** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury

IIICIII	.a	ide service		
A F	or the	2023 calendar year, or tax year beginning JUL 1, 2023 and ending	JUN 30, 2024	
B c	heck if	C Name of organization	D Employer identific	cation number
a	pplicabl	AMERICAN ASSOCIATION OF UNIVERSITY		
	Addre	WOMEN, INC.		
	Name chang		52-60373	88
	⊓Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/su		
	_ return □Final	,	(202)785	
	_return/ termin	·		
	ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	80,897,267.
	return	WASHINGTON, DC 20005	H(a) Is this a group re	
	Application	F Name and address of principal officer: GLOKIA BLACKWELL	for subordinates	? Yes X No
	pendir	g SAME AS C ABOVE	H(b) Are all subordinates in	cluded? Yes No
ΙT	ax-ex	empt status: $\overline{\mathbf{X}}$ 501(c)(3) $\overline{}$ 501(c) () (insert no.) $\overline{}$ 4947(a)(1) or $\overline{}$ 5	If "No," attach a	list. See instructions
J۷	Vebsit	e: WWW.AAUW.ORG	H(c) Group exemptio	n number
K F	orm of	organization: X Corporation Trust Association Other L Ye		1 State of legal domicile; DC
	rt I	Summary	an or formation,	- Ctate of logal dollinolog
		Briefly describe the organization's mission or most significant activities: AAUW ADVA	NCES GENDER I	COULTAN EOB
ė		WOMEN AND GIRLS THROUGH RESEARCH, EDUCATION,		IQUIII IUN
au	l			
ern	l	Check this box if the organization discontinued its operations or disposed of mo		
ŏ	ı	Number of voting members of the governing body (Part VI, line 1a)		15
S		Number of independent voting members of the governing body (Part VI, line 1b)		15
Se S	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	49
Ìţį	6	Total number of volunteers (estimate if necessary)	6	875
Activities & Governance		Total unrelated business revenue from Part VIII, column (C), line 12		0.
Ā	ь	Net unrelated business taxable income from Form 990-T, Part I, line 11		0.
		, ,	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	6,065,568.	8,069,140.
ne	l		276,573.	249,114.
ven	l	, , , , , , , , , , , , , , , , , , , ,	4,607,685.	6,205,049.
Revenue	l .	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	ı	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,086,731.	1,000,549.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,036,557.	15,523,852.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	6,525,394.	6,398,087.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
ű	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,202,255.	5,223,582.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	131,000.	131,000.
þei		Total fundraising expenses (Part IX, column (D), line 25) 1,300,651.		
Ě	l .	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6,342,109.	6,595,465.
	ı	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18,200,758.	18,348,134.
	l	Revenue less expenses. Subtract line 18 from line 12	-6,164,201.	-2,824,282.
- S		rievende 1633 expenses. Oubtract line 10 from line 12	Beginning of Current Year	End of Year
Net Assets or und Balances		Total access (Dark V. line 10)	157,306,367.	162,470,193.
sse	20	Total assets (Part X, line 16)		
et A nd	21	Total liabilities (Part X, line 26)	32,392,089.	30,187,586.
_		Net assets or fund balances. Subtract line 21 from line 20	124,914,278.	132,282,607.
	ırt II	Signature Block		
Unde	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and state	ements, and to the best of my	knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prepa	rer has any knowledge.	
Sigr	า	Signature of officer	Date	
Her		GLORIA BLACKWELL, CEO		
		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Paid		RICHARD J. LOCASTRO, CPA Record of hoeastro.	3/21/2025 if self-employ	
				2-1392008
•	arer	Firm's name GELMAN, ROSENBERG & FREEDMAN Firm's address 4550 MONTGOMERY AVE SUITE 800N	FIFTH S EIN 3	<u> </u>
บรย	Only		E. 20	1 051 0000
		BETHESDA, MD 20814-2930	Phone no. 30	1-951-9090
May	the IF	RS discuss this return with the preparer shown above? See instructions		X Yes No

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN. INC. 52-6037388 Page 2 Part III | Statement of Program Service Accomplishments X Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: AAUW ADVANCES GENDER EQUITY FOR WOMEN AND GIRLS THROUGH RESEARCH, EDUCATION, AND ADVOCACY. Did the organization undertake any significant program services during the year which were not listed on the Yes X No If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? ______ Yes X No If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4 , 104 , 214 including grants of \$ 3,090,300.) (Revenue \$) (Expenses \$ AMERICAN FELLOWSHIPS - ARE AWARDED TO WOMEN WHO ARE U.S. CITIZENS OR PERMANENT RESIDENTS PURSUING FULL-TIME STUDY TO COMPLETE DISSERTATIONS TO CONDUCT POSTDOCTORAL RESEARCH FULL TIME, OR TO PREPARE RESEARCH FOR PUBLICATION. SELECTED PROFESSIONAL FELLOWSHIPS ARE AWARDED TO WOMEN PURSUING FULL-TIME STUDY IN A MASTER'S OR PROFESSIONAL DEGREE PROGRAM IN WHICH WOMEN ARE UNDERREPRESENTED, INCLUDING STEM, LAW, BUSINESS, AND MEDICINE. 859,787.) (Revenue\$ 2,561,188. including grants of \$) (Expenses \$ RESEARCH AND PROJECTS - RESEARCH AND PROJECTS EXIST TO HELP ADVANCE EQUITY FOR WOMEN AND GIRLS; PROTECT THEM FROM DISCRIMINATION AND ABUSE; PROMOTE EDUCATIONAL AND WORKPLACE OPPORTUNITY AND ACHIEVEMENT; AND, BREAK THROUGH BARRIERS THAT PREVENT THEM FROM ATTAINING THEIR PERSONAL GOALS AND FULL POTENTIAL; AAUW FUNDS RESEARCH THROUGH WIDELY DISSEMINATED RESEARCH REPORTS AND UPDATES, INCLUDING: THE SIMPLE TRUTH: ANALYZES THE GENDER PAY GAP; DEEPER IN DEBT: ADDRESSES THE FACT THAT STUDENT LOAN DEBT DISPROPORTIONATELY AFFECTS WOMEN; BROKEN LADDERS: DESCRIBES BARRIERS TO WOMEN'S REPRESENTATION IN NONPROFIT LEADERSHIP. AAUW ALSO CONDUCTS MEMBER PROGRAMS AND DIRECT SUPPORT PROGRAMS INCLUDING START SMART AND WORK SMART. 2,493,678. including grants of \$ $2,215,\underline{000}$) (Revenue \$) (Expenses \$ INTERNATIONAL FELLOWSHIPS - ARE AWARDED TO WOMEN PURSUING FULL-TIME GRADUATE OR POSTDOCTORAL STUDY IN THE UNITED STATES WHO ARE NOT U.S. CITIZENS OR PERMANENT RESIDENTS. INTERNATIONAL PROJECT GRANTS ARE AWARDED TO ALUMNAE OF AAUW'S INTERNATIONAL FELLOWSHIPS PROGRAM WHO ARE LIVING IN THEIR HOME COUNTRIES AND PURSUING COMMUNITY-BASED PROJECTS TO IMPROVE THE SOCIAL ADVANCEMENT AND ECONOMIC EMPOWERMENT OF WOMEN AND GIRLS.

Other program services (Describe on Schedule O.)

3,272,875 • including grants of \$

233,000.) (Revenue \$

249,114.)

12,431,955.

Form 990 (2023)

Form 990 (2023) WOMEN, INC.
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			7.7
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		37
_	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			Х
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	х	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	Λ	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
_	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D.			
а		11a	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	Ha	- 21	
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
Ü	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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	110		
•	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
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
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		τ,	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	المرا		v
46	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	المرا		v
00	complete Schedule G, Part III	19		X
20a	" roo, complete concause r	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	х	
	domestic government on Fart IX, column (A), intellining yes, "Complete Schedule I, Parts I and II	Z 1	41	

332003 12-21-23

Form **990** (2023)

Form 990 (2023) WOMEN, INC.

Part IV Checklist of Required Schedules (continued)

	·		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
	Schedule K. If "No," go to line 25a	24a		_X_
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
ч	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	210		
	transaction with a 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			
	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		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	28a		Х
h	"Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
·	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
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			37
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	04	Х	
25.2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	งจล	21	
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
-	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O 't V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
4 -	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 47 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
·	(gambling) winnings to prize winners?	1c	Х	
332004	\$ 12-21-23			(2023)

Form 990 (2023) WOMEN , INC .

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
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 49			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	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		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
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?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
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?	7g		
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. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? N/A			
•		8		
9	Sponsoring organizations maintaining donor advised funds. Did the appropriate organization make any tayable distributions under section 40662. N / A	9a		
a b	Did the sponsoring organization make any taxable distributions under section 4966? N/A Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A Section 501(c)(7) organizations. Enter:	90		
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
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			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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.			
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			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			37
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			77
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A	17		
	If "Yes," complete Form 6069.			

332005 12-21-23

Form 990 (2023)

WOMEN, INC.

