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Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public

Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 07-01-2014, and ending 06-30-2015

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

MS FOUNDATION FOR WOMEN INC

Doing business as

Number and street (or P O box if mail is not delivered to street address)

12 METROTECH CENTER NO 26 FL

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

BROOKLYN, NY 11201

F Name and address of principal officer

TERESA YOUNGER

12 METROTECH CENTER NO 26 FL

BROOKLYN, NY 11201

H(a) Is this a group return for subordinates?

☐ Yes☒ No

H(b) Are all subordinates included?

☐ Yes☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website:

WWW.FORWOMEN.ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation

1972

M State of legal domicile

NY

Part I	Summary																															
Activities & Governance	1 Briefly describe the organization's mission or most significant activities "OUR MISSION IS TO BUILD WOMEN'S COLLECTIVE POWER TO REALIZE A NATION OF JUSTICE FOR ALL"																															
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets																															
	<table><tr><td>3</td><td>Number of voting members of the governing body (Part VI, line 1a)</td><td>3</td><td>16</td></tr><tr><td>4</td><td>Number of independent voting members of the governing body (Part VI, line 1b)</td><td>4</td><td>16</td></tr><tr><td>5</td><td>Total number of individuals employed in calendar year 2014 (Part V, line 2a)</td><td>5</td><td>39</td></tr><tr><td>6</td><td>Total number of volunteers (estimate if necessary)</td><td>6</td><td>46</td></tr><tr><td>7a</td><td>Total unrelated business revenue from Part VIII, column (C), line 12</td><td>7a</td><td>0</td></tr><tr><td>7b</td><td>Net unrelated business taxable income from Form 990-T, line 34</td><td>7b</td><td>0</td></tr></table>	3	Number of voting members of the governing body (Part VI, line 1a)	3	16	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	39	6	Total number of volunteers (estimate if necessary)	6	46	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0	7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0							
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Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

2016-01-22

Date

ROSINA BARBA VP FINANCE AND ADMINISTRATION

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

GARRETT M HIGGINS

Preparer's signature

GARRETT M HIGGINS

Date

2016-01-22

Check ☐ if self-employed

PTIN

P00543209

Firm's name

O'CONNOR DAVIES LLP

Firm's EIN

27-1728945

Firm's address

500 MAMARONECK AVENUE

HARRISON, NY 105281633

Phone no

(914) 381-8900

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

☒ Yes☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2014)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III ☐ ☒

1

Briefly describe the organization's mission

OUR MISSION IS TO BUILD WOMEN'S COLLECTIVE POWER TO REALIZE A NATION OF JUSTICE FOR ALL WE FOCUS ON ECONOMIC JUSTICE, REPRODUCTIVE HEALTH, AND SAFETY WE ARE THE FIRST AND LARGEST DOMESTICALLY-FOCUSED WOMEN'S FOUNDATION IN THE COUNTRY

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 3,403,054 including grants of \$ 1,811,577) (Revenue \$)

THE MS FOUNDATION FOR WOMEN PROVIDES A VARIETY OF PROGRAMS AND SERVICES IN SUPPORT OF ISSUES AFFECTING WOMEN IN THE UNITED STATES IN 2015, THE FOUNDATION PROVIDED GRANTS TO 80 ORGANIZATIONS WORKING ON KEY ISSUE OF REPRODUCTIVE HEALTH, CHILD SEXUAL ABUSE PREVENTION, AFFORDABLE CHILD CARE AND QUALITY CHILD CARE JOBS IN ADDITION, THROUGH ITS CAPACITY BUILDING PROGRAMS, THE FOUNDATION PROVIDES ASSISTANCE IN STRATEGIC COMMUNICATIONS, ORGANIZATIONAL DEVELOPMENT AND FINANCIAL MANAGEMENT IN 2015, IT SPONSORED NUMEROUS WEBINARS AS WELL AS GRANTEE CONVENINGS AND ROUNDTABLES THE MS FOUNDATION ALSO HOSTS DONOR ADVISED FUNDS INCLUDING THE OMA FUND, ASIAN WOMEN GIVING CIRCLE, E P FUND, THE SOPHIA FUND AND GLORIA FUND

4b

(Code) (Expenses \$ 1,009,881 including grants of \$) (Revenue \$)

THE MS FOUNDATION FOR WOMEN CONDUCTS PUBLIC EDUCATION IN AREAS CRITICAL TO WOMEN'S WELLBEING, SUCH AS HEALTH AND REPRODUCTIVE JUSTICE, ECONOMIC JUSTICE, AND ENDING VIOLENCE AGAINST WOMEN AND GIRLS WE EDUCATE AND ENGAGE AUDIENCES THROUGH OUR WEBSITE, BLOGS, SOCIAL MEDIA PLATFORMS, ONLINE ACTION CAMPAIGNS, AND MEDIA PLACEMENTS THROUGH NEWS OUTLETS ACROSS THE COUNTRY OUR PUBLIC EDUCATION EFFORTS HELP CHANGE THE PUBLIC DISCOURSE ON OUR CORE ISSUES BOTH BY ENGAGING INDIVIDUALS IN CONVERSATIONS ABOUT THE ISSUES AND BY CHANGING THE NARRATIVE IN MEDIA

4c

(Code) (Expenses \$ 379,869 including grants of \$ 1,000) (Revenue \$)

THE ADVOCACY AND POLICY PROGRAM ENHANCES THE ORGANIZATION'S REACH, THOUGHT LEADERSHIP AND STRATEGICALLY PROMOTE POLICIES AND PRACTICES TO IMPROVE THE CONDITIONS AND LIVES OF WOMEN THIS YEAR, THE MS FOUNDATION INITIATED ADVOCACY CAMPAIGNS THAT STRENGTHENED OUR VOICE AND THOSE OF OUR GRANTEES BY 1) CREATING A MIXED IMMIGRANT FACT SHEET ON THE IMPACT AND IMPLEMENTATION OF THE AFFORDABLE CARE ACT THAT GRANTEES SHARED WITHIN THEIR COMMUNITIES 2) INCREASING THE PROFILE OF A GRANTEE BY SPOTLIGHTING THE EFFORTS ON THE "ONE KEY QUESTION" CAMPAIGN TO THE PUBLIC HEALTH COMMUNITY 3) PROMOTING OF DOCUMENTARY FILM MAKING AS AN ADVOCACY TOOL

