Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Open to Public Inspection

OMB No 1545-0047

benefit trust or private foundation)

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

A F	or the	e 2011 calendar year, or tax year beginning APR 1, 2011 and ending	MAR 31, 2012	}
В	Check if	C Name of organization	D Employer identif	·
a	pplicabl	NATIONAL PARTNERSHIP FOR WOMEN AND		
	Addre chang	SS DANTITED		
	Name chang	Doing Business As	23-7	124915
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/si	uite E Telephone numbe	er
	Termii ated	1875 CONNECTICUT AVENUE, NW 650	(202	986-2600
	Amen- return	City or town, state or country, and ZIP + 4	G Gross receipts \$	6,075,058.
	Application	WASHINGTON, DC 20003	H(a) Is this a group r	eturn
	pendii	F Name and address of principal officer.DEBRA L. NESS	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates in	cluded? Yes No
1	Tax-ex	empt status X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527 If "No," attach a	a list (see instructions)
		te: ► WWW.NATIONALPARTNERSHIP.ORG	H(c) Group exemption	on number
		forganization: X Corporation Trust Association Other ► L Y	ear of formation: 1971	M State of legal domicile; DC
Pa	art I	Summary		
a)	1	Briefly describe the organization's mission or most significant activities. SEE PART	III, LINE 1.	
4VIA ernanc				
J ü	2	Check this box	nore than 25% of its net a	ssets.
o Š	3	Number of voting members of the governing body (Part VI, line 1a)	3	19
Activities & Governance	i	Number of independent voting members of the governing body (Part VI, line 1b)	4	17
ivities	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	. 5	51
Ĭ.	6	Total number of volunteers (estimate if necessary)	6	32
V G	7 a	Total unrelated business revenue from Part VIII, column (Opine 12 FIVE)	<u>7a</u>	0.
wenue Ac	b	Net unrelated business taxable income from Form 990 T, line 34		0.
3		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2o)	Prior Year	Current Year
, e	1		6,240,910.	
Revenue		Trogram service revenue (Fart VIII, IIIIe 29)	32,607.	,
, ě	1	Investment income (Part VIII, column (A), lines 3, 4, and 76)	277,101.	
_	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9e, 10c, and 11e)	<165,990.	
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,384,628.	5,759,526.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es	I .	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,341,320.	
Expenses	1	Professional fundraising fees (Part IX, column (A), line 11e)	18,000.	18,000.
쫎	1	Total fundraising expenses (Part IX, column (D), line 25) 810,053.	0 606 633	0.054.600
_	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,606,633.	2,874,629.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	6,965,953.	7,719,935.
- 8		Revenue less expenses Subtract line 18 from line 12	<581,325.	· · · · · · · · · · · · · · · · · · ·
Net Assets or Fund Balances		T. I. (D. 1771 - 40)	Beginning of Current Year	End of Year
SSe	20	Total assets (Part X, line 16)	23,627,868.	
jet Piet	21	Total liabilities (Part X, line 26)	860,608.	· · · · · · · · · · · · · · · · · · ·
	22 art II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block	22,767,260.	21,087,272.
		alties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tomante, and to the heet of n	ay knowledge and belief it is
	-	ct, and c <u>ompligite.</u> Declaration of preparer (other than officer) is based on all information of which prep		ly knowledge and belief, it is
11 00	, сопе	Disperse declaration of preparer (office than officer) is based on an information of which preparer	// /	14/12
Sig	_	Signature of officer	Date	11112
Her		DEBRA L. NESS, PRESIDENT		
Hei	E	Type or print name and title		
		Print/Type preparer's name Preparer's Aignature	Date Check	PAIN
Paid	1	DAVID F. GRALING CPA BANG F. But CPA	//-8-/2 if self-emplo	yed P 00366995
	parer	Firm's name GELMAN, ROSENBERG & FREEDMAN	Firm's EIN ▶	52-1392008
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N	Tim O Em	00 207000
	•	BETHESDA, MD 20814-2930	Phone no. (301) 951-9090
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
	01 01-2		·	Form 990 (2011)
				110 010
				14 (217
				_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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132002 02-09-12 Form 990 (2011) FAMILIES
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)?			ĺ
	If "Yes," complete Schedule A	_1_	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		.,
_	public office? If "Yes," complete Schedule C, Part I	3		X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		v	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
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	_		v
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		X
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		<u> </u>
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			1
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	I		
	Part VI	11a	X	<u> </u>
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X_
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	444		х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116	22	
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	l
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	1
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			- T
46	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	40		v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		X
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	
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	х	
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	· · · · · · · · · · · · · · · · · · ·	Form	990	2011)

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Part IV Checklist of Required Schedules (continued)

24	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		Yes	No
21	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			v
00	•	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			х
22	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22		
23				
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	Λ	
24 a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	040		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
Ŭ	any tax-exempt bonds?	24c		
d		24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24u		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	ZJa		-21
~	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			7,5
0.4	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?		v	
25.	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
Ь	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	OEL.		v
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		X
30	If "Yes," complete Schedule R, Part V, line 2	26		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36_		47
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	3,		
	Note. All Form 990 filers are required to complete Schedule O	38	х	
		Form	990 (2011)

Form 990 (2011)

FAMILIES

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Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	כ		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 5	<u>L</u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		1	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a	<u> </u>	<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	7 <u>a</u>	X	<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	4	}	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<u>7g</u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A			
^	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	-	├──
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? N/A			
a	- •	9a	-	
10	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		\vdash
10	Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	ļ	ļ	
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	┪	•	
11	Section 501(c)(12) organizations. Enter	┪		
	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
	amounts due or received from them)			i
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . N/A 12b	124		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O	1.55		 -
b	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			
С	Enter the amount of reserves on hand	7	L	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2011)

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

	Check if Schedule O contains a response to any question in this Part VI			\mathbf{x}				
Sec	tion A. Governing Body and Management			بمي				
<u>oec</u>	HOIT A. GOVERNING BODY and Management		Yes	No				
12	Enter the number of voting members of the governing body at the end of the tax year 19	[163					
Ia	If there are material differences in voting rights among members of the governing body, or if the governing	1						
	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 1b							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other							
_	officer, director, trustee, or key employee?	2		х				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision							
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X				
6	Did the organization have members or stockholders?	6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or							
	more members of the governing body?	7a		х				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?	7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	Х					
b	Each committee with authority to act on behalf of the governing body?	8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9_		X				
<u>Sec</u>	tion 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?	10a		X				
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?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	<u> </u>				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			[
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	├──				
b	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe							
	ın Schedule O how this was done	12c	X	├──				
13	Did the organization have a written whistleblower policy?	13	X					
14	Did the organization have a written document retention and destruction policy?	14	X	_				
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?		7.7					
a	The organization's CEO, Executive Director, or top management official	15a	X	 				
b	Other officers or key employees of the organization	15b	X	<u> </u>				
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
ıoa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40-		v				
_	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		X				
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's							
		16b						
Sec	exempt status with respect to such arrangements? tion C. Disclosure	I IOD						
17	List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE O							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable).	availah	مار					
	for public inspection. Indicate how you made these available. Check all that apply	عب عباها <i>ل</i>						
	Own website X Another's website X Upon request							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial					
	statements available to the public during the tax year	JQ1						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion:	•					
	CORINNA DRAGULESCU - (202)986-2600							
_	1875 CONNECTICUT AVENUE, NW, NO. 650, WASHINGTON, DC 20009							
13200 01-23-	6	Form	990	(2011)				

