcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	ling of	violations, and	┌ Yes	┌ No
Sta ►	ff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	ents d	during the year		
A m ► \$	ount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easements	durin	g the year		
	es each conservation easement reported on line 2(o i section 170(h)(4)(B)(II)?	d) above satisfy the requirements of sect	tion 17	70(h)(4)(B)(ı)	☐ Yes	┌ No
bala	Part XIII, describe how the organization reports col ance sheet, and include, if applicable, the text of th organization's accounting for conservation easeme	e footnote to the organization's financial				
rt II	Organizations Maintaining Collection Complete if the organization answered "Y		or Ot	her Similar <i>i</i>	Assets.	
wor	he organization elected, as permitted under SFAS 1 ks of art, historical treasures, or other similar asse vice, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education, o	rrese	arch in furthera		
If t wor	he organization elected, as permitted under SFAS 1 ks of art, historical treasures, or other similar asse vice, provide the following amounts relating to thes	.16 (ASC 958), to report in its revenue s its held for public exhibition, education, o	tatem	ent and balance		IC
(i)	Revenues included in Form 990, Part VIII, line 1			► \$		
(ii)	Assets included in Form 990, Part X			- \$		
Ift	he organization received or held works of art, histor owing amounts required to be reported under SFAS		r finan			
Rev	venues included in Form 990, Part VIII, line 1			► \$		
Ass	sets included in Form 990, Part X			- ≯		

Part	Organizations Maintaining Co	<u>illections of Ar</u>	t, His	storical i	<u>reasures, or O</u>	tne	<u>r Similar Asse</u>	ets (co	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, cl	heck any of	the following that a	are a	significant use o	fits	
а	Public exhibition		d	┌ Loan	or exchange progr	ams			
b	Scholarly research		е	┌ Othe	r				
С	Preservation for future generations								
4	Provide a description of the organization's c Part XIII	ollections and expl	aın ho	w they furth	er the organization	's ex	empt purpose in		
5	During the year, did the organization solicit								_
	assets to be sold to raise funds rather than						· ·	Yes	☐ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					a "Y	es" to Form 99	J,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					ets i	not	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the	e follo	wing table	_				
							Amo	unt	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on F	orm 990, Part X, lır	ne 21?)			Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anation has	been provided in P	art)	KIII		Γ
Pa	rt V Endowment Funds. Complete								
		(a)Current year	(b)	Prior year	b (c)Two years back	+			ears back
1a	Beginning of year balance	106,316,811		111,821,928		-	87,108,997	1	13,106,308
b	Contributions	1,100,490		1,247,092	1,446,631		744,251		1,918,746
c	Net investment earnings, gains, and losses	12,143,632		-398,349	17,985,838	3	13,022,327	-2	23,377,357
d	Grants or scholarships								
е	Other expenditures for facilities and programs	6,253,912		6,353,860	4,834,513	3	3,651,603		4,538,700
f	Administrative expenses								
g	End of year balance	113,307,021		106,316,811	111,821,928	3	97,223,972		87,108,997
2	Provide the estimated percentage of the cur	rent year end balar	nce (lır	ne 1g, colum	nn (a)) held as		<u> </u>		
а	Board designated or quasi-endowment	,	•	J.	,				
b	Permanent endowment ► 71 090 %								
c		910 %							
	The percentages in lines 2a, 2b, and 2c sho								
За	Are there endowment funds not in the posse		zation	that are hel	d and administered	d for	the		
	organization by							Yes	No
	(i) unrelated organizations		•				3a(i)	↓	No
	(ii) related organizations					•	<u> </u> 3a(ii)	 	No
	If "Yes" to 3a(II), are the related organization					•	3b	<u> </u>	<u> </u>
4	Describe in Part XIII the intended uses of the				10				
Par	t VI Land, Buildings, and Equipment Description of property	ent. See Form 9	90, Pa	(a) Cost or		ther	(c) Accumulated	(d) Bo	ok value
	Description of property			basis (inves			depreciation	(u) 50	
1a	Land				3,357	,226			3,357,226
b	Buildings				11,815	,533	5,999,688		5,815,845
C	Leasehold improvements				1,153	,765	573,908		579,857
d	Equipment				842	,855	554,248		288,607
						,996	106,222		24,774
Tota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colu	umn (B), line	10(c).)		🕨	1	.0,066,309