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses ▶ 4,792,804

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 	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6 Yes	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 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 V 	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
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	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e 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 Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
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 Yes	
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	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2b	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).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?	Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?		No
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		No
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

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

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	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 independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	Yes	
b	Other officers or key employees of the organization	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
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

17	List the States with which a copy of this Form 990 is required to be filed	AL, AK, AR, CO, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, NH, NJ, NM, NC, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, CA, MS, NY, ND, OH
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
19	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	
20	State the name, address, and telephone number of the person who possesses the organization's books and records	ROSINA BARBA 12 METROTECH CENTER 26TH FLOOR BROOKLYN, NY 11201 (212) 742-2300

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation 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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ELIZABETH BREMNER DIRECTOR	1 00	X						0	0	0
(2) ASHLEY BLANCHARD DIRECTOR	1 00	X						0	0	0
(3) JEANNIE DIEFENDERFER VICE-CHAIR-TERM ENDED MAY 2015	1 00	X		X				0	0	0
(4) CATHY RAPHAEL DIRECTOR	1 00	X						0	0	0
(5) RENE A REDWOOD CO-TREASURER	1 00	X		X				0	0	0
(6) VERNA WILLIAMS SECRETARY	1 00	X		X				0	0	0
(7) EVE E ELLIS CO-TREASURER	1 00	X		X				0	0	0
(8) LAUREN EMBREY DIRECTOR	1 00	X						0	0	0
(9) HEATHER ARNET CHAIR	1 00	X		X				0	0	0
(10) ALICIA LARA DIRECTOR	1 00	X						0	0	0
(11) SIMONE SNEED DIRECTOR	1 00	X						0	0	0
(12) SUSAN DICKLER VICE-CHAIR	1 00	X		X				0	0	0
(13) GARA LAMARCHE DIRECTOR-TERM ENDED FEB 2015	1 00	X						0	0	0
(14) MICHAEL CAMPBELL DIRECTOR-TERM ENDED FEB 2015	1 00	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(15) JENNA BUSSMAN-WISE DIRECTOR	1 00	X						0	0	0
(16) JOCELYN FRYE DIRECTOR	1 00	X						0	0	0
(17) LYNN MALERBA DIRECTOR	1 00	X						0	0	0
(18) GAIL WASSERMAN DIRECTOR	1 00	X						0	0	0
(19) TOM WATSON DIRECTOR	1 00	X						0	0	0
(20) TERESA YOUNGER PRESIDENT/CEO	40 00			X				125,816	0	8,348
(21) ROSINA BARBA VP, FINANCE & ADMIN	40 00			X				152,250	0	10,404
(22) ALESIA SOLTANPANAH VP, DEVELOPMENT THROUGH JAN 2015	40 00				X			186,191	0	20,286
(23) MICHAEL CORRENTE DIRECTOR, INSTITUTIONAL PARTNERSHIPS	40 00					X		100,156	0	12,113
(24) ELLEN LIU DIRECTOR, WOMEN'S HEALTH	40 00					X		109,100	0	4,364
(25) ALEYAMMA MATHEW DIRECTOR, WOMEN'S ECONOMIC JUSTICE	40 00					X		107,885	0	12,363
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								781,398	0	67,878

2Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶6

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
CAMINO PUBLIC RELATIONS 134 W 18TH STREET NEW YORK, NY 10011	COMMUNICATIONS AND MEDIA SERVICES	219,605

2Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶1

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c	661,335			
	d	Related organizations 1d				
	e	Government grants (contributions) 1e				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	7,017,586			
	g	Noncash contributions included in lines 1a-1f \$	345,330			
	h	Total. Add lines 1a-1f	7,678,921			
Program Service Revenue	2a	Business Code				
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	641,827			641,827
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6a	Gross rents				
	b	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss)	45,000			45,000
	7a	Gross amount from sales of assets other than inventory				
	b	Less cost or other basis and sales expenses				
	c	Gain or (loss)				
	d	Net gain or (loss)	2,278,379			2,278,379
	8a	Gross income from fundraising events (not including \$ 661,335 of contributions reported on line 1c) See Part IV, line 18				
	b	Less direct expenses				
	c	Net income or (loss) from fundraising events	-227,395			-227,395
	9a	Gross income from gaming activities See Part IV, line 19				
	b	Less direct expenses				
	c	Net income or (loss) from gaming activities	0			
	10a	Gross sales of inventory, less returns and allowances				
	b	Less cost of goods sold				
	c	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue				
	11a	OTHER INCOME	5,212			5,212
	b					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d	5,212			
	12	Total revenue. See Instructions	10,421,944	0	0	2,743,023

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	1,812,577	1,812,577		
2	Grants and other assistance to domestic individuals. See Part IV, line 22.				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	654,001	396,370	137,478	120,153
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.	1,511,007	922,133	311,622	277,252
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	29,568	16,353	8,759	4,456
9	Other employee benefits.	251,135	138,908	63,897	48,330
10	Payroll taxes.	184,417	95,666	59,870	28,881
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	55,942		55,008	934
c	Accounting.	30,750		30,750	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.	115,045			115,045
f	Investment management fees.	211,560		211,560	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	696,460	511,871	85,201	99,388
12	Advertising and promotion.	6,811		6,811	
13	Office expenses.	354,689	166,812	79,442	108,435
14	Information technology.	60,047	30,866		29,181
15	Royalties.				
16	Occupancy.	690,059	400,580	161,546	127,933
17	Travel.	151,220	102,362	27,407	21,451
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	27,383	4,319	21,080	1,984
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	72,559		72,559	
23	Insurance.	50,720		50,720	
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):				
a	CONVENINGS	187,039	187,039		
b	OUTSIDE EVENTS AND OTHE	12,450	1,350	10,950	150
c	OTHER DIRECT EXPENSE	11,509	909	9,593	1,007
d	SPACE RENTAL AND CATERI	4,689	4,689		
e	All other expenses	4,111			4,111
25	Total functional expenses. Add lines 1 through 24e.	7,185,748	4,792,804	1,404,253	988,691
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