52-6037388

Page 6

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 on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 15 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 15 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 6 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? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? Х 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, Х and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 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? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records THOMAS CHAPPELL - (202)785-7700

Form **990** (2023)

20005

1310 L STREET, NW, 1000, WASHINGTON, DC

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

(A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average	(-1-	Position (do not check more than one					Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son is	s both	an	compensation	compensation	amount of
	week	offic	cer an	id a di	recto	r/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	gy.			ted		organization	(W-2/1099-MISC/	from the
	related	stee	truste		9	bens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	nal tru	ional		ploye	t com		1099-NEC)		and related
	below line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) GLORIA BLACKWELL	41.82	=	=	0	Ж	王壱	Œ			
CEO	0.00	-		х				363,412.	0.	43,311.
(2) SHANNON WOLFE	41.90									-
MANAGING DIR. & CHIEF OF STAFF	0.00			Х				229,935.	0.	35,240.
(3) JULIAN SFECLA	37.50									
DIRECTOR OF IT	0.00					Х		198,548.	0.	24,026.
(4) THOMAS CHAPPELL	45.11							150 000		
VP OF FINANCE	0.00			Х				179,228.	0.	31,123.
(5) TIFFANY SANCHEZ	37.50				37			177 405	0	22 550
VP PROG. & FELLOW. (UNTIL 1/24) (6) KATRINA BREESE	39.88				Х			177,495.	0.	23,559.
SENIOR DIR INSTITUTIONAL ADVANCEMENT	0.00				Х			163,792.	0.	20,383.
(7) LESHELL HATLEY	37.50				Λ			103,192.	0.	20,303.
DIRECTOR, STEM PROGRAMS	0.00					x		134,433.	0.	26,376.
(8) EDWARD TILLER	37.50									
NETWORK ADMINISTRATOR	0.00					х		127,540.	0.	27,893.
(9) KENDALL RIDLEY	37.51									
SR. DIRECTOR OF COMMUNICATIONS	0.00					X		130,069.	0.	18,065.
(10) SINDHURA EDARA	37.50									
SALESFORCE ADMINISTRATOR	0.00					Х		126,961.	0.	12,440.
(11) JULIA BROWN	20.00									
CHAIR (UNTIL 5/24)	1.00	Х		Х				0.	0.	0.
(12) CHERYL SOROKIN	10.00									
SEC., THEN CHAIR (TRANS @ 5/24)	1.00	Х		Х				0.	0.	0.
(13) MALINDA GAUL	10.00								_	_
VICE CHAIR (UNTIL 5/24)	1.00	Х		Х				0.	0.	0.
(14) GLORIA BANUELOS	5.00									
DIR., THEN VICE CHAIR (TRANS @ 5/24)	0.00	Х		Х				0.	0.	0.
(15) PEGGY CABANISS	10.00									
FINANCE VICE CHAIR	1.00	Х		Х		_		0.	0.	0.
(16) JEANIE LATZ	5.00								•	_
DIR., THEN SECRETARY (TRANS @ 5/24)	0.00	Х		Х		\vdash		0.	0.	0.
(17) KIMBERLY S. ADAMS	5.00	-							0	^
DIRECTOR	0.00	X		l				0.	0.	990 (2022)

332007 12-21-23 Form **990** (2023)

Destablish	1110.								32 0037	JOO Tage C
Part VII Section A. Officers, Directors, Tru	ustees, Key Em	oloy	ees,	and	l Hi	ghes	t Co	pmpensated Employee	s (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		າ than ເ	one	Reportable	Reportable	Estimated
	hours per	box	box, unless person is both an officer and a director/trustee)			is both	n an	compensation	compensation	amount of
	week (list any	_	Cei ai	lu a u	liecto	T	(66)	from	from related	other
	hours for	irecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	eord	tee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ndividual trustee or director	nstitutional trustee		/ee	m per		1099-NEC)	10001120)	and related
	below	idual	ution	<u></u>	Key employee	sst co	er	,		organizations
	line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Former			
(18) JOSEPH BERTOLINO	5.00									
DIRECTOR (UNTIL 5/24)	0.00	Х						0.	0.	0.
(19) LISETTE GARCIA	5.00									
DIRECTOR (UNTIL 5/24)	0.00	Х						0.	0.	0.
(20) ELIZABETH HAYNES	5.00									
DIRECTOR (UNTIL 5/24)	0.00	Х						0.	0.	0.
(21) MONIQUE TAYLOR	5.00									
DIRECTOR	0.00	Х						0.	0.	0.
(22) JENNA K. HOWARD	5.00									
DIRECTOR	0.00	Х						0.	0.	0.
(23) MARY ZUPANC	5.00									
DIRECTOR	0.00	Х						0.	0.	0.
(24) EDWINA FRANCES MARTIN	5.00									
DIRECTOR	0.00	Х				_		0.	0.	0.
(25) SHAILA RAO MISTRY	5.00							_	_	_
DIRECTOR	0.00	Х				_		0.	0.	0.
(26) MELISSA LADUKE	5.00							_	_	_
DIRECTOR (FROM 5/24)	0.00	Х						0.	0.	0.
1b Subtotal								1,831,413.	0.	262,416.
c Total from continuation sheets to Part								0.	0.	0.
d Total (add lines 1b and 1c)								1,831,413.	0.	262,416.

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

Yes No

3 Did the organization list any former officer, director, 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

5 X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONPROFIT HR SOLUTIONS, 1441 L ST., NW,	HR CONSULTING	
SUITE 620, WASHINGTON, DC 20005	SERVICES	363,700.
NIMBLE USER, 1100 PITTSFORD VICTOR ROAD,	DESIGNING NIMBLE AMS	
PITTSFORD, NY 14534	SOFTWARE SYSTEM	326,733.
EQUITY THROUGH ACTION LLC, 15800 CRABBS		
BRANCH WAY, STE 300, ROCKVILLE, MD 20855	DEI CONSULTING	204,380.
RANDSTAD CELLA	TEMP EMPLOYEE	
PO BOX 742689, ATLANTA, GA 30374	SERVICES	200,879.
DENNISON & ASSOCIATES, 1529 QUEEN ANNE AVE		
N, STE 212, SEATTLE, WA 98109	CRM CONSULTING WORK	143,456.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 6		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2023)

13

Part VII Section A. Officers, Directors, Trustees, K (A) (B) Avera hour per hour per wee (list a hours relate organizate belo line (27) DIANNE OWENS DIRECTOR (FROM 5/24) (28) SONA PANCHOLY DIRECTOR (FROM 5/24) (29) CHRISTINE SCHMITZ DIRECTOR (FROM 5/24) (30) AUNTANESHIA STAVELOZ DIRECTOR (FROM 5/24) O. O. O. O. O. O. O. O. O. O		plo	yees	s, ar (C		ighe	est (es (continued)	
Name and title Avera hour per wee (list a hours relate organiza belo line (27) DIANNE OWENS DIRECTOR (FROM 5/24) OLIRECTOR (FROM 5/24) DIRECTOR (FROM 5/24) OLIRECTOR (FROM 5/24)				ıc	•					
Name and title Avera hour per wee (list a hours relate organiza belo line (27) DIANNE OWENS DIRECTOR (FROM 5/24) OLIRECTOR (FROM 5/24) DIRECTOR (FROM 5/24) OLIRECTOR (FROM 5/24)				, -	<i>•</i>)			(D)	(E)	(F)
hour per wee (list a hours relate organiza belo line (27) DIANNE OWENS 5. DIRECTOR (FROM 5/24) 0. (28) SONA PANCHOLY 5. DIRECTOR (FROM 5/24) 0. (29) CHRISTINE SCHMITZ 5. DIRECTOR (FROM 5/24) 0. (29) CHRISTINE SCHMITZ 5. (30) AUNTANESHIA STAVELOZ 5.				Posi				Reportable	Reportable	Estimated
per wee (list a hours relate organiza belo line (27) DIANNE OWENS 5. DIRECTOR (FROM 5/24) 0. (28) SONA PANCHOLY 5. DIRECTOR (FROM 5/24) 0. (29) CHRISTINE SCHMITZ 5. DIRECTOR (FROM 5/24) 0. (30) AUNTANESHIA STAVELOZ 5.	-	(ch			all that apply)			compensation	compensation	amount of
wee (list a hours relate organizate)	- ⊢	,ö.				црр	"	from	from related	other
(list a hours relate organizate o						e e		the	organizations	compensation
hours relate organizate belo line (27) DIANNE OWENS 5. DIRECTOR (FROM 5/24) 0. (28) SONA PANCHOLY 5. DIRECTOR (FROM 5/24) 0. (29) CHRISTINE SCHMITZ 5. DIRECTOR (FROM 5/24) 0. (30) AUNTANESHIA STAVELOZ 5.		ě				ploye		organization	(W-2/1099-MISC)	from the
relate organiza belo line (27) DIANNE OWENS 5. DIRECTOR (FROM 5/24) 0. (28) SONA PANCHOLY 5. DIRECTOR (FROM 5/24) 0. (29) CHRISTINE SCHMITZ 5. DIRECTOR (FROM 5/24) 0. (30) AUNTANESHIA STAVELOZ 5.	for	direct				em I		(W-2/1099-MISC)	(VV 2/ 1000 IVIIOO)	organization
organization below line (27) DIANNE OWENS 5. DIRECTOR (FROM 5/24) 0. (28) SONA PANCHOLY 5. DIRECTOR (FROM 5/24) 0. (29) CHRISTINE SCHMITZ 5. DIRECTOR (FROM 5/24) 0. (30) AUNTANESHIA STAVELOZ 5.	101	9 Or (tee			satec		(88-2/1099-181130)		and related
belo line (27) DIANNE OWENS 5. DIRECTOR (FROM 5/24) 0. (28) SONA PANCHOLY 5. DIRECTOR (FROM 5/24) 0. (29) CHRISTINE SCHMITZ 5. DIRECTOR (FROM 5/24) 0. (30) AUNTANESHIA STAVELOZ 5.	tions	nste	trus		e e	npen				organizations
Ine	10115	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				organizations
(27) DIANNE OWENS 5. DIRECTOR (FROM 5/24) 0. (28) SONA PANCHOLY 5. DIRECTOR (FROM 5/24) 0. (29) CHRISTINE SCHMITZ 5. DIRECTOR (FROM 5/24) 0. (30) AUNTANESHIA STAVELOZ 5.		divid	stitul	Officer	y en	ghes	Former			
DIRECTOR (FROM 5/24) 0. (28) SONA PANCHOLY 5. DIRECTOR (FROM 5/24) 0. (29) CHRISTINE SCHMITZ 5. DIRECTOR (FROM 5/24) 0. (30) AUNTANESHIA STAVELOZ 5.		드	드	Ď	포	王	2			
(28) SONA PANCHOLY 5. DIRECTOR (FROM 5/24) 0. (29) CHRISTINE SCHMITZ 5. DIRECTOR (FROM 5/24) 0. (30) AUNTANESHIA STAVELOZ 5.										
(28) SONA PANCHOLY 5. DIRECTOR (FROM 5/24) 0. (29) CHRISTINE SCHMITZ 5. DIRECTOR (FROM 5/24) 0. (30) AUNTANESHIA STAVELOZ 5.	00	X						0.	0.	0
DIRECTOR (FROM 5/24) 0. (29) CHRISTINE SCHMITZ 5. DIRECTOR (FROM 5/24) 0. (30) AUNTANESHIA STAVELOZ 5.										
(29) CHRISTINE SCHMITZ 5. DIRECTOR (FROM 5/24) 0. (30) AUNTANESHIA STAVELOZ 5.		\mathbf{x}						0.	0.	0
DIRECTOR (FROM 5/24) (30) AUNTANESHIA STAVELOZ 5.			\dashv					0.	0 •	0
(30) AUNTANESHIA STAVELOZ 5.		Ψ,							_	_
		Х						0.	0.	0
DIRECTOR (FROM 5/24) O.										
	00	X						0.	0.	0
	\neg									
	\rightarrow		\dashv							
	\longrightarrow	_								
	\rightarrow		-							
	\rightarrow	\dashv	\dashv		-					
		\dashv	\dashv		-					
	\rightarrow		\neg							
										