Part VIII Investments—Other Securities. See F	orni 550, rare A, mic 12		
(a) Description of security or category	(b) Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market value	
(1)Financial derivatives			
(2)Closely-held equity interests			
(3)Other			
(A) LIGHTHOUSE DIVERSIFIED FUND, LTD	11,454,896	F	
(B) MINERAL RIGHTS	353,002	F	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	11,807,898		
Part VIII Investments—Program Related. See		3	
(a) Description of investment type	(b) Book value	(c) Method of valuation	
(a) Description of investment type	(b) Book value	Cost or end-of-year market value	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line	. 15		
(a) Descript		(b) Book value	
(a) Descript	1011	(D) Book Value	
Tabel (Column (b) much across 5 pers 2000, Part V, and (P) line 15			
Part X Other Liabilities. See Form 990, Part X,	line 25.		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability	line 25.		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability Federal income taxes	line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability Federal income taxes SECURITY DEPOSITS	(b) Book value 73,234		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability Federal income taxes SECURITY DEPOSITS POOLED INCOME FUNDS	73,234 160,911		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability Federal income taxes SECURITY DEPOSITS POOLED INCOME FUNDS CHARITABLE GIFT ANNUITIES	73,234 160,911 572,672		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability Federal income taxes SECURITY DEPOSITS POOLED INCOME FUNDS CHARITABLE GIFT ANNUITIES	73,234 160,911		
(a) December of leability	73,234 160,911 572,672		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability Federal income taxes SECURITY DEPOSITS POOLED INCOME FUNDS CHARITABLE GIFT ANNUITIES IRA SWEEPSTAKES	73,234 160,911 572,672 12,918		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability Federal income taxes SECURITY DEPOSITS POOLED INCOME FUNDS CHARITABLE GIFT ANNUITIES IRA SWEEPSTAKES	73,234 160,911 572,672 12,918		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability Federal income taxes SECURITY DEPOSITS POOLED INCOME FUNDS CHARITABLE GIFT ANNUITIES IRA SWEEPSTAKES	73,234 160,911 572,672 12,918		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability Federal income taxes SECURITY DEPOSITS POOLED INCOME FUNDS CHARITABLE GIFT ANNUITIES IRA SWEEPSTAKES	73,234 160,911 572,672 12,918		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability Federal income taxes SECURITY DEPOSITS POOLED INCOME FUNDS CHARITABLE GIFT ANNUITIES IRA SWEEPSTAKES	73,234 160,911 572,672 12,918		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability Federal income taxes SECURITY DEPOSITS POOLED INCOME FUNDS CHARITABLE GIFT ANNUITIES IRA SWEEPSTAKES	73,234 160,911 572,672 12,918		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability Federal income taxes SECURITY DEPOSITS POOLED INCOME FUNDS CHARITABLE GIFT ANNUITIES IRA SWEEPSTAKES	73,234 160,911 572,672 12,918		
Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability Federal income taxes SECURITY DEPOSITS POOLED INCOME FUNDS CHARITABLE GIFT ANNUITIES IRA SWEEPSTAKES	73,234 160,911 572,672 12,918		

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	per Return
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	
a	Net unrealized gains on investments	
b	Donated services and use of facilities 2b	
C	Recoveries of prior year grants	
d	Other (Describe in Part XIII) 2d	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	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
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s nor Doturn
	1. Recommend of Expenses bet Madred I manda statements with Expenses	s per keturn
1	Total expenses and losses per audited financial statements	1
	<u> </u>	l l
1	Total expenses and losses per audited financial statements	l l
1 2	Total expenses and losses per audited financial statements	l l
1 2 a	Total expenses and losses per audited financial statements	l l
1 2 a b	Total expenses and losses per audited financial statements	l l
1 2 a b c	Total expenses and losses per audited financial statements	l l
1 2 a b c	Total expenses and losses per audited financial statements	1
1 2 a b c d e	Total expenses and losses per audited financial statements	2e
1 2 a b c d e	Total expenses and losses per audited financial statements A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	2e
1 2 a b c d e 3	Total expenses and losses per audited financial statements	2e
1 2 a b c d e 3 4	Total expenses and losses per audited financial statements	2e
1 2 a b c d e 3 4 a b c	Total expenses and losses per audited financial statements	2e 3