Check if Schedule O contains a response or note to any line in this Part X

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		500	1	500
	2	Savings and temporary cash investments		2,390,909	2	4,302,145
	3	Pledges and grants receivable, net		2,746,216	3	4,380,215
	4	Accounts receivable, net		2,408	4	4,563
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	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			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		70,523	9	68,944
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,931,211		
	b	Less accumulated depreciation	10b	1,471,385	530,502	10c 459,826
	11	Investments—publicly traded securities		37,302,053	11	36,488,551
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		229,867	15	241,036
	16	Total assets. Add lines 1 through 15 (must equal line 34)		43,272,978	16	45,945,780
Liabilities	17	Accounts payable and accrued expenses		344,474	17	572,907
	18	Grants payable		685,000	18	1,153,500
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 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		201,655	25	198,528
	26	Total liabilities. Add lines 17 through 25		1,231,129	26	1,924,935
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		2,711,382	27	2,394,309
	28	Temporarily restricted net assets		14,489,922	28	16,851,031
	29	Permanently restricted net assets		24,840,545	29	24,775,505
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		42,041,849	33	44,020,845
	34	Total liabilities and net assets/fund balances		43,272,978	34	45,945,780

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,421,944
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,185,748
3	Revenue less expenses Subtract line 2 from line 1	3	3,236,196
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	42,041,849
5	Net unrealized gains (losses) on investments	5	-1,236,140
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	-21,060
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	44,020,845

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990EZ)

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.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization MS FOUNDATION FOR WOMEN INC	Employer identification number 23-7252609
---	--

Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations _____
- g

Provide the following information about the supported organization(s)

(i)Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	8,424,381	4,787,881	8,292,736	4,608,704	7,678,921	33,792,623
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	8,424,381	4,787,881	8,292,736	4,608,704	7,678,921	33,792,623
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						11,554,764
6 Public support. Subtract line 5 from line 4						22,237,859

Section B. Total Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	8,424,381	4,787,881	8,292,736	4,608,704	7,678,921	33,792,623
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,056,685	871,548	791,051	792,676	686,827	4,198,787
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	5,014	38	4,095	2,936	5,212	17,295
11	Total support. Add lines 7 through 10						38,008,705
12	Gross receipts from related activities, etc. (see instructions)					12	220,554
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 						

Section C. Computation of Public Support Percentage			
14	Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	58 510 %
15	Public support percentage for 2013 Schedule A, Part II, line 14	15	65 960 %
16a	33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 		
b	33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 		
17a	10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization 		
b	10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization 		
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions 		

Part IIISupport 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 in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services 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 furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, 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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b 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 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 VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2013. 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 ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 <u>Activities Test</u> Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 <u>Parent of Supported Organizations</u> Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V – Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009.			
b From 2010.			
c From 2011.			
d From 2012.			
e From 2013.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010.			
b From 2011.			
c From 2012.			
d From 2013.			
e From 2014.			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	OTHER INCOME - 2010 AMOUNT \$ 5,014 2011 AMOUNT \$ 38 2012 AMOUNT \$ 4,095 2013 AMOUNT \$ 2,936 2014 AMOUNT \$ 5,212

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**

▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at**

www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public 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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization MS FOUNDATION FOR WOMEN INC	Employer identification number 23-7252609
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	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).

1	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	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	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	

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

Part II-A

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

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	30,500													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	23,000													
c	Total lobbying expenditures (add lines 1a and 1b)	53,500													
d	Other exempt purpose expenditures	6,143,557													
e	Total exempt purpose expenditures (add lines 1c and 1d)	6,197,057													
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	459,853													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		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		
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 line 1f)	114,963													
h	Subtract line 1g from line 1a If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	☐ Yes ☐ 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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount	539,325	505,196	505,519	459,853	2,009,893
b Lobbying ceiling amount (150% of line 2a, column(e))					3,014,840
c Total lobbying expenditures	60,060	43,500	11,281	53,500	168,341
d Grassroots nontaxable amount	134,831	126,299	126,380	114,963	502,473
e Grassroots ceiling amount (150% of line 2d, column (e))					753,710
f Grassroots lobbying expenditures	42,319	38,500	5,213	30,500	116,532

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
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?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

1	Were substantially all (90% or more) dues received nondeductible by members?	1	Yes	No
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		

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, 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).		
a	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

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, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation

[illegible]

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2014

Open to Public Inspection

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization MS FOUNDATION FOR WOMEN INC	Employer identification number 23-7252609
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	8	
2 Aggregate value of contributions to (during year)	287,872	
3 Aggregate value of grants from (during year)	333,200	
4 Aggregate value at end of year	4,310,709	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	☒ Yes	☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	☒ Yes	☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1

► \$

(ii) Assets included in Form 990, Part X

► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included in Form 990, Part VIII, line 1

► \$

b Assets included in Form 990, Part X

► \$

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	
- 2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	33,012,349	29,741,000	26,770,991	27,791,499	24,117,747
b Contributions	5,000	187,641	761,882	178,487	551,617
c Net investment earnings, gains, and losses	1,610,796	4,880,712	3,847,148	46,615	4,476,605
d Grants or scholarships					
e Other expenditures for facilities and programs	1,324,188	1,797,004	1,639,021	1,245,610	1,354,470
f Administrative expenses	211,635				
g End of year balance	33,092,322	33,012,349	29,741,000	26,770,991	27,791,499

- 2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment ▶

3 540 %

b

Permanent endowment ▶

74 870 %

c

Temporarily restricted endowment ▶

21 590 %

The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

☐ Yes

☐ No

(ii) related organizations

3a(ii)

☐ Yes

☐ No
- b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

☐ Yes

☐ No

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,334,792	889,675	445,117
d Equipment		596,419	581,710	14,709
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶				459,826

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	8,974,244
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-1,236,140
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	-1,236,140
3	Subtract line 2e from line 1	3	10,210,384
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	211,560
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	211,560
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	10,421,944

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	6,995,248
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	21,060
e	Add lines 2a through 2d	2e	21,060
3	Subtract line 2e from line 1	3	6,974,188
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	211,560
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	211,560
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	7,185,748

Part XIII

Supplemental Information

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 information.