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. 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

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)			(()			(D)	(E)	(F)
Name and Title	Average		Position (do not check more than one box, unless person is both an		Reportable	Reportable	Estimated			
	hours per week			ss pe id a d				compensation	compensation from related	amount of other
	(describe	ctor					ļ	the	organizations	compensation
	hours for	or dire				ted		organization	(W-2/1099-MISC)	from the
	related	stee	truste			beusa		(W-2/1099-MISC)		organization
	organizations in Schedule	ual fr	ional		ploye	tcom/ee	١.			and related organizations
	O)	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former	ł		Organizations
(1) ELLEN MALCOLM			-	_	-		_			
CHAIR	0.50	Х		Х				0.	0.	0.
(2) PAULINE A. SCHNEIDER							ŀ			
VICE CHAIR	0.50	X	_	X			L	0.	0.	0.
(3) CHRIS SALE	1									
TREASURER	0.50	Х	ļ	X		ļ	<u> </u>	0.	0.	0.
(4) NIKKI HEIDEPRIEM									_	_
SECRETARY	0.50	X		X			_	0.	0.	0.
(5) DEBRA L. NESS	25.50							244 600		40 405
PRESIDENT	37.50	X	-	Х			_	311,699.	0.	48,435.
(6) JUDITH LICHTMAN	27 50	.,			٦,		l	222 621		20 020
SR, ADVISOR/BOARD MEMBER	37.50	X	┢	┝	X			223,621.	0.	29,838.
(7) LINDA A. BERGTHOLD	0.50	X	ŀ							_
BOARD DIRECTOR	0.50	<u> </u>					_	0.	0.	0.
(8) RANNY COOPER	0.50	\ .						0.	0.	0.
BOARD DIRECTOR (9) LINDA D. FIENBERG	0.50	^						0.	<u></u>	<u> </u>
(9) LINDA D. FIENBERG BOARD DIRECTOR	0.50	v						0.	0.	0.
(10) JEANNIE KEDAS	0.30		一				-			· ·
BOARD DIRECTOR	0.50	x						0.	0.	0.
(11) VINCENT E. KERR	0.33	<u> </u>						<u> </u>		-
BOARD DIRECTOR	0.50	X						0.	0.	0.
(12) R. MAY LEE	, ,,,,,									
BOARD DIRECTOR	0.50	X						0.	0.	0.
(13) ARNOLD MILSTEIN						_				
BOARD DIRECTOR	0.50	X						0.	0.	0.
(14) JUDITH SCOTT										
BOARD DIRECTOR	0.50	X	<u>L</u> .					0.	0.	0.
(15) KAY KAHLER VOSE										
BOARD DIRECTOR	0.50	X	<u> </u>				<u> </u>	0.	0.	0.
(16) MARCY WILDER			-							
BOARD DIRECTOR	0.50	X	_		<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(17) NINA MATIS										
BOARD DIRECTOR	0.50	X	<u> </u>					0.	0.	0.
132007 01-23-12										Form 990 (2011)

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FAMILIES

BOARD DIRECTOR	Part VII Section A Officers Directors Tru	istees. Kev Fi	mple	over	s. a	nd l	Hiah	est	Compensated Employ	ees (continued)	<u> </u>	, .	aye o
Name and title Average week (describe hours for week (describe hours for related organizations in Schedule organizations) Schedule organization (NZ/1099-MISC)	Cookerna Chicere, Bricatera, 110	1		<u> </u>			<u></u>				Г	(F)	
Compensation Comp					Pos	itior					-		ed
Cities and a rectrectivatival of the corganization of the corganization of the corganizations (W.2/1099.MISC) Cities and a rectrectivatival or the corganization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the corganization of the calendar year ending with or within the organization of corporation of the calendar year ending with or within the organization of corporation of the calendar year ending with or within the organization of corporation of the calendar year ending with or within the organization of corporation of the cale	Name and the									•			
Thous for leasted organizations Figure Fig		week							· ·	•			
In Schedule		, ,	ector						the	organizations	cor	npensa	ation
In Schedule			- F	₈₂			ated			(W-2/1099-MISC)	1		
In Schedule			ustee	truste		92	bens		(W-2/1099-MISC)			-	
(18) HELENA FOULKS BOARD DIRECTOR 0.50 X 0.0.0.0.0.0.0.0.0.0.19) JENNIFER DUCK BOARD DIRECTOR 0.0.50 X 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0		1 -	E T	tional		ploy	yee						
(18) HELENA FOULKS BOARD DIRECTOR 0.50 X 0.0.0.0.0.0.0.0.0.0.19) JENNIFER DUCK BOARD DIRECTOR 0.0.50 X 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0		0)	ndivid	nstitu	Officer	(ey en	Higher	Forme			0.5	, cu iizati	0113
(19) JENNIFER DUCK BOARD DIRECTOR (THROUGH 4/11) 0.50 X 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	(18) HELENA FOULKES			Ī	Ī								
(19) JENNIFER DUCK BOARD DIRECTOR (THROUGH 4/11) 0.50 X 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	, ,	0.50	x				ŀ		0.	0.			0.
BOARD DIRECTOR													
(20) SHELI Z. ROSENBERG (21) SALEJ Z. ROSENBERG (21) SALEY SUSMAN (21) SALEY SUSMAN (21) SALEY SUSMAN (22) CORINNA DRAGULESCU (22) CORINNA DRAGULESCU (23) CARISTINE BECHTEL (24) KIRSTEN SICAN (23) CHRISTINE BECHTEL (24) KIRSTEN SICAN (24) KIRSTEN SICAN (26) KIRSTEN SICAN (26) KIRSTEN SICAN (26) KIRSTEN SICAN (27) KIRSTEN SICAN (28) KIRSTEN SICAN (27) KIRSTEN SICAN (28) KIRSTEN SICAN (28) KIRSTEN SICAN (27) KIRSTEN SICAN (28) KIRSTEN SICAN (27) KIRSTEN SICAN (28) KIRSTEN SICAN (28) KIRSTEN SICAN (27) KIRSTEN SICAN (28) KIRSTEN SICAN (28) KIRSTEN SICAN (27) KIRSTEN SICAN (28) KIRSTEN SICAN (2		0.50	X						0.	0.			0.
BOARD DIRECTOR (THROUGH 4/11)			Ī	İ		-							
SALLY SUSMAN BOARD DIRECTOR (HROUGH 4/11) 0.50 X 0. 0. 0. 0. 0. 0. (22) CORINNA DRAGULESCU 37.50 X 98.832. 0. 25,583. (23) CHRISTINE BECHTEL 37.50 X 156,497. 0. 9,279. (24) KIRSTEN SLOAN YICE PRESIDENT 37.50 X 153,348. 0. 20,370. (25) TUCKER BALL 0. 20,370. (26) VICKI SHABO 0. 26,903. (27) VICKI SHABO 0. 26,197. (28) VICKI SHABO 0. 26,197. (29) VICKI SHABO 0. 26,197. (20) VICKI SHABO 0. 20,370. (26) VICKI SHABO 0. 20,370. (27) VICKI SHABO 0. 20,370. (28) VICKI SHABO 0. 20,370. (29) VICKI SHABO 0. 20,370. (29) VICKI SHABO 0. 20,370. (20) VICKI SHABO		0.50	X						0.	0.			0.
(22) CORINNA DRAGULESCU FINANCE DIRECTOR 37.50	(21) SALLY SUSMAN		Γ										
STATE STAT	BOARD DIRECTOR (THROUGH 4/11)	0.50	X						0.	0.			0.
Carrier Carr	(22) CORINNA DRAGULESCU												
STICE PRESIDENT 37.50 X 156,497. 0. 9,279.	FINANCE DIRECTOR	37.50			Х				98,832.	0.	2	25,5	83.
VICE PRESIDENT 37.50 X 153,348. 0. 20,370.	(23) CHRISTINE BECHTEL												
STICKE PRESIDENT 37.50 X 153,348. 0. 20,370.	VICE PRESIDENT	37.50	<u></u>		<u> </u>	X			156,497.	0.		9,2	79.
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DIRECTOR OF NEW MEDIA 37.50 X 120,429 0 26,903	VICE PRESIDENT	37.50					Х		153,348.	0.	1	20,3	70.
Sub-total Sub-	(25) TUCKER BALL												
DIRECTOR, WORK PAMILY PROGRAMS 37.50 X 112,872. 0.26,197. 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address PR SOLUTIONS, INC, 1250 EYE STREET, NW # 800, WASHINGTON, DC 20005 PUBLIC RELATIONS 235,575.	DIRECTOR OF NEW MEDIA	37.50	<u> </u>				X		120,429.	0.	1 2	<u> 26,9</u>	<u>03.</u>
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Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation PR SOLUTIONS, INC, 1250 EYE STREET, NW # 800, WASHINGTON, DC 20005 PUBLIC RELATIONS 235,575. THE ADVISORY BOARD COMPANY	• •	•				-		Siai	led organization or indivi	dual for services	5		x
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THE ADVISORY BOARD COMPANY									PUBLIC RELAT	IONS	23	35,5	75.
2445 M STREET N.W., WASHINGTON, DC 20037 PUBLISHING COMPANY 202,180.	THE ADVISORY BOARD COMPA	NY											
	2445 M STREET N.W., WASH	INGTON,	D	<u> </u>	<u> 20</u> 0	<u>3.</u>	7		PUBLISHING C	OMPANY	20)2 <u>,1</u>	80.
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								İ					