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

OF ENDOWMENT FUNDS SCHOLA INTERN PROJEC DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48 PART X, LINE 2 THE ORG RECOGN LIKELY-	Explanation OOWMENT FUNDS ARE MAINTAINED TO FUND
OF ENDOWMENT FUNDS SCHOLA INTERN PROJEC DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48 RECOGN LIKELY-	
TAX POSITIONS UNDER FIN 48 RECOGN	RSHIPS AND GRANTS FOR THE AMERICAN AND ATIONAL FELLOWSHIPS AND RESEARCH AND IS
RETURN FINANC UNCERT FORM 99 INCOME ORGANI RELATE BY FEDE	GANIZATION REQUIRES THAT A TAX POSITION BE IZED OR DERECOGNIZED BASED ON A "MORE-THAN-NOT" THRESHOLD THIS APPLIES TO ONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX THE ORGANIZATION DOES NOT BELIEVE ITS EAL STATEMENTS INCLUDE, OR REFLECT, ANY AIN TAX POSITIONS THE ORGANIZATION'S IRS POOR OF TOO ON TOO ON THE ORGANIZATION STATEMENT OF ORGANIZATION EXEMPT FROM TAX, AND IRS FORMS 990-T, EXEMPT ZATION BUSINESS INCOME TAX RETURN AND OSTATE FILINGS ARE SUBJECT TO EXAMINATION RAL AND STATE TAXING AUTHORITIES,

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DLN: 93493107000204 OMB No 1545-0047

Open to Public **Inspection**

(f) Total expenditures

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.

Internal Revenue Service Name of the organization

(a) Region

(Form 990)

Department of the Treasury

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC

Employer identification number

52-6037388

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

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 No

(b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a

- For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	offices in the region	employees, agents, and independent contractors in region	region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program service, describe specific type of service(s) in region	for and investments in region
NORTH AMERICA	0		• •	AMERICAN FELLOWSHIP GRANT	20,000
EAST ASIA AND THE PACIFIC	0	=		HOME COUNTRY PROJECT	7,000
NORTH AMERICA	0			HOME COUNTRY PROJECT	6,262
SUB-SAHARAN AFRICA	0			HOME COUNTRY PROJECT	14,000
Sub-total Total from continuation sheets	0	0			47,262
to Part I : Totals (add lines 3a and 3b)	0	0			47,262

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) Amount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2				ted above that are r e or counsel has pro					
3	Enter total nu	mher of other or	nanizations or en	tities					

Schedule F (Form 990) 2012

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.
Part III can be duplicated if additional space is needed.

Part III can be	<u>e duplicated if additi</u>	<u>onal space is ne</u>	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
OTHER AWARDS	SUB-SAHARAN AFRICA	4		ELECTRONIC WIRE TRANSFER			
AMERICAN FELLOWSHIP GRANT	EUROPE (INCLUDING ICELAND & GREENLAND)	1	20,000	ELECTRONIC WIRE TRANSFER			
	Τ						
		1					
						Schod	ule E (Form 990) 2012

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Y	'es	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Y	'es	্য	No
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	Y	'es	<u> </u>	Νo
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)	Γ	Υ	'es	<u> </u>	Νo
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	Υ	'es	<u> -</u>	Νo
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).	Γ	Υ	'es	<u> </u>	No

Schedule F (Form 990) 2012

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

as applicable. Also compl	lete this part to provide any ac	Iditional information (see instructions).
Identifier	ReturnReference	Explanation
ROCEDURE FOR MONITORING GRANTS OUTSIDE THE US		SCHEDULE F, PART I, LINE 2 FOR FUNDS AWARDED THROUGH AAUW INC'S INTERNATIONAL FELLOWSHIPS PROGRAM, FELLOWS ARE REQUIRED TO GIVE AN ACCOUNTING TWICE DURING THE FELLOWSHIP YEAR SUCH ACCOUNTING MAY INCLUDE PROJECT PROGRESS, INSTITUTIONAL CERTIFICATION OF GOOD STANDING, TRANSCRIPTS AND BUDGET EXPENDITURES RECEIPT OF THE SECOND FELLOWSHIP PAYMENT IS CONTINGENT UPON THE SUBMISSION OF A SATISFACTORY MID-YEAR REPORT, INCLUDING FINANCIALS FELLOWS ARE ALSO REQUIRED TO REQUEST, IN ADVANCE, ANY CHANGES TO THEIR PROJECT PLAN AND BUDGET, WHICH ARE APPROVED BY THE PROGRAM OFFICER TO ENSURE THEY MEET FELLOWSHIP GUIDELINES
		+
		+
		Schedule F (Form 990) 2012

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DLN: 93493107000204

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Name of the organization AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC	Employer identification number
	52-6037388