Return Reference	Explanation
PART V, LINE 4	THE PURPOSE IS TO PROVIDE LONG-TERM SUPPORT FOR PROGRAMS. THE INCOME FROM ENDOWMENT IS AVAILABLE FOR GENERAL OPERATIONS.
PART X, LINE 2	MS FOUNDATION RECOGNIZES THE EFFECT OF TAX POSITIONS ONLY WHEN THEY ARE MORE LIKELY THAN NOT TO BE SUSTAINED. MANAGEMENT IS NOT AWARE OF ANY VIOLATION OF ITS TAX STATUS AS AN ORGANIZATION EXEMPT FROM INCOME TAXES, NOR OF ANY EXPOSURE TO UNRELATED BUSINESS INCOME TAX. THE MS FOUNDATION IS NO LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING JURISDICTIONS FOR PERIODS PRIOR TO 2012.
PART XII, LINE 2D - OTHER ADJUSTMENTS	LOSSES ON UNCOLLECTIBLE PLEDGES 21,060

[illegible]

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
Attach to Form 990 or Form 990-EZ.
Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
MS FOUNDATION FOR WOMEN INC

Employer identification number
23-7252609

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☒

Mail solicitations

e

☒

Solicitation of non-government grants

b

☒

Internet and email solicitations

f

☐

Solicitation of government grants

c

☒

Phone solicitations

g

☒

Special fundraising events

d

☒

In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes

☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 THOMPSON HABIB & DENISON INC 65 SOUTH BROADWAY TARRYTOWN, NY 10591	FUNDRAISING COUNSEL AND MARKETING		No	24,719	115,045	-90,326
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				24,719	115,045	-90,326

3

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

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		WOMEN OF VISION (event type)	(event type)	(total number)	(add col (a) through col (c))
Revenue	1	Gross receipts	754,710		754,710
	2	Less Contributions	661,335		661,335
	3	Gross income (line 1 minus line 2)	93,375		93,375
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	128,783		128,783
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	191,987		191,987
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Subtract line 10 from line 3, column (d) ▶			
					(320,770)
					-227,395

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	Yes % No	Yes % No	Yes % No
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Subtract line 7 from line 1, column (d) ▶			

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11

Does the organization conduct gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activities conducted in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14

Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization and the amount of gaming revenue retained by the third party

\$ and the \$

c

If "Yes," enter name and address of the third party

Name

Address

16

Gaming manager information

Name

Gaming manager compensation

Description of services provided

☐ Director/officer ☐ Employee ☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year

\$

Part IV

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Return Reference	Explanation
------------------	-------------

Schedule G (Form 990 or 990-EZ) 2014

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
MS FOUNDATION FOR WOMEN INC

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.
▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public
Inspection

Employer identification number
23-7252609

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

89

3

Enter total number of other organizations listed in the line 1 table

Part III

Grants and Other Assistance to Domestic Individuals. 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)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE MS FOUNDATION REQUESTS, AND KEEPS ON FILE, WRITTEN REPORTS FROM ALL GRANTEEES THAT RECEIVE \$5,000 OR MORE IN FUNDING THE REPORTS INCLUDE A DESCRIPTION OF PROGRAMMATIC ACTIVITIES AND ACCOMPLISHMENTS, AS WELL AS A REPORT ON THE EXPENDITURE OF GRANT FUNDS WE ALSO USE OUTSIDE EVALUATORS TO COLLECT DATA ON THE WORK AND IMPACT OF MOST OF OUR GRANTEEES, AND MAKE PERIODIC PHONE CALLS AND SITE VISITS TO A PORTION OF OUR GRANTEEES EACH YEAR

Additional Data

Software ID:
Software Version:
EIN: 23-7252609
Name: MS FOUNDATION FOR WOMEN INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACT FOR WOMEN AND GIRLS323 WOAK AVE VISALIA,CA 93279	26-0287450	501(C)3	35,000				TO PROVIDE GENERAL OPERATING SUPPORT
ADHIKAAR FOR HUMAN RIGHTS AND SOCIAL JUSTICE71-07 WOODSIDE AVENUE WOODSIDE,NY 11377	20-3384725	501(C)3	50,000				TO SUPPORT THE PROJECT QUALITY CHILDCARE FOR ECONOMIC SECURITY
AFRICAN COMMUNITIES TOGETHER381 CANAL PLACE SUITE 207 BRONX,NY 10451	46-1689772	501(C)3	25,000				TO PROVIDE SUPPORT FOR THE LIVELYUP AFRICAN WOMEN'S LIVELIHOOD PROJECT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALL OUR KIN INC414A CHAPEL STREET SUITE 100 NEW HAVEN,CT 06530	06-1539280	501(C)3	35,000				TO SUPPORT THE PROTECTING CHILD CARE IN A TIME OF CRISIS PROJECT
ASIAN AMERICAN FILM LAB20 JAY STREET SUITE 740 BROOKLYN,NY 10128	20-5310887	501(C)3	11,000				TO SUPPORT THE SHORT FILM,THE OPPOSITE OF A FAIRY TALE
ASIAN AMERICAN LEGAL DEFENSE AND EDUCATION FUND (AALDEF)99 HUDSON STREET 12TH FLOOR NEW YORK,NY 10013	13-2855641	501(C)3	13,000				TO SUPPORT THE PUBLISHING OF A ZINE,A MAGAZINE FEATURING MULTI- GENERATIONAL VOICES OF UNDOCUMENTED ASIAN WOMEN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASIAN WOMEN GIVING CIRCLE/O MS FOUNDATION FOR WOMEN 12 METROTECH CENTER 26TH FLOOR BROOKLYN, NY 11217	23-7252609	501(C)3	10,000				TO PROVIDE GENERAL OPERATING SUPPORT
CALIFORNIA CHILD CARE RESOURCE & REFERRAL NETWORK (PARENT VOICES)111 NEW MONTGOMERY STREET 7TH FLOOR FLOOR SAN FRANCISCO, CA 94105	94-2718807	501(C)3	50,000				TO SUPPORT MOTHERS ADVOCATING FOR JUSTICE IN CHILD CARE PROJECT
CALIFORNIA COALITION AGAINST SEXUAL ASSAULT1215 K STREET STE 1850 SACRAMENTO, CA 95814	94-2800985	501(C)3	20,000				TO PROVIDE SUPPORT FOR THE #POWERINPREVENTION ENDING CHILD SEXUAL ABUSE WEB CONFERENCE SERIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA LATINAS FOR REPRODUCTIVE JUSTICE 244 S SAN PEDRO ST STE 405 LOS ANGELES, CA 90086	26-2213868	501(C)3	30,000				TO PROVIDE GENERAL OPERATING SUPPORT
CENTER FOR FRONTLINE RETAIL 140 WEST 31ST ST NEW YORK, NY 10001	11-3344389	501(C)3	30,000				TO SUPPORT THE BUILD POWER TO BUILD CHILD CARE PROJECT
CENTRO DE LOS DERECHOS DEL MIGRANTE INC 519 N CHARLES ST SUITE 260 BALTIMORE, MD 21201	20-2585279	501(C)3	40,000				TO SUPPORT FROM THE GROUND UP, PART 2 BUILDING ON A FOUNDATION PROJECT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDSpace DAY CARE CENTER INC7500 GERMANTOWN AVENUE PHILADELPHIA,PA 19119	23-2529443	501(C)3	35,000				TO PROVIDE GENERAL OPERATING SUPPORT
COLLABORATIVE ARTS PROJECT 21 INC18 WEST 18TH STREET 6TH FLOOR NEWYORK,NY 10011	13-3735969	501(C)3	6,000				TO SUPPORT CHANDRA & PHOOLAN, A NEW MUSICAL
COLORADO ORGANIZATION FOR LATINA OPPORTUNITY AND REPRODUCTIVE RIGHTSP.O BOX 40991 DENVER,CO 80204	84-1569021	501(C)3	55,000				TO PROVIDE GENERAL OPERATING SUPPORT AND SUPPORT FOR THE PROJECT "PLEDGE TO ENROLL"