SEE PART VII, SECTION A CONTINUATION SHEETS

Total number of independent contractors (including but not limited to those listed above) who received more than

Form **990** (2011)

\$100,000 of compensation from the organization

Form 990 (2011)

FAMILIES

23-7124915

Pour per Week Page	Port VIII FAMILIES										23-/12	4915	
Average hours per week per wee	Part VII Section A. Officers, Directors, Tru	ustees,	Key E	mple	oyee	es, a	nd ŀ	ligh	est	Compensated Employ	ees (continued)	г	
Week Bay	(A)	Ave	3) rage urs	Position						(D) Reportable	(E) Reportable compensation	Estimated amount of	
DIRECTOR, HIT FOLICY 37.50 X 108,112. 0. 7,7 (28) JESSE CONNOLLY DIRECTOR, CBC 37.50 X 104,265. 0. 6,2					Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations	other compensation from the organization and related organizations	
(28) JESSE CONNOLLY 37.50 X 104,265. 0. 6,2		1								100 110			
DIRECTOR, CBC 37.50 X 104,265. 0. 6,2		37	.50					X		108,112.	0.	7,707	
		37	.50					x		104.265.	0.	6,229	
	71 MacTon, CDC	<u> </u>								101/203.	0.	0,225	
			•										
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												-	
	70.			-								<u> </u>	
												<u> </u>	
otal to Part \/II Section A line 1c	otal to Part VII, Section A, line 1c			l				L		212,377.		13,936	

<u>FAMILIES</u>

Part VIII Statement of Revenue (D) Revenue excluded from (B) (A) (C) Total revenue Related or Unrelated tax under sections 512, exempt function business revenue revenue 513, or 514 1,633. 1 a Federated campaigns 1a 1b **b** Membership dues 737,547 c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 4848810. similar amounts not included above 836,474 g Noncash contributions included in lines 1a-1f \$ 5587990. h Total. Add lines 1a-1f Business Code 900099 4,075. 2 a HONORARIA 4,075 Program Service f All other program service revenue 4,075. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 292,926. 292,926. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 97,950. 6 a Gross rents 86,677 b Less. rental expenses 11,273. c Rental income or (loss) 11,273. 11,273. d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less. cost or other basis 4,344. and sales expenses <4,344.b c Gain or (loss) <4,344. <4,344.> d Net gain or (loss) . 8 a Gross income from fundraising events (not Other Revenue including \$737,547. of contributions reported on line 1c) See 75,600 Part IV, line 18 224511 b Less: direct expenses <148,911. <148911.> c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 900099 16,517. 16,517. 11 a MISCELLANEOUS d All other revenue 16,517. e Total. Add lines 11a-11d 167,461. 5759526 4.075 Total revenue. See instructions. Form 990 (2011)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do	Check if Schedule O contains a responsion include amounts reported on lines 6b,	(A)	(B)	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	963,797.	788,969.	142,390.	32,438
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	3,075,772.	2,682,914.	18,354.	374,504
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	141,730.	119,809.	4,820.	17,101
9	Other employee benefits	371,362.	323,988.	1,756.	45,618
0	Payroll taxes	274,645.	239,446.	6,357.	28,842
11	Fees for services (non-employees)				
а	Management				
b	Legal	3,637.	2,787.	508.	342
С	Accounting	23,539.	17,638.	3,525.	2,376
d	Lobbying _				
е	Professional fundraising services. See Part IV, line 17	18,000.			18,000
f	Investment management fees	45,418.	45,418.		
g	Other	1,091,333.	983,262.	3,612.	104,459
12	Advertising and promotion	10,969.	10,969.		
13	Office expenses	133,812.	103,261.	10,185.	20,366
4	Information technology	17,929.	13,434.	2,685.	1,810
15	Royalties				
16	Occupancy	648,322.	551,889.	22,098.	74,335
17	Travel	147,754.	119,454.	21.	28,279
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	117,677.	116,249.	609.	819
20	Interest	109.		109.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	102,586.	83,478.	7,864.	11,244
23	Insurance	12,114.	9,077.	1,814.	1,223
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	PUBLICATIONS	325,685.	316,779.		8,906
b	FEES DUES & SUBS.	140,949.	120,994.	2,802.	17,153
С	DIRECT MAIL	47,888.	25,650.		22,238
d	STAFF DEVELOPMENT	4,908.	4,908.		
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	7,719,935.	6,680,373.	229,509.	810,053
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	İ			
	Check here following SOP 98-2 (ASC 958-720)				

132010 01-23-12

Form **990** (2011)

FAMILIES

Part	t X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	500.	1	500.
	2	Savings and temporary cash investments	3,389,302.	2	3,974,523.
	3	Pledges and grants receivable, net	5,936,950.	3	3,193,640.
	4	Accounts receivable, net	18,984.	4	35,033.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
.		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	122,359.	9	187,408.
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 1,123,423.			
į	b	Less accumulated depreciation 10b 847,001.	216,278.	10c	276,422. 14,432,234.
	11	Investments - publicly traded securities	13,879,251.	11	14,432,234.
	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	64,244.	15	64,244.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	23,627,868.	16	22,164,004.
	17	Accounts payable and accrued expenses	638,414.	17	671,261.
	18	Grants payable .		18	
	19	Deferred revenue	210,000.	19	106,150.
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
ja		highest compensated employees, and disqualified persons. Complete Part II			
_		of Schedule L		22	
l l	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			
1		parties, and other liabilities not included on lines 17-24). Complete Part X of	10 104		200 221
		Schedule D	12,194.	25	299,321.
-	26	Total liabilities. Add lines 17 through 25	860,608.	26	1,076,732.
.		Organizations that follow SFAS 117, check here X and complete			
ő	07	lines 27 through 29, and lines 33 and 34.	1 672 124		1 011 004
lan	27	Unrestricted net assets	1,673,134. 6,794,157.	27	1,911,094. 4,871,921.
Ba	28	Temporarily restricted net assets Permanently restricted net assets	14,299,969.	28 29	14,304,257.
Ĕ	29		14,233,303.	29	14,304,237.
Ē		, , , , , , , , , , , , , , , , , , , ,			
ls o	20	complete lines 30 through 34. Capital stock or trust principal, or current funds		20	
× 1	30	Paid in or capital surplus, or land, building, or equipment fund		30 31	
ξ	31	Retained earnings, endowment, accumulated income, or other funds	<u> </u>	32	-
Ž	32 33	Total net assets or fund balances	22,767,260.	33	21,087,272.
	33 34	Total liabilities and net assets/fund balances	23,627,868.	34	22,164,004.
	<u>~~</u>	rotal national and the about their balances	23,027,000.		Form 990 (2011)

Form **990** (2011)

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a

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

b 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

Both consolidated and separate basis

За

X

X

separate basis, consolidated basis, or both

Act and OMB Circular A-133?

X Separate basis Consolidated basis

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

FAMILIES

NATIONAL PARTNERSHIP FOR WOMEN AND

Employer identification number 23-7124915

Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part) See inst	tructions.				
he organ	ization is not a	private foundation	because it is (For lines 1	through ¹	I1, check o	only one b	ox.)					
1 🗀			s, or association of chur) <u>.</u>				
2 🔲	A school des	cribed in section 17	/0(b)(1)(A)(ii). (Attach Sc	hedule E)								
з 🔲	A hospital or	a cooperative hospi	ital service organization o	described	n section	170(b)(1)(A)(iii).					
4	•		operated in conjunction					(b)(1)(A)(ii	i). Enter th	ne hospital's name,		
• —	city, and stat	_	•						•	•		
5			benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental uni	t describe	d in		
	_	(b)(1)(A)(iv). (Comple	_			,	J					
6 []			ent or governmental unit	t describer	d in sectio	n 170(h)(1	IVAV _V)					
7 🗓			eives a substantial part					r from the	neneral n	ublic described in		
, 142	_	b)(1)(A)(vi). (Comple		or its supp	on nom a	govonnio	intai aint o		gonorarp	abile decembed in		
в 🔲	•			(Complete	Part II \							
9	☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from											
3	-	•	nctions - subject to certa		• -					-		
			axable income (less sect									
		509(a)(2). (Complete		iioii o i i ta	A) 110111 Du	311103303 2	ioquirou b	y the orga	ii iization a	rtor ouric co, roro.		
10			perated exclusively to te	et for nubl	ic safety. S	See sectio	n 500(a)(/	1)				
11	_	-	perated exclusively for the	•	_			•	v out the r	ourposes of one or		
	-	-	ations described in section		-							
			organization and compl		-		., 555 660	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	۵,(۵,۱ ۵۱۱۵			
	a Type I		_	Тур			egrated		аГП	Type III - Other		
e 🗀			at the organization is not			•	•	r more dis		• •		
-			than one or more publicly									
f			tten determination from t						- (-/(- /			
•		rganization, check ti				po., .,po	, 0					
g		-	organization accepted ar	nv aift or c	ontribution	from any	of the follo	owina per	sons?			
9	-		lirectly controls, either al			-				Yes No		
			upported organization?	J		•		` ,		11g(i)		
			n described in (i) above?	•		•				11g(ii)		
	• •	•	person described in (i)		e?					11g(iii)		
h	• •	•	about the supported or				•	•				
••	, , , , , , , , , , , , , , , , , , , ,	oogo		94	(-)-							
(i) Nama	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	organization	(v) Did voi	ı notify the	(vi) Is	the	(vii) Amount of		
	anization	(11) LIN	organization		sted in your	organizat	ion in col.	Lorganizati	on in col. l	support		
Oi gi	2,112411011		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	support?	(i) organiz U.S	?	одрон		
			(see instructions))	Yes	No	Yes	No	Yes	No			
										_		
	-			1								
				ļ	ļ			ļ				
							1					
P-4-1		ì	i	1	I	I	1	I	1 1			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-12

23-712<u>4915</u> Page 2

Schedule A (Form 990 or 990-EZ) 2011 FAMILIES 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 (a) 2007 Calendar year (or fiscal year beginning in) **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") 12,828,374 4.902.182 8,656,832 6,240,910 5,587,990, 38 216 288. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 38 216 288. 12,828,374, 4,902,182, 8,656,832 6 240 910 5,587,990, 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) 15.837.292. 6 Public support. Subtract line 5 from line 4 22 378 996 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 7 Amounts from line 4 12,828,374 4,902,182 8,656,832 6,240,910, 5,587,990, 38,216,288, 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 700,755. 343,628. 298,511. 364,849. 390,876. and income from similar sources 2 098 619. 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 4,546 2,209 2,424 190 16,517. 25,886. assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 40,340,793. 106,993. 12 Gross receipts from related activities, etc. (see instructions) 12 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 2011 (line 6, column (f) divided by line 11, column (f)) 55.47 14 15 Public support percentage from 2010 Schedule A, Part II, line 14 15 53.86 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and ►X stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. 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 - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,

Schedule A (Form 990 or 990-EZ) 2011

and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2010. 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 IV how the

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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 III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization failed to qualify under Part II.	rganization fails to
qualify under the tests listed below, please complete Part II.)	

Section A. Public Support	<u> </u>	oroto r art m.,				
Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not					1	
ınclude any "unusual grants.")		į				
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose			<u> </u>			
3 Gross receipts from activities that				 		
are not an unrelated trade or bus-						
iness under section 513						
†					 	
4 Tax revenues levied for the organ-						
ization'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				ļ		
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and				1		1
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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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		1				
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				<u></u>		1
12 Other income. Do not include gain or loss from the sale of capital					-	
assets (Explain in Part IV)		ļ 			. 	ļ <u>-</u>
13 Total support (Add lines 9, 10c, 11, and 12)		<u> </u>	<u></u>		1	L
14 First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a sect	ion 501(c)(3) organiz	zation,
check this box and stop here					- · · · · · · · · · · · · · · · · · · ·	> L
Section C. Computation of Publi	c Support Pe	rcentage			- 	
15 Public support percentage for 2011 (li	ne 8, column (f) d	livided by line 13,	column (f))		15	<u> </u>
16 Public support percentage from 2010					16	
Section D. Computation of Inves	<u>itment Incom</u>	e Percentage	1			
17 Investment income percentage for 20	11 (line 10c, colur	mn (f) divided by li	ne 13, column (f))		17	
18 Investment income percentage from 2	2010 Schedule A,	Part III, line 17			18	
19a 33 1/3% support tests - 2011. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box ar	nd stop here. The	e organization qua	lifies as a publicly	supported organ	ization	▶□
b 33 1/3% support tests - 2010. If the						and
line 18 is not more than 33 1/3%, che	•					
20 Private foundation If the organization			•			

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ. See separate instructions.