Internal Revenue Service						Inspection
Name of the organization AMERICAN ASSOCIATION	N OF UNIVERSITY WOMEN INC				Employer identif	ication number
Part I Fundraising	Activities. Complete if the org	nanızatı	on ansv	wered "Ves" to For		
					· · · · · · · · · · · · · · · · · · ·	17.
-	organization raised funds through any	y of the f				
a	Leolicitations	e f		icitation of non-gove icitation of governme	-	
c Phone solicitation		ď	_	cial fundraising ever	=	
d In-person solicita		9	, 500	erar ranararsing ever	incs	
or key employees liste b If "Yes," list the ten hi	ave a written or oral agreement with ed in Form 990, Part VII) or entity in ghest paid individuals or entities (fu least \$5,000 by the organization	n connec	tion with	professional fundra	ising services?	Ves IN otalseris
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?		(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 EL SEGUNDO, CA	TELEMARKETING/MEMBERSHIP DEVELOPMENT		No	78,611	76,604	2,007
90245						
COMNET MARKETING GROUP INC 1214 STOWE AVE	TELEMARKETING/MEMBERSHIP DEVELOPMENT		No	42,765	46,491	-3,726
MEDFORD, OR 97501						

GROUP INC 1214 STOWE AVE		No	42,765	46,491	-3,726
MEDFORD, OR 97501					
TELEFUND INC PO BOX 2366 DENVER, CO 802012366	TELEMARKETING/MEMBERSHIP DEVELOPMENT	No	29,678	32,887	-3,209
SD&A TELESERVICES INC 5757 WEST CENTURY BLVD 300 LOS ANGELES, CA 90045	TELEMARKETING/MEMBERSHIP DEVELOPMENT	No	9,271	13,184	-3,913
CHAPMAN CUBINE ADAMS & HUSSEY 1600 WILSON BLVD 300 ARLINGTON, VA 22209	FUNDRAISING CONSULTING	No	0	174,665	-174,665

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

AL, AK, AR, AZ, CA, CO, CT, DC, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, HI

Total.

160,325

-183,506

343,831

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribu	cion answered "Yes" to tions and gross income	Form 990, Part IV, li e on Form 990-EZ, lin	ne 18, or reported es 1 and 6b. List
		<u> </u>	(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
_			(event type)	(event type)	(total number)	(3)
Revenue	1	Gross receipts				
9. 9.	2	Less Contributions				
<u>~</u>	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
en.	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ğ	7	Food and beverages .				
Direct	8	Entertainment				
ā	9	Other direct expenses .				
	10	Direct expense summary Add lin	es 4 through 9 ın colum	n (d)		()
	11	Net income summary Combine Ii	ne 3, column (d), and Iır	e 10		
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
<u>—</u>		\$13,000 OH TOTHI 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col (a) through col (c))
<u>_</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
			☐ Yes	┌ Yes	┌ Yes	
	6	Volunteer labor	□ No	│ No	┌ No	
	7	Direct expense summary Add lines	s 2 through 5 ın column	(d)		
	8	Net gaming income summary Com	bine lines 1 and 7 in co	lumn (d)	🛌	
9	Ent	er the state(s) in which the organiza	ation operates gaming a	ctivities		
а		the organization licensed to operate				. 「Yes 「No
b	If"	No," explain				
10a b		re any of the organization's gaming Yes," explain	icenses revoked, suspe	ended or terminated during	the tax year?	

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address 🟲			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
	<u> </u>	activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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2012

(Form 990)

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

Department of the Treasury Internal Revenue Service	Compie	_	Attach to Form 990	1 3 3 0, 1 dre 1 v, mie 21 01 .			pen to Public Inspection
Name of the organization	/EDCITY WOMEN I	N.C.				Employer identificati	on number
						52-6037388	
Part I General Informatio							
Does the organization maintain in the selection criteria used to aw	records to substanti ard the grants or as	ate the amount of the sistance?	grants or assistance, the	e grantees' eligibility for t	the grants or assista	ance, and	✓ Yes ✓ N
2 Describe in Part IV the organiza	ition's procedures fo	or monitoring the use o	of grant funds in the Unite	ed States			
Part II Grants and Other A : Form 990, Part IV, line							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 or assistance
See Additional Data Table							
2 Enter total number of section 50	1)1(c)(3) and governi	 ment organizations list	ted in the line 1 table .			<u> </u>	
3 Enter total number of other orga							
For Paperwork Reduction Act Notice, see	the Instructions for	Form 990.		Cat No 50055P		Schedu	ıle 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 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	75	1,408,086		FMV	
(2) SELECTED PROFESSION FELLOWSHIPS	19	339,761		FMV	
(3) INTERNATIONAL FELLOWSHIP	51	994,260		FMV	
(4) CAREER DEVELOPMENT GRANTS	65	647,614		FMV	
(5) OTHER AWARDS AND STIPENDS	2	15,500		FMV	

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

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

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
AAUW ASHLAND KY AREA BRANCH412 SKAGGS ROAD MOREHEAD, KY 40351	23-7395552	501(C)(3)	7,000		FMV		COMMUNITY ACTION GRANT
AAUW SAN JUAN PR6 CARRION COURT PLAYA APT 502 SAN JUAN,PR 00911	23-7208610	501(C)(3)	5,350		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
BAY PATH COLLEGE588 LONGMEADOW ST LONGMEADOW, MA 01106	04-2103865	501(C)(3)	6,500		FMV		COMMUNITY ACTION GRANT
CALIFORNIA STATE UNIVERSITY STANISLAUS 3617 NORTHAMPTON LANE MODESTO,CA 95356	77-0492209	501(C)(3)	6,978		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
CARNEGIE MELLON UNIVERSITY GIRLS OF STEEL FIRST ROBOTICS TEAM5000 FORBES AVE PITTSBURGH,PA 15213	25-0969449	501(C)(3)	7,000		FM∨		COMMUNITY ACTION GRANT
FAMILY ENRICHMENT NETWORK INC 24 CHERRY STREET JOHNSON CITY, NY 13790	16-1113373	501(C)(3)	5,612		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
KANSAS CHILDREN'S DISCOVERY CENTER4400 SW 10TH AVE TOPEKA,KS 66604	37-1534978	501(C)(3)	6,446		FM∨		COMMUNITY ACTION GRANT
LATINA COALITION OF SILICON VALLEY (LCSV) 1346 THE ALAMEDA SUITE 7-293 SAN JOSE,CA 95126	01-0799235	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
LATINO LEADERSHIP COUNCIL OF PLACER COUNTY11473 SHERWOOD WAY AUBURN,CA 95602	27-0970476	501(C)(3)	6,355		FM∨		COMMUNITY ACTION GRANT
MEMPHIS MUSEUMS INC- PINK PALACE MUSEUM- EDUCATION DEPARTMENT 3050 CENTRAL AVE MEMPHIS,TN 38111	62-0801926	501(C)(3)	6,971		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
MONTCLAIR STATE UNIVERSITYRUSS HALL- MONTCLAIR STATE UNIV MONTCLAIR,NJ 07043	22-2912682	501(C)(3)	7,000		FM∨		COMMUNITY ACTION GRANT
NEXT DOOR SOLUTIONS TO DOMESTIC VIOLENCE 234 EAST GISH ROAD SUITE 200 SAN JOSE,CA 95112	94-2420708	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
RESEARCH FOUNDATION OF CUNY FOR INSTITUTE FOR LITERACY STUDIESLEHMAN COLLE 250 BEDFORD PARK BLVD WEST-OLD GYM RM019 BRONX,NY 10468	13-1988190	501(C)(3)	5,400		FMV		COMMUNITY ACTION GRANT
THE OHIO STATE UNIVERSITY FOUNDATION 281 W LANE AVENUE 3RD FLOOR SAS BLDG COLUMBUS OH 43210	31-1145986	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
THE PINNACLE CHARTER SCHOOL1001 W 84TH AVE FEDERAL HEIGHTS,CO 80260	84-1434734	501(C)(3)	7,000		FMV		COMMUNITY ACTION GRANT
THE YOUTH FOUNDATION PO BOX 309 VAIL,CO 81658	84-1442909	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
VERMONT WORKS FOR WOMEN32A MALLETTS BAY AVE WINOOSKI,VT 05404	22-2894557	501(C)(3)	7,000		FMV		COMMUNITY ACTION GRANT
WEST CHESTER-CHESTER COUNTY (PA) BRANCH (PA2052)311 BISHOP MORGAN CT DOWNINGTOWN,PA 19335	23-6297024	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
YWCA YORK320 EAST MARKET STREET YORK,PA 17403	23-1360889	501(C)(3)	7,000		FM∨		COMMUNITY ACTION GRANT
BIG BEND CDC FKA FRENCHTOWN CDC403 REG SMITH CIRCLE LOUISVILLE,FL 32351	59-3686332	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
FAMILY SCHOLAR HOUSE INC403 REG SMITH CIRCLE LOUISVILLE,KY 40208	61-1285124	501(C)(3)	10,000		FM∨		COMMUNITY ACTION GRANT
GEORGIA COLLEGE & STATE UNIVERSITYCBX 004 MILLEDGEVILLE,GA 31061	58-6002064	501(C)(3)	9,897		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
LATINO STEM ALLIANCE20 MORAINE STREET JAMAICA PLAIN,MA 02130	27-1941096	501(C)(3)	10,000		FM∨		COMMUNITY ACTION GRANT
SATURDAY ACADEMY5000 N WILLAMETTE PORTLAND,OR 97203	20-3770321	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
THE MY HERO PROJECT 1278 GLENNEYRE 286 LAGUNA BEACH,CA 92651	10-0003021	501(C)(3)	10,000		FM∨		COMMUNITY ACTION GRANT
UNIVERSITY OF ROCHESTER - SUSAN B ANTHONY INSTITUTE FOR GENDER & WOMEN'S S UNIVERSITY OF ROCHESTER - SUSAN B ANTHONY INSTITUTE FOR GENDER WOMENS ROCHESTER.NY 14627	16-0743209	501(C)(3)	10,000		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
VERA COURT NEIGHBORHOOD CENTER 614 VERA COURT MADISON,WI 53704	39-1945609	501(C)(3)	9,677		FMV		COMMUNITY ACTION GRANT
DAKOTA ST UNIVBUDGET GRANTS DIRECTOR BUSINESS OFC HH203 DAKOTA ST UNIV MADISON,SD 57042	46-6000364	501(C)(3)	5,000		FMV		OTHER AWARDS AND 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
SIEGEL & YEE499 14TH STREET SUITE 220 OAKLAND,CA 94612	94-3193030	501(C)(4)	27,000		FMV		OTHER AWARDS AND STIPENDS
THE HARRY WALKER AGENCY INC355 LEXINTON AVENUE 21ST FLOOR NEWYORK,NY 10017	13-3305553		10,000		FMV		SPECIAL AWARDS