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CONNECT INC127 WEST 127TH STREET ROOM 431 NEWYORK,NY 10027	02-0694269	501(C)3	17,500				TO PROVIDE GENERAL OPERATING SUPPORT TO END CHILD SEXUAL ABUSE
EL PUEBLO INC2321 CRABTREE BLVD SUITE 105 RALEIGH,NC 27604	56-1934310	501(C)3	40,000				TO SUPPORT THE PROJECT "NUESTROS DERECHOS SIN FRONTERAS/OUR RIGHTS HAVE NO BORDERS"
EX-MUSLIMS OF NORTH AMERICA1069 W BROAD ST SUITE 142 FALLS CHURCH,VA 22046	46-4333040	501(C)3	5,000				TO PROVIDE SUPPORT FOR THE BOOK AN EX-MUSLIM FEMINISTS JOURNEY OUT OF EGYPT

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SERVICE WOMEN'S ACTION NETWORK220 5TH AVENUE 8TH FLOOR NEWYORK,NY 10001	13-2612524	501(C)3	10,000				TO PROVIDE SUPPORT FOR WOMEN VETERANS LEADERSHIP IN ACTION, IN PARTNERSHIP AND IN TRAINING PROJECT
GARMENT WORKER CENTER1250 S LOS ANGELES ST LOS ANGELES,CA 90015	81-0622327	501(C)3	50,000				TO PROVIDE SUPPROT FOR HANGING BY A THREAD STRATEGIES FOR IMPROVING LOS ANGELES' GARMENT WORKERS' ACCESS TO AFFORDABLE CHILD CARE PROJECT
HIGHER HEIGHTS LEADERSHIP FUND147 PRINCE STREET SUITE 7 BROOKLYN,NY 11201	46-3554404	501(C)3	2,500				TO PROVIDE GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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IBIS REPRODUCTIVE HEALTH17 DUNSTER STREET SUITE 201 CAMBRIDGE,MA 02138	03-0382773	501(C)3	10,000				TO SUPPORT THE LATER ABORTION NETWORK (LAN), WHICH AIMS TO MOBILIZE A COORDINATED EFFORT TO ENSURE ACCESS TO AND PROVISION OF LATER ABORTION IN THE U S
FRANKLIN FURNACE ARCHIVEC/O PRATT INSTITUTE 200 WILLOUGHBY AVE BROOKLYN,NY 11205	13-2879766	501(C)3	8,000				TO SUPPORT FIREWALL, A COLLABORATIVE VIDEO INSTALLATION AND RESEARCH PROJECT ON GENDER ISSUES IN CHINA
WOMEN IN ISLAM INC402 WEST 148TH STREET SUITE 5 NEWYORK,NY 10031	47-0924438	501(C)3	11,000				TO SUPPORT THE MUSLIM WOMEN'S STORY LAB

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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KENTUCKY HEALTH JUSTICE NETWORK959 BARRET AVE LOUISVILLE,KY 40204	27-1246514	501(C)3	15,000				REPRODUCTIVE JUSTICE, TRANS* HEALTH AND BUILDING TRANS* POWER
KINGSBRIDGE HEIGHTS COMMUNITY CENTER3101 KINGSBRIDGE TERRACE BRONX,NY 10466	13-2813809	501(C)3	20,000				TO PROVIDE GENERAL OPERATING SUPPORT TO END CHILD SEXUAL ABUSE
KUNDIMAN INC229 W 109 STREET 22 NEWYORK,NY 10025	06-1650662	501(C)3	11,000				TO SUPPORT A LETTER HOME NEPALI STORIES PROJECT

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PERFORMANCE ZONE INC 75 MAIDEN LANE NEW YORK, NY 100384614	13-3357408	501(C)3	8,000				TO SUPPORT MS ORIENTAL, A PLAY THAT CONFRONTS CONCERNS OVER IDENTITY, OPPORTUNITY, AND THE SENSE OF HISTORY MISSING FROM THE ASIAN AMERICAN EXPERIENCE
MEDIA VOICES FOR CHILDREN 110 DAGGETT AVENUE VINEYARD HAVEN, MA 02568	26-2908915	501(C)3	3,000				TO PROVIDE GENERAL OPERATING SUPPORT
MINNESOTA COALITION AGAINST SEXUAL ASSAULT 161 ST ANTHONY AV SUITE 1001 ST PAUL, MN 55103	41-1459621	501(C)3	22,500				TO PROVIDE GENERAL OPERATING SUPPORT TO END CHILD SEXUAL ABUSE