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), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	tions Complete Part III	, , ,	_,, _,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	,,
		L PARTNERSHIP FO	R WOMEN AND	l Ei	nployer identification number
	FAMILIE		it worthin hit		23-7124915
Pa		janization is exempt und	ler section 501(c)	or is a section 52	
	art A complete it the org	juinzation io exempt une	101 30011011 001(0)	or is a scotion of	organization.
1	Provide a description of the organiz	ation's direct and indirect politic	cal campaign activities	ın Part IV	
	Political expenditures	·	. 0	_	* \$
3	Volunteer hours				
Pa	art I-B Complete if the org	janization is exempt und	ler section 501(c)	(3)	
	Enter the amount of any excise tax				> \$
	Enter the amount of any excise tax	, =		5	> \$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4 a	Was a correction made?	_			Yes No
b	If "Yes," describe in Part IV.		•		
Pa	art I-C Complete if the org	janization is exempt und	ler section 501(c)	, except section 50	01(c)(3).
1	Enter the amount directly expended	by the filing organization for se	ction 527 exempt func	tion activities	\$
2	Enter the amount of the filing organ	ization's funds contributed to ot	her organizations for se	ection 527	
	exempt function activities				> \$
3	Total exempt function expenditures	Add lines 1 and 2 Enter here a	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 en	nployer identification number (El	IN) of all section 527 pc	olitical organizations to v	hich the filing organization
	made payments For each organiza	tion listed, enter the amount pai	d from the filing organi	zation's funds Also ente	er the amount of political
	contributions received that were pr	omptly and directly delivered to	a separate political org	janization, such as a sep	arate segregated fund or a
	political action committee (PAC) If	additional space is needed, prov	vide information in Part	: IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	
			-	filing organization's	
				funds. If none, enter	 promptly and directly delivered to a separate
					political organization.
					If none, enter -0
	· = ·				

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

Schedule C (Form 990 or 990-EZ) 2011

LHA

NATIONAL PARTNERSHIP FOR WOMEN AND

Schedule C (Form 990 or 990-EZ) 2011_				23-7	124915 Page 2
Part II-A Complete if the org		mpt under sectio	n 501(c)(3) and fil	ed Form 5768	
		liated group (and list in	Part IV each affiliated	group member's nam	e. address. EIN.
	e of excess lobbying	- ' '		9 F	-,,
. —		nd "limited control" pro	visions apply		
Limi	ts on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infli	uence public opinion (grass roots lobbying)		16,721.	
b Total lobbying expenditures to influ			•	88,342.	
c Total lobbying expenditures (add li		, (•	105,063.	
d Other exempt purpose expenditure	· ·	-		7,614,872.	
e Total exempt purpose expenditure		1)	• ••	7,719,935.	
f Lobbying nontaxable amount Ente	·	•	n columns	535,997.	
If the amount on line 1e, column (a) o		bying nontaxable amo			-
Not over \$500,000		the amount on line 1e.			
Over \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000		
Over \$1,500,000 but not over \$17,	000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000		
Over \$17,000,000	\$1,000,	000			
g Grassroots nontaxable amount (en	133,999.				
h Subtract line 1g from line 1a. If zer	o or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zero	•			0.	
j If there is an amount other than ze		line 1i, did the organiza	ation file Form 4720	Г	
reporting section 4911 tax for this				<u> </u>	Yes No
· · · · · · · · · · · · · · · · · · ·	ations that made a s lumns below. See th	eraging Period Under ection 501(h) election e instructions for line	do not have to comp s 2a through 2f on pa		
	Lobbying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount	455,387.	491,914.	498,298.	535,997.	1,981,596.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,972,394.
c Total lobbying expenditures	124,371.	195,398.	106,253.	105,063.	531,085.
d Grassroots nontaxable amount	113,847.	122,979.	124,575.	133,999.	495,400.
e Grassroots ceiling amount (150% of line 2d, column (e))	· ·				743,100.

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990 EZ) 2011 FAMILIES 23-7124915 Page 3
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)).

1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expenditures (do not include amounts of the prior year lill-A, line 3, answered "No" OR (b) Part III-A, line 3, answered "Yes." 1 Dues, assessments and similar amounts from members 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). 4 Current year 2 Did the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts of political expension for the excess does the organization agree to carry over to the reasonable estimate of nondeductible lobbying and political expenditure next year? 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 carry over to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Taxable amount of lobbying and political expenditures (see instructions)	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?	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)
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 1)? 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? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? 2art 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? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in-house lobbying and political expenditures from the prior year? 1 Dues, assessments and similar amounts from members 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, answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 152(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 503(e)(1)(A) notices of nondeductible section 162(e) dues 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 (see instructions)	local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Pad 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)? bi I''Ves, "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 to this year? art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes Notes substantially all (90% or more) dues received nondeductible by members? 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, in answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 152(e) nondeductible lobbying and political expenditures for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2 cexceeds the amount on line	he lobbying activity	Yes	No	Amo	unt
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

2011
Open to Public Inspection

Name of the organization

NATIONAL PARTNERSHIP FOR WOMEN AND FAMILIES

Employer identification number 23 – 71 2 / 91 5

Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate contributions to (during year) 4 Aggregate value at end of year 5 Dot the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is properly, subject to the organization's exclusive legal control? 5 Dot the organization inform all grantenes, donors, and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantenes, 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 important land area grantenes, 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 important land area grantenes, donors, and the properties of the organization answered "Yes" to Form 950, Part IV, line 7 1 Purpose(e) of conservation easements. Scomplete if the organization or education) Preservation of an historically important land area Protection of natural habitat Protection of natural habitat Protection of natural habitat Protection of natural habitat Protection of natural habitat Protection of conservation easements 2 Total number of conservation easements 3 Total number of conservation easements and certified hation structure included in (a) 4 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 5 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 8 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 9 Number of conservation have a written pelocy organding the periodic monitoring, inspection, and enforcing conservation easements	Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts. Complete if the					
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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? 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)? 9 In Part XIV, 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 Organization 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 XIV, the text of the footnote to its financial statements that describes these terms. 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) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part VII				2d					
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Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Boes 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)? In Part XIV, 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. 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 XIV, the text of the footnote to its financial statements that describes these items. 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: 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		_	, , , , , , , , , , , , , , , , , , , ,	,					
violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)) In Part XIV, 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. 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 XIV, the text of the footnote to its financial statements that describes these items. 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) Revenues included in Form 990, Part X	4	Number of states where property subject to conservation ea	sement is located >						
Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)? In Part XIV, 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. 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 XIV, 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) Revenues included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 S = 1.5	5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of						
Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)? In Part XIV, 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. 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 XIV, 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) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 \$\Bigsim \frac{1}{2}\$		violations, and enforcement of the conservation easements in	t holds?	Yes No					
B Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)? In Part XIV, 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 XIV, 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) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1	6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements durin	g the year ▶					
and section 170(h)(4)(B)(ii)? In Part XIV, 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 XIV, 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) Revenues included in Form 990, Part X	7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	year ▶ \$					
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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 XIV, 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) Revenues 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 Revenues included in Form 990, Part VIII, line 1		and section 170(h)(4)(B)(ii)?		Yes No					
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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. 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 XIV, 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) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1		include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	organization's accounting for					
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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) Revenues 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 Revenues included in Form 990, Part VIII, line 1		historical treasures, or other similar assets held for public ext	nibition, education, or research in furtherance	of public service, provide, in Part XIV,					
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relating to these items (i) Revenues 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 Revenues included in Form 990, Part VIII, line 1	b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement and	d balance sheet works of art, historical					
(ii) Revenues included in Form 990, Part VIII, line 1 (iii) 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 Revenues included in Form 990, Part VIII, line 1		treasures, or other similar assets held for public exhibition, ea	ducation, or research in furtherance of public	service, provide the following amounts					
(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1		relating to these items:							
 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 Revenues included in Form 990, Part VIII, line 1 		(i) Revenues included in Form 990, Part VIII, line 1		> \$					
 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 Revenues included in Form 990, Part VIII, line 1 		(ii) Assets included in Form 990, Part X		> \$					
a Revenues included in Form 990, Part VIII, line 1	2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial ga						
		the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items						
b Assets included in Form 990, Part X	а	Revenues included in Form 990, Part VIII, line 1		> \$					
	b	Assets included in Form 990, Part X		• \$					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 01-23-12

Schedule D (Form 990) 2011

Sche	dule D (Form 990) 2011 FAMILIE	S		J1121 121	_		23-71	24915	Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, Historical T	reasures,	or Oth				
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of the	e following that	at are a s	significant	use of its	collection	rtems
	(check all that apply):								
а	Public exhibition	d	Loan or ex	change progr	ams				
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how they further	the organizat	ion's exe	mpt purpo	ose in Parl	XIV	
5	During the year, did the organization solicit of	r receive donations	of art, historical tre	asures, or oth	er sımıla	r assets		_	
	to be sold to raise funds rather than to be ma							Yes	No.
Par	t IV Escrow and Custodial Arran		ete if the organizati	on answered	"Yes" to	Form 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa	rt X, line 21							
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contributio	ns or other as	ssets no	t included		_	
	on Form 990, Part X?					-	L_	Yes	∟ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:			F			
								Amount	
С	Beginning balance					1c			···
d	Additions during the year	••				1d			
е	Distributions during the year			-		1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?					Yes	∟ No
	If "Yes," explain the arrangement in Part XIV								
Par	t V Endowment Funds. Complete	f the organization an	swered "Yes" to F	orm 990, Part	IV, line	10			
		(a) Current year	(b) Prior year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance	14,299,969.	14,290,931	. 14,21	1,165.	14,1	36,858,		
b	Contributions	4,288,	9,038	. 7	9,766.		74,307.		·-····
С									
ď	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses .								
g	End of year balance	14,304,257.	14,299,969	•	0,931.	14,2	11,165.		
2	Provide the estimated percentage of the curr	rent year end balanc		(a)) held as					
а	Board designated or quasi-endowment		_%						
b	Permanent endowment ► 100.00	%							
C	Temporarily restricted endowment	%							
_	The percentages in lines 2a, 2b, and 2c shou	•							
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held	and administe	ered for t	the organiz	ation	Г	
	by								Yes No
	(i) unrelated organizations							3a(i)	X
	(ii) related organizations		0.1.1.50					3a(ii)	<u> </u>
	If "Yes" to 3a(ii), are the related organizations	•						3b	
4 Par	t VI Land, Buildings, and Equipm								
Pai									
	Description of property	(a) Cost or o basis (investing	1	t or other	, , ,	ccumulate	ea	(d) Book	value
	1004	Dasis (ITIVESTI	nem Dasis	(other)	ue	preciation			
	Land								
b	Buildings			22 000		206 2	E 2	1.0	746
C	Leasehold improvements		4	22,998.		<u> 206,2</u>	24.	_те	746.
a	Equipment		0.0	00,425.		640,7	10	250	676.
		1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	i	~ ~ ~ / ·	エノ・	433	,, U / O •

Schedule D (Form 990) 2011

276,422.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 2. FIN 48 (ASC 740)

01-23-12

(10)

Schedule D (Form 990) 2011

NATIONAL PARTNERSHIP FOR WOMEN AND

		Form 990) 2011 FAMILIES	11111	111111		23-	7124	915	Page 4
Par		Reconciliation of Change in Net Assets from Form 990 to A	<u> uaite</u>	ea Finan	cial State	emen			
1		venue (Form 990, Part VIII, column (A), line 12)			1				<u>526.</u>
2		spenses (Form 990, Part IX, column (A), line 25)			2				935.
3		or (deficit) for the year. Subtract line 2 from line 1	-		3				<u>409.</u> >
4		ealized gains (losses) on investments			4			<u>280,</u>	<u>421.</u>
5		d services and use of facilities			5				
6		nent expenses			6			· · ·	
7	•	eriod adjustments			7				
8		Describe in Part XIV.)		-	8				101
9		djustments (net). Add lines 4 through 8			9				<u>421.</u>
10 Par		or (deficit) for the year per audited financial statements. Combine lines 3 and the Conciliation of Revenue per Audited Financial Statements.		th Povo	10	Octur		679,	<u>988.</u> >
			12 441	ui nevei	iue pei r			001	206
1		venue, gains, and other support per audited financial statements is included on line 1 but not on Form 990, Part VIII, line 12 [.]			-	1	0,	UOI,	206.
2		· · · · · ·	ا ہ	20	0 401				
a		ealized gains on investments d services and use of facilities	2a		0,421.	4			
b		ries of prior year grants	2b			-			
C		Describe in Part XIV)	2c		6,677.	-			
d		· •	2d		0,0//	7		267	000
e		es 2a through 2d				2e	Е	<u> 30 / ,</u>	$\frac{098.}{100}$
3		at line 2e from line 1				3	Э,	<u>/14,</u>	108.
4		is included on Form 990, Part VIII, line 12, but not on line 1:	ا ۔	4	E //10				
a		nent expenses not included on Form 990, Part VIII, line 7b Describe in Part XIV)	4a	4	5,418.	4			
b	•	, ·	4b			┨. │		4 5	410
c		es 4a and 4b				4c			<u>418.</u> 526.
5 Par		venue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statemer	ate W	ith Eyne	neae nar	Dotu		<u>/ 59 ,</u>	<u>526.</u>
1		penses and losses per audited financial statements	11.5 11	itii Expe	nses per	1		761	194.
2		s included on line 1 but not on Form 990, Part IX, line 25			-	1		<u>/от,</u>	174.
a		d services and use of facilities	0-						
b		ar adjustments	2a 2b			1			
c	Other lo	•				1 1			
d		Describe in Part XIV.)	2c	Ω	6,677.	1 1			
e		es 2a through 2d	<u> </u>		0,011.	2e		86	677.
3		t line 2e from line 1				3	7		517.
4		s included on Form 990, Part IX, line 25, but not on line 1.				-3-		014,	<u>J17.</u>
-		ent expenses not included on Form 990, Part VIII, line 7b	4a	4	5,418.				
		Describe in Part XIV.)	4b		J, 410 .	1 1			
	-	es 4a and 4b	70			4c		45	418.
		penses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			•	5	7		935.
		Supplemental Information						<u>, </u>	,,,,,
Comp	olete this	part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, I	lines 1	a and 4: Pa	rt IV. lines 1	b and 2	2b. Part	V. line 4	: Part
		XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complet							,
		LINE 4: THE ENDOWMENT WAS GIVEN TO THE			-				
							-		
<u>ORI</u>	ER 1	O PROVIDE LONG TERM FINANCIAL STABILITY	Y FC	OR THE	ORGAN	IIZA'	TION	. TH	E
<u>ANN</u>	<u>IUAL</u>	DRAW TAKEN FROM THE ENDOWMENT IS USED T	ro c	COVER	OPERA 1	ING	EXP	ENSE	<u>s</u>
ANI	EXP	ENSES INCURRED TO ADVANCE ISSUES THAT I	TAM:	CER MO	ST TO	WOM	<u>EN AJ</u>	<u> </u>	
THE	IR F	AMILIES: HEALTHCARE, WORK FAMILY, AND V	WORK	KPLACE	FAIRN	<u>IESS</u>	•		
					-				
יו גים	יות עי	TIME 2. IN TIME 2006 MY STANDARD ST	700-	TATION	am		a ===		
<u>rak</u>	CI X,	LINE 2: IN JUNE 2006, THE FINANCIAL AC	الالالا	NT.TNG	STANL	ARD	s BO	AKD	
/ E >	CP \	DELEYCED ENCE NOW 140 THOOME WAVE	mv	יים הענו	OTT DEC	. ~	T 10 2 2 7	~ ~	OD
(PA	(<u>00</u>	RELEASED FASB ASC 740-10, INCOME TAXES	<u>, 'l'F</u>	iat PR	OVIDES				
						Sched	lule D (F	orm 99	0) 2011

SCHEDULE G (Form 990 or 990-EZ)

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. ➤ See separate instructions.

2011

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

NATIONAL PARTNERSHIP FOR WOMEN AND

Employer identification number

23-7124915 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply X Mail solicitations e X Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants Phone solicitations g X Special fundraising events d X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? _ 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. (v) Amount paid (iii) Did fundraiser (vi) Amount paid (i) Name and address of individual (iv) Gross receipts fundraiser have custody or control of contributions? (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) fundraiser from activity organization listed in col (i) LEWIS ADV. - 325E OLIVER ST., Yes No BALTIMORE MD 21202 DIRECT MAIL X 34,000 18,000 16,000. 34,000 18,000 16,000. 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI

132081 01-23-12

LHA Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2011

NATIONAL PARTNERSHIP FOR WOMEN AND Schedule G (Form 990 or 990-EZ) 2011 FAMILIES 23-7124915 Page 2 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 NONE (add col (a) through DC EVENT col (c)) (event type) (event type) (total number) 813,147 <u>813,147.</u> Gross receipts 737,547 Less. Charitable contributions <u>737,547.</u> Gross income (line 1 minus line 2) 75,600. 75,600. Cash prizes Noncash prizes Direct Expenses Rent/facility costs 30,116. 30,116. 70,270 70,270. Food and beverages 8 Entertainment 124,125. Other direct expenses 124,125. 224,511 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary Combine line 3, column (d), and line 10 <148,911.> 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 (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities. Yes a Is the organization licensed to operate gaming activities in each of these states? **b** If "No," explain:

Schedule G (Form 990 or 990-EZ) 2011

___ Yes

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain.

132082 01-23-12

NATIONAL PARTNERSHIP FOR WOMEN AND

Sche	dule G (Form 990 or 990-EZ) 2011 FAMILIES 23-	7124915	Page 3
11	Does the organization operate 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
	Indicate the percentage of gaming activity operated in:		
а	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
	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$		
	If "Yes," enter name and address of the third party:		
·	in 163, enter hand address of the tilld party.		
	Name		
	Address ▶		
16	Gaming manager information		
	Name ►		
	Gaming manager compensation > \$		
	Description of services provided		
			- · · · · · · · · · · · · · · · · · · ·
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	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 to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year > \$		
Par	t IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information.		
		,	
		 	
	Schodulo G (For		E7\ 2011

SCHEDULE J (Form 990)

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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990. See separate instructions.

FAMILIES

NATIONAL PARTNERSHIP FOR WOMEN AND

Employer identification number 23-7124915

Pa	rt 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,			1				
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			l				
	First-class or charter travel Housing allowance or residence for personal use			ĺ				
	Travel for companions Payments for business use of personal residence							
	Tax indemnification and gross-up payments Health or social club dues or initiation fees							
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)							
b	If any of the boxes on 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 officers, directors,	:						
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		<u> </u>				
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. Explain in Part III			•				
	X Compensation committee Written employment contract							
	Independent compensation consultant Compensation survey or study							
	X Form 990 of other organizations X 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							
а	Receive a severance payment or change-of-control payment?	4a		X				
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х				
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	ļ	X				
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III							
	Only section 501(c)(3) and 501(c)(4) 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							
а	The organization?	5a	 	X				
b	Any related organization?	5b		X				
	If "Yes" to line 5a or 5b, describe in Part III							
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation							
	contingent on the net earnings of:		ŀ					
	The organization?	6a		X				
b	Any related organization?	6b		X				
	If "Yes" to line 6a or 6b, describe in Part III.							
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	1						
	not described in lines 5 and 6? If "Yes," describe in Part III	7_		X				
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		1	7,				
_	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X				
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in							
	Regulations section 53 4958-6(c)?	9	L	1				

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

Schedule J (Form 990) 2011

FAMILIES

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2011

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.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C)	(D)	(E)	(F)
(A) Name	1	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Hetirement and other deferred compensation	Nontaxable benefits	l otal of columns (B)(i)-(D)	Compensation reported as deferred in prior Form 990
	ε	311,699.	0.	0	32,500.	15,935.	360,134.	0.
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0)	⋛ (≘	0	0	0	4	٧ .	4	0.
	ε	156,497.	0	0	9,279.	0	165,776.	0
3 CHRISTINE BECHTEL	Ξ		0	0.				0.
	Ξ ;	153,348.	0	0	12,724.	7,646.	173,718.	0
4 KIKSTEN SLOAN		0	0	0	0	0	0	•
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16								

Schedule J (Form 990) 2011

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

NATIONAL PARTNERSHIP FOR WOMEN AND

Employer identification number

FAMILIES 23-7124915 Types of Property (a) (b) (d) (c) Check if Number of Noncash contribution Method of determining contributions or amounts reported on noncash contribution amounts applicable tems contributed Form 990, Part VIII, line 1g Art - Works of art Art · Historical treasures 2 Art · Fractional interests 4 Books and publications 5 Clothing and household goods Cars and other vehicles 6 7 Boats and planes Intellectual property 8 12 836,474. FMV X 9 Securities - Publicly traded Securities - Closely held stock 10 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles Food inventory . 19 20 Drugs and medical supplies Taxidermy 21 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other 26 Other 27 Other 28 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 0 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 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 X the entire holding period? 30a b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? X 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a 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

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

Schedule M (Form 990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

NATIONAL PARTNERSHIP FOR WOMEN AND FAMILIES

Employer identification number 23-7124915

FORM 990, PART VI, SECTION B, LINE 11: THE TAX RETURN WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY THE FINANCE COMMITTEE. THE FORM 990 WAS SENT TO THE FULL BOARD BEFORE FILING WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION ENSURES COMPLIANCE WITH THE POLICY ANNUALLY AT ITS BOARD MEETING. BOARD MEMBERS ARE ASKED TO FILL OUT AND SIGN A OUESTIONNAIRE IN WHICH THEY DISCLOSE IF ANY. THE QUESTIONNAIRES ARE KEPT ON FILE BY THE ORGANIZATION. ANY DIRECTOR HAVING A CONFLICT OF INTEREST REGARDING ANY MATTER PRESENTED TO THE BOARD FOR ACTION WILL MAKE CERTAIN THAT THE EXISTENCE OF SUCH CONFLICT OF INTEREST IS FULLY DISCLOSED TO THE BOARD AND MADE A MATTER OF RECORD. DIRECTOR HAVING A CONFLICT OF INTEREST WITH RESPECT TO ANY MATTER COMING BEFORE THE BOARD WILL NOT VOTE OR USE HIS OR HER PERSONAL INFLUENCE TO AFFECT THE OUTCOME OF BOARD ACTION WITH RESPECT TO SUCH MATTER. THE MINUTES OF THE BOARD MEETINGS WILL REFLECT THE FACT THAT ANY DIRECTOR WITH A CONFLICT OF INTEREST REFRAINED FROM VOTING.

IF A CONFLICT EXISTS WHICH WILL AFFECT A DIRECTOR'S CONTINUED SERVICE ON
THE BOARD, THE DIRECTOR WILL TERMINATE THE CONFLICTING ACTIVITY OR
ORGANIZATIONAL ASSOCIATION OR RESIGN FROM THE BOARD. IF THE DIRECTOR FAILS
TO RESOLVE THE CONFLICT, THE BOARD WILL REMOVE THE DIRECTOR AS PERMITTED BY
THE BYLAWS.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2011)

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD HAS A COMPENSATION

COMMITTEE THAT DETERMINES, WITH THE HELP OF OUTSIDE BENEFITS COUNSEL AND

COMPARABILITY DATA, THE PROPER AMOUNT OF COMPENSATION FOR THE PRESIDENT,

AND SENIOR ADVISOR. AT THE ANNUAL BOARD MEETING THE WHOLE BOARD APPROVES

THE COMPENSATION. THE FINAL DECISIONS ARE THEN DOCUMENTED IN THE BOARD

MEETING MINUTES, AS WELL AS PERSONNEL FILES. THE LAST COMPENSATION REVIEW

TOOK PLACE IN OCTOBER 2010.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,AK,AZ,AR,CA,CO,CT,DE,FL,GA,HI,IL,IN,IA,KS,KY,LA,ME,MD,MA,MI,MN,MS,MO,MT

NE,NV,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,SD,TN,TX,UT,VT,VA,WA,WV,WI,WY

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE ITS

BY-LAWS, CONFLICT OF INTEREST POLICY OR FINANCIAL STATEMENTS AVAILABLE TO

THE PUBLIC.

FORM 990, PART VIII, LINE 7C, NET LOSS: A LEASED COPY MACHINE UNDER A

CAPITAL LEASE WAS RETURNED TO THE LESSOR AT THE END OF THE LEASE, BUT

BEFORE IT WAS FULLY DEPRECIATED, WHICH RESULTED IN THE LOSS ON LINE 7.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS:

280,421.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2011 Open to Public

OMB No 1545-0047

Employer identification number 23-7124915

entity

Inspection

Direct controlling Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) End-of-year assets **e** Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Total income ਉ ▼ See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) NATIONAL PARTNERSHIP FOR WOMEN AND ▶ Attach to Form 990. Primary activity 9 FAMILIES Name, address, and EIN of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service Partl Part

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2011 S entity? Yes × NAT'L PARTNERSHIP Direct controlling entity FOR WOMEN & FAMILIES status (if section Public charity 501(c)(3)) N/A Exempt Code DISTRICT OF COLUMBIA 501 (C)(4) section € Legal domicile (state or foreign country) Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. DORMANT NATIONAL PARTNERSHIP FOR WOMEN AND FAMILIES ACTION FUND - 52-2324155, 1875 CONNECTICUT Name, address, and EIN 20009 of related organization AVE, NW WASHINGTON DC

NATIONAL PARTNERSHIP FOR WOMEN AND

Schedule R (Form 990) 2011 FAMILIES

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

Page 2

23-7124915

Percentage ownership Schedule R (Form 990) 2011 managing ownership General or Percentage Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year) Ξ 3 Code V-UBI General of Person of Person of Schedule Partner?
K-1 (Form 1065) Yes No Share of end-of-year assets Ξ Share of total income ate allocations? Disproportion-Yes No Ξ Type of entity (C corp, S corp, or trust) Share of end-of-year assets **©** 9 (d)
Direct controlling
entity Share of total income $\boldsymbol{\varepsilon}$ Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) છ <u>e</u> 39 Primary activity (d)
| Direct controlling entity 9 (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization 132162 01-23-12 Part IV

Schedule R (Form 990) 2011

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

ansactions with one ad entity (ated organization(s) ared organization(s) organization(s) type	Note Complete line 1 if any entity is listed in Parts II III or IV of this schedule					Yes	ž
sept of (i) rivieras (iii) annuties (iii) uyalties or (iv) ent from a controlled entity type and to capabilize contribution to related organization(s) ity and to capabilize contribution to related organization(s) ins or loan guaranties by related organization(s) ins or loan guaranties by related organization(s) ins or loan guaranties by related organization(s) ins or loan guaranties by related organization(s) ins or loan guaranties by related organization(s) is of assets to related organization(s) is of facilities, equipment, or other assets from related organization(s) is of facilities, equipment, or other assets from related organizations by related organization(s) formance of services or membership or fundrasing solicitations by related organization(s) formance of services or membership or fundrasing solicitations by related organization(s) formance of services or membership or fundrasing solicitations by related organization(s) formance of services or membership or fundrasing solicitations by related organization(s) formance of services or membership or fundrasing solicitations by related organization(s) formance of services or membership or fundrasing solicitations by related organization(s) formance of services or membership or fundrasing solicitations by related organization(s) formance of services or membership or fundrasing solicitations by related organization(s) formance of services or membership or fundrasing solicitations by related organization(s) for a service or membership or fundrasing solicitations by related organization(s) for a service of services or membership or fundrasing solicitations by related organization(s) for a service or service organization(s) for a service organization organization organization for a service organization organization for a service organization organization for a service organization for a service organization for a service organization for a service organization for a service organization for a service organization for a service	ring the tax year, did the organization engage in any of the following transactions with	th one or more rela	ted organizations listed	in Parts II-IV?		3	
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NATIONAL PARTNERSHIP FOR WOMEN AND FAMILIES

Schedule R (Form 990) 2011

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

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(k) Percent Dwners					990) 2
General or F managing partner?					(Form
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(h) (i) (j) (k) Dspropor- tionale allocations? Code V-UBI amanagion of Schedule K-1 General or managion partner? Percentage ownership Ves No (Form 1065) Yes No					Schedule R (Form 990) 2011
(h) Disproportionate allocations? Yes No					
(g) Share of end-of-year assets					
(f) Share of total income					
(e) Are all partners sec 501(c)(3) 01gs ? Ves No					
(d) Predominant income pa (related, unrelated, excluded from tax under section 512-514) py					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of entity					

NATIONAL PARTNERSHIP FOR WOMEN AND 23-7124915 Page 5 **FAMILIES** ' Schedule R (Form 990) 2011 Part VII | Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

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Schedule R (Form 990) 2011