(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
AMOS JONES LAW FIRM 1150 K STREET NW SUITE 902 WASHINGTON, DC 200056809	27-3168421		6,500		FM∨		OTHER WARDS AND STIPENDS
GERALD DESMARAIS375 CHURCH STREET NORTH ADAMS,MA 01247	04-2613803		5,000		FMV		OTHER WARDS AND 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
BURKE LLCBURKE LLC 1000 POTOMAC STREET NW WASHINGTON, DC 20007	20-3210492	501(C)(3)	22,250		FMV		OTHER AWARDS AND STIPENDS

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DLN: 93493107000204

Employer identification number

OMB No 1545-0047

Compensation Information

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC

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

			52-603/388			
Pa	rt I Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization provides 990, Part VII, Section A, line 1a Complete Part III to		•			
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the orga reimbursement or provision of all of the expenses desc			1b		
2	Did the organization require substantiation prior to rein directors, trustees, and the CEO/Executive Director, r			2		
3	Indicate which, if any, of the following the filing organiz organization's CEO/Executive Director Check all that used by a related organization to establish compensati	appl	y Do not check any boxes for methods			
	Compensation committee	굣	Written employment contract			
	Independent compensation consultant	⋝	Compensation survey or study			
	Form 990 of other organizations		Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	rt VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	ymen	it?	4a		No
b	Participate in, or receive payment from, a supplementa	ıl non	qualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-base	ed co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provi	ıde th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must	comp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, lincompensation contingent on the revenues of	ne 1a	, did the organization pay or accrue any			
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 compensation contingent on the net earnings of	ne 1 a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, lii payments not described in lines 5 and 6? If "Yes," des		• • • • • • • • • • • • • • • • • • • •	7		No
8	Were any amounts reported in Form 990, Part VII, paid					
	subject to the initial contract exception described in R in Part III	egula	itions section 53 4958-4(a)(3)? If "Yes," describe	8		No
9	If "Yes" to line 8, did the organization also follow the re	ebutt:	able presumption procedure described in Regulations	-		1110
-	costion F2 40 F9 6/a)2	a c c	and production products accorded in Negatations	ا ما	1	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)LINDA HALLMAN EXECUTIVE DIRECTOR	(i) (ii)	237,466 4,398	0	0 0	0	59,894 487	· · · · · · · · · · · · · · · · · · ·	l .
(2)JILL PIERCE COO	(i) (ii)	210,898 3,906	0	0 0	0	30,960 453	1	
(3)FONG-CHING CHENG DIR OF INFORM TECH	(i) (ii)	134,143 0	0	0 0	0	17,016 0	151,159 0	0
	(i) (ii)	173,999 3,955	0	0	0	20,454 465	1	

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2012

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DLN: 93493107000204

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

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

Noncash Contributions

Name of the organization AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC

Employer identification number

52-6037388

Pa	rt I Types of Property				32 0037 300			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of d noncash contrib	etermı		:s
1	Art—Works of art			- 9				
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
	Securities—Publicly traded .	Х	9	27,779	FMV			
10	Securities—Closely held stock \cdot							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶ ()							
26	Other ▶()							
27	O ther ▶()							
	O ther ▶ ()							
29	Number of Forms 8283 received for which the organization comple				29			
							Yes	No
30a	During the year, did the organiza							
	must hold for at least three year			·	d to be used			
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangement	ent in Part 1	I					
31	Does the organization have a gif	t acceptano	ce policy that requires the	review of any non-standard	contributions?	31		No
32a	Does the organization hire or us contributions?		es or related organizations	to solicit, process, or sell i	noncash 	32a		No
ь	If "Yes," describe in Part II					320		110
33	If the organization did not report	: an amount	ın column (c) for a type of	property for which column (a) is checked,			
	describe in Part II				•			

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

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DLN: 93493107000204

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Supplemental Information to Form 990 or 990-EZ

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, INC HAS MEMBERS AND RECEIVES MEMBER DUES
	FORM 990, PART VI, SECTION A, LINE 7A	THE BOARD OF DIRECTORS APPOINTS THREE MEMBERS OF THE BOARD IN ORDER TO EXPAND THE EXPERTIS E OF THE BOARD IN CERTAIN CRITICAL AREAS ADDITIONALLY, THE BOARD ALSO APPOINTS THE GOVERN ANCE COMMITTEE, INVESTMENT COMMITTEE, AUDIT COMMITTEE, AWARDS PANELS AND OTHER STANDING COMMITTEES AND TASK FORCES
	FORM 990, PART VI, SECTION A, LINE 7B	AAUW USES A BIENNIAL ELECTRONIC VOTING PROCEDURE TO ELECT TWELVE OUT OF FIFTEEN MEMBERS OF THE BOARD OF DIRECTORS, INCLUDING PRESIDENT AND VICE PRESIDENT THE BOARD OF DIRECTORS AP POINTS THREE ADDITIONAL BOARD MEMBERS
	FORM 990, PART VI, SECTION B, LINE 11	FORM 990 IS REVIEWED BY THE FINANCE COMMITTEE AND 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 D ISCLOSE ANY POTENTIAL SITUATION THAT MAY RAISE CONFLICT OF INTEREST TO THE BOARD OF DIRECT ORS
	FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE DIRECTOR HAS AN EMPLOY MENT AGREEMENT WITH AAUW THE BOARD OF DIRECTORS CONDU CTS A YEARLY PERFORMANCE REVIEW OF THE EXECUTIVE DIRECTOR UPON WHICH COMPENSATION IS BASED THE BOARD OF DIRECTORS RELIES ON AN INDEPENDENT COMPENSATION CONSULTANT TO OBTAIN APPROP RIATE COMPENSATION INFORMATION FOR THE EXECUTIVE DIRECTOR THE COMPENSATION CONSULTANT ALS O PROVIDES INFORMATION THAT IS USED FOR THE OTHER OFFICERS AND KEY EMPLOYEES AS WELL AS TH E REST OF THE STAFF ANNUAL PERFORMANCE REVIEWS ARE COMPLETED YEARLY BETWEEN THE MONTHS OF APRIL AND JUNE YEARLY STAFF COMPENSATION IS RECOMMENDED BY SENIOR MANAGEMENT TO THE EXEC UTIVE DIRECTOR THE OVERALL COMPENSATION IS THEN PRESENTED TO THE BOARD OF DIRECTORS THROU GH THE BUDGET APPROVAL PROCESS
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S BY LAWS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE IN THE WWW AAUW OR G WEBSITE AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE
AVERAGE HOURS PER WEEK FOR RELATED ORGANIZATION	FORM 990, PART VII, SECTION A, COLUMN B	THE AVERAGE HOURS PER WEEK OF ALL DIRECTORS AND OFFICERS INCLUDE ONE HOUR PER WEEK FOR A RELATED ORGANIZATION, AAUW ACTION FUND, INC
	FORM 990, PART XII, LINE 2C	THE BOARD OF DIRECTORS ASSIGNS AN AUDIT COMMITTEE THAT ASSUMES THE RESPONSIBILITY OF OVERS EEING THE ANNUAL AUDIT OF THE FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT AC COUNTANT
	FORM 990, PART VI, SECTION A, LINE 1A	AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC HAS AN EXECUTIVE COMMITTEE. THE 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 KIR KWOOD, DIRECTOR -KATHLEEN CHA, DIRECTOR THE EXECUTIVE COMMITTEE IS AUTHORIZED BY THE BOARD OF DIRECTORS TO TAKE ACTION, BETWEEN BOARD MEETINGS WHEN TIME IS A FACTOR, TO ESTABLISH A N ORGANIZATION POSITION IN A MATTER CLEARLY WITHIN THE SCOPE OF THE ORGANIZATION'S PROGRAM S AND MISSION AND IN ACCORDANCE WITH PREVIOUS ACTIONS OF THE ORGANIZATION AND/OR THE BOARD OF DIRECTORS

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

DLN: 93493107000204

2012

OMB No 1545-0047

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Schedule R (Form 990) 2012

52-6037388

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

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

► Attach to Form 990. ► See separate instructions.

Internal Revenue Service

Name of the organization

(Form 990)

Department of the Treasury

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC

Employer identification number

Cat No 50135Y

(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income E	(e) ind-of-year assets		(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the	ations (Complete if le tax year.)	the organization a	inswered "Yes" t	to Form 990, P	art IV,	, line 34 because it	had o	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	Public charity (if section 501	status (c)(3))	(f) Direct controlling entity	Section (13) co	g) 512(b ontrolled tity?
							Yes	No
(1) AAUW ACTION FUND INC	SEE SCHEDULE R, PART VII	MA	501(C)(4)	N/A				No
1111 SIXTEENTH STREET NW						N/A		
WASHINGTON, DC 20036 53-0025390								
								_

(a) Name, address, and EIN o related organization	f	(b) Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percenta ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo	ration is a cor	or Trust (poration or	Complete if trust during	the organı the tax ye	zatıon ar ar.)	iswere	d "Ye	s" to Form	990,	Part	:IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of enti (C corp, S corp, or trust)		total Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
											Yes		No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Yes

$oldsymbol{1}$ During the tax year, did the organization engage in any of the following transactions with one or more $oldsymbol{r}$	elated organizations lis	sted in Parts II-IV?							
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No			
b Gift, grant, or capital contribution to related organization(s)				1b		No			
c 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 Dividends from related organization(s)				1f		No			
g Sale of assets to related organization(s)				1g		No			
h Purchase of assets from related organization(s)				1h		No			
i Exchange of assets with related organization(s)									
j Lease of facilities, equipment, or other assets to related organization(s)				1j		No			
In I are of facilities assumed to a should be a second from the latest and the second from the				1k		No			
k Lease of facilities, equipment, or other assets from related organization(s)				11		No			
Performance of services or membership or fundraising solicitations for related organization(s)				1m		No			
m Performance of services or membership or fundraising solicitations by related organization(s)				1n	Yes	140			
Leading of identities, equipment, maining install dissects mentionated organization(s)									
• Sharing of paid employees with related organization(s)				10	Yes				
p Reimbursement paid to related organization(s) for expenses				1p		No No			
				1q		No			
q Reimbursement paid by related organization(s) for expenses				-4					
f r Other transfer of cash or property to related organization(s)				1r		No			
s Other transfer of cash or property from related organization(s)				1s		No			
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	e this line, including co	vered relationships	and transaction thresholds						
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount ir	nvolved				
1) AAUW ACTION FUND INC	С	200,000	CASH						

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	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 section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data Return to Form

Software ID: Software Version:

EIN: 52-6037388

Name: AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC

Schedule R (Form 990) 2012

Page **5**

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,	RIMARY ACTIVITY AAUW ACTION FUND ADVANCES EQUITY FOR WOMEN AND GIRLS THROUGH MEMBER ACTIVISM AND VOTER
ORGANIZATION	IDENTIFICATION	OBILIZATION
AAUWACTION	OF RELATED TAX-	
FUND, INC	EXEMPT	
	ORGANIZATIONS	