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MISSISSIPPI LOW INCOME CHILDCARE INITIATIVE 684 WALKER STREET BILOXI, MS 39533	64-0943404	501(C)3	50,000				TO PROVIDE GENERAL OPERATING SUPPORT
MUJERES UNIDAS Y ACTIVAS3543 18TH STREET BOX 23 SAN FRANCISCO, CA 94110	20-2986926	501(C)3	50,000				TO PROVIDE SUPPORT FOR MUA DOMESTIC WORKER ORGANIZING PROJECT
NATIONAL ADVOCATES FOR PREGNANT WOMEN15 WEST 36TH STREET SUITE 901 NEW YORK, NY 10018	52-2282183	501(C)3	10,000				TO PROVIDE SUPPORT FOR ADVANCING REPRODUCTIVE HEALTH, RIGHTS, AND JUSTICE ACTIVISM IN THE RED STATES PROJECT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NATIONAL ASIAN PACIFIC AMERICAN WOMEN'S FORUM155 WATER STREET BROOKLYN,NY 11201	51-0198509	501(C)3	40,000				TO PROVIDE SUPPORT FOR THE BUILDING AAPI WOMEN'S POWER FOR REPRODUCTIVE JUSTICE PROJECT
NATIONAL LATINA INSTITUTE FOR REPRODUCTIVE HEALTH50 BROAD STREET SUITE 1937 NEWYORK,NY 10004	52-1891734	501(C)3	40,000				TO PROVIDE GENERAL OPERATING SUPPORT
NATIONAL NETWORK OF ABORTION FUNDSPO BOX 170280 BOSTON,MA 02117	04-3236982	501(C)3	20,000				TO PROVIDE GENERAL OPERATING SUPPORT

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NATIVE AMERICAN COMMUNITY BOARD809 HIGH ST LAKE ANDES,SD 57356	46-0392867	501(C)3	30,000				TO PROVIDE SUPPORT FOR THE INDIGENOUS WOMEN'S HEALTH AND REPRODUCTIVE JUSTICE (RJ) PROGRAM
COREALIGN1330 BROADWAY STE 730 OAKLAND,CA 94612	20-5806345	501(C)3	5,000				TO PROVIDE GENERAL OPERATING SUPPORT
NONTRADITIONAL EMPLOYMENT FOR WOMEN 243 WEST 20TH STREET NEW YORK,NY 10011	13-3272001	501(C)3	3,500				TO PROVIDE SUPPORT FOR NEW'S TRAINING PROGRAMS FOR LOW-INCOME WOMEN

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NORTHWEST HEALTH LAW ADVOCATES4759 15TH AVE NE STE 305 SEATTLE, WA 98105	91-1961032	501(C)3	35,000				TO PROVIDE SUPPORT FOR THE ENSURING ACCESS TO COVERAGE AND CARE FOR WASHINGTON WOMEN PROJECT
NURSING STUDENTS FOR CHOICE2356 UNIVERSITY AVE W SUITE 244 SAINT PAUL, MN 55114	27-0560247	501(C)3	20,000				TO PROVIDE GENERAL OPERATING SUPPORT
OREGON FOUNDATION FOR REPRODUCTIVE HEALTH310 SW 4TH AVE SUITE 840 PORTLAND, OR 97240	93-0803636	501(C)3	20,000				TO PROVIDE SUPPORT FOR INTEGRATING REPRODUCTIVE HEALTH INTO PRIMARY CARE AND COMPREHENSIVE COVERAGE

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OUR BODIES OURSELVES5 UPLAND RD 3 CAMBRIDGE,MA 02140	23-7274169	501(C)3	10,000				TO SUPPORT OUR BODIES OURSELVES 40TH ANNIVERSARY SYMPOSIUM
PEACE OVER VIOLENCE 1015 WILSHIRE BOULEVARD SUITE 200 LOS ANGELES,CA 90017	51-0179305	501(C)3	15,000				TO PROVIDE GENERAL OPERATING SUPPORT TO END CHILD SEXUAL ABUSE
PLANNED PARENTHOOD OF SOUTHEAST75 PIEDMONT AVENUE NE SUITE 800 ATLANTA,GA 30303	58-6045874	501(C)3	25,000				TO PROVIDE SUPPORT FOR REPRODUCTIVE JUSTICE AND ECONOMIC JUSTICE CONNECTING THE WORK PROJECT

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PLANNED PARENTHOOD PUBLIC POLICY NETWORK OF THE NORTHWEST2001 E MADISON SEATTLE,WA 98122	20-1987331	501(C)3	10,000				TO PROVIDE SUPPORT TO EXPANDING ACA ENROLLMENT & INCREASING ACCESS TO REPRODUCTIVE/SEXUAL HEALTH SERVICES
PREVENT CHILD ABUSE AMERICA228 S WABASH AVE 10TH FLOOR CHICAGO,IL 60604	23-7235671	501(C)3	12,500				TO PROVIDE SUPPORT IN DEVELOPING RESOURCES FOR A NATIONAL CHILD SEXUAL ABUSE PREVENTION TECHNICAL ASSISTANCE CENTER
PREVENT CHILD ABUSE NEW JERSEY103 CHURCH STREET NEW BRUNSWICK,NJ 08901	22-2314861	501(C)3	12,500				TO PROVIDE SUPPORT TO BUILD THE MOVEMENT TO END CHILD SEXUAL ABUSE IN NJ

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PRO-CHOICE RESOURCES 250 THIRD AVENUE NORTH SUITE 625 MINNEAPOLIS, MN 55401	41-0971333	501(C)3	30,000				TO PROVIDE GENERAL OPERATING SUPPORT
PROVIDE INC (FORMERLY ABORTION ACCESS PROJECT)47 THORNDIKE STREET CAMBRIDGE, MA 02141	04-3298538	501(C)3	25,000				TO PROVIDE GENERAL OPERATING SUPPORT
PUGET SOUND SAGE1032 S JACKSON ST SUITE 203 SEATTLE, WA 98144	20-8974030	501(C)3	30,000				TO PROVIDE SUPPORT TO ADVANCING A RACE, GENDER & WORKER JUSTICE AGENDA FOR UNIVERSAL CHILDCARE PROJECT

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PURDUE UNIVERSITY610 PURDUE MALL WEST LAFAYETTE,IN 479072051	35-6002041	501(C)3	20,000				TO PROVIDE GENERAL OPERATING SUPPORT TO END CHILD SEXUAL ABUSE
RAISING WOMEN'S VOICES-NY475 RIVERSIDE DRIVE SUITE 1600 NEW YORK,NY 02108	04-3355127	501(C)3	35,000				TO PROVIDE SUPPORT FOR SECURING THE PROMISE OF HEALTH REFORM FOR NEW YORK'S WOMEN PROJECT
REPRODUCTIVE JUSTICE COLLECTIVE161 W WISCONSIN AVENUE SUITE 1000LL 1000LL MILWAUKEE,WI 53203	39-0806258	501(C)3	30,000				TO PROVIDE GENERAL OPERATING SUPPORT AND SUPPORT A TRANSITION CONSULTANT