		-			-					
		\Box								
	\neg									
	\rightarrow	\dashv	\dashv		\vdash					
Fotal to Part VII, Section A, line 1c										

Form 990 (2023) WOMEN,
Part VIII Statement of Revenue

			Check if Schedule O contains a	response o	or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues	1b	2,213,856.				
S S			Fundraising events	1c					
fts,			Related organizations	1d	200,000.				
ية إق					27,389.				
ons,			Government grants (contributions)	1e	27,303.				
utic		T	All other contributions, gifts, grants, and	1 1	5,627,895.				
ĕ			similar amounts not included above	1f					
ont		_	Noncash contributions included in lines 1a-1f	1g \$	25,932.	0.060.140			
<u>0</u> 8		n	Total. Add lines 1a-1f		B 0. d.	8,069,140.			
					Business Code	040 114	040 114		
ce	2	а	CONFERENCE REVENUE		900099	249,114.	249,114.		
ervi		b							
Program Service Revenue		С							
ran Sev		d							
.0g		е							
<u>-</u>		f	All other program service revenue .						
		g	Total. Add lines 2a-2f			249,114.			
	3		Investment income (including divide	ends, intere	st, and				
			other similar amounts)			2,970,605.			2970605.
	4		Income from investment of tax-exen						
	5		Royalties			16,093.			16,093.
				(i) Real	(ii) Personal				
	6	а	Gross rents 6a	991,627.					
			Less: rental expenses 6b	0.					
				991,627.					
			Not rental income or (loca)			991,627.			991,627.
			· /—	Securities	(ii) Other	·			·
	-	_		607,859.					
		h	Less: cost or other basis						
Φ		~	and sales expenses 7b 65,	373.415.					
her Revenue		c	Gain or (loss) 7c 3,	234.444.					
ě			Net gain or (loss)			3,234,444.			3234444.
푸			Gross income from fundraising events (,,=,=,=			
O th	Ü	u	including \$						
١			contributions reported on line 1c). S	-					
			• • • • • • • • • • • • • • • • • • • •	I .					
		L	Part IV, line 18						
			Less: direct expenses						
			Net income or (loss) from fundraisin Gross income from gaming activitie						
	9	а		I					
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gaming ac						
	10	а	Gross sales of inventory, less return						
		_	and allowances						
			Less: cost of goods sold						
\rightarrow		С	Net income or (loss) from sales of in	ventory					
က္					Business Code				
e e	11	а	OTHER		900099	-7,171.			-7,171.
Miscellaneous Revenue		b							
cell Sev		С							
Ais		d	All other revenue						
		е	Total. Add lines 11a-11d			-7,171.			
	12		Total revenue. See instructions			15,523,852.	249,114.	0.	7205598.

332009 12-21-23

Form **990** (2023)

Form 990 (2023) WOMEN, INC. Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respor	(4)		(6)	(P)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	405,897.	405,897.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	5,577,240.	5,577,240.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	414,950.	414,950.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,197,037.	360,715.	547,701.	288,621.
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	3,137,126.	2,404,761.	574,886.	157,479.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	263,215.		44,853.	10,887.
9	Other employee benefits	297,298.		60,645.	26,803.
10	Payroll taxes	328,906.	213,874.	82,523.	32,509.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	63,817.	11,861.	21,620.	30,336.
С	Accounting	103,034.		103,034.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17	131,000.			131,000.
f	Investment management fees	105,829.		105,829.	
g					
	column (A), amount, list line 11g expenses on Sch 0.)	1,108,511.	475,584.	553,546.	79,381.
12	Advertising and promotion	26,734.	25,023.	250.	1,461.
13	Office expenses	783,219.	388,753.	29,257.	365,209.
14	Information technology	689,868.	432,515.	217,505.	39,848.
15	Royalties				
16	Occupancy	2,726,470.	622,670.	2,011,382.	92,418.
17	Travel	66,713.	29,664.	36,863.	186.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	275,299.	256,328.	15,610.	3,361.
20	Interest	-	-	-	-
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	434,789.	300,823.	96,791.	37,175.
23	Insurance	70,500.	27,937.	41,489.	1,074.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				-
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	STAFF TRAINING & DEV'T	74,928.	8,347.	65,648.	933.
b	RECRUITING	43,446.	43,446.	,	
c	MEMBERSHIP/SUBSCRIPTION	20,619.	12,924.	5,725.	1,970.
d	MISCELLANEOUS	1,689.	1,318.	371.	,
	All other expenses	=,	_,,,_,	Ţ. - V	
25	Total functional expenses. Add lines 1 through 24e	18,348,134.	12,431,955.	4,615,528.	1,300,651.
26	Joint costs. Complete this line only if the organization	, -,	, , , , , , , , , , , ,	, -,	, ,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
		<u> </u>			Earm 990 (2022)

Form 990 (2023)
Part X | Balance Sheet

Pai	rt X	Balance Sheet							
		Check if Schedule O contains a response or note	to an	y line in this Part X					
					(A) Beginning of year		(B) End of year		
	1	Cash - non-interest-bearing			2,751,815.	1	3,102,061.		
	2	Savings and temporary cash investments			554,649.	2	543,957.		
	3	Pledges and grants receivable, net			121,369.	3	1,802,785.		
	4	Accounts receivable, net			1,333,348.	4	1,279,980.		
	5	Loans and other receivables from any current or for							
		trustee, key employee, creator or founder, substan	ntial c	ontributor, or 35%					
		controlled entity or family member of any of these	perso	ons		5			
	6	Loans and other receivables from other disqualified							
		under section 4958(f)(1)), and persons described i	n sec	tion 4958(c)(3)(B)		6			
ţ	7	Notes and loans receivable, net			7				
Assets	8	Inventories for sale or use				8			
Ä	9	Prepaid expenses and deferred charges			1,026,975.	9	997,084.		
	10a	Land, buildings, and equipment: cost or other							
		basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	3,653,707.					
	b	Less: accumulated depreciation	10b	1,948,259.	2,032,315.	10c	1,705,448.		
	11	Investments - publicly traded securities	131,468,836.		136,446,484.				
	12	Investments - other securities. See Part IV, line 11	8,521.	12	5,302.				
	13	Investments - program-related. See Part IV, line 11		13					
	14	Intangible assets	10 000 500	14	16 505 000				
	15	Other assets. See Part IV, line 11		18,008,539.	15	16,587,092.			
	16	Total assets. Add lines 1 through 15 (must equal			157,306,367.		162,470,193.		
	17	Accounts payable and accrued expenses		978,842.	17	777,503.			
	18	Grants payable	6,524,451. 2,021,684.	18 19	6,226,491. 2,066,722.				
	19		ferred revenue						
	20	Tax-exempt bond liabilities				20			
	21	Escrow or custodial account liability. Complete Pa				21			
ies	22	Loans and other payables to any current or forme							
Liabilities		trustee, key employee, creator or founder, substal							
<u>E</u>	00	controlled entity or family member of any of these				22			
	23 24	Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated to				24			
	25	Other liabilities (including federal income tax, paya				24			
	25	parties, and other liabilities not included on lines 1							
		of Schedule D	,	·	22,867,112.	25	21,116,870.		
	26	Total liabilities. Add lines 17 through 25			32,392,089.	26	30,187,586.		
		Organizations that follow FASB ASC 958, check							
es		and complete lines 27, 28, 32, and 33.							
anc	27	Net assets without donor restrictions			4,636,043.	27	4,478,054.		
Bal	28				120,278,235.	28	127,804,553.		
Б		Organizations that do not follow FASB ASC 958							
Ē		and complete lines 29 through 33.							
, o	29	Capital stock or trust principal, or current funds				29			
set	30	Paid-in or capital surplus, or land, building, or equ				30			
As	31	Retained earnings, endowment, accumulated inco				31			
Net Assets or Fund Balances	32	Total net assets or fund balances			124,914,278.	32	132,282,607.		
	33				157,306,367.	33	162,470,193.		
-							Form 990 (202		

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			X		
1	Total revenue (must equal Part VIII, column (A), line 12)	1			3,8			
2	Total expenses (must equal Part IX, column (A), line 25)	2			8,1			
3	Revenue less expenses. Subtract line 2 from line 1	3			4,2			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	124	,91	4,2	78.		
5	Net unrealized gains (losses) on investments	5	10	,07	2, 4	45.		
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9		12	0,1	66.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	132	, 28	2,6	07.		
Part XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII							
					Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.							
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?							
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed							
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?			2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate							
	consolidated basis, or both:							
	Separate basis X Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	[
	review, or compilation of its financial statements and selection of an independent accountant?	•		2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho							
За	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the							
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required							
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b				
	, , , , , , , , , , , , , , , , , , , ,			Form	990	(2023)		

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

AMERICAN ASSOCIATION OF UNIVERSITY

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

52-6037388 WOMEN, INC Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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

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

Sec	tion A. Public Support		•	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	. ,		()	` ,	,	,,
-	membership fees received. (Do not						
	include any "unusual grants.")	9170120.	8731989.	9035614.	6065568.	8069140.	41072431.
2	Tax revenues levied for the organ-						
	ization'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	9170120.	8731989.	9035614.	6065568.	8069140.	41072431.
	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)						1418434.
6	Public support. Subtract line 5 from line 4.						39653997.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	9170120.	8731989.	9035614.	6065568.	8069140.	41072431.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	2975607.	2391929.	2981510.	3046295.	3978325.	15373666.
9	Net income from unrelated business						
_	activities, whether or not the						
	business is regularly carried on	8,916.					8,916.
10	Other income. Do not include gain	•					,
	or loss from the sale of capital						
	assets (Explain in Part VI.)	119,667.	72,113.	13,220.	38,455.	-7,171.	236,284.
11	Total support. Add lines 7 through 10		•	•	,		56691297.
	Gross receipts from related activities,	etc. (see instructio	ns)				,072,322.
	First 5 years. If the Form 990 is for th						
	organization, check this box and stop	•					
Sec	tion C. Computation of Publi						
14	Public support percentage for 2023 (li	ine 6, column (f), di	ivided by line 11, c	olumn (f))		14	69.95 %
15	Public support percentage from 2022	Schedule A, Part I	I, line 14			15	64.42 %
	33 1/3% support test - 2023. If the o					ore, check this bo	x and
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2022. If the						
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts						
	meets the facts-and-circumstances te				vacai-ation		
b	10% -facts-and-circumstances test						
	more, and if the organization meets the	_					
	organization meets the facts-and-circu				-		
18	Private foundation. If the organizatio		-				3
			,				/Farm 000\ 0002

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	etion A. Public Support	siow, picase comp	oloto i dit ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the 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						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
		(a) 2013	(6) 2020	(6) 2021	(d) ZOZZ	(6) 2020	(i) rotai
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is						
12	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organizatio	on,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2023 (li	ne 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2022					16	%
Sec	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20	23 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2	2022 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization qual	ifies as a publicly s	supported organiza	ation	
b	33 1/3% support tests - 2022. If the line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

332023 12-21-23

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
За		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
3		
9a		
9b		
9с		
10a		
401-		
10b ule A (Forn	n 990)	2023

Par	rt IV Supporting Organizations (continued)			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one			l
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	rs,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support	ed		l
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			l
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			l
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sec	supervised, or controlled the supporting organization. Stion C. Type II Supporting Organizations	2		
	Alon of Typo ii oupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		162	NO
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			l
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			l
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			l
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	supported organizations played in this regard.	3		
	ction E. Type III Functionally Integrated Supporting Organizations	•		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruc	tions).		
a	Somplete Selem			
b		(:tt	-1	
2	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity Activities Test. Answer lines 2a and 2b below.	see instruction	Yes	No
a			163	140
-	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			l
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			l
	that these activities constituted substantially all of its activities.	2a		
b				
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b				
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		ı

	\neg							
Par	rt V	Type III	Non-Functi	ionally Integ	rated 50	9(a)(3) Supp	orting	g Organizations
Sche	dule A	(Form 990)	2023	WOMEN,	INC.			
				AMERICA	IN ASS	OCIATION	\mathbf{OF}	UNIVERSITY

	, , , , , , , , , , , , , , , , , , , ,			
1	Check here if the organization satisfied the Integral Part Test as a qualifying		· ·	Part VI). See instructions.
Sect	All other Type III non-functionally integrated supporting organizations must ion A - Adjusted Net Income	complete	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
_	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionall	y integrate	ed Type III supporting orga	nization (see
	instructions)	. •		•

8

9

10

8 Distributions to attentive supported organizations to which the organization is responsive

(provide details in Part VI). See instructions.

10 Line 8 amount divided by line 9 amount

Distributable amount for 2023 from Section C, line 6

Section E - Distribution Allocations (see instructions	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, lin	ne 6		
2 Underdistributions, if any, for years prior to 2023	3 (reason-		
able cause required - explain in Part VI). See ins	tructions.		
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instruction	ns)		
j Remainder. Subtract lines 3g, 3h, and 3i from lin	ne 3f.		
4 Distributions for 2023 from Section D,			
line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2	2023, if		
any. Subtract lines 3g and 4a from line 2. For res	sult greater		
than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2023. Subtract	lines 3h		
and 4b from line 1. For result greater than zero,	explain in		
Part VI. See instructions.	,		
7 Excess distributions carryover to 2024. Add li	nes 3j		
and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN INC.

Schedule A	(Form 990) 2023	WOMEN,	INC.		52-6037388 Page 8
Part VI	Supplemental Part IV, Section A, line 1; Part IV, Sec	Information. Prolines 1, 2, 3b, 3c, 4b, tion D, lines 2 and 3;	vide the e 4c, 5a, 6 Part IV, Se	explanations required by Part II, line 10; Part II, line 17a o i, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines ection E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V E, lines 2, 5, and 6. Also complete this part for any additio	r 17b; Part III, line 12; 1 and 2; Part IV, Section C, V, Section B, line 1e; Part V,
	(See instructions.)	o, and o, and Fart v,	Section	., illes 2, 3, and 6. Also complete this part for any addition	
		40000			

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY

WOMEN, INC.

Organization type (check one):

Employer identification number

52-6037388

Filers of:	Section:					
Form 990 or 990-E	Z X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
, ,	nization is covered by the General Rule or a Special Rule . on 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General Rule						
-	ganization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
sections 5 contribute	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
contributo literary, or	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$						
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).						

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization

AMERICAN ASSOCIATION OF UNIVERSITY

WOMEN, INC.

Employer identification number

52-6037388

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	ıl space is needed.	
(a)	(b)	(c)	(d)
No1	Name, address, and ZIP + 4	* 1,450,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Name, audiess, and Zir + 4	\$ 503,628.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 250,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 218,978.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>216,667.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023) Page **2**

Name of organization

AMERICAN ASSOCIATION OF UNIVERSITY

WOMEN, INC.

Employer identification number 52-6037388

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (c) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 7 X Person **Payroll** 200,000. Noncash (Complete Part II for noncash contributions.) (a) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 8 X Person **Payroll** 175,000. Noncash (Complete Part II for noncash contributions.) (a) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.)

Name of organization

AMERICAN ASSOCIATION OF UNIVERSITY

WOMEN, INC.

Employer identification number

52-6037388

art II Noi	ncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) o. om ort I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) o. om rt I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) lo. om irt l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-			
		S	1

Employer identification number

Name of organization

AMERICAN ASSOCIATION OF UNIVERSITY 52-6037388 WOMEN, INC. Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on 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" on 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" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

 Section 501(c)(4), (5), or (6) organizations: Complete Part III. **Employer identification number** AMERICAN ASSOCIATION OF UNIVERSITY 52-6037388 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ______\$ ____ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 4a Was a correction made? Yes Nο b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

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

Part II-A Complete if the organization 501(h)).	anization is exem	npt under section	501(c)(3) and file		ction under
A Check if the filing organizat	tion belongs to an affile of excess lobbying e		Part IV each affiliated	group member's name	e, address, EIN,
	, ,	nd "limited control" pro	visions apply		
Limit	s on Lobbying Exper	•		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion (o	arassroots lobbying)		89,820.	
b Total lobbying expenditures to influ				14,949.	
c Total lobbying expenditures (add lir				104,769.	
d Other exempt purpose expenditure				18,137,536.	
e Total exempt purpose expenditures				18,242,305.	
f Lobbying nontaxable amount. Ente				1,000,000.	
If the amount on line 1e, column (a) or		bying nontaxable am			
not over \$500,000,	20% of t	the amount on line 1e.			
over \$500,000 but not over \$1,000	,000, \$100,00	0 plus 15% of the exce	ess over \$500,000.		
over \$1,000,000 but not over \$1,50	0,000, \$175,00	· · · · · · · · · · · · · · · · · · ·			
over \$1,500,000 but not over \$17,0	000,000, \$225,00	0 plus 5% of the exces	ss over \$1,500,000.		
over \$17,000,000,	\$1,000,0	000.			
g Grassroots nontaxable amount (ent	er 25% of line 1f)			250,000.	
h Subtract line 1g from line 1a. If zero	h Subtract line 1g from line 1a. If zero or less, enter -0-				
i Subtract line 1f from line 1c. If zero	or less, enter -0			0.	
j If there is an amount other than zer	o on either line 1h or l	ine 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this y	/ear?				Yes No
(Some organizations th	at made a section 50	eraging Period Under 01(h) election do not l ate instructions for lin	nave to complete all o	of the five columns be	elow.
	Lobbying Exper	nditures During 4-Yea	r Averaging Period	T	T
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	883,249.	997,748.	1,000,000.	1,000,000.	3,880,997.
b Lobbying ceiling amount (150% of line 2a, column(e))					5,821,496.
c Total lobbying expenditures	152,795.	130,960.	85,383.	104,769.	473,907.
d Grassroots nontaxable amount	220,812.	249,437.	250,000.	250,000.	970,249.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,455,374.
f Grassroots lobbying expenditures	58,557.	65,014.	45,916.	89,820.	259,307.

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023

WOMEN, INC. 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)).

 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: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Jotal. Add lines 1c through 1i Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 	es No		Amc	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d 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 not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
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 not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
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 not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
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 not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
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 not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1(c)(5) or	Secti	ion	
501(c)(6).	1(0)(0), 01	3661	1011	
	_		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prio Part III-B Complete if the organization is exempt under section 501(c)(4), section 50		3		
answered "Yes." 1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
expenses for which the section 527(f) tax was paid).		_		
a Current year	I	2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	·····-	3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	, [
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politica				
expenditures next year? 5 Taxable amount of lobbying and political expenditures. See instructions	·····	4		
5 Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information		5		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN,

Employer identification number 52-6037388

Pa	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		ds or Accounts. Complete if the
	organization disenses to our our coo, raintry, mis	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor ac	lvised funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac		
	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		Yes No
Pai	rt II Conservation Easements. Complete if the org	anization answered "Yes" on Form 99	00, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizatio	n (check all that apply).	
	Preservation of land for public use (for example, recreat	ion or education) Preservation	n of a historically important land area
	Protection of natural habitat	Preservation	n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the fo	rm of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included on line 2c acquir		
	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele		
	year		
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling	of
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h		
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conse	rvation easements during the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and exper	nse statement and
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's financial state	ements that describes the
	organization's accounting for conservation easements.		
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statemen	nt and balance sheet works
	of art, historical treasures, or other similar assets held for publ	lic exhibition, education, or research i	n furtherance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these i	tems.
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement ar	nd balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in f	urtherance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical trea		icial gain, provide
	the following amounts required to be reported under FASB AS		
а			\$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2023

332051 09-28-23

Pai	t III Organizations Maintaining Co	ollections of Art	, Historical Tre	asures, or Oth	ner S	imilar	Assets	(continu	ued)
3	Using the organization's acquisition, accession							(OOTTENTA	
_	collection items (check all that apply).	, a	,		o.g				
а	Public exhibition	d	I oan or excl	hange program					
b	Scholarly research	e	Other						
c	Preservation for future generations	ū							
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's e	vemnt	nurnos	a in Part	XIII	
5	During the year, did the organization solicit or	•	•	· ·	•		oc iiii ait	ZIII.	
3	to be sold to raise funds rather than to be ma							Yes	☐ No
Pai	t IV Escrow and Custodial Arrang								
	reported an amount on Form 990, Par		e ii tile organization	ranswered res	JII I OI	111 990,	raitiv, ii	ile 9, 0i	
12	Is the organization an agent, trustee, custodia		any for contribution	s or other assets r	not inc	luded			
ıu			-					Yes	☐ No
h	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII a							_ 1 C S	NO
b	ii res, explain the arrangement in Fart Alli a	and complete the folio	Jwing table.					Amount	
_	Deginning belongs					10		711100111	
	Beginning balance					1c			
	Additions during the year					1d			
_	Distributions during the year					1e			
f O-	Ending balance					1f		7 v	
	Did the organization include an amount on Fo				-			Yes	No
Pai	If "Yes," explain the arrangement in Part XIII. To V Endowment Funds Complete if								
ı aı	Lindowinient i dinds Complete ir			(c) Two years bac		Throny	ears back	(a) Four	years back
	<u></u>	(a) Current year 93,751,711.	(b) Prior year 90,873,066.		-			` '	
	Beginning of year balance			131,271,016	_		12,744.		753,761.
	Contributions	1,085,044.	266,629.	55,25			07,128.	- · · · · · · · · · · · · · · · · · · 	
	Net investment earnings, gains, and losses	12,269,505.	9,134,296.	-16,916,402	4.	31,931,318.		3,	024,691.
	Grants or scholarships				_				
е	Other expenditures for facilities		6 500 000					_	
	and programs	4,851,084.	6,522,280.	7,208,783	3.	6,2	10,174.	5,	152,983.
f	Administrative expenses				_				
g	End of year balance	102,255,176.		107,201,086	•	131,2	71,016.	104,	842,744.
2	Provide the estimated percentage of the curre		(line 1g, column (a)) held as:					
а	Board designated or quasi-endowment	26.0000	_%						
b	Permanent endowment 74.0000	%							
С	Term endowment	%							
	The percentages on lines 2a, 2b, and 2c should	ıld equal 100%.							
3a	Are there endowment funds not in the posses	ssion of the organizat	ion that are held an	d administered fo	r the			_	
	organization by:								Yes No
	(i) Unrelated organizations?							3a(i)	X
								3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organizate	tions listed as require	ed on Schedule R?					3b	
4	Describe in Part XIII the intended uses of the		ment funds.						
Pai	t VI Land, Buildings, and Equipme	ent							
	Complete if the organization answered	d "Yes" on Form 990,	Part IV, line 11a. S	ee Form 990, Part	X, line	e 10.			
	Description of property	(a) Cost or ot	her (b) Cost	or other (c	c) Accumulated		d	(d) Book	value
	•	basis (investm	ent) basis	(other)	depreciation				
1a	Land								
	Buildings								
С	Leasehold improvements	**							
	Equipment	I	2,27	1,001.	86	0,54	18.	1,410	,453.
	Other					7,71	11.	294	,995.
	I. Add lines 1a through 1e. (Column (d) must ed			*					,448.

Schedule D (Form 990) 2023 WOMEN, INC.		5	52-6037388 Page 3
Part VII Investments - Other Securities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1) DEFERRED RENT RECEIVABLE			524,492.
(2) RIGHT OF USE ASSET			16,062,600.
(3)			
(4)			
(5)			
(6)			
			_
(7)			+
(8)			+
(9)			16 507 000
Total. (Column (b) must equal Form 990, Part X, line 15, co	ol. (B))		16,587,092.
Part X Other Liabilities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) SECURITY DEPOSIT			173,108.
(3) SPLIT INTEREST AGREEMENTS			440,268.
(4) DUE TO RELATED PARTY			68,060.
(5) OPERATING LEASE LIABILITY			20,435,434.
(6)			1,23,200
(7)			
(8)			+
(9)			01 116 000
Total. (Column (b) must equal Form 990, Part X, line 25, co			
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote to	the organization's financial statements	s that reports the

Schedule D (Form 990) 2023

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

CONTRIBUTIONS AND INVESTMENT REVENUE EARNED FROM PURPOSE RESTRICTED GIFTS

TO FUND PROGRAMS AND RESEARCH THAT HELP TO: ADVANCE EQUITY FOR WOMEN AND

GIRLS; PROTECT THEM FROM DISCRIMINATION AND ABUSE; PROMOTE EDUCATIONAL AND

WORKPLACE OPPORTUNITY AND ACHIEVEMENT; ADVOCATE FOR PUBLIC POLICIES THAT

Part XIII Supplemental Information (continued)
BENEFIT THEM AND THEIR FAMILIES; AND, BREAK THROUGH BARRIERS THAT PREVENT
THEM FROM ATTAINING THEIR PERSONAL GOALS AND FULL POTENTIAL.
LEGAL ADVOCACY FUND: THESE FUNDS ARE RESTRICTED TO SUPPORTING PROGRAMS,
GRANTS, RESEARCH AND LEGAL CASES COMBATING SEX AND GENDER DISCRIMINATION,
PARTICULARLY IN EDUCATION AND THE WORKPLACE.
CAMPUS LEADERSHIP PROGRAMS: ENDOWMENT FUNDS ARE RESTRICTED FOR AAUW'S
CAMPUS LEADERSHIP PROGRAMS.
PART XII, LINE 4B - OTHER ADJUSTMENTS:
RETURN OF PRIOR YEAR GRANT EXPENSES 120,166.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Open to Public

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

OMB No. 1545-0047

Name of the organization **Employer identification number** AMERICAN ASSOCIATION OF UNIVERSITY 52-6037388 WOMEN INC. General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (a) Region (b) Number of (c) Number of (d) Activities conducted in the region (f) Total employees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region GRANTS TO RECIPIENTS SUB-SAHARAN AFRICA 0 LOCATED IN REGION 180,000. GRANTS TO RECIPIENTS 25,000. 0 0 LOCATED IN REGION EUROPE GRANTS TO RECIPIENTS 0 0 LOCATED IN REGION 45,000. NORTH AMERICA GRANTS TO RECIPIENTS LOCATED IN REGION SOUTH ASIA 0 0 95,000. MIDDLE EAST AND GRANTS TO RECIPIENTS LOCATED IN REGION NORTH AFRICA 0 0 40,000. EAST ASTA AND THE GRANTS TO RECIPTENTS PACIFIC 0 LOCATED IN REGION 9,950. GRANTS TO RECIPIENTS RUSSIA AND NEIGHBORING STATES 0 LOCATED IN REGION 20,000. 0 0 414,950. 3 a Subtotal

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

0

0

Schedule F (Form 990) 2023

414,950.

and 3b)

b Total from continuation

sheets to Part I c Totals (add lines 3a

WOMEN, INC.

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax	
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	

3 Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if (a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
INTERNATIONAL FELLOWSHIPS	SUB-SAHARAN						
FUND	AFRICA	7	180,000.	ACH/WIRE	0.		
INTERNATIONAL FELLOWSHIPS							
FUND	EUROPE	1	25,000.	WIRE	0.		
INTERNATIONAL FELLOWSHIPS							
FUND	NORTH AMERICA	1	25,000.	ACH DISBURSEMENT	0.		
TAMEDAN MITONAL DELLONGUEDO							
INTERNATIONAL FELLOWSHIPS FUND	SOUTH ASIA	3	95 000	ACH DISBURSEMENT	0.		
. 0112			23,000.	TOTAL PROBOTORIES			
INTERNATIONAL FELLOWSHIPS	MIDDLE EAST AND						
FUND	NORTH AFRICA	2	40,000.	ACH DISBURSEMENT	0.		
INTERNATIONAL GRANT PROEJCT	EAST ASIA AND THE						
FUND	PACIFIC	1	9,950.	ACH DISBURSEMENT	0.		
	RUSSIA AND						
	NEIGHBORING						
NYC METROPOLITAN FUND	STATES	1	20,000.	ACH DISBURSEMENT	0.		
NYC METROPOLITAN FUND	NORTH AMERICA	1	20,000.	WIRE	0.		

Schedule F (Form 990) 2023 V Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2023

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
PART I, LINE 2:
FOR FUNDS AWARDED THROUGH AAUW INC'S. INTERNATIONAL PROJECT GRANT/HOME
COUNTRY GRANT, FELLOWS ARE REQUIRED TO GIVE AN ACCOUNTING TWICE DURING
THE FELLOWSHIP YEAR. SUCH ACCOUNTING MAY INCLUDE PROJECT PROGRESS,
INSTITUTIONAL CERTIFICATION OF GOOD STANDING, TRANSCRIPTS AND BUDGET
EXPENDITURES. FELLOWS ARE ALSO REQUIRED TO REQUEST, IN ADVANCE, ANY
CHANGES TO THEIR PROJECT PLAN AND BUDGET, WHICH ARE APPROVED BY THE
PROGRAM OFFICER TO ENSURE THEY MEET FELLOWSHIP GUILDLINES.

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization AMERICA	N ASSOCIATION OF U	IVI	ERS:	ITY		Employer ide	ntification number
WOMEN,	INC.		52-6037	388			
Part I Fundraising Activities. required to complete this par	Complete if the organization answett.	red "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
 1 Indicate whether the organization rais a X Mail solicitations b X Internet and email solicitations c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid individual compensated at least \$5,000 by the 	e X Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with previduals or entities (fundraisers) pursua	tion of tion of fundra (includance)	non-g gover aising ding of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
AB DATA - 600 AB DATA DRIVE,		Yes	No				
MILWAUKEE, WI 53217	FUNDRAISING CONSULTANT		х	0.		131,000.	-131,000.
Total 3 List all states in which the organization	us in variational as licensed to aclicit a			ar has been notified	itio	131,000.	,
or licensing. AL, AK, AR, CA, CO, CT, DC, 1							
NC, ND, OH, OK, OR, PA, RI,					,	, _ , _ , _ , _ , _ ,	

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

Schedule G (Form 990) 2023

Pa	ırt I	Fundraising Events. Complete if the of fundraising event contributions and great productions.				
		or randration growth continuation of and gr	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
Φ			(event type)	(event type)	(total number)	col. (c))
Revenue		Once we exist				
Вè	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
ø		Noncash prizes				
Direct Expenses	6	Rent/facility costs				
rect E	7	Food and beverages				
ቯ		Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through				
D	11 	Net income summary. Subtract line 10 from light Gaming. Complete if the organization	ine 3, column (d)	.000 Dort IV line 10 or	ranautad maya than	
		\$15,000 on Form 990-EZ, line 6a.	answered fes on Form	1990, Part IV, line 19, 011	reported more than	
_		*·-,	(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) birigo	bingo/progressive bingo	(c) Other gaining	col. (a) through col. (c))
Reve						
	1	Gross revenue				+
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
		Volunteer labor	Yes % No	Yes % No	Yes % No	
		Direct expense summary. Add lines 2 through	5: 1 (0)		·	
		Net gaming income summary. Subtract line 7				
		Not garning moone summary. Subtract line 7	nom inc 1, column (a)			
		ter the state(s) in which the organization condu				
		the organization licensed to conduct gaming a				Yes No
t) IT "	No," explain:				
		ere any of the organization's gaming licenses re Yes," explain:				Yes No
	_					

Schedule G (Form 990) 2023

332082 09-13-23

AMERICAN ASSOCIATION OF UNIVERSITY

Sch	edule G (Form 990) 2023 WOMEN , INC . 52	-603	37 s	<u> 888</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	[Y	es (☐ 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?		Y	es/	☐ No
13	Indicate the percentage of gaming activity conducted in:				
	The organization's facility	1:	3a		%
	An outside facility		3b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:				,,,
•	Enter the manie and dadress of the person who propares the organization of garming operation of the books and records.				
	Name				
	Address				
	Address				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	С	Y	/es	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount				
	of gaming revenue retained by the third party \$				
C	If "Yes," enter name and address of the third party:				
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation \$				
	Description of services provided				
		-			
	Director/officer Employee Independent contractor				
17	Mandatoni diatributiona				
	Mandatory distributions:				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		٦,		
_	retain the state gaming license?	L	1	es/	∟ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the				
Da	organization's own exempt activities during the tax year \$				
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Part III,	, line	es 9, 9	b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				

AMERICAN ASSOCIATION OF UNIVERSITY

Schedule G	G (Form 990) WOMEN, INC.	52-6037388 Page 4
Part IV	(Form 990) WOMEN , INC . Supplemental Information (continued)	

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

AMERICAN ASSOCIATION OF UNIVERSITY

OMB No. 1545-0047

Open to Public Inspection

Name of the organization AMERICAN WOMEN, IN		ON OF UNIVE	RSITY				Employer identification number 52-6037388
Part I General Information on Grants a	nd Assistance						
 Does the organization maintain records to criteria used to award the grants or assist Describe in Part IV the organization's pro 	stance?						
Part II Grants and Other Assistance to recipient that received more than S					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ALMOST HOME							
3200 ST. VINCENT AVE. ST. LOUIS, MO 63104	43-1645686	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS
DISABILITY EMPOWHER NETWORK 67 FIRESTONE DR. ROCHESTER, NY 14624	86-2446885	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS
GRIT GLAM AND GUTS 3018 WOODRUFF APT. 9 LANSING, MI 48912	84-2899834		10,000.	0.			COMMUNITY ACTION GRANTS
HER IDEA SF 782 31ST AVE. SAN FRANCISCO, CA 84121	86-3603375	501(C)(3)	5,500.	0.			COMMUNITY ACTION GRANTS
HORTONS KIDS 2233 HUNTER PL. SE WASHINGTON, DC 20722	52-1755403	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS
IMMIGRANT FAMILY SERVICES INSTITUTE, INC 1626 BLUE HILL AVE MATTAPAN, MA 02126	47-4400495	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS
2 Enter total number of section 501(c)(3) a3 Enter total number of other organizations	-						

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

Schedule I (Form 990) 2023

Part II Continuation of Grants and Other				(====			
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE BOYS & GIRLS CLUB OF THE							
OLYMPIC PENINSULA - 400 W FIR ST.							
- SEQUIM, WA 98382	91-1376766	501 (C) (3)	10,000.	0.			COMMUNITY ACTION GRANTS
	31 1370700	301(0)(3)	10,000.	٠.			COMMONITY METTON GRANTS
THE BRAVE HOUSE							
155 WATER ST. 3RD FLOOR							
BROOKLYN, NY 11201	83-3670811	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS
YOUNG WOMEN'S PREPARATORY NETWORK							
1722 ROUTH ST. SUITE 720							
DALLAS, TX 75201	74-0902114	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS
,			,				
BRIGHT FUTURES FOR YOUTH							
200 LITTON DR. SUITE 308							
GRASS VALLEY, CA 95945	68-0262000	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS
GIRLS 4 SCIENCE							
P.O. BOX 288958							
CHICAGO, IL 60628	27-0147595	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS
GIRLS INCORPORATED OF WORCESTER							
125 PROVIDENCE ST.							
WORCESTER, MA 01604-5412	04-2123666	501(C)(3)	7,500.	0.			COMMUNITY ACTION GRANTS
LIBERA, INC							
8 SUBURBAN CT.							
MORGANTOWN, WV 26505	47-1601546	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS
WITHOUTER WERTALL GRAPE							
MAIMONIDES MEDICAL CENTER							
362 5TH ST.	44 4605061	501 (7) (2)	10.000	_			
BROOKLYN, NY 11215	11-1635081	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS
OREGON STATE UNIVERSITY FOUNDATION							
STEM ACADEMY @ OREGON STATE							
UNIVERSITY 110 SNELL HALL -							
CORVALLIS, OR 97331	93-6022772	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS

Schedule I (Form 990)

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	t II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GELF-ESTEM							
6114 LA SALLE AVE. #297							
OAKLAND, CA 94611	47-2316798	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS
SHIELD MENTOR PROGRAM							
2715-D GRANDVIEW AVE. #218							
GREENSBORO, NC 27408	76-0784186	501(C)(3)	10,000.	0.			COMMUNITY ACTION GRANTS
UNIVERSITY OF NORTH CAROLINA AT							
CHAPEL HILL - 130 MASON FARM RD.	56 6001202	F01 (@) (3)	0.005				
CB 7108 - CHAPEL HILL, NC 27599	56-6001393	501(C)(3)	9,897.	0.			COMMUNITY ACTION GRANTS
THE RESEARCH FOUNDATION OF THE							
STATE OF UNIV OF NY - PO BOX 9 -							
ALBANY, NY 12201	14-1368361	501(C)(3)	25,000.	0.			LEGAL ADVOCACY FUND
UCI WORKERS, LAW, AND ORGANIZING			,				
CLINIC, UNIV OF CA IRVINE - 401 E.							
PELTASON DR. SUITE 1000 - IRVINE,							
CA 92697	95-2226406	N/A	30,000.	0.			LEGAL ADVOCACY FUND
FAFINSKI MARK & JOHNSON, P.A.							
FLAGSHIP CORPORATE CENTER							
EDEN PRAIRIE, MS 55344	41-1941221	N/A	10,000.	0.			LEGAL ADVOCACY FUND
·							
TB ROBINSON LAW GROUP, PLLC							
7500 SAN FELIPE ST. SUITE 800							
HOUSTON, TX 77063	81-1021710	N/A	62,000.	0.			LEGAL ADVOCACY FUND
THE PERPER NATIONAL LAW CROSE							
THE FIERBERG NATIONAL LAW GROUP, PLLC - 161 EAST FRONT ST., SUITE							
200 - TRAVERSE CITY, MI 49684	47-5554638	N/A	20,000.	0.			LEGAL ADVOCACY FUND
THINDROD CITT, MI 47004	4, 2224020	**/ **	20,000.	0.			DESIL IDVOCACT FOND
CORREIA & PUTH, PLLC							
1400 16TH ST., NW							
WASHINGTON, DC 20036	47-0975519	N/A	30,000.	0.			LEGAL ADVOCACY FUND

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UST ACCOUNT OF KATZ, MARSHALL &									
NKS, LLP - 1718 CONNECTICUT VE., 7TH FLOOR - WASHINGTON, DC									
0009	42-1693698	N/A	36,000.	0.			LEGAL ADVOCACY FUND		
AMBERTON LAW FIRM, LLC									
7 GRANT ST., SUITE 1705									
TTSBURGH, PA 15219	50-3084165	N/A	20,000.	0.			LEGAL ADVOCACY FUND		

WOMEN, INC.

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
NYC METRO AREA FUND	2	1,500.	0.		
AMERICAN FELLOWSHIPS FUND	91	2,590,300.	0.		
SELECTED PROFESSION FELLOWSHIPS	25	500,000.	0.		
INTERNATIONAL FELLOWSHIPS FUND	81	2,035,000.	0.		
CAREER DEVELOPMENT GRANT	29	450,440.	0.		

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

PART I, LINE 2:

FELLOWS AND GRANTEES ARE REQUIRED TO GIVE AN ACCOUNTING TWICE DURING THE

GRANT/FELLOWSHIP PERIOD. SUCH ACCOUNTING MAY INCLUDE PROJECT PROGRESS,

INSTITUTIONAL CERTIFICATION OF GOOD STANDING, TRANSCRIPTS, AND BUDGET

EXPENDITURES. RECEIPT OF THE SECOND GRANT/FELLOWSHIP PAYMENT IS CONTINGENT

UPON THE SUBMISSION OF A SATISFACTORY MID-TERM REPORT, INCLUDING

FINANCIALS. GRANTEES AND FELLOWS ARE ALSO REQUIRED TO REQUEST, IN ADVANCE,

ANY CHANGES TO THEIR PROJECT PLAN AND BUDGET, WHICH ARE APPROVED BY THE

PROGRAM OFFICER TO ENSURE THEY MEET GRANT FELLOWSHIP GUIDELINES.

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC.

Employer identification number 52-6037388

Pa	art 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 on Form 990,					
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or charter travel Housing allowance or residence for personal use					
	Travel for companions Payments for business use of personal residence			l		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees					
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			l		
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 directors,					
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2				
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's					
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to					
	establish compensation of the CEO/Executive Director, but explain in Part III.					
	Compensation committee Written employment contract					
	X Independent compensation consultant					
	Form 990 of other organizations X Approval by the board or compensation committee			l		
				l		
4	During the year, did any person listed on 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		X		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			l		
				l		
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			l		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			l		
	contingent on the revenues of:					
а	The organization?	5a		<u>X</u>		
b	Any related organization?	5b		Х		
	If "Yes" on line 5a or 5b, describe in Part III.			l		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation					
	contingent on the net earnings of:			37		
а	The organization?	6a		X		
b	Any related organization?	6b		Х		
	If "Yes" on line 6a or 6b, describe in Part III.					
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		Ψ,			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	 		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the					
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X		
9		9				

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

Schedule J (Form 990) 2023

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

For each individual whose compensation must be reported on 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 aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) GLORIA BLACKWELL	(i)	343,412.	20,000.	0.	31,881.	11,430.	406,723.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SHANNON WOLFE	(i)	229,935.	0.	0.	23,392.	11,848.	265,175.	0.
MANAGING DIR. & CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JULIAN SFECLA	(i)	198,548.	0.	0.	19,883.	4,143.	222,574.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) THOMAS CHAPPELL	(i)	179,228.	0.	0.	17,965.	13,158.	210,351.	0.
VP OF FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) TIFFANY SANCHEZ	(i)	177,495.	0.	0.	10,355.	13,204.	201,054.	0.
I	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) KATRINA BREESE	(i)	163,792.	0.	0.	16,480.	3,903.	184,175.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) LESHELL HATLEY	(i)	134,433.	0.	0.	13,712.	12,664.	160,809.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) EDWARD TILLER	(i)	127,040.	500.	0.	14,704.	13,189.	155,433.	0.
NETWORK ADMINISTRATOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

AMERICAN ASSOCIATION OF UNIVERSITY

Open to Public Inspection Employer identification number

	WOMEN, INC.					52-6037	388	
Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) Method of determin ash contribution an	•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	5	25,932.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz	zation during	the tax year for co	ontributions				
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29			0	
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that	it		
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to be used t	or			
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	equires the review o	of any nonstandard contribut	ions?	31	X	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	for which column (a) is chec	ked,			
	describe in Part II							

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

Schedule M (Form 990) 2023

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE 0 (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC.

Employer identification number 52-6037388

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ADVOCACY - INCLUDES AAUW'S POLICY PROGRAMS, CIVIC ENGAGEMENT, AND ACTIVITIES TO CONNECT, EDUCATE, AND RALLY MEMBERS, SUPPORTERS AND ADVOCATES TO ADVANCE ITS MISSION TO EMPOWER WOMEN AND GIRLS AT THE NATIONAL AND STATE LEVELS. EXPENSES \$ 586,607. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. MEETING AND CONVENING - INCLUDES ACTIVITIES RELATED TO MEMBER AND ALUMNAE CONVENING, AND THE NATIONAL CONFERENCE FOR COLLEGE WOMEN STUDENT LEADERS (NCCWSL). EXPENSES \$ 356,070. INCLUDING GRANTS OF \$ 0. REVENUE \$ 249,114. COMMUNICATIONS AND EXTERNAL RELATIONS - INCLUDES ALL ACTIVITIES RELATED TO SERVING, ENGAGING, AND COMMUNICATING WITH MEMBERS AND THE GENERAL PUBLIC. EXPENSES \$ 832,942. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. LEGAL ADVOCACY FUND (LAF) - LAF COMBATS SEX AND GENDER DISCRIMINATION THROUGH CASE SUPPORT FOR LEGAL CASES IN HIGHER EDUCATION AND THE WORKPLACE. EXPENSES \$ 248,335. INCLUDING GRANTS OF \$ 233,000. REVENUE \$ 0. MEMBERSHIP - EXPENDITURES ARE USED TO ASSIST STATE AND LOCAL AAUW BRANCHES WITH MEMBER RECRUITMENT AND RETENTION, GENDER EQUITY RELATED PROGRAMS SUCH AS PAY EQUITY PUBLIC EDUCATION INITIATIVES AND TRAINING AS WELL AS EDUCATION INITIATIVES. PROGRAMS ,

332211 11-14-23

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

Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization AMERICAN ASSOCIATION OF UNIVERSITY WOMEN, INC.

Employer identification number 52-6037388

EXPENSES \$ 1,147,921. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

OTHER PROGRAMS

EXPENSES \$ 101,000. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6:

AAUW, INC. HAS MEMBERS AND RECIEVES MEMBER DUES. THE MEMBERS OF AAUW

CONSIST OF INDIVIDUAL MEMBERS AND COLLEGE/UNIVERSITY MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A:

AAUW USES AN ANNUAL ELECTRONIC AND PAPER VOTING PROCEDURE TO ALLOW THE

MEMBERSHP TO ELECT TWELVE OUT OF THE FIFTEEN MEMBERS OF THE BOARD OF

DIRECTORS ON STAGGERED TERMS. THE BOARD OF DIRECTORS APPOINTS THREE

ADDITIONAL BOARD MEMBERS ON STAGGERED TERMS.

FORM 990, PART VI, SECTION A, LINE 7B:

MEMBERS ARE ENTITILED TO VOTE ON THE ELECTION OF THE BOARD OF DIRECTORS,

ADOPTION OR AMENDMENT OF THE PUBLIC POLICY PRIORITIES, AND AMENDMENTS TO

THE BYLAWS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY MANAGEMENT, THE FINANCE CHAIR, AND THE BOARD OF DIRECTORS BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION REQUIRES DIRECTORS AND OFFICERS TO SIGN AN ANNUAL

AFFIRMATION OF COMPLIANCE TO DISCLOSE ANY POTENTIAL SITUATION THAT MAY

RAISE A CONFLICT OF INTEREST TO THE BOARD OF DIRECTORS.

THIS I CONTESTO OF INTERNED TO THE BOILD OF BINEGIOUS

Schedule O (Form 990) 2023

Employer identification number 52-6037388

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN

INTERESTED PERSON DISCLOSES THE EXISTENCE OF THE FINANCIAL INTEREST AND IS

GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO ONE OR MORE

DIRECTORS. SUCH DISCLOSURE MUST BE PROVIDED AS SOON AS REASONABLY POSSIBLE

PRIOR TO FURTHER CONSIDERATION OR CONTEMPLATION OF ENTERING INTO ANY

ACTIVITY, TRANSACTION OR ARRANGEMENT THAT REPRESENTS A POSSIBLE CONFLICT OF

INTEREST. ADVANCE DISCLOSURE MUST OCCUR SO THAT THE BOARD MAY DETERMINE

WHETHER A CONFLICT OF INTEREST EXISTS AND, IF APPROPRIATE, DETERMINE A PLAN

OF ACTION TO MANAGE THE CONFLICT.

IF AN INTERESTED PERSON DISCLOSES THE EXISTENCE OF A FINANCIAL INTEREST

DURING A MEETING, HE/SHE LEAVES THE BOARD MEETING WHILE THE DETERMINATION

OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON AFTER DISCLOSURE OF

THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION

WITH THE INTERESTED PERSON. THE REMAINING BOARD MEMBERS DECIDE IF A

CONFLICT OF INTEREST EXISTS.

IF AN INTERESTED PERSON DISCLOSES THE EXISTENCE OF A FINANCIAL INTEREST TO

ONE OR MORE DIRECTORS OUTSIDE OF A BOARD MEETING, HE/SHE PROVIDES

ADDITIONAL INFORMATION AS REQUESTED TO THE DIRECTORS. THE BOARD DISCUSSES

AND DETERMINES WHETHER A CONFLICT OF INTEREST EXISTS AT THE NEXT BOARD

MEETING.

THE FACT THAT A POTENTIAL CONFLICT WAS IDENTIFIED, MANAGED, AVOIDED, AND/OR
RESOLVED WILL BE DOCUMENTED IN THE MINUTES OF ANY MEETING OR COMMUNICATION
REGARDING THE MATTER.

Schedule O (Form 990) 2023 Page 2

Name of the organization AMERICAN ASSOCIATION OF UNIVERSITY **Employer identification number** WOMEN, INC. 52-6037388 FORM 990, PART VI, SECTION B, LINE 15A: THE CHIEF EXECUTIVE OFFICER (CEO) HAS AN EMPLOYMENT AGREEMENT WITH AAUW. THE BOARD OF DIRECTORS CONDUCTS A YEARLY PERFORMANCE REVIEW OF THE CEO UPON WHICH COMPENSATION IS BASED. THIS MOST RECENTLY TOOK PLACE IN OCTOBER 2024. THE BOARD OF DIRECTORS RELIES ON AN INDEPENDENT COMPENSATION CONSULTANT TO OBTAIN APPROPRIATE COMPENSATION INFORMATION FOR THE CEO. YEARLY STAFF COMPENSATION IS RECOMMENDED BY SENIOR MANAGEMENT TO THE CEO. THE OVERALL COMPENSATION IS THEN PRESENTED TO THE BOARD OF DIRECTORS THROUGH THE BUDGET APPROVAL PROCESS. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OR, PA, RI, SC, TN, UT VA,WV,WI FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S BYLAWS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE ON THE WWW.AAUW.ORG WEBSITE. AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: RETURN OF PRIOR YEAR GRANT EXPENSE 120,166.

332212 11-14-23

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

2023

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

AMERICAN ASSOCIATION OF UNIVERSITY **Employer identification number** Name of the organization 52-6037388 WOMEN, INC. Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (f) (a) (b) (c) (d) (e) Name, address, and EIN (if applicable) Primary activity Legal domicile (state or Total income End-of-year assets Direct controlling of disregarded entity entity foreign country) Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt Part II organizations during the tax year. (a) (b) (d) (e) (c) (g) Section 512(b)(13) Name, address, and EIN Legal domicile (state or **Exempt Code** Public charity Direct controlling Primary activity controlled of related organization section status (if section entity foreign country) entity? 501(c)(3)) Yes No AAUW ACTION FUND, INC. - 53-0025390 AMERICAN 1310 L STREET NW #1000 ASSOCIATION OF WASHINGTON, DC 20005 SEE PART VII MASSACHUSETTS 501(C)(4) UNIVERSITY WOMEN Х

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

Schedule R (Form 990) 2023

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)	
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income (related, unrelated,	Share of total income	Share of end-of-year	Dispropo	ortionate	Code V-UBI amount in box	General managir	Percentage ownership	
or rotatou organization		(state or foreign	5	(related, unrelated, excluded from tax under sections 512-514)		assets	alloca	itions?	20 of Schedule	partner	1	
		country)		sections 512-514)			Yes	No	amount in box 20 of Schedule K-1 (Form 1065)	Yes N		
							<u> </u>					
	I											

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(t contr ent	(i) otion b)(13) rolled tity?
		country)		or tracty		400010		Yes	No
								<u> </u>	<u> </u>
								<u> </u>	<u> </u>
	-								
									<u> </u>

X

Yes No

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/			1a		X		
С	c Gift, grant, or capital contribution from related organization(s)								
					1d		Х		
е	Loans or loan guarantees by related organization(s)				1e		Х		
	, , , , , , , , , , , , , , , , , , , ,								
f	Dividends from related organization(s)				1f		Х		
					1g		X		
h	Purchase of assets from related organization(s)				1h		X		
i	Exchange of assets with related organization(s)				1i		X		
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х		
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х		
-1					11		Х		
b Girt, grant, or capital contribution to related organization(s) c Girt, grant, or capital contribution from related organization(s) d Loans or loan guarantees to rof related organization(s) e Loans or loan guarantees by related organization(s) f Dividends from related organization(s) g Sale of assests to related organization(s) g Sale of assests to related organization(s) f Dividends from related organization(s) g Sale of assests to related organization(s) g Sale of assests the related organization(s) g Sale of assests the related organization(s) g Sale of assest store related organization(s) g Sale of assests the related organization(s) g Sale of assest store related organizati									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
	•								
р	Reimbursement paid to related organization(s) for expenses				1p		Х		
					1q	Х			
					•				
r	Other transfer of cash or property to related organization(s)				1r		Х		
					1s		Х		
	Name of related organization				olved				
		type (a-s)		· ·					
1) .	AAUW ACTION FUND, INC.	C	200,000.	CASH					
	·		-						
2)									
3)									
4)									
5)									
6)									
	3 09-28-23	•		Schedule	R (Fori	n 990	2023		
					•				

Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?	General manage partner	(k) Percentage ownership
	_								000) 0000

Schedule R (Form 990) 2023 332165 09-28-23