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RESTAURANT OPPORTUNITIES CENTERS UNITED275 SEVENTH AVE SUITE 1703 NEW YORK,NY 10001	01-0939141	501(C)3	20,000				TO PROVIDE SUPPORT FOR CHILDCARE COOPERATIVE EXPANSION AND ONE FAIR WAGE PROJECT
RURAL DEVELOPMENT LEADERSHIP NETWORK98 PRINCE ST STATION NEW YORK,NY 10012	13-3213301	501(C)3	2,500				TO PROVIDE GENERAL OPERATING SUPPORT
SAMARITAN COUNSELING CENTER1803 OREGON PIKE LANCASTER,PA 17601	23-2467315	501(C)3	25,000				TO PROVIDE GENERAL OPERATING SUPPORT TO END CHILD SEXUAL ABUSE

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SISTER SONG1237 RALPH DAVID ABERNATHY BLVD ATLANTA,GA 30310	51-0544927	501(C)3	1,000				TO PROVIDE SUPPORT FOR THEIR BOARD OF DIRECTORS MEETING
SMITH COLLEGESMITH COLLEGE 10 ELM STREET NORTHAMPTON,MA 01063	04-1843040	501(C)3	10,000				TO SUPPORT THE GLORIA STEINEM PROGRAM FOR SOCIAL CHANGE
SOAPBOX THE FEMINIST FOUNDATION106 SUFFOLK STREET APT 2A NEWYORK,NY 10002	46-4146072	501(C)3	50,000				TO SUPPORT THE FEMINIST CAMP, AS WELL AS, THE DOCUMENTARY MAKERS AND SUPPORT THE YOUNG WOMEN'S LEADERSHIP EXCHANGE IN ZAMBIA, WHICH SEEKS TO EXPAND THE HORIZONS OF YOUNG NY STUDENTS THROUGH ACTIVE AND INTERACTIVE FEMINISMS ABROAD

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SOUTH AFRICA PARTNERS 89 SOUTH STREET SUITE 701 BOSTON, MA 02111	04-3396641	501(C)3	2,000				TO PROVIDE SUPPORT FOR THE EARLY CHILDHOOD DEVELOPMENT PROGRAM
SOUTH ASIAN YOUTH ACTION (SAYA)54-05 SEABURY STREET ELMHURST, NY 11373	13-3943630	501(C)3	11,000				TO SUPPORT THE DESI GIRLS DOCUMENTARY FILM PROJECT
SPARK REPRODUCTIVE JUSTICE NOW250 GEORGIA AVE SE SUITE 207C ATLANTA, GA 30312	58-1872316	501(C)3	25,000				TO PROVIDE SUPPORT TO ENSURING REPRODUCTIVE HEALTH, RIGHTS, AND JUSTICE FOR GEORGIA'S MOST VULNERABLE PROJECT

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STUDIO TWO THREE1617 W MAIN ST RICHMOND,VA 23220	27-0876594	501(C)3	4,000				TO PROVIDE GENERAL OPERATING SUPPORT
TEWA WOMEN UNITED912 FAIRVIEW LN ESPANOLA,NM 87567	85-0480836	501(C)3	15,000				CIRCLING AND EMBRACING ALL CHILDREN- TA'HKI AY YAA PINGEH
THE FAMILY TREE2108 NORTH CHARLES STREET BALTIMORE,MD 21218	52-1110645	501(C)3	12,500				TP PROVIDE SUPPORT IN THE MOVING MARYLAND FORWARD TO END CHILD SEXUAL ABUSE PROJECT

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THE INSTITUTE FOR AEGEAN PREHISTORY STUDY CENTER FOR EAST CRETE2133 ARCH ST MULBERRY ATRIUM SUITE 300 PHILADELPHIA,PA 19103	13-3832587	501(C)3	15,000				TO PROVIDE FUNDING FOR SCHOLARSHIPS THAT WILL INVESTIGATE THE ROLE OF GENDER IN PREHISTORIC CRETE AND TO PROVIDE GENERAL OPERATING SUPPORT
THE NEW SCHOOL80 FIFTH AVENUE 4TH FLOOR ROOM 402 NEWYORK,NY 10011	13-3297197	501(C)3	35,000				FELLOWSHIP PROGRAM TO STRENGTHEN GRANTEES' COMMUNICATIONS AND ADVOCACY EFFORTS AND BRING INNOVATIVE SOLUTIONS TO THE BROADER REPRODUCTIVE JUSTICE MOVEMENT
THE OL EDUCATION FUND 411 BELLAMAH NW ALBUQUERQUE,NM 87102	27-1275857	501(C)3	35,000				TO PROVIDE SUPPORT FOR THE OLE WORKING PARENTS PARTNERSHIP PROJECT

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THE OPED PROJECT175 VARICK ST 6TH FLOOR NEWYORK,NY 10014	27-2877151	501(C)3	46,500				FELLOWSHIP PROGRAM TO CHANGE THE DEMOGRAPHICS OF PUBLIC VOICE AND THOUGHT LEADERSHIP
THE YARD INCPO BOX 405 CHILMARK,MA 02535	23-7348937	501(C)3	1,000				TO PROVIDE GENERAL OPERATING SUPPORT
THE YES LAB20 COOPER SQUARE 5TH FLOOR NEWYORK,NY 10003	27-3621511	501(C)3	10,000				TO PROVIDE GENERAL OPERATING SUPPORT

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THIRD WORLD NEWSREEL THIRD WORLD NEWSREEL 545 EIGHTH AVE SUITE 550 NEW YORK,NY 10018	13-2624257	501(C)3	13,000				TO SUPPORT THE DOCUMENTARY #NAILEDIT VIETNAMESE & THE NAIL INDUSTRY
TRUSTEES OF HAMPSHIRE COLLEGE COLLEGE/O HAMPSHIRE COLLEGE 893 WEST STREET AMHERST,MA 01002	04-6130872	501(C)3	10,000				TO PROVIDE SUPPORT FOR BUILDING THE MOVEMENT PROJECT, WHICH TRAINS YOUNG LEADERS IN THE REPRODUCTIVE JUSTICE MOVEMENT
URGE UNITE FOR REPRODUCTIVE AND GENDER EQUITY 1317 F ST NW SUITE 501 WASHINGTON,DC 20004	52-1772575	501(C)3	25,000				TO PROVIDE GENERAL OPERATING SUPPORT

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VERA INSTITUTE OF JUSTICE233 BROADWAY 12TH FLOOR NEW YORK, NY 10279	13-1941627	501(C)3	45,000				TO SUPPORT THE EFFORTS IN ENDING SEXUAL ABUSE OF CHILDREN WITH DISABILITIES AND DEAF CHILDREN
WEST VIRGINIA FREEPO BOX 11042 CHARLESTON, WV 25339	55-0715930	501(C)3	75,000				TO PROVIDE SUPPORT FOR THE ORGANIZING FOR WOMEN'S LIVES IN APPALACHIA PROJECT AND PROVIDE SUPPORT IN ADVANCING POLICY, OUTREACH AND ENROLLMENT FOR WEST VIRGINIA WOMEN
WOMEN'S FUNDING NETWORK222 SUTTER STREET SUITE 500 SAN FRANCISCO, CA 94108	41-1685134	501(C)3	5,000				TO PROVIDE SUPPORT FOR THE 2015 WOMEN'S FUNDING NETWORK ANNUAL CONFERENCE

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WOMEN'S MEDIA CENTER 1825 K STREET NW SUITE 400 WASHINGTON, DC 20006	38-3727585	501(C)3	20,000				TO PROVIDE GENERAL OPERATING SUPPORT
WRITERS IN BALTIMORE SCHOOLS 3103 N CHARLES STREET BALTIMORE, MD 21218	52-2148413	501(C)3	1,000				TO PROVIDE GENERAL OPERATING SUPPORT
YOUNG WOMEN UNITED 309 GOLD AVE SW ALBUQUERQUE, NM 87102	85-0481224	501(C)3	40,000				TO PROVIDE GENERAL OPERATING SUPPORT

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
MS FOUNDATION FOR WOMEN INC

Employer identification number
23-7252609

Part I

Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☒ Compensation committee ☒ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c	No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	No
b Any related organization? If "Yes," to line 5a or 5b, describe in Part III.	5b	No
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	No
b Any related organization? If "Yes," to line 6a or 6b, describe in Part III.	6b	No
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ROSINA BARBA, VP, FINANCE & ADMIN	(i)	152,250	0	0	1,159	9,245	162,654	0
	(ii)	0	0	0	0	0	0	0
2 ALESIA SOLTANPANAH, VP, DEVELOPMENT THROUGH JAN 2015	(i)	186,191	0	0	4,247	16,039	206,477	0
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

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.

Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.
►Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
MS FOUNDATION FOR WOMEN INC

Employer identification number
23-7252609

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	13	320,022	PROCEEDS OF STOCK SALES
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	3	5,150	FMV
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (EVENT/GIFT ITEMS)	X	3	17,500	FMV
26 Other ► (RAFFLE ITEMS)	X	8	2,658	FMV
27 Other ► (_____)				
28 Other ► (_____)				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	0		
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a	Yes	No	No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	No	No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	Yes	No	No
b If "Yes," describe in Part II				
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part II

Supplemental Information.

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.

Return Reference	Explanation
PART I, COLUMN (B)	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS IN COLUMN (B)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization MS FOUNDATION FOR WOMEN INC	Employer identification number 23-7252609
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990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	
FORM 990, PART VI, SECTION B, LINE 12C	A CONFLICT OF INTEREST DISCLOSURE STATEMENT IS COMPLETED ANNUALLY BY DIRECTORS, OFFICERS, COMMITTEE MEMBERS AND KEY STAFF MEMBERS. IF A CONFLICT OF INTEREST EXISTS, IT IS ADDRESSED AT THE BOARD MEETING. IF THERE IS A POTENTIAL CONFLICT AT THE BOARD LEVEL, THE MEMBER WILL RECUSE HIM OR HERSELF FROM DELIBERATIONS AND VOTING ON THAT ISSUE. THE MINUTES OF ANY MEETING AT WHICH A CONFLICT OF INTEREST TRANSACTION IS CONSIDERED MUST REFLECT ALL DETAILS OF THE MATTER.
FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE COMMITTEE OF THE BOARD IS RESPONSIBLE FOR REVIEWING THE CEO'S PERFORMANCE AND SALARY ON AN ANNUAL BASIS. AS PART OF THE COMPENSATION REVIEW, THE COMMITTEE REVIEWED EXTERNAL DATA ON COMPENSATION LEVELS AND BENEFITS FOR SIMILARLY QUALIFIED INDIVIDUALS IN COMPARABLE POSITIONS. THE COMMITTEE LAST REVIEWED THE PRESIDENT'S COMPENSATION IN JUNE OF 2015. WHEN HIRING NEW VPS, INITIAL OFFER IS BASED ON EXTERNAL BENCHMARKING AND INPUT BY RECRUITMENT CONSULTANTS AS TO THE MARKET VALUE OF SUCH POSITIONS. OVERALL, ANNUAL VP COMPENSATIONS ARE REVIEWED AND APPROVED BY THE CEO BASED ON THE OVERALL BUDGET AS APPROVED BY THE BOARD. COMPENSATION SURVEYS ARE ALSO LEVERAGED. THE PROCESS WAS LAST UNDERTAKEN IN JUNE OF 2015. BOTH THE CEO'S AND VPS COMPENSATION WAS APPROVED BY THE BOARD MEMBERS AND DOCUMENTED IN THE MINUTES.
FORM 990, PART VI, SECTION C, LINE 19	THE MS FOUNDATION FOR WOMEN, INC. MAKES ITS FORM 990 AND FORM 1023 AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. THE FORM 990 IS AVAILABLE ON THE ORGANIZATION'S WEBSITE, GUIDESTAR.ORG, AND OTHER CHARITY EVALUATOR WEBSITES. IN ADDITION TO THE FORM 990, THE FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON A WRITTEN REQUEST AT 12 METROTECH CENTER, 26TH FLOOR, BROOKLYN, NY 11201 OR BY CALLING THE ORGANIZATION DIRECTLY AT (212)742-2300.
FORM 990, PART XI, LINE 9	LOSSES ON UNCOLLECTIBLE PLEDGES -21,060
FORM 990, PART XII, LINE 2C	THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT.