# CENTER FOR MEDIA AND DEMOCRACY

P.O. Box 259010, Madison, WI 53715 608-260-9713 | <u>www.PRWatch.org</u>

October 31, 2016

Office of General Counsel Federal Election Commission 999 E. Street, N.W. Washington, DC 20463

MUR # 1181

Dear Sir or Madam,

Enclosed please find an original notarized complaint and three copies, including exhibits, against Independent Women's Voice (IWV) for failure to comply with federal election campaign laws.

The Center for Media and Democracy is filing the complaint based on information and belief that IWV's "major purpose" since 2010 has been to influence federal elections, and that its failure to register and report as a political committee in the 2010, 2012, and 2014 elections violates the Federal Election Campaign Act.

In addition, the Center for Media and Democracy alleges, based on information and belief, that IWV failed to report approximately \$250,000 in independent expenditures on behalf of Scott Brown in the 2010 special election to fill the Massachusetts U.S. Senate seat left vacant by the death of Senator Ted Kennedy.

Please let me know if you have any questions about the filing or require any additional information.

Sincerely,

Arn H. Pearson General Counsel arn@prwatch.org

207.272.2886

# BEFORE THE FEDERAL ELECTION COMMMISSION

**Center for Media and Democracy** 122 W. Washington Ave., Suite 555 Madison, WI 53703

v.

MUR No. 7181

Independent Women's Voice 1875 I Street, NW, Suite 500 Washington, DC 20006

#### COMPLAINT

- 1. The Center for Media and Democracy (hereinafter "Complainant") files this complaint pursuant to 52 U.S.C. § 30109(a)(1) and based on information and belief that Independent Women's Voice (IWV) has violated the Federal Election Campaign Act (FECA), 52 U.S.C. § 30101 et seq. Based on IWV's tax returns, its public statements, and published reports, Complainant has reason to believe that IWV has raised and spent millions of dollars to influence the 2010, 2012, and 2014 federal elections without registering as a political committee as required by 52 U.S.C. § 30103, filing political committee disclosure reports as required by 52 U.S.C. § 30104, or complying with the organizational, accounting, and recordkeeping requirement of 52 U.S.C. § 30102. In addition, Complainant has reason to believe that IWV has failed to report independent expenditures to the Commission, even under the minimal requirements for persons other than political committees in violation of 52 U.S.C. § 30104.
- 2. Timely investigation by the Federal Election Commission (hereinafter "Commission") is critical and necessary to determine whether IWV is violating

FECA, where Complainant and the public do not have full access to all the relevant information. See 52 U.S.C. § 30109(a)(2) ("If the Commission, upon receiving a complaint . . . has reason to believe that a person has committed, or is about to commit, a violation of [the FECA], . . . [t]he Commission shall make an investigation of such alleged violation.")(emphasis added).

3. Furthermore, the Commission has recognized in its Supplemental Explanation and Justification on Political Committee Status (hereinafter "SE&J") that, "The Federal courts' interpretation of its constitutionally mandated major purpose doctrine requires the Commission to conduct investigations into the conduct of specific organizations that may well reach beyond publicly available advertisements." 72 Fed. Reg. 5595, 5597 (Feb. 7, 2007).

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4. Complainant alleges, based on information and belief, that IWV's major purpose since 2010 has been to influence elections, that the group spent at least \$6.4 million more to influence federal elections between 2010 to 2014 than was reported to the Commission, and that it failed to report to the Commission approximately \$250,000 in independent expenditures on behalf of Scott Brown in the 2010 special election to fill the Massachusetts U.S. Senate seat left vacant by the death of Senator Ted Kennedy.

# I. Applicable Law

5. The history of campaign finance regulation has been marked by repeated and highly creative efforts to circumvent the law. *See McConnell v. FEC*, 540 US. 93, 165 (2003)(noting "the hard lesson of circumvention"). Following passage of the Bipartisan Campaign Reform Act of 2002, political players increasingly turned to the

use of 501(c)(4) organizations as a way to influence elections while evading basic requirements of campaign law. The Supreme Court's decision in *Citizens United v. FEC*, CITE, in 2010, which legitimized independent political spending by corporations, greatly accelerated this trend. The amount of "dark" money spent on federal elections without disclosure of true funding sources soared from \$82.8 million 2008 to \$199.4 million in 2012, and is expected to shatter all records in 2016.¹ Action by the Commission is needed to stop the kind of "widespread circumvention" of the law flagged by the Court in *McConnell* by 501(c)(4) organizations that use their social welfare group status to mask their major purpose of influencing federal elections.

- 6. FECA requires any group to register as a "political committee" if it receives contributions or makes expenditures aggregating more than \$1,000 during a calendar year "for the purpose of influencing any election for federal office." See 52 U.S.C. § 30101(4), (8)(A), (9)(A).
- 7. The Supreme Court in *Buckley v. Valeo* limited the scope of FECA's political committee definition to only include groups "that are under the control of a candidate or the major purpose of which is the nomination or election of a candidate." 424 U.S. 1, 79 (1976). The Court expanded on that holding in *FEC v. Massachusetts Citizens for Life*, which involved a 501(c)(4) organization, to say that a group is subject to the "obligations and restrictions applicable to those groups whose primary objective is to influence campaign activities" when its political

<sup>&</sup>lt;sup>1</sup> See <a href="https://www.opensecrets.org/outsidespending/nonprof\_summ.php">https://www.huffingtonpost.com/entry/dark-money-supreme-court\_us\_57c09b32e4b0267344500abb</a>

activities "become so extensive that the organization's major purpose may be regarded as campaign activity." 479 U.S. 238, 262 (1986); *See also McConnell*, 540 U.S. at 170 n.64.

- 8. An organization's tax status is not relevant to the Commission's inquiry into whether or not it is a political committee. Rather, it involves a two-pronged test based on "an analysis of both an organization's specific conduct—whether it received \$1,000 in contributions or made \$1,000 in expenditures—as well as its overall conduct—whether its major purpose is Federal campaign activity." SE&J, 72 Fed. Reg. at 5597. "Neither FECA, its subsequent amendments, nor any judicial decision interpreting either, has substituted tax status as an acceptable proxy for this conduct-based determination." *Id*.
- 9. The Commission's "major purpose" determination is made on a case-by-case basis based on an "investigation into the conduct of specific organizations that may reach well beyond publicly available advertisements." *Id.* at 5601. The inquiry involves an examination of an organization's "overall conduct" that includes its spending, public statements, organizational documents, and fundraising solicitations. *Id.* at 5597, 5605.
- 10. The test is not confined to expenditures on express advocacy or its functional equivalent. *See, e.g., Citizens United v. FEC*, 558 U.S. 310, 130 S.Ct. 876, 914–16 (2010) ("We reject Citizens United's contention that the disclosure requirements must be limited to speech that is the functional equivalent of express advocacy"); *Real Truth About Abortion, Inc. v. FEC*, 681 F.3d 544, 552 n.3 (4th Cir. 2010) ("We take the registration and organizational requirements for political committees to be

akin to the disclosure requirements such that, as a constitutional matter, they can be regulated regardless of whether they contain express advocacy or its functional equivalent."); FEC, First General Counsel's Report, *Public Citizen v. Crossroads GPS*, MUR 6396 at 17 (2012) (applying major purpose test to spending for "communications that do not contain express advocacy but criticize or oppose a clearly identifiable candidate").

- 11. If the Commission finds that an organization meets the major-purpose test, it then looks to see whether the organization has received more than \$1,000 in "contributions" or made more than \$1,000 in "expenditures" "for the purpose of influencing" a federal election, as defined in FECA. 52 US.C. §30101(8), (9).
- 12. A group that meets the definition of a "political committee" is subject to FECA's organizational and recordkeeping requirements, 52 U.S.C. § 30102; must file a "statement of organization" with the FEC, 52 U.S.C. § 30103; and must file regular disclosure reports, 52 U.S.C. § 30104. Those reports must include the identity of all donors contributing more that \$200 to the committee in a calendar year. 52 U.S.C. § 30104(b).

# II. Application of Major Purpose Test to IWV

- 1. Complainant has reason to believe that IWV's spending to influence federal elections far exceeded the amounts reported to the FEC and the IRS for 2010, 2012, and 2014, and was the major purpose of the organization in each of those years.
- 2. IWV's spending has soared since Heather Higgins took the helm as the group's President and CEO, with dramatic spikes during federal election years. The group's 2010 spending was almost eight time greater than what it spent in 2009; its

2012 spending was five times what it spent in 2011; and its 2014 spending was more that double what it spent in 2013. Yet IWV only reported a relatively small percentage of its election year expenses to the FEC. (See chart.)

\$6,000,000 \$4,000,000 \$3,000,000 \$2,000,000 \$1,000,000 \$0 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014

IWV Total Spending (2004-2014)

Sources: IRS Form 990, Exs. 4-12 (IWV 990s for 2007 and 2008 are not available); FEC filings, Form 5 and Form 9, Exs. 13-23.

# A. 2010 Organizational Shift

3. IWV incorporated in 2003 and received its 501(c)(4) determination letter from the IRS in 2004. Exs. 1, 2. In its Form 1024 application for a tax exemption, the group asserted that the purpose of IWV would be to "educate women about public policy issues important to them" and "mobilize citizens to be involved in public policy issues," and stated that, "[i]t will also implement radio and television advertising to educate and promote policy positions." It also claimed that it did not

"plan to influence the selection, nomination, election, or appointment of any person to any Federal, state, or local public office." Ex. 3.

- 4. For the first six years, IWV's annual spending ranged from \$52,678 in 2004 to a high of \$248,823 in 2009. However, following the Supreme Court's decision in *Citizens United*, IWV's spending skyrocketed to \$1,986,937 in 2010—a nearly 700% increase. IWV began reporting independent expenditures to the Commission and political expenditures to the IRS that year.
- 5. In 2010, Higgins, formerly a paid consultant and board member, replaced Michelle Bernard as President and CEO of IWV, and all other board members left, except Midge Dector. Since then, the organization has been under the de facto sole control of Higgins. Higgins and Dector have been the only directors, with Dector serving just one hour per week with no compensation, according to the group's 990s.
- 6. On its 2010 tax return, IWV checked "yes" for engaging "in direct or indirect political campaign activities" for the first time. Ex. 8, p. 3. IWV's returns after that year describe its purpose as "reaching conservative and mainstream independents and women on the most important policy and legislative battles of the day," by "identifying messages that work with those key target audiences," and reaching them with "multi-faceted issue campaigns, which can include paid advertising." *See, e.g.,* Ex. 9, Schedule C.
- 7. The group reports no lobbying expenses on its tax returns or under the federal Lobbying Disclosure Act.

### B. Reported Political Spending

8. Since 2010, IWV has worked aggressively to influence both federal and state elections. Both its total spending and its reported political spending have been substantially greater in even-numbered federal election years.

Table 1
IWV Total Spending and Reported Political Spending
2010-2014

Political Expenditures Reported to IRS	Independent and Electioneering Expenditures Reported to FEC	Total Spending	Year
101 × 101 × 101	\$0.	\$52,678	2004
\$0	\$0	\$156,914	2005
\$0	\$0	\$38,216	2006
\$0	\$0	\$248,823	2009
\$772,435	\$454,691	\$1,986,937	2010
\$349,001	\$28,600	\$984,378	2011
\$382,542	\$961,019	\$5,040,110	2012
\$958,770	\$160,287	\$2,318,795	2013
\$747,359	\$783,403	\$5,490,529	2014

Sources: IRS Form 990, Exs. 4-12 (IWV 990s for 2007 and 2008 are not available); FEC filings, Form 5 and Form 9, Exs. 13-23.

9. IWV reported political spending ranged between 15% and 41% of the group's total spending during 2010-2014. However, Complainant has reason to believe that the organization's spending for the purpose of influencing federal elections is much greater that what it files with federal agencies, based on IWV's public statements and news accounts, its tax returns, an analysis of its political ads, and discrepancies in reporting.

### C. Public Statements about IWV's Political Purpose

10. IWV's executive director, Heather Higgins, gave a presentation to conservative activists and donors in November 2015 that made perfectly clear that IWV's major purpose is to influence elections. Higgins described IWV as "what is needed in the Republican conservative arsenal" and boasted of having a "90 percent win rate on races that were dubbed toss-up or worse, as well as some messaging campaigns, just to see how much we could move the needle." Her speech made it clear that IWV's "issue campaigns" are in fact designed to influence elections by branding the group as "independent" and "neutral" in order to target a specific segment of moderate women voters.

[F]or the last 5 years I have been working to provide the margin that matters in races that are toss-ups or worse. We have had a strong of wins because when we look at these things we try to think, how do you play chess rather than playing checkers? And we approach it much as the way the NRA does. When the NRA decides that they want a particular candidate to be elected because he's good on their issue, sometimes they run ads on guns, but very often they run ads on something entirely different and never even mention guns because their goal is to win the race, not to make themselves feel good about the ads they've run.

Ex. 34 at 3.

11. Higgins stated that other "political consultants and campaign consultants" "dislike" her because she is "different," explaining that:

[T]hey tend to support their friends and we tend to go do what the data tells us to do. Their driver for what they do tends to be commissions sadly. . . . [O]urs is whether we actually win and the data and the result that we get for where we were able to move the needle. . . And there are lots of people who, as a corollary to that, actually like us, including long-shot candidates that others had given up on, donors who want a high return on their investment for their political dollars and Americans who may not be large donors themselves but they want to see things that are strategic that win and that start getting the country back on track.

Id. Higgins statements make clear that much of the data research, polling and message development that IWV engages in—and does not report as political spending—is in fact intended to maximize the group's electoral impact. Her examples included Scott Brown's 2010 Senate race, Mark Sanford's 2013 House race, and President Obama's 2102 reelection. Id. at 4-5.

12. The Sanford race illustrates Higgins' statement well. IWV claimed in a press release that it made "the only independent expenditure of a significant size on the winning side of the ledger," and went on to explain how it used "4 days of [message] testing to 10,000 likely voting Republican and Independent households" to identify pivotal issues and lay the groundwork for spending "about \$250,000 in the last week of the campaign." Ex. 33. IWV reported spending \$160,287 to the Commission on political advertising and live GOTV calls based on that research, but did not report the cost of its extensive message testing. Ex. 21.

13. IWV intentionally brands itself as independent, nonpartisan and neutral precisely in order to increase its electoral impact on its target constituency of voters. Higgins said,

Branding matters. If you get a piece of mail, or you see an ad, or you get a phone call, and it's from some group that you think you don't like, you never pay attention to what they have to say. . . . So we have worked hard to create a branded organization that does not carry partisan baggage. It's called Independent Women's Voice. Being branded as neutral, but actually having the people who know know that you're actually conservative puts us in a unique position.

... [B]y having this branding you can go places that perhaps if you're the Republican National Committee of the RGA—which play incredibly important roles, but they can't get access the way we can.

Ex. 34 at 4.

14. Higgins went on to describe in detail how IWV used surveys, polling, focus groups, and message testing to design ads and phone campaigns that would move independent and women voters in Wisconsin Governor Scott Walker's 2012 recall race. Higgins claimed that IWV's research showed that "the people who had gotten our messaging were now at 36 points for Walker—so, a net 31 point gain." *Id.* at 8.

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15. Higgins made the same points in her 2015 presentation to the Conservative Political Action Conference, "Reaching Beyond the Base." After describing what she considers successful messaging strategies used by Democrats, Higgins says, "IWV's mission is to expand our [Republican] base" by developing effective appeals to swing voters, and then goes on to showcase the success of IWV's strategy in the 2012 presidential election and recall election of Wisconsin Governor Scott Walker.<sup>2</sup>

<sup>&</sup>lt;sup>2</sup> See https://www.youtube.com/watch?v=Xqosw6lYg08.

16. Similarly, IWV's website claims an 86% "campaign success rate" and a 90% "messaging success rate." The group asserts that:

IWV OUTREACH AND EDUCATION INITIATIVES HAD AN ENORMOUS IMPACT in races where free market conservative candidates were experiencing difficulties in communicating the benefits of free markets and personal liberty. IWV made sure that voters had the information they needed on the issues that matter most so that they could make smart choices about nation's leadership and the direction of our country.

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Ex. 27.

17. Higgins finished her November 2015 talk with a direct electoral appeal to her audience: "I ask that you join me in taking back our country, winning races that we are not supposed to win, and building a majority that will do the hard work that we need to do in order to stop the metastasizing march of the ideas of the left." *Id.* at 11. That, in a nutshell, is the major purpose of IWV, as articulated by its executive director—to win elections and build a conservative majority.

18. While IWV does engage in state elections from time to time, the vast majority of its activities and spending is related to federal elections. IWV reported making federal independent expenditures in 20 House races and one Senate race in 2010; the Presidential race, 14 Senate Races, and 18 House races in 2012; and 16 House races and nine Senate races in 2014. By contrast, Complainant has only found IWV involvement in one state judicial race in 2011; one gubernatorial race in 2012 and 2013; and one gubernatorial race and one special State Senate race in 2015. Complainant cannot find any reported expenditure in any of those contests, except for \$8,000 in the 2015 State Senate race. Exs. 13-23.

19. IWV's public statements, press releases, and website reinforce the conclusion that the major purpose of IWV is to influence elections, and that the groups conducts

most of its research, messaging, and communications work of the organization in furtherance of that objective.

- D. IWV Spending on Political Vendors, Political Staff, and Other Dark Money Groups
- 20. Based on IWV's own public statements, Complainant believes the lion's share of the group's expenditures for public opinion research, data development, message testing, and grassroots targeting since 2010 have been made for the sole purpose of increasing the effectiveness of its political ads, robocalls, and voter engagement in support of or opposition to federal candidates, and should therefore be taken into account in the Commission's application of the major purpose test. In addition, IWV has invested heavily in staff with political consulting backgrounds, and made large grants to other dark money groups that make expenditures in federal elections.
- 21. In 2010, IWV reported spending \$1,119,572 on advertising, \$183,209 on communications, and \$99,739 on direct mail, but identified no specific contractor. Judging from Higgins' public statements, those expenses may have been for political purposes, and totaled \$1.4 million, or 71% of IWV's total operating expenses that year. Ex. 8 at 10, 24.
- 22. In 2012, IWV reported spending almost \$4 million for activities that Complainant believes had a political purpose, or 79% of its \$5 million in total expenses, based on Higgins' public statements (\$2,183,024 for "Active Engagement"; \$1,132,390 for advertising; \$502,247 for polling; and \$165,376 for phone banks"). Ex. 10 at 10.
- 23. That same year, IWV's tax return shows payments of \$4.0 million to four vendors known for their political campaign work: \$2,362,187 to Victory Media

Group; \$992,035 to Campaign Grid; \$500,772 to GEB International; and \$172,000 to Antietam Communications. Ex. 10 at 8.

24. In 2014, IWV reported spending \$1.5 million for activities that Complainant believes had a political purpose, based on Higgins' public statements, almost double what it reported as political spending to the Commission (\$898,775 for "Active Engagement"; \$364,881 for polling; \$243,500 for "grassroots activity"; and \$45,880 for communications). Ex. 12 at 11.

25. That same year, IWV's tax return shows payments of more than \$1.1 million to three vendors known for their political campaign work: \$783,907 to Victory Media Group; \$170,000 to Public Opinion Strategies; and \$166,981 to GEB Strategies. Ex. 12 at 9.

26. IWV also paid Higgins \$226,000 in consulting fees that year, including a \$100,000 bonus. Ex. 12 at 8. In federal election years, Higgins' pays herself roughly double what she makes during the off years (she is President and CEO of IWV, and there is only one other board director). Higgins received \$128,500 from IWV in 2013, through her consulting firm, Ashdown Forest Strategies, an LLC incorporated in Delaware in 2012; in 2014, she received \$226,000. Higgins appears to have paid herself a \$100,000 bonus in 2012 as well; her compensation went from less than \$100,000 in prior years to \$198,500 in 2012. (IWV did not report Higgins' compensation on its 2011 tax return, but she received \$94,735 in 2009 and \$92,000 in 2010.) Ex. 11 at 7; Ex. 12 at 8; Ex. 10 at 7; Ex. 8 at 10; Ex. 7 at 2.

27. When evaluating whether IWV's major purpose is to influence federal elections, the Commission should take into consideration Higgins' increased pay

during federal election years, as well as a percentage of the group's overall salaries and operating expenses. Based on Higgins' own public statements and FEC filings, it is clear that Higgins and her staff are engaged in electoral work during those years. At least two other staff members at IWV are political consultants by profession: IWV's Director of Advocacy Projects, Heather Madden, was a political consultant who "helped shape messages and lead congressional, gubernatorial, and senatorial clients to victory nationwide" before joining IWV's staff; and Ashley Carter, IWV's Grassroots Director, "worked in political consulting and was involved with campaigns at the national and state level" before joining IWV. Ex. 30.

28. In addition, IWV paid out \$2.8 million in grants to three organizations in 2014: \$1,350,000 to American Commitment; \$950,000 to Donors Trust; and \$493,000 to Let Freedom Ring. Donors Trust is a 501(c)(3) organization, but the other two recipients are politically active dark money groups. The grants were highly unusual for IWV; prior to 2014, IWV had only made modest grants of less than \$100,000 to its 501(c)(3) affiliate, Independent Women's Forum.

29. American Commitment reported spending \$387,291 on federal elections in 2014, but likely spent far more, and shares an address with American Commitment Action Fund, which spent hundreds of thousands of dollars in 2014 to defeat senators Cory Booker and Mark Udall.<sup>3</sup> Let Freedom Ring is a dark money organization that has reported spending more than \$3.7 million on federal elections

<sup>&</sup>lt;sup>3</sup> See

https://www.opensecrets.org/outsidespending/detail.php?cmte=American+Commitment&cycle=20 14; https://www.opensecrets.org/pacs/lookup2.php?strID=C00547265&cycle=2014; http://www.opensecrets.org/news/2013/04/american-commitments-missing-millions/; http://www.sourcewatch.org/index.php/American\_Commitment#Campaign\_Spending.2C\_2014.

over the past decade in favor or Republican candidates, and was reported to be "set to spend \$20 million on political advertising" in 2012.4

30. IWV's spending on political consultants, the performance bonus paid to Higgins, and the grants made to other dark money groups in 2014 add up to \$3.1 million, or 56% of the group's total expenses for that year, without counting any other allocation of staff salaries and operating expenses.

31. IWV's president and its largest vendors are well known for their extensive work to influence elections.

32. In 2014, IWV put out a press release touting its "multiple coveted Pollie Awards, the most sought-after awards in the political campaign, communications and public affairs industry." IWV, Victory Media Group, and Antietam Communications were recognized for their work to elect former South Carolina Governor Mark Sanford to Congress in the 2013 special election. The release boasts that "IWV's fact-based Independent Expenditure helped propel Sanford to victory." Ex. 24.

33. The American Association of Political Consultants also issued a press release that year entitled "Victory Media Group Receives Highest Industry Honor," for the firm's 2013 political work. The association gives Pollie Awards for "superior work on behalf of candidates." In the release, Higgins is quoted as saying, "Victory Media Group and Antietam Communications are top notch and help take IWV messages

<sup>&</sup>lt;sup>4</sup> See <a href="https://www.opensecrets.org/outsidespending/nonprof-contrib\_summ.php?id=061719990;">https://www.opensecrets.org/orgs/summary.php?id=D000062143&cycle=2014;</a>; <a href="http://www.nytimes.com/2012/05/21/us/politics/super-pacs-changing-how-political-operatives-operate.html">http://www.nytimes.com/2012/05/21/us/politics/super-pacs-changing-how-political-operatives-operate.html</a>.

into the field to move the needle to win races." Ex. 25. Victory Media Group's website showcases its awards for best automated phone calls in elections.<sup>5</sup>

34. Bill Pascoe, a partner in Antietam Communications, describes the firm as offering clients "counsel in campaign strategy, political strategy, communications strategy, crisis communications, and general political research and analysis."

35. Campaign Grid provides a sophisticated voter targeting advertising platform that matches voter registration records with a national voter file, "enabling candidates and causes to target voters with laser-like accuracy."

36. GEB International's website boasts of "Electing World Leaders Around the Globe" under the leadership of George Birnbaum, "one of America's leading international political consultants." The website highlights Birnbaum's campaign strategy work for multiple federal elections over the past two decades. GEB provides a range of services for political campaigns, including survey research, focus groups, message development, and media buying.8

37. The Brushfire Group offers campaign consulting, issue advocacy, and social media strategies, boasting of "years of experience in local, statewide, congressional races and ballot initiatives."

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<sup>&</sup>lt;sup>5</sup> See http://www.victorym.com/.

<sup>&</sup>lt;sup>6</sup> See https://www.linkedin.com/in/bill-pascoe-4b2b7a8.

<sup>&</sup>lt;sup>7</sup> See http://www.campaigngrid.com/our-capabilities/#our-patented-process.

<sup>&</sup>lt;sup>8</sup> See <a href="http://www.gebinternational.com/">http://www.gebinternational.com/</a>about-us; <a href="http://www.gebinternational.com/services">http://www.gebinternational.com/services</a>.

<sup>&</sup>lt;sup>9</sup> See <a href="http://thebrushfiregroup.com/campaign-consulting/">https://thebrushfiregroup.com/campaign-consulting/</a>; <a href="https://thebrushfiregroup/about/">https://thebrushfiregroup.com/campaign-consulting/</a>;

38. Public Opinion Strategies is a leading political polling company that says it has "helped elect over 85 new members of the U.S. House, more than any other polling firm." <sup>10</sup>

#### E. IWV's Political Ads and Robocalls

39. As described in Higgins' public statements, the public opinion research, voter targeting, and message development was primarily for the purpose of developing IWV's television and radio ads and robocalls to influence voters and voter turnout in targeted elections. It is not clear which of the ads and robocalls were reported as such to the FEC. The major purpose test at issue here is not limited to express advocacy or its functional equivalent, but it is worth noting that many of the ads that IWV would likely claim as "issue ads" are micro-targeted to specific voters in proximity to an election, name a candidate and take a position on his or her character or fitness for office, and do not focus on a specific or pending legislative matter, and as such are in fact the functional equivalent of express advocacy. See 11 C.F.R. § 100.22; McConnell v. FEC, 540 U.S. 93 (2003); FEC v. Wisconsin Right to Life, Inc. (WRTL), 551 U.S. 449 (2007); Citizens United v. FEC, 558 U.S. 310 (2010).

40. Complainant has been able to find the following ads and robocalls from the 2010 elections as examples of IWV's political spending:

"Case Closed," Uploaded May 6, 2010 by IWV. This is a campaign ad opposing Democratic candidate Ed Case, run two weeks before the special election to replace Rep. Neil Abercrombie, who resigned from Hawaii's 1st congressional district to run for governor. IWV supported Republican Charles Djou in the race. Case is not named in the voiceover, which slams him for his voting record and staff hires, but when the voice asks, "Who is this tax-raising liberal?" the name Ed Case is displayed on screen. The call to action is to visit

<sup>10</sup> See http://pos.org/expertise/campaigns/.

www.theCaseIsClosed.com (no longer a live link). This is the functional equivalent of express advocacy. https://www.youtube.com/watch?v=D8Uh0EALdM0

Scott Brown radio ad, 2010 (exact date not known). This radio ad explicitly endorses Scott Brown and opposes Martha Coakley for U.S. Senate in the Massachusetts 2010 special election to fill the seat held by the late Edward Kennedy.

http://iwvoices.com/media/ma\_ad\_2.mp3

Scott Brown robocall 1, 2010 (exact date not known). This robocall by Dr. Lorraine Schratz explicitly asks voters to vote for Scott Brown, citing his opposition to Obamacare. http://iwvoices.com/media/Schwarz\_ad\_MA.mp3

Scott Brown robocall 2, 2010 (exact date not known). This robocall by Dr. Barbara Rocket, explicitly asks voters to vote for Scott Brown, citing his opposition to Obamacare.

http://iwvoices.com/media/M23911\_IWV\_Call-1\_Rockett.mp3

Burns robocall 1, 2010 (exact date not known). This robocall explicitly asks Pennsylvania voters to vote for Tim Burns, a Republican running for Pennsylvania's 12th congressional district in a special election, citing his opposition to Obama's "reckless spending." <a href="http://iwvoices.com/media/irey.mp3">http://iwvoices.com/media/irey.mp3</a>

Burns robocall 2, 2010 (exact date not known). This robocall by a doctor explicitly asks Pennsylvania voters to vote for Tim Burns. http://iwvoices.com/media/hessen.mp3

41. The "Case Closed" ad above provides a good example of how IWV operates. While the group reported paying \$237,500 to BrabenderCox and Victory Media group to produce and place the ad, Ex. 13, it did not report the cost of extensive polling by GEB International to determine whether to get into the race and on what issues. IWV commissioned a poll to determine whether it was worth running its campaign, and settled on engaging around "three key data points": Case's votes for higher taxes; his "F" ratings from the National Taxpayers Union; and his hire of a

political consultant who worked for indicted former Illinois Governor Rod Blagojevich. Exs. 31, 32.

42. IWV's website boasts that the ad "moved independent women +18 points and resulted in a win for Charles Djou." Ex. 27; *See also* Exs. 30, 31. IWV reported the ad as an electioneering communication, but refers to it on its website as "the only independent expenditure in this race." Exs. 27, 31. The ad slams Case's voting record and ethics in staff hiring, is the functional equivalent of express advocacy, and should have been reported as an independent expenditure.

43. IWV reported spending \$154,900 to defeat President Obama in the 2012 elections, but Complainant believes the actual amount IWV spent to influence the race is far greater. According to an IWV press release, the group partnered with Let Freedom Ring on a \$7.4 million ad buy—which the group touted as "the largest single all-digital advocacy online video buy in history"—targeting women voters in the presidential election. IWV describes the ads as follows:

The ads tell a tale familiar to millions of American women. Women, who four years ago were overwhelmingly supportive of Obama, have come to feel disconnected from and let down by the President. His promises for new policies and a better direction have not matched the reality. It has now gotten to the point where women don't feel obliged to defend his policies.

In turn, women are chalking up their relationship with the President as an experience to learn from and a mistake they will not repeat. Women voters are ready to move on to someone who is more dependable.

Ex. 26.

44. The genesis of the anti-Obama ad buy provides a good example of how the lion's share of IWV's expenses are for the group's major purpose of influencing elections. IWV's release stated that:

The campaign, which began this spring, was validated as highly effective by various focus groups, polls and online tests during the summer and therefore was slated for this massive online distribution effort.

Geo-targeting to registered voting independents, the ad buy will run through Election Day in five battleground states: Florida, Ohio, Pennsylvania, Virginia and Wisconsin.

Id.

45. The following describes the ads and provides link to where they can be viewed:

"Mr. Dependable," Uploaded Oct 29, 2012 by IWV. This ad shows a young woman ostensibly complaining about her boyfriend who "just keeps spending and spending money we don't have." "He's never accountable; he's so condescending..." Her friend suggests that she consider going out with "Mr. Dependable," even though he's a Republican. It becomes clear that the ad is for Mitt Romney, as his photo appears. The ad ends with the IWV logo and the words "Let freedom ring." The ad is the functional equivalent of express advocacy. https://www.youtube.com/watch?v=yUJwHoz40hc

"Feeling Guilty," Uploaded Oct 29, 2012 by IWV. Young woman in a coffee shop is discussing how she feels guilty: "I supported him for four years..." "I miss the way he used to make me feel." Her friend tells her she has to "move on." With dramatic background music, a picture appears onscreen: Munch's "The Scream," with Barack Obama's face superimposed. There's a voiceover of the friend saying, "You know you deserve better" while the IWV logo is displayed. The ad is the functional equivalent of express advocacy. https://www.youtube.com/watch?v=h36QfkJOyD4

"Boyfriend," Uploaded June 1, 2012 by IWV. This ad is similar to the previous two, featuring the same young woman complaining to a friend about "him." "I've been waiting for him to get his act together; it's been almost four years!" It's clear that she's talking about President Obama, as a facsimile of the famous Hope poster hangs in the background. When she says, "Why do I always fall for guys like this?," the face in the poster winks. Her friend says, "You know you deserve better." The ad is the functional equivalent of express advocacy. <a href="https://www.youtube.com/watch?v=8as]Mw T610">https://www.youtube.com/watch?v=8as]Mw T610</a>

"Talk America," Uploaded May 30, 2012 by IWV. In this ad, the voiceover talks about women's supposed disappointment with

President Obama, "We voted for President Obama but our hope has turned to worry," while showing women communicating negative messages by text, email, etc. The ad is the functional equivalent of express advocacy. <a href="https://www.youtube.com/watch?v= IVjjtnP7RA">https://www.youtube.com/watch?v= IVjjtnP7RA</a>

"Stolen Dreams," Uploaded May 30, 2012 by IWV. This ad uses the same dramatic device as "Talk America": women are shown emailing and texting negative messages while the voiceover makes statements such as "Obama's budget will add more debt than every prior president combined." The ad is the functional equivalent of express advocacy. https://www.youtube.com/watch?v= ZXlyL2WLRE

"Gas Prices," Uploaded April 27, 2012 by IWV. "What do you feel when you go buy gas?" is the question posed on the screen at the start of this ad. One of the three women who then speak compares the price of gas before President Obama's inauguration and the price today. The ad is the functional equivalent of express advocacy. https://www.youtube.com/watch?v=c7-kZO9HQB4

"American Dream," Uploaded April 26, 2012 by IWV. "What do you think has gone wrong?" A woman, with a kitchen as a backdrop, confides her worries about Barack Obama's borrowing and spending. She ends with "I don't think we as a nation can afford another four years like the last four." The ad is the functional equivalent of express advocacy. https://www.youtube.com/watch?v=EtNkXc8XmGQ

46. In sum, the overall conduct of IWV supports the conclusion that the group's "major purpose" of IWV since 2010 has been to engage in activity designed to influence federal elections, and that it has made expenditures for this purpose far in excess of the \$1,000 threshold triggering political committee status under FECA.

## III. Failure to Report Independent Expenditures

- 47. Complainant has identified at least one election in which IWV failed to report independent expenditures on behalf of a federal candidate, even given the minimal requirements of Form 5 reports for persons other than political committees.
- 48. IWV did not report making any independent expenditures or electioneering communications in the 2010 special election for the Massachusetts U.S. Senate seat

30109(a)(2). Based on IWV's past performance, that investigation should include an evaluation of IWV's conduct with respect to the 2016 federal elections.

52. Complainant further requests that the Commission investigate whether IWV failed to file a report of its substantial independent expenditures in the 2010 Massachusetts Senate race, and knowingly and willfully filed false reports to the Commission.

53. Upon a finding of such violations by IWV, Complainant urges the Commission to impose appropriate sanctions for any and all violations, require IWV to register and report as a political committee for future elections, and impose additional remedies as are necessary and appropriate to ensure compliance with FECA.

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Respectfully submitted,

Arn H. Pearson, Esq.

General Counsel

Center for Media and Democracy 122 W. Washington Ave., Suite 555

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Madison, WI 53703

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left vacant by Sen. Kennedy's death. However, IWV has publicly boasted of playing a pivotal role in the race:

IWV is so proud of the role we were able to play in the Massachusetts special election.

When IWV couldn't persuade the political professionals that Martha Coakley was anything but a shoo-in and Scott Brown's race was worth spending money on, IWV launched its own *independent expenditure of approximately \$250,000*....

To that end, IWV used extremely successful recorded calls by a female physician, radio ads, and live calls. Our radio ads saturated Massachusetts up until election day and the calls carefully educated targeted voters about the stakes in this race – the future of their health care freedom – and encouraged them to get out and vote against big government by voting for Scott Brown.

Ex. 28 (emphasis added). IWV's website claims its independent expenditure "moved women +21 points for a Scott Brown win. Ex. 27. *See also* Ex. 29.

49. The radio ad and two robocalls identified in these exhibits and by Complainant above, see par. 48, expressly advocate for the election of Scott Brown.

50. Failure to report an independent expenditure is a violation of 52 U.S.C. § 30104, and knowing or willful submission of false, erroneous, or incomplete information on an FEC Form 5 independent expenditure report is subject to penalties under 52 U.S.C. § 30109(d).

## IV. Prayer for Relief

51. Whereas the Commission has ample reason to believe that IWV has violated FECA's political committee registration, organization, recordkeeping, and reporting requirements as set forth in 52 U.S.C. §§ 30102, 30103, and 30104 for the 2010, 2012, and 2014 federal elections, Complainant requests that the Commission conduct a timely investigation of such violations pursuant to 52 U.S.C. §

# **Verification**

Complainant hereby verifies that the statements made in the attached Complaint are, upon information and belief, true.

Sworn to pursuant to 18 U.S.C. § 1001.

Arn H. Pearson, Esq.

**General Counsel** 

Center for Media and Democracy 122 W. Washington Ave., Suite 555

Madison, WI 53703

Signed and sworn to before me on this 25 day of October 2016.

Notary Public

JILL KEEFE
NOTARY PUBLIC
State of Maine
My Commission Expires
October 26, 2021

# Exhibit 1



# STATE CORPORATION COMMISSION

Richmond, June 26, 2003

This is to certify that the certificate of incorporation of

# INDEPENDENT WOMEN'S VOICE

was this day issued and admitted to record in this office and that the said corporation is authorized to transact its business subject to all Virginia laws applicable to the corporation and its business. Effective date: June 26, 2003



State Corporation Commission Attest:

Clerk of the Commission

#### ARTICLES OF INCORPORATION

OF

#### INDEPENDENT WOMEN'S VOICE

TO: The State Corporation Commission Richmond, Virginia

We, the undersigned persons of the age of eighteen years or more, acting as incorporators of a corporation adopt the following Articles of Incorporation for such corporation pursuant to the Virginia Nonstock Corporation Act.

**FIRST:** The name of the corporation is:

#### INDEPENDENT WOMEN'S VOICE

**SECOND:** The period of duration is perpetual.

THIRD: The specific and primary purposes for which this corporation is formed and for which it shall be exclusively administered and operated are to receive, administer and expend funds for charitable, educational, and social welfare purposes, within the meaning of section 501(c)(4) of the Internal Revenue Code of 1986:

- 1. To educate women on public policy issues important to their lives;
- 2. To keep elected officials informed of the corporation's views on critical public policy matters;
- 3. To mobilize women to bridge ideas with action and get involved in the public debate;
  - 4. To prepare educational materials and conduct educational activities in support of the

### general purposes of the corporation;

- To conduct and sponsor forums, lectures, debates and similar programs;
- 6. To assist other charitable, educational and social welfare organizations in the conduct of similar activities;
- 7. To establish in the main office or elsewhere all departments and activities necessary to carry out the purposes of the corporation;
- 8. To engage in other charitable and educational activity as determined by the Board of Directors; and
- 9. To engage in any and all lawful activities incidental to the foregoing purposes except as restricted herein.

In order to accomplish the foregoing charitable and educational purposes, and for no other purpose or purposes, this corporation shall also have the power to:

- (a) sue and be sued;
- (b) make contracts:
- (c) receive property by devise or bequest, subject to the laws regulating the transfer of property by will, and otherwise acquire and hold all property, real or personal, including shares of stock, bonds and securities of other corporations;
- (d) act as trustee under any trust whose objects are related to the principal objects of the corporation, and to receive, hold, administer and expend funds and property subject to such trust;
- (e) convey, exchange, lease, mortgage, encumber, transfer upon trust or otherwise dispose of all property, real or personal;
- (f) borrow money, contract debts and issue bonds, notes, and debentures, and secure the payment or performance of its obligations; and
- (g) do all other acts necessary or expedient for the administration of the affairs and attainment of the purposes of this corporation; provided, however, that this corporation shall not, except to an insubstantial degree, engage in any activities or exercise any powers that are not in furtherance of the primary purposes of this corporation.

**<u>FOURTH</u>**: The corporation shall not have members.

ETETH: No part of the net income of the corporation shall inure to the benefit of or be distributable to its directors, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services actually rendered and to make payments and distributions in furtherance of the purposes and objects set forth in Article THIRD hereof.

SIXTH: The affairs of the corporation shall be carried on through its Board of Directors. The election or appointment of new directors shall be by the present Board; successors to outgoing directors shall be elected by the Board of Directors. In furtherance and not in limitation of the powers conferred by statute, the corporation is expressly authorized to carry on its business and to hold annual or special meetings of its Board of Directors either within or out of any of the states, territories or possessions of the United States, or the District of Columbia.

**SEVENTH:** The private property of the incorporators, directors and officers shall not be subject to the payment of corporate debts to any extent whatever.

**EIGHTH:** Notwithstanding any other provision of these Articles, the corporation shall not conduct or carry on any activities not permitted to be conducted or carried on by an organization exempt from tax under Section 501(c)(4) of the Internal Revenue Code of 1986.

NINTH: Upon the dissolution of the corporation or the winding up of its affairs, the assets of the corporation shall be distributed exclusively for charitable or educational purposes or to organizations which are then exempt from federal tax under Section 501(c)(3) or Section 501(c)(4) of the Internal Revenue Code of 1986.

TENTH: The address, including the street and number of its initial registered office is 5930 Wilton Road, Alexandria, Virginia 22310 located in the County of Fairfax and the name and address of its initial registered agent is Frank M. Northam, a Virginia resident, and a member of the Virginia State Bar.

ELEVENTH: The corporation reserves the right to amend, change or repeal any provision contained in these Articles of Incorporation or to merge or consolidate this corporation with any other nonprofit corporation in the manner now or hereafter prescribed by statute, provided, however, that any such action shall be undertaken exclusively to carry out the objects and purposes for which the corporation is formed, and all rights herein conferred or granted shall be subject to this reservation.

TWELFTH: The number of directors constituting the initial Board of Directors is two (2), but the number of directors may be increased or decreased in the manner set forth in the bylaws, provided that the number shall not be less than one. The names and addresses, including street and number, of the persons who are to serve as the initial directors are:

### **NAME**

#### **ADDRESS**

Heather Higgins

4141 N. Henderson Road Arlington, VA 22203

Nancy Pfotenhauer

4141 N. Henderson Road Arlington, VA 22203

THIRTEENTH: The name and address of the incorporator is Alan P. Dye, 1747 Pennsylvania Avenue, Suite 1000, Washington, D.C. 20006.

Date: 6-20-03

Incorporator

District of Columbia )

SS:

I, day of June, 2003, personally appeared before me ALAN P. DYE, who signed the foregoing document as the incorporator, and declared that the statements contained therein are true.

My commission expires:

STEFANIE WHITE

A Notary Public of District of Columbia My Commission Expires April 14, 2004

# Exhibit 2

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201 DEPARTMENT OF THE TREASURY

Date: NOV 05 2004

INDEPENDENT WOMENS VOICE 1726 M ST NW 10TH FLR WASHINGTON, DC 20036-4527 Employer Identification Number: 36-4534086 DLN: 17053268009004 Contact Person: ZENIA LUK TD# 31522 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: DECEMBER 31 Form 990 Required: YES Effective Date of Exemption: JUNE 26, 2003 Contribution Deductibility: .

Dear Applicant:

We are pleased to inform you that upon review of your application for taxexempt status we have determined that you are exempt from Federal income tax under section 501(c)(4) of the Internal Revenue Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Please see enclosed Information for Organizations Exempt Under Sections Other Than 501(c)(3) for some helpful information about your responsibilities as an exempt organization.

Contributions to you are not deductible by donors under section 170(c)(2) of the Code.

Sincerely,

Lois G. Lerner

Director, Exempt Organizations

Rulings and Agreements

Enclosure: Information for Organizations Exempt Under Sections Other Than 501(c)(3)

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Letter 948 (DO/CG)

#### INDEPENDENT WOMENS VOICE

#### INFORMATION FOR ORGANIZATIONS EXEMPT UNDER SECTIONS OTHER THAN 501(C)(3)

#### WHERE TO GET FORMS AND HELP

Forms and instructions may be obtained by calling toll free 1-800-829-3676, through the Internet Web Site at www.irs.gov, and also at local tax assistance centers.

Additional information about any topic discussed below may be obtained through our customer service function by calling toll free 1-877-829-5500 between 8:00 a.m. - 6:30 p.m. Eastern time.

#### NOTIFY US ON THESE MATTERS

If you change your name, address, purposes, operations or sources of financial support, please inform our TE/GE Customer Account Services Office at the following address: Internal Revenue Service, P.O. Box 2508, Cincinnati, Ohio 45201. If you amend your organizational document or by-laws, or dissolve your organization, provide the Customer Account Services Office with a copy of the amended documents. Please use your employer identification number on all returns you file and in all correspondence with the Internal Revenue Service.

#### FILING REQUIREMENTS

In your exemption letter we indicated whether you must file Form 990, Return of Organization Exempt From Income Tax. Form 990 (or Form 990-EZ) is filed with the Ogden Submission Processing Center, Ogden UT 84201-0027.

You are required to file a Form 990 only if your gross receipts are normally more than \$25,000.

If your gross receipts are normally between \$25,000 and \$100,000, and your total assets are less than \$250,000, you may file Form 990-EZ. If your gross receipts are over \$100,000, or your total assets are over \$250,000, you must file the complete Form 990. The Form 990 instructions show how to compute your "normal" receipts.

If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. There are penalties for failing to timely file a complete return. For additional information on penalties, see Form 990 instructions or call our toll free number.

If your receipts are below \$25,000, and we send you a Form 990 Package, follow the instructions in the package on how to complete the limited return to advise us that you are not required to file.

If your exemption letter states that you are not required to file Form 990, you are exempt from these requirements.

Letter 948 (DO/CG)

#### INDEPENDENT WOMENS VOICE

#### UNRELATED BUSINESS INCOME TAX RETURN

If you receive more than \$1,000 annually in gross receipts from a regular trade or business you may be subject to Unrelated Business Income Tax and required to file Form 990-T, Exempt Organization Business Income Tax Return. Special rules for organizations exempt under sections 501(c)(7), (9), (17) and (19) are described in Publication 598.

There are several exceptions to the tax on unrelated business income.

- Income you receive from the performance of your exempt activity is not unrelated business income.
- 2. Income from fundraisers conducted by volunteer workers, or where donated merchandise is sold, is not unrelated business income.
- Income from routine investments such as certificates of deposit, savings accounts, or stock dividends is usually not unrelated business income.

There are special rules for income derived from real estate or other investments purchased with borrowed funds. This income is called "debt financed" income. For additional information regarding unrelated business income tax see Publication 598, Tax on Unrelated Business Income of Exempt Organizations, or call our toll free number shown above.

#### PUBLIC INSPECTION OF APPLICATION AND INFORMATION RETURN

You are required to make your annual information return, Form 990 or Form 990-EZ, available for public inspection for three years after the later of the due date of the return, or the date the return is filed. You are also required to make available for public inspection your exemption application, any supporting documents, and your exemption letter. Copies of these documents are also required to be provided to any individual upon written or in person request without charge other than reasonable fees for copying and postage. You may fulfill this requirement by placing these documents on the Internet. Penalties may be imposed for failure to comply with these requirements. Additional information is available in Publication 557, Tax-Exempt Status for Your Organization, or you may call our toll free number shown above.

# EXCESS BENEFIT TRANSACTIONS (Applies to 501(c)(4) organizations)

Excess benefit transactions are governed by section 4958 of the Code. Excess benefit transactions involve situations where a section 501(c)(4) organization provides an unreasonable benefit to a person who is in a position to exercise substantial influence over the organization's affairs. If you believe there may be an excess benefit transaction involving your organization, you should report the transaction on Form 990 or Form 990-EZ. Additional information can

Letter 948 (DO/CG)

#### INDEPENDENT WOMENS VOICE

be found in the instructions for Form 990 and Form 990-EZ, or you may call our toll-free number to obtain additional information on how to correct and report this transaction.

#### EMPLOYMENT TAXES

If you have employees, you are subject to income tax withholding and the social security taxes imposed under the Federal Insurance Contribution Act (FICA). You are required to withhold Federal income tax from your employee's wages and you are required to pay FICA on each employee who is paid more than \$100 in wages during a calendar year. To know how much income tax to withhold, you should have a Form W-4, Employee's Withholding Allowance Certificate, on file for each employee.

You are also liable for tax under the Federal Unemployment Tax (FUTA) for each employee you pay \$50 or more during a calendar quarter if, during the current or preceding calendar year, you had one or more employees at any time in each of 20 calendar weeks or you paid wages of \$1,500 or more in any calendar quarter.

Employment taxes are reported on Form 941, Employer's Quarterly Federal Tax Return. The requirements for withholding, depositing, reporting and paying employment taxes are explained in Circular E, Employer's Tax Guide, (Publication 15), and Employer's Supplemental Tax Guide, (Publication 15-A). These publications explain your tax responsibilities as an employer.

### Exhibit 3

### 17053268009004

Form 1024

(Rev. September 1998)

Department of the Treatury Internal Revenue Service

## Application for Recognition of Exemption Under Section 501 (a)

QMB No. 1545-0057

If exempt status is approved, this application will be open for public inspection.

Read the instructions for each Part carefully. A User Fee must be attached to this application.

If the required information and appropriate documents are not submitted along with Form 8718 (with payment of the appropriate user fee), the application may be returned to the organization.

	Procedural Checklist on		
Part 1. Identification of Applicant (Manual Submit only the schedule the	ust be completed by all applic at applies to your organiz	cants; also con ation. Do not	nplete appropriate schedule. t submit blank schedules.
Check the appropriate box below to indicate the	11.51	ation is applying	:
a Section 501 (00-Title holding corpo	rations (Schedule A, page 7)		
b Section 501 (c)(4)-Civic leagues, social (Schedule B, page 8)	welfare organizations (including certa	iln war veterans' o	rganizations), or local associations of employees
c Section 501 (c)(6)-Labor, agricultura	i, or horticultural organizations (Sci	hedule cPQST	MARK RECEIVED
d Section 501 (c)(6)-Business leagues			
e 🔲 Section 501 (c)(7)-Social clubs (Scho	edule D, page I 1)	CED C	0 104 CCR 0 7 104
	i i i		erbenerts to members (Scheoule E. page 13)
Section 501 (c)(9)-Voluntary employ			
h Section 501 (c)(1 0)-Domestic fratern	tal sociaties, orders, etc., not provi	ding life, sick, ac	cident, or CHRICONNIACT hedule E, page 1 3)
companies, or like organizations	insurance associations, mulual oit (Schedule G. page 15)	CO OT HINGSHOOL CO	ompasieRVIGE CENTER telephone
Section 501(c)(13)-Cemeleries, crem	natoria, and like corporations (Sch	edule H, page 16	o) **
k 🔲 Section 501 (c)(11 5)-Mutual insurance			
			n benefits (Parts I through IV and Schedule J., page 16)
			ed Forces of the United States (Schedule K, page 1 9)
la Full name of organization (as shown in or		ge /)	2 Employer identification number (EIN) (if
			none, see Specific instructions on page 2)
Independent Women's Voice			36-4534086 ¹
1b c/o Name (if applicable)			3 Name and telephone number of person to be contacted if additional information is needed
ic Address (number and street) 1726 M Street, NW, 10th Floor	5	Room/Suite	±.
id City, town or post office, state, and ZIP + instructions for Part 1, page 2.	4 if you have a foreign address,	see Specific	Michael D. Berry, Treasurer
Washington, DC 20036-4527			( 202 ) 349-5880
le Web site address	4 Month the annual accounts December	ng period ends	5 Date incorporated or formed 06/26/03
6 Did the organization praviously apply for rec if "Yes," attach an explanation.	ognition of examption under this Code	e section or under	any other section of the Code? Yes 🛛 Yes
7 Has the organization filed Federal income if "Yes," state the form numbers, years fi IRS 990, for 2002-03; IRS 8868, f	led, and internal Revenue office w	here filed.	
8 Check the box for the type of organization THE APPLICATION BEFORE MAILING.	m. ATTACH A CONFORMED COP	Y OF THE COR	RESPONDING ORGANIZING DOCUMENTS TO
B Corporation- Attach a copy of the A	ticles of incorporation (including a	emendments and	f restatements) showing approval by the
	cial; also attach a copy of the byla	WS.	
	Trust Indenture or Agreement, Incl		
			ocument, with a declaration (see instructions) or ent by more than one person. Also include a copy
of the bylaws.	a differential was followed by south	ion of the bocom	ent by more than one parson. Also include a copy
If this is a corporation or an unincorporat	ed association that has not yet ad	opted bylaws, ch	neck here
PLEASE SIGN HERE  I declare under the penalties of perjut this application, including the accomp	anying schedules and attachments, an Mic	d to the best of my hael D. Berry	the above organization, and that I have examined knowledge it is true, correct, and complete.  Treasurer (Date (Date)

For Paperwork Reduction Act Notice, see page 5 of the instructions.

#### Part 11. Activities and Operational information (Must be completed by all applicants)

Provide a detailed narrative description of all the activities of the organization-past, present, and planned. Do not merely refer to or repeat the language in the organizational document. List each activity separately in the order of importance based on the relative time and other resources devoted to the activity. Indicate the percentage of time for each activity. Each description should include, as a minimum, the following: (a) a detailed description of the activity including its purpose and how each activity furthers your exempt purpose; (b) when the activity was or will be initiated; and (c) where and by whom the activity will be conducted.

The purpose of the Organization will be to educate women about public policy issues important to them. The Organization will mobilize citizens to be involved in policy issues important to women and to encourage them to get involved in the public debate. The Organization will educate citizens in states across the country through mail and internet communications, seminars, book events and issues advocacy. It will also implement radio and television advertising to educate and promote policy positions. It will provide mailings to elected officials, grassroots leaders and other citizens on fiscal and regulatory issues important to women. Its programs will be implemented with policy best practices, coalitions and research integration. The organization will develop a nation-wide membership to promote these ideas. It will utilize newsletters and e-mail alerts to provide members opportunities to attend seminars and meetings.

2 List the organization's present and future sources of financial support, beginning with the largest source first.

Donations from corporations and individuals

Dues from corporations and individuals.

3	Give the following information about the organization's governing body:	
	a Names, addresses, and titles of officers, directors, trustees, etc.	b Annual compensation
	See attached Statement 1.	
	P	•
	-2.	
		}
4	If the organization is the outgrowth or continuation of any form of predecessor, state the na	me of each predecessor, the period during
	which it was in existence, and the reasons for its termination. Submit copies of all papers	s by which any transfer of assets was effected
	N/A	3
		<b>6</b>
5	If the applicant organization is now, or plans to be, connected in any way with any other organization ship (e.g., financial support on a continuing basis; shared facilities or em  The organization will be affiliated with the Independent Women's Forum	oloyees; same officers, directors, or trustees).  , a section 501(c)(3) organization. The
	explain the relationship (e.g., financial support on a continuing basis; shared facilities or em  The organization will be affiliated with the Independent Women's Forum organization will share employees, facilities and will have some of the same	playees; same officers, directors, or trustees).  , a section 501(c)(3) organization. The e officers, and directors
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	explain the relationship (e.g., financial support on a continuing basis; shared facilities or em  The organization will be affiliated with the Independent Women's Forum organization will share employees, facilities and will have some of the sam  If the organization has capital stock issued and outstanding, state: (1) class or classes of the shares; (3) consideration for which they were issued; and (4) if any dividends have been	ployees; same officers, directors, or trustees).  , a section 501(c)(3) organization. The sections, and directors
	The organization will be affiliated with the Independent Women's Forum organization will share employees, facilities and will have some of the same of	ployees; same officers, directors, or trustees).  , a section 501(c)(3) organization. The sections, and directors
5	The organization will be affiliated with the Independent Women's Forum organization will share employees, facilities and will have some of the same of	ployees; same officers, directors, or trustees).  , a section 501(c)(3) organization. The sections, and directors
	The organization will be affiliated with the Independent Women's Forum organization will share employees, facilities and will have some of the same of	playees; same officers, directors, or trustees).  , a section 501(c)(3) organization. The secofficers, and directors  ne officers, and directors  ne stock; (2) number and par value of the n paid or whether your organization's creation or whether your organization's creation or whether your organization's creation of the second or whether your organization's creation of the participation of the participati
6	The organization will be affiliated with the Independent Women's Forum organization will share employees, facilities and will have some of the same of the organization will share employees, facilities and will have some of the same if the organization has capital stock issued and outstanding, state: (1) class or classes of the shares; (3) consideration for which they were issued; and (4) if any dividends have been instrument authorizes dividend payments on any class of capital stock.  N/A  State the qualifications necessary for membership in the organization; the classes of membership; and the voling rights and privileges received, if any group or class of persons is requestion; the relationship between those members and members who join voluntarity. Submit	playees; same officers, directors, or trustees).  , a section 501(c)(3) organization. The section section of the section section of the stock; (2) number and par value of the nips of the section of the
	The organization will be affiliated with the Independent Women's Forum organization will share employees, facilities and will have some of the same of the organization has capital stock issued and outstanding, state: (1) class or classes of the shares; (3) consideration for which they were issued; and (4) if any dividends have been instrument authorizes dividend payments on any class of capital stock.  N/A  State the qualifications necessary for membership in the organization; the classes of membersary; and the voting rights and privileges received, if any group or class of persons is requestion; the relationship between those members and members who join voluntarily. Submit Attach sample copies of all types of membership certificates issued.  The Organization will have only nonvoting members. Both individuals and	playees; same officers, directors, or trustees).  a section 501(c)(3) organization. The section of the section of the stock; (2) number and par value of the nips of the section or whether your organization's creation of the section

Fom	1024 (Rev. D-98)		Pag	10 4
Pa	t 11. Activities and Operational Information (continued)			
9	Hes the organization made or does it plan to make any distribution of its property or surplus funds to shareholders or members?  If "Yes," state the full details, including: (1) amounts or value; (2) source of funds or property distributed or to be distributed; and (3) basis of, and authority for, distribution or planned distribution.	☐ Yes	×	No
				_
10	Does, or will, any part of your organization's receipts represent payments for services performed or to be performed?. If "Yes," state in detail the amount received and the character of the services performed or to be performed.	☐ Yes	X	No
11	Has the organization made, or does it plan to make, any payments to members or shareholders for services performed or to be performed?  If "Yes," state in detail the amount paid, the character of the services, and to whom the payments have been, or will be, made.	Yes	Ø	No
12	Does the organization have any arrangement to provide insurance for members, their dependents, or others (including provisions for the payment of sick or death benefits, pensions, or annuities)?	☐ Yes	×	No
13	Is the organization under the supervisory jurisdiction of any public regulatory body, such as a social welfare agency, etc.?  If "Yes," submit copies of all administrative opinions or court decisions regarding this supervision, as well as copies of applications or requests for the opinions or decisions.	☐ Yes	×	No
14	Does the organization now lease or does it plan to lease any property?	⊠ Yes		No
	The organization will lease space and employees from the Independent Women's Forum, a Section organization at a fair market value. Employees will keep detailed time records. Salaries, lease shand office overhead expense will be allocated to the Organization on that basis.	on 501(c) aring an	(3) loun	t,
15	Has the organization spent or does it plan to spend any money attempting to influence the selection, nomination, election, or appointment of any person to any Federal, state, or tocal public office or to an office in a political organization?. If "Yes," explain in detail and list the amounts spent or to be spent in each case.	Yes	×	No
16	Does the organization publish pemphiots, brochures, newsletters, journals, or similar printed material?	⊠ Yes		No
	The Organization does not have any published materials yet, but will have printed materials in the	he future	-01-18	

Part III. Financial Data (Must be completed by all applicants)

A. Statem		ue and Expe				
	(a) Current Tax Year	3 Prior Tax Yea	rs or Proposed Bud	get for Next 2 Ye	816	
Revenue	From 01/01//04	(b) 2002	2003			
	To 12/31/04	(w)	. (C)	. (d)		(e) Tota
Gross dues and assessments of members		241,866		4	-	241,866
Gross contributions, gifts, etc.					_	
Gross amounts derived from activities related to				1.3	- 1	
the organization's exempt purpose (attach			1			
schedule) (include related cost of sales on line 9.)						
Gross amounts from unretailed business activities (attach schedule)			بنسبين		_	
Gain from sale of assets, excluding inventory items				1		
(attach schedule)						
Investment income (see page 3 of the Instructions)	51		520			571
Other revenue (attach schedule)						
Total revenue (add lines 1 through 7)	51	241,866	520			242,437
Expenses						
Expenses attributable to activities related to the			ł		- 1	
organization's exempt purposes	276		.]			276
Expenses attributable to unralated business activities						
Contributions, gifts, grants, and similar emounts					- 77	Station at the
paid (attach schedule)	50,000					50,000
Disbursements to or for the benefit of members (attach schedule)						
Compensation of officers, directors, and trustees (attach schedule)						
Other salaries and wages	3134					3134
Interest						
Occupancy						
Depreciation and depletion	1			1- 1-	. 3.3	
Other expenses (SEE ATTACKED SCHEDULE)		2,457	471			2,928
Total expenses (add lines 9 through 16)	53,410	2,457	471			56,338
Excess of revenue over expenses (line 8 minus						
Kne 19)	(53,359)	239,409	49			186,099
B. Balance Sho	eet (at the en	d of the perio	d shown)			
					Cum	ent Tax Year
	Assets				81 0	08/31/04
Cash	: Ere ene e	120 2 120 2 20	2 202 503		7	186,099
Accounts receivable, net					2	
Inventories	26.8				3	
					1	
Corporate stocks (attach schedule)					5	
Mortgage loans (attach schedule)					0	
Other investments (attach schedule)					7	
Depreciable and deplatable assets (attach schedule)		(US) 5 35 5 15( NGC 404 4 4 4			8	
Land					9	
Other assets (attach schedule)					10	
Total assets					11	186,099
	labilities					
					12	
Contributions, gifts, grants, etc., payable					13	90-11
					14	
Mortgages and notes payable (attach schedule) = .					15	
Other Nabilities (attach schedule)				• • • •	16	
Total Habilities		Accete		• • •	+	
E Dala		MXXXXIX			- 1	
Fund Balances or not assets					17	186,099

	Organizations Described in Section 501(c)(4) (Civic leagues, social welfare organizations not qualifying or apple exemption under section 501(c)(19)) or local associations of employees.)	ying for	
(or any preda later revoked	nel Revenue Service previously issued a ruling or determination letter recognizing the applicant organization cessor organization listed in question 4, Part 11 of the application) to be exempt under section 501 (c)(3) and that recognition of exemption on the basis that the applicant organization (or its predecessor) was carrying dated or otherwise attempting to influence legislation or on the basis that it engaged in political activity?	☐ Yes	⊠ n
	cate the earliest tax year for which recognition of examplion under section 501(c)(3) was revoked and the ffice that issued the revocation.		
the common	anization perform or plan to perform (for members, shareholders, or others) services, such as maintaining areas of a condominium; buying food or other items on a cooperative basis; or providing recreational facilities tion services, job placement, or other similar undertakings?	☐ Yes	⊠ n
of the benefit	ain the activities in detail, including income realized and expenses incurred. Also, explain in detail the nature its to the general public from these activities. (If the answer to this question is explained in Part 11 of the page 2, 3, and 4), enter the page and item number here.)		
If the organizor maintains	ration is claiming exemption as a homeowners' association, is access to any property or facilities it owns restricted in any way?	☐ Yea	□ N
		_	
if "Yes," expl	ain.		
If "Yes," expl	ain.		
	uin.		
	aun.		
	atin.		
	uin.		
	ain.		
	aun.		
	atin.		
	alin.		
	ain.		
N/A			
N/A  If the organizere eligible to	ation is claiming exemption as a local association of employees, state the name and address of each employer membership in the association. If employees of more than one plant or office of the same employer are eligities of each plant or office.	r whose en	npłoyec
N/A  If the organizere eligible to	etion is claiming exemption as a local association of employees, state the name and address of each employer membership in the association. If employees of more than one plant or office of the same employer are elicit	r whose en	nployee
N/A  If the organizere eligible for give the adding	etion is claiming exemption as a local association of employees, state the name and address of each employer membership in the association. If employees of more than one plant or office of the same employer are elicit	r whose en	nployee
N/A  If the organizere eligible for give the adding	etion is claiming exemption as a local association of employees, state the name and address of each employer membership in the association. If employees of more than one plant or office of the same employer are elicit	r whose en	riployee
N/A  If the organizere eligible for give the adding	etion is claiming exemption as a local association of employees, state the name and address of each employer membership in the association. If employees of more than one plant or office of the same employer are elicit	r whose en	nployee sbershij

# ATTACHMENT TO FORM 1024 INDEPENDENT WOMEN'S VOICE EIN: 36-4534086

### Statement 1

#### Part II, Question 3, a

Names, Addresses and titles of officers, directors trustees, etc.

Name, Title, Address	Annual compensation
Nancy M. Pfotenhauer, President 10340 Southarn Lane Oakton, VA 22124	\$5000
Michael D. Berry, Treasurer PO Box 3058 Arlington, VA 22203	\$1000
Joy Simington, Secretary 105 Lake Cook Drive Alexandria, VA 22304-6451	\$1000
Ron Crawford, Director 1106 Dunaway Drive McLean, VA 22101	None
Mary Amold, Director 1120 20 <sup>th</sup> Street, NW Suite 1000 Washington, DC 20036	None

#### ATTACHMENT TO FORM 1024 INDEPENDENT WOMEN'S VOICE EIN: 36-4534086

#### Statement 2

#### Part IIIA, Line 18 - Other Expenses

YEAR	2004	<u>2002</u>	2003
Administration*	0	624	434
Legal fees	0	1,067	37
Accounting fees	0	766	0
<u>TOTAL</u>	0	2,457	471

<sup>\*</sup>Expenses in conjunction with starting an organization (filing fees, postage, printing, copying)

#### ATTACHMENT TO FORM 1024 INDEPENDENT WOMEN'S VOICE EIN: 36-4534086

#### Schedule 1

Part IIIA, Line 11 - Contributions

June 18, 2004

\$50,000

Contribution to the Independent Women's Forum, a 501(c)(3) corporation, for general operating support

### 17053268009004

OMB No. 15-15-1798 User Fee for Exempt Organization For IRS **Determination Letter Request** Control number Amount paid 500 Use Attach this form to determination letter application. (Form 8718 is NOT a determination letter application.) User fee screener 2 Employer Identification Nu 1 Name of organization 36:4534086 Independent Women's Caution: Do not attach Form 8718 to an application for a pension plan determination letter. Use Form 8717 instead. Fee Initial request for a determination letter for: An exempt organization that has had annual gross receipts averaging not more than \$10,000 during the preceding 4 years, or ◆ A new organization that anticipates gross receipts averaging not more than \$10,000 during its lirst 4 years Note: If you checked box 3a, you must complete the Certification below. Certification have averaged (or are expected to average) not more than \$10,000 during the preceding 4 '(or the first 4) years of operation. Signature ▶ Title ▶ Initial request for a determination letter for: An exempt organization that has had annual gross receipts averaging more than \$10,000 during the preceding \$500 A new organization that anticipates gross receipts averaging more than \$10,000 during its first 4 years . c Group exemption letters \$500 Instructions You are not required to provice the Where To File information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating The law requires payment of a user fee with each application for a determination Send the determination letter application and Form 8718 to: letter. The user fees are listed on line 3 above. For more Information, see Rev. Proc. 2003-8, 2003-1, I.R.B. 236, or latest Internal Revenue Service to a form or its instructions must be P.O. Box 192 Covington, KY 41012-0192 retained as long as their contents may become material in the administration of annual update. If you are using express mail or a delivery service, send the application and Form 8718 to: any Internal Revenue law. The rules Check the box or boxes on line 3 for the type of application you are submitting. If you check box 3a, you must complete and sign the certification statement that governing the confidentiality of Form 8718 are covered in Code section 6104. Internal Revenue Service The time needed to complete and file The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is 5 minutes. If you have comments concerning the accuracy of this time estimate or suggestions for making this form simpler, we would be happy to hear from you. You can write to the Tax Products Coordinating Committee, Western Area Distribution Center, Rancho Cordova, CA 95743-001. Do not send this form to this address, Instead, see 201 West Rivercenter Blvd. Attn: Extracting Stop 312 Covington, KY 41011 appears under line 3a. Attach to Form 8718 a check or money order payable to the "United States Treasury" for the full amount of the user fee. If you do not include the full amount, Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. If you want your organization to be recognized as tax-exempt by the IRS, you are required to give us this information. We need it to determine whether the organization meets the least requirements for the content of th your application will be returned. Attach Form 8718 to your determination letter application. Generally, the user fee will be refunded only if the internal Revenue Service this form to this address. Instead, see declines to issue a determination. the legal requirements for tax-exempt Where To File above. Money Order RECEIVED POSTMAR! SEP 2 2 'B4 6 Check

CINCINNATI

SERVICE CENTER

Arrach

### Exhibit 4

#### **Return of Organization Exempt from Income Tax**

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

OMB No. 1545-0047 2004

Open to Public

			tisty s				
Chec		, 2004, a	and er	nding	_		
	k if applicable:  Please use  C Name of organization				203		cation Number
	Address change   Please use   IRS label   Independent Women's or print		00=717			5340	
H	Name change or type. Number and street (or P.O. box if it	nail is not delivered to street add	dr) Ro	om/suite	E Telepho	ne numbe	ır
Н	Initial return specific 1726 M Street, NW			Oth Floor			9-1820
	Final return tions. City, town or country	State	ZIP d	ode + 4	F Accoun	ling	Cash X Accru
	Armended return Washington	DC	20	036	Ot	er (specif	(y) ►
-	Section 501(c)(3) organizations and charitable trusts must attach a com (Form 990 or 990-EZ).  Site: ► N / A	4947(a)(1) nonexempt pleted Schedule A	ļı	H and I are not applic H (a) Is this a grou H (b) If 'Yes,' enter	p return for a	ffiliates?	Yes X
Ora	anization type ack only one)	a.) 4947(a)(1) or	527	H (C) Are all affilia (If 'No,' attac			
	ck here if the organization's gross receipts are no		32/	H (d) is this a sepa	rate return fil	ed by an	
\$25	000. The organization need not file a return with the IR	rmany not more than So but if the organization	. 1	organization	covered by a	group rulin	ng? Yes X N
rece	,000. The organization need not file a return with the IR eved a Form 990 Package in the mail, it should file a re	turn without financial da	ta.	Group Exe	emption N	ımber .	and the second
Son	ne states require a complete return.		Ī		The same of the sa		n is not required
Gro	ss receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ► 8	178.					00-EZ, or 990-PF).
art I	Revenue, Expenses, and Changes in Ne		aland	ces/See Instru	efions)		
1				TOTO IN INCINCI	1		
1 :	a Direct public support		1.1				
11	b Indirect public support						
	Government contributions (grants)						
7	d Total (add lines	::::::::::::::::::::::::::::::::::::::	-14				
2	d Total (add lines la through 1c) (cash \$ noncash !  Program service revenue including government fees a	end analogola (farm Dark	_)	02/		1 d	
3					-	_	
1	Membership dues and assessments				_	3	
4	interest on savings and temporary cash investments .					4	878
5	Dividends and interest from securities					5	
	Gross rents						
b 1	Less: rental expenses		6b		1.5	- 1	a 150
1	Net rental income or (loss) (subtract line 6b from line	6a)			erranes _	6c	
7	Other investment income (describe				)	7	
8	a Gross amount from sales of assets other	(A) Securities		(B) Other			
1	than inventory		8a				
	Less: cost or other basis and sales expenses		8b				
	c Gain or (loss) (attach schedule)		8c				
	Net gain or (loss) (combine line 8c, columns (A) and	(B))				Bd	
۱ ۵	Special events and activities (attach schedule). If any			200101111000000000000000000000000000000			
9		amount is from damino.	. chec	k here			
٦	Gross revenue (not including \$	of contributions	, chec	k here ►	] [		
3	Gross revenue (not including \$	of contributions				-3	
is	Gross revenue (not including \$ reported PECE TERM than fundraising expenses	of contributions	9a		] [		
is	reported RECENTED than fundraising expenses	of contributions					• 1
	Less direct exhibits one than fundraising expenses  Noticome or (loss) from specify events (subtract line	of contributions s e 9b from line 9a)	9a 9b			9 c	e in
10:	reported RECEIVED than fundraising expenses  Lass direct Exhems of than fundraising expenses  Noticeme or (loss) from specify events (subtract line  Gos sales of investor than sures and allowances	of contributions s e 9b from line 9a)	9a 9b			9c	
10:	reported Fine Exherits on than fundraising expenses  Noticeme or (loss) from specific events (subtract line  Gos sales of investor) lips Gurns and allowances  Liss cost of goods sold	of contributions  s e 9b from line 9a)	9a 9b 10a 10b			9c	e ex
10:	reported Fine Exherits on than fundraising expenses  Noticeme or (loss) from specific events (subtract line  Gos sales of investor) lips Gurns and allowances  Liss cost of goods sold	of contributions  s e 9b from line 9a)	9a 9b 10a 10b			9c 0c	· i
10 a	reported prime and than fundraising expenses  Less: direct expenses once than fundraising expenses  Repricome or (loss) from specify events (subtract line  a G 53: sales of invento 105 secures and allowances  b Less: cost of goods sold  c goss profiler (loss) from sales a riveller (attach schedule) (subt	of contributions s e 9b from line 9a) ract line 10b from line 10a).	9a 9b 10a 10b		1	9c 0c	
10a 10a 11 11 12	reported Company of the fundraising expenses the state of company of the fundraising expenses to the state of company of the state of company of the state of goods sold.  Company of the fund from sales and allowances of company of the state of goods sold.  Company of the fund from sales and sales of the state of company of the state of the sales of the s	of contributions  s e 9b from line 9a)  ract line 10b from line 10a)	9a 9b 10a 10b		1 1 1	9 c 0 c 1	
10 a 10 a 11 12 13	c Less direct expenses once than fundraising expenses on the fundraising expenses of the fundraising expenses on the fundraising expenses of the fund of the fundraising expenses of the fundraising expenses of the fundraising expenses of the fundraising expenses of the fund of the fundraising expenses of the fund of t	of contributions  s e 9b from line 9a)  ract line 10b from line 10a).	9a 9b 10a 10b		]	9 c 0 c 1	50,000
10a 10a 11 11 12	c Less direct expenses on than fundraising expenses on than fundraising expenses on than fundraising expenses on than fundraising expenses of the school of	of contributions  see 9b from line 9a)  ract line 10b from line 10a)	9a 9b 10a 10b		1 1 1 1 1 1	9c 0c 1 2	50,000
10 a 10 a 11 12 13	c Less direct expenses once than fundraising expenses on the fundraising expenses of the fundraising expenses on the fundraising expenses of the fund of the fundraising expenses of the fundraising expenses of the fundraising expenses of the fundraising expenses of the fund of the fundraising expenses of the fund of t	of contributions  see 9b from line 9a)  ract line 10b from line 10a)	9a 9b 10a 10b		1 1 1 1 1 1	9 c 0 c 1 2 3	50,000 2,478
10: 11: 12: 13: 14:	Luss: direct exherits only than fundraising expenses  Luss: direct exherits only than fundraising expenses  Luss: cost of goods sold  Goss profit or (100) form sales: exherity (attach schedule) (subtract line 103)  Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 1)  Program services (from line 44, column (B))  Management and general (from line 44, column (C))  Fundraising (from line 44, column (D))  Payments to affiliates (attach schedule)	of contributions  s e 9b from line 9a)  ract line 10b from line 10a)	9a 9b 10a 10b		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9 c 0 c 1 2 3 4	50,000 2,478
10 a 11 12 13 14 15	Luss: direct exherits only than fundraising expenses  Luss: direct exherits only than fundraising expenses  Luss: cost of goods sold  Goss profit or (100) form sales: exherity (attach schedule) (subtract line 103)  Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 1)  Program services (from line 44, column (B))  Management and general (from line 44, column (C))  Fundraising (from line 44, column (D))  Payments to affiliates (attach schedule)	of contributions  s e 9b from line 9a)  ract line 10b from line 10a)	9a 9b 10a 10b		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9 c 0 c 1 2 3 4 5 6	50,000 2,478 200
10 a 11 12 13 14 15 16	Luss: direct exherits only than fundraising expenses  Luss: direct exherits only than fundraising expenses  Luss: cost of goods sold  Cluss: cost of goods sold  Cluss: cost of goods sold  Cher revenue from family line 103)  Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 1)  Program services (from line 44, column (B))  Management and general (from line 44, column (C))  Fundraising (from line 44, column (D))	of contributions  s e 9b from line 9a)  ract line 10b from line 10a)	9a 9b 10a 10b		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9 c 0 c 1 22 33 4 55 66 7	50,000 2,478 200 52,678
10 a 11 12 13 14 15 16 17	Less: direct exherits once than fundraising expenses on the form of come or (loss) from specify events (subtract line and allowances of cost of goods sold cost of goods sold cost of goods sold cost of goods are revenue (and lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10 Program services (from line 44, column (B))  Management and general (from line 44, column (C)). Fundraising (from line 44, column (D))  Payments to affiliates (attach schedule)  Total expenses (add lines 16 and 44, column (A))  Excess or (deficit) for the year (subtract line 17 from I	of contributions  s s s 9b from line 9a)  ract line 10b from line 10a)  10c, and 11)	9a 9b 10a 10b		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9 c 0 c 1 2 3 4 5 6 7	50,000 2,478 200 52,678 -51,800
10 a a a a a a a a a a a a a a a a a a a	Less: direct exherities only than fundraising expenses on the come or (loss) from specify events (subtract line sales of invento 115s sourns and allowances of the cost of goods sold costs profiber fore from sales invento (attach schedule) (subtract line 103).  Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 1)  Program services (from line 44, column (B)).  Management and general (from line 44, column (C)).  Fundraising (from line 44, column (D)).  Payments to affiliates (attach schedule).  Total expenses (add lines 16 and 44, column (A))	of contributions s s s 9b from line 9a) ract line 10b from line 10a) 10c, and 11) ine 12) n line 73, column (A))	9a 9b 10a 10b		]	9 c 0 c 1 2 3 4 5 6 7 8 9 9	878 50,000 2,478 200 52,678 -51,800 237,895

-		2004) İndependent Women's Voice		36	-4534	086 Page 3
Part	ΙŲ	Balance Sheets (See Instructions)				
Note:	Wh	ere required, attached schedules and amounts within turn should be for end-of-year amounts only.	the description	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing		239,285.	45	188,360.
	46	Savings and temporary cash investments			46	
		V.			8 9	
		Accounts receivable			44	
11 12	b	Less: allowance for doubtful accounts	47 b	<u>. 1</u>	47 c	
		2			8	
		Pledges receivable			**	
		Less: allowance for doubtful accounts			48 c	
	49	Grants receivable			49	
A S S E T S	50	Receivables from officers, directors, trustees, and key employees (attach schedule)	y ************		50	
S E	51 a	Other notes & loans receivable (attach sch)	51 a			
S	b	Less: allowance for doubtful accounts	51 b		51 c	
- 6	52	Inventories for sale or use			52	
		Prepaid expenses and deferred charges			53	
1	54	Investments - securities (attach schedule)	▶ ☐ Cost ☐ FMV [		54	
	55 a	Investments - land, buildings, & equipment: basis.	55 a			
	b	Less: accumulated depreciation (attach schedule)	55 b		55 c	
	56	Investments - other (attach schedule)			56	
		Land, buildings, and equipment: basis				
		Less: accumulated depreciation				
		(attach schedule)			57 c	
		Other assets (describe	)		58	
-		Total assets (add lines 45 through 58) (must equal lin		239,285.	59	188,360.
		Accounts payable and accrued expenses		1,390.		2,265.
ij		Grants payable			61	
ĝ		Deferred revenue			63	
LIABILITIES		Loans from officers, directors, trustees, and key employees (attach				
†		Tax-exempt bond liabilities (attach schedule)			64a	
Ě		Mortgages and other notes payable (attach schedule)			65	
9			)	1,390.		2,265.
-		Total liabilities (add lines 60 through 65)zations that follow SFAS 117, check here X an		1,390.	00	2,203.
N L	-	through 69 and lines 73 and 74.	d complete lines of			
ħ.		Unrestricted		237,895.	67	186,095.
Ş		Temporarily restricted		231,093.	68	100,093.
Ĕ		Permanently restricted	1		69	
€mmu—m O¤		zations that do not follow SFAS 117, check here			103	
K C	ıyaılı	70 through 74.	L and complete intes		A	
E	70	Capital stock, trust principal, or current funds			70	
B		Paid-in or capital surplus, or land, building, and equi			71	
- 1	, ,	, a.a., or outstar sarpines, or raine, comanig, and ogai,				

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Retained earnings, endowment, accumulated income, or other funds ........

Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21) ..........

72

73

74

186,095.

188,360.

237,895.

239,285.

BAA

72

	990 (2004) Independent Wome			* ***	36-45	_		age 4
Par	Reconciliation of Revenu Financial Statements wit per Return (See instruction	h Revenue	Par	TIVE Reconcilia Financial S per Return	tatements with	E	per Audited kpenses	
a	Total revenue, gains, and other support per audited financial statements	N/A	а	Total expenses and lo financial statements	osses per audited	а	N/A	and the
b	Amounts included on line a but not on line 12, Form 990:		ь	Amounts included on on line 17, Form 990:	line a but not	127	A	The state of the s
(1)	Net unrealized gains on investments \$	7	(1	Donated services and use of facilities	in the second	111		chinete should
(2)	Donated services and use of facilities \$		(2	Prior year adjust- ments reported on line 20, Form 990		7.5	7. 6	
(3)	Recoveries of prior year grants \$	1	(3	B) Losses reported on line 20, Form 990 \$				¥ .
(4)	Other (specify):		(4	4) Other (specify):				
	\$		-	\$				
	Add amounts on lines (1) through (4)		1	Add amounts on lines (1) Line a minus line b	hrough (4)	b c		- 14
С	Line a minus line b	С	C .			-	***	
d	Amounts included on line 12, Form 990 but not on line a:		d	Amounts included on Form 990 but not on	line 17, line a:			
(1)	Investment expenses not included on line 6b, Form 990 \$		(	1) Investment expenses not included on line 6b, Form 990 \$			The second secon	X N
(2)	Other (specify):		(2	2) Other (specify):				
		2 3 6 8						2
	Add amounts on lines (1) and (2)	d		Add amounts on line	s (1) and (2) >	d		
8	Total revenue per line 12, Form 990 (line c plus line d)		е	Total expenses per I 990 (line c plus line	ine 17, Form	e		
Par		Trustees, and Key I	mp	loyees (List each one	even if not compe	nsa	ted; see instruction	ns.)
	(A) Name and address	(B) Title and average he per week devoted to position		(C) Compensation (if not paid, enter -0-)	<ul> <li>(D) Contributions employee benef plans and deferre compensation</li> </ul>	to it ed	(E) Expense account and o allowances	ther
	Crawford 6 M Street, NW							
	shington, DC	Director	Nom	0.	3-44-4	0.		0.
	ncy Pfotenhauer							
	26 M Street, NW			521.		ο.		0.
	shington, DC Lanne Massey	President/Directo	L Nom	321.		<u> </u>		
	26 M Street, NW	1						920
Was	shington, DC	Treasurer	Nom	0.		0.		0.
		4						
		1			J. J			
		4						
		1						
75	Did any officer, director, trustee, or k than \$100,000 from your organization	ey employee receive aggr	egate	compensation of more				
	than \$100,000 from your organization \$10,000 was provided by the related	n and all related organizat organizations?	ions,	or which more than		•	Yes X	No
	If 'Yes,' attach schedule - see instru					_		
BA	1						Form <b>990</b>	(200

	n990 (2004) Independent Women's Voice 36-453408	6	_	Page 5
Pa	ift VI Other Information (See instructions.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	76		х
	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	,	X
78	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	78b		
79	year? If 'Yes,' attach a statement	79	is.	Х
808	a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?	80a	Х	-
١	Independent Women's Forum  and check whether it is X exempt or nonexempt.			
Ω1 -	and check whether it is X exempt or nonexempt.  Enter direct and indirect political expenditures. See line 81 instructions		Y I	
	Did the organization file Form 1120-POL for this year?	81 b	2	l v
		010		X
82 :	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		x
	olf 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)			6
	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a		
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83 b	Х	
84 8	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
_ k	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84 b		e e e e e e e e e e e e e e e e e e e
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85 a	Х	
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85 b		Х
	If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
	Dues, assessments, and similar amounts from members			6.
	Section 162(e) lobbying and political expenditures	11:00		100
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			. *
	Taxable amount of lobbying and political expenditures (line 85d less 85e)			3
	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		-
	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85 h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on	6511		1.6
	line 12	THE.	70	
Ŀ	Gross receipts, included on line 12, for public use of club facilities		-	
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders			. 8
Ŀ	Gross income from other sources. (Do not net amounts due or paid to other sources		vi 50	
	against amounts due or received from them.)			~
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX	88		x
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:		\$ P	<b>20</b> 7
-	section 4911 > ; section 4912 > ; section 4955 >			-
t	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89Ь		x
	CONTRACTOR SALES AND CONTRACTOR C	90.0		
	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			0.
	Enter: Amount of tax on line 89c, above, reimbursed by the organization	-	-	0.
	List the states with which a copy of this return is filed ► none			
	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)	90 Ь	34	0
91	The books are in care of ► The Organization Telephone number ► (202) 419-	-		
92	Located at ► 1726 M Street, NW, Washington, DC ZIP + 4 ► 2003 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here	0		FU
	and enter the amount of tax-exempt interest received or accrued during the tax year			
BAA		Form	990	(2004)

36-4534086 Page 6 Form 990 (2004) Independent Women's Voice Part VII' Analysis of Income-Producing Activities (See instructions.) Excluded by section 512, 513, or 514 Unrelated business income Related or exempt Note: Enter gross amounts unless (B) Amount (C) Exclusion code (D) Amount (A) Business code function income otherwise indicated. 93 Program service revenue: а f Medicare/Medicald payments .... g Fees & contracts from government agencies . 94 Membership dues and assessments. 878. 95 Interest on savings & temporary cash invmnts 96 Dividends & interest from securities 97 Net rental income or (loss) from real estate: a debt-financed property ...... b not debt-financed property ...... 98 Net rental income or (loss) from pers prop . . . Other investment income ...... 100 Gain or (loss) from sales of assets other than inventory .... Net income or (loss) from special events . 101 102 Gross profit or (loss) from sales of inventory Other revenue: a 878 104 Subtotal (add columns (B), (D), and (E)) 878 105 Total (add line 104, columns (B), (D), and (E)) ..... Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I. Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See instructions.) Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment Line No. of the organization's exempt purposes (other than by providing funds for such purposes). N/A N/A Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions.) (E) (C) (D) (B) End-of-year Percentage of ownership interest Total Name, address, and EIN of corporation, partnership, or disregarded entity Nature of activities income 용 ક ક Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See instructions.) a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X No b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?..... Yes Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions). colore that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is colorates propreparer (other than officer) is based on all information of which preparer has any knowledge. Please

Preparer's SSN or PTIN (See General Instruction W)

Sian

Form **8868** (Rev December 2004)

payment instructions.

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

#### Application for Extension of Time to File an Exempt Organization Return

OMB No. 1545-1709

Form 8868 (Rev 12-2004)

Department of the Treasury Internal Revenue Service File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ...... If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Automatic 3-Month Extension of Time — Only submit original (no copies needed) Form 990-T corporations requesting an automatic 6-month extension — check this box and complete Part I only ..... All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041. Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6-months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile. Name of Exempt Organization Employer identification number Type or print File by the due date for Independent Women's Voice 36-4534086 Number, street, and room or suite number. If a P.O. box, see instructions. filing your 1726 M Street, NW, #1001 return. See instructions. City, town or post office. For a foreign address, see instructions. state ZIP code Washington DC 20036 Check type of return to be filed (file a separate application for each return): Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (section 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870 • The books are in the care of ► The Organization Telephone No. ► (202) 419-1820 FAX No. ► (202) 419-1821 If the organization does not have an office or place of business in the United States, check this box..... If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . ▶ . If it is for part of the group, check this box . . ▶ and attach a list with the names and EINs of all members the extension will cover. 1 I request an automatic 3-month (6-months for a Form 990-T corporation) extension of time until Aug 15 , 20 05 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 04 or tax year beginning \_\_\_\_\_, 20 \_\_\_, and ending 2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit ...... Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

### Exhibit 5

#### **Return of Organization Exempt From Income Tax**

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

OMB No 1545 0047 2005

Open to Public

Inte	rnal Revenue Service The organization may have to use	a copy of this return to s	atisfy	state reporting re	equirem	ents	Inspection	n
A	For the 2005 calendar year, or tax year beginning	, 2005,	, and e	nding		,		
В	Check if applicable Please use Name of organization				D Empl	yer iden	lification Number	
	Address change IRS label Independent Women				36-	4534	086	
	Name change or type Number and street (or P O box to See	if mail is not delivered to street ac	ddr) R	oom/suite	E Telep	hone nun	nber	
	Initial return   specific   1726 M Street, NW		1	Oth Floor			19-1820	
	Final return tions City, town or country	Stat	ie ZIP	code + 4	F Accou	inting od	Cash X	Accrua
	Amended return Washington	DC	20	036		Other (sp	ecify)	
	Application pending • Section 501(c)(3) organizations ar	nd 4947(a)(1) nonexempt		H and I are not applic	able to sec	tion 527	organizations	
	charitable trusts must attach a co (Form 990 or 990-EZ).	mpleted Schedule A		H (a) Is this a grou	p relurn for	affiliates	? Yes	X N
G	Web site: ► N/A		- 1	H (b) If 'Yes,' enter	number of	affiliates	<b>-</b>	
2				H (c) Are all affilia	tes include	d?	Yes	
,	Organization type (check only one) ► X 501(c) 4 ◄ (insert	no ) 4947(a)(1) or	527	(If 'No,' allac	halist Se	e instruct	ions )	
ĸ	Check here ► if the organization's gross receipts are r		1 361	H (d) Is this a sepa	rale relurn	filed by a	ın	
	\$25,000 The organization need not file a return with the	IRS, but if the organization	on .	organization	covered by	a group i	'uling' Yes	X
	chooses to file a return, be sure to file a complete return complete return.	Some states require a		I Group Exe	emption	Numbe	r ►	
_							tion is not required	
F	Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶	15,606.				orm 990,	990-EZ, or 990-PF	)
Pa	rt I Revenue, Expenses, and Changes in N		Balan	ces (See Instruc	ctions)			
	1 Contributions, gifts, grants, and similar amounts red	ceived		i come	55.73d			
	a Direct public support		1a	15,	000.			
	b Indirect public support		1b			- 1		
	c Government contributions (grants)		1c					
	la through 1c) (cash ?		0.)			1d	15,	000
	2 Program service revenue including government fees	s and contracts (from Par	t VII, I	ine 93)		2		3
	3 Membership dues and assessments					3		
	4 Interest on savings and temporary cash investments	S			-	4		606
	5 Dividends and interest from securities		1		-	5		
	6a Gross rents		6a					
	b Less rental expenses		6b					
	c Net rental income or (loss) (subtract line 6b from lin 7 Other investment income (describe	ie baj				6c		
R	Other investment income (describe	(A) Securities	1	(D) Other	)	7		-
MCZM<	8a Gross amount from sales of assets other than inventory	(A) Securities	-	(B) Other				
\.U	b Less cost or other basis and sales expenses	-	8a			- 1-		
Ž.	c Gain or (loss) (attach REDEIVED O		86					
	d Net gain of (loss) (combine line 8c, columns (A) and	4 (0)/	8 c		-			
					,	8d		_
	9 Special events and activities gattant schedule) If ar	ly amount is from gaming	g, cned	k here	J			
	a Gross revenue (not including \$ 100 per reported on line 1a)	of contributions	1 0-					
	b Less direct expense @ attantion fundament	205	9a 9b					
	c Net income or (lose) from special events (subtract li	una Oh from luna On)	9.0					
	10a Gross sales of inventory, less returns and allowance		1 10-		-	9c		
	b Less. cost of goods sold	:5	10a					
1.0	c Gross profit or (loss) from sales of inventory (attach schedule) (su	whiteness from 10th from the control 10.3	10b					
	11 Other revenue (from Part VII, line 103)	abilact line lob from line (0a)				10 c		
	(1)	10a and 11V			_	11		
-	12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c 13 Program services (from line 44, column (B))	, roc, and 11)				12	15,	
E					-	13	127,	
P	The second of th	)			-	14		185.
N	15 Fundraising (from line 44, column (D)) 16 Payments to affiliates (attach schedule)				-	15	1,	474.
EXPESSES					-	16		
	17 Total expenses (add lines 16 and 44, column (A))  18 Excess or (deficit) for the year (subtract line 17 from	r line 12)				17	156,	
N S	,	•			-	18	-141,	
N S E E T T		,				19	186,	
T	GAR FEOR				-	20		1.
		see the senarate instructi				21	44,	788.

DAA				Form 990 (2005)
to Fundraising \$				The second secon
\$	, (iii) the amount allocated to Managemen	it and general \$ _	; and (iv) t	the amount allocated
f 'Yes,' enter (i) the	aggregate amount of these joint costs \$		, (ii) the amount allocated to Pro	
	from a combined educational campaign and fund	raising solicitation rep	orten in (b) riogiani services.	
			and of the Program and uses?	► Yes X No
Inint Coets Check	If you are following SOP 98-2			

9,862.

156,914.

43 c

43 d 43e 43 f 43 q

c Consulting

BAA

Total functional expenses Add lines 22 through 43 (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)

2,349.

127,255.

1,474.

28,185

TEEA0102 11/01/05

Form 990 (2005) Independent Women's Voice 36-453	34086 Page 3
Part III Statement of Program Service Accomplishments	
Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about organization. How the public perceives an organization in such cases may be determined by the information presented on please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accurate.	uts return Therefore
What is the organization's primary exempt purpose? To educate women on public policy issues important to their lives. All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a Grant to assist affiliated entity, Independent Women's Forum (IWF), with general operating revenue. IWF fosters public education, research, and discussion of various women's issues.	2
(Grants and allocations \$ 75,000.) If this amount includes foreign grants, check here ▶	75,000.
b Legal policy - To educate women about the judicial nominations process and its impact on women and society. To advocate nominees based on credentials and ability to uphold the law, not on gender.  (Grants and allocations \$ 0.) If this amount includes foreign grants, check here	52,255.
Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶	
e Other program services  (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	127,255.
BAA	Form 990 (2005)

TEEA0103 10/14/05

BAA

Note:	Whe	ere required, attached schedules and amounts within imn should be for end-of-year amounts only	the description	(A) Beginning of year		(B) End of year
1	_	Cash – non-interest-bearing		188,360.	45	49,905.
		A STATE OF THE STA	2 1 N F		46	
	46	Savings and temporary cash investments	1			
	47 a	Accounts receivable	47a			
ı	ь	Less allowance for doubtful accounts	47 b		47 c	
		Pledges receivable	48a		40.0	
- 1	_	Less allowance for doubtful accounts	48b		48 c	
	49	Grants receivable			49	
Ą	50	Receivables from officers, directors, trustees, and ke employees (attach schedule)	у		50	
A S E T S	51 a	Other notes & loans receivable (attach sch)	51 a		- 1	
Ţ		Less allowance for doubtful accounts	51 b		51 c	
٦		Inventories for sale or use			52	
		Prepaid expenses and deferred charges			53	
		Investments – securities (attach schedule)	► Cost FMV		54	
		Investments — land, buildings, & equipment basis	55a			
	p	Less accumulated depreciation (attach schedule)	55b		55 c	
	56	Investments – other (attach schedule)			56	
-		Land, buildings, and equipment, basis	57 a	BOT TO STATE		p.7
- 1						
- 1		Less accumulated depreciation (attach schedule)	57 b		57 c	
- 1	58	Other assets (describe	)		58	
	59	Total assets (must equal line 74) Add lines 45 through	igh 58	188,360.	59	49,905
$\neg$		Accounts payable and accrued expenses		2,265.	60	5,117
اب	61	Grants payable			61	
À	62	Deferred revenue			62	
B	63	Loans from officers, directors, trustees, and key employees (attack	schedule)		63	an and the second
	64 a	Tax-exempt bond liabilities (attach schedule)			64a	
	b	Mortgages and other notes payable (attach schedule)			64 b	
S	65	Other liabilities (describe >	)		65	
	66	Total liabilities. Add lines 60 through 65		2,265.	66	5,117
	Organ	izations that follow SFAS 117, check here > X a	nd complete lines 67		1 1	
Ė		through 69 and lines 73 and 74				
A	67	Unrestricted		186,095.	67	44,788
	68	Temporarily restricted			68	
351	69	Permanently restricted			69	
	Organ	izations that do not follow SFAS 117, check here	and complete lines			
- 1		70 through 74				
DZC	70	Capital stock, trust principal, or current funds			70	
	71	Paid-in or capital surplus, or land, building, and equ			71	
BALANCEM	72	Retained earnings, endowment, accumulated incom	e, or other funds		72	
Ñ	73	Total net assets or fund balances (add lines 67 thro 72, column (A) must equal line 19, column (B) must	ough 69 or lines 70 through	186,095.	73	44,788
٤١						

Form 990 (2005) Independent Wo	omen's Voice		36-453	
Part IV-A Reconciliation of Revinstructions.)	enue per Audited Financial	Statements with F	Revenue per Retur	n(See
				N/A
<ul> <li>Total revenue, gains, and other supplied</li> </ul>	oort per audited financial statemer	nts	a	
b Amounts included on line a but not o		3 30		
1 Net unrealized gains on investments		b1		
2Donated services and use of facilitie	S	b2		
3Recoveries of prior year grants		b3		
4Other (specify),				
Add lines b1 through b4		b4	ь	
c Subtract line b from line a			c	
d Amounts included on Part I, line 12,	but not on line a:		H	
1 Investment expenses not included o		d1		
20ther (consults)				
		d2		
Add lines d1 and d2	PARAMETER I		d	
Part IV-B Reconciliation of Exp		al Statements with	Evnences ner Bet	urn
Fart 14-B   Reconcination of Exp	enses per Auditeu Financia	ai Statements with	Expenses per net	N/A
a Total expenses and losses per audit	ed financial statements		a	-1,7
b Amounts included on line a but not				
1 Donated services and use of facilities	S	61		
2Prior year adjustments reported on l	Part I, line 20	b2		
3Losses reported on Part I, line 20		ь3		
4Other (specify)				
		b4		
Add lines b1 through b4			ь	
c Subtract line b from line a			c	
d Amounts included on Part I, line 17,	but not on line a:			
1 Investment expenses not included o		d1		
2Other (specify).				
		d2		
Add lines d1 and d2			d	
e Total expenses (Part I, line 17) Ad	d lines c and d		▶ e	
		mnlovees (List each	person who was an off	icar director trustae
Part V-A Current Officers, Dire or key employee at any time	e during the year even if they were	e not compensated ) (S	ee the instructions )	icer, director, trustee,
	(B) Title and average hours	(C) Compensation	(D) Contributions to	(E) Expense
(A) Name and address	per week devoted	(if not paid, enter -0-)	employee benefit plans and deferred	account and other
365	to position	enter -0-)	compensation plans	allowances
Carol Crawford				
1726 M Street, NW				
Washington, DC	Director Nom	0.	0.	0.
Nancy Pfotenhauer			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1726 M Street, NW				
Washington, DC	President/Director 10	18,817.	0.	0.
Arianne Massey				4
1726 M Street, NW				
Washington, DC	Treasurer 10	7,415.	0.	0.
Michelle Bernard				
1726 M Street, NW				
Washington, DC	Senior VP 10	21,448.	0.	0.
BAA	TEEA0105 1	10/17/05		Form 990 (2005

Form 990 (2005) Independent Women's Vo	ice		36-453408	6		age t
Part V-A Current Officers, Directors, Trus	stees, and Key E	mployees (continued)			Yes	No
7,5 a Enter the total number of officers, directors, and trustees pe			s ► 3	_		
b Are any officers, directors, trustees, or key emplisted in Schedule A, Part I, or highest compens A, Part II-A or II-B, related to each other throug identifies the individuals and explains the relation.	loyees listed in Form ated professional and h family or business	990, Part V-A, or highe	st compensated employees tractors listed in Schedule	75b		х
c Do any officers, directors, trustees, or key empl	oyees listed in form 9	d other independent con	tractors listed in Schedule			
A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control?						
Note. Related organizations include section 509						
If 'Yes,' attach a statement that identifies the in other organization(s), and describes the compe- related organization	dividuals, explains the nsation arrangements	e relationship between t s, including amounts pai	his organization and the d to each individual by each			
d Does the organization have a written conflict of				75 d	-	X
Part V-B Former Officers, Directors, Trus Benefits (If any former officer, directo during the year, list that person below at the instructions)	r, trustee, or key emp nd enter the amount	oloyee received compens of compensation or othe	ation or other benefits (de r benefits in the appropriat	scribed be e column	elow) See	
(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans and deferred compensation plans	account	and o	ther
		*			2	
		-				
		-				
				8 5 9		
				Coll 1	*****	
		H-1				
Double Other Information (C. II					Yes	No
Part VI Other Information (See the instruct		- No. (DO2 K IVes I			163	INO
76 Did the organization engage in any activity not attach a detailed description of each activity	previously reported t	o the IRS? If Yes,		76		Х
77 Were any changes made in the organizing or g	•	but not reported to the II	RS?	77	<u> </u>	X
If 'Yes,' attach a conformed copy of the change		O or more during the ve-	or covered by this return?	78 a		X
78a Did the organization have unrelated business g b If 'Yes,' has it filed a tax return on Form 990-T		to or more during the year	ar covered by this return:	78E	-	
79 Was there a liquidation, dissolution, termination year? If 'Yes,' attach a statement	n, or substantial cont	raction during the		79	_	X
80a is the organization related (other than by associatements), governing bodies, trustees, office	ciation with a statewic rs, etc, to any other	de or nationwide organiz exempt or nonexempt or	ation) through common ganization?	80 a	X	
<b>b</b> If 'Yes,' enter the name of the organization	Independent			ot		
81 a Enter direct and indirect political expenditures			81 a	0.		
b Did the organization file Form 1120-POL for the	1.24			81 8	)	X
BAA			70-11-10-13	Forn	n <b>990</b>	(2005

	990 (2005) Independent Women's Voice	36-453408	36	Р	age 7
Par	t VI Other Information (continued)			Yes	No
82 a	Old the organization receive donated services or the use of materials, equipment, or facilities at no substantially less than fair rental value?	charge or at	82 a	HC I	х
b	f 'Yes,' you may indicate the value of these items here. Do not include this amount as evenue in Part I or as an expense in Part II. (See instructions in Part III.)				
83a i	Did the organization comply with the public inspection requirements for returns and exemption appl	ications?	83a	Х	
b	Old the organization comply with the disclosure requirements relating to quid pro quo contributions?	?	83b	Х	
84 a l	Did the organization solicit any contributions or gifts that were not tax deductible?		84 a	Х	
b	f 'Yes,' did the organization include with every solicitation an express statement that such contribution tax deductible?	tions or gifts were	84b	x	
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?		85 a	Х	
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85b	N/	A
	f 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the orga waiver for proxy tax owed for the prior year	inization received a			
С	Dues, assessments, and similar amounts from members 85c				
	Section 162(e) lobbying and political expenditures 85d				
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e				
	Taxable amount of lobbying and political expenditures (line 85d less 85e)  85f				
	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85g		
h	f section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line85f to its reasonable es dues allocable to nondeductible lobbying and political expenditures for the following tax year?	timate of	85 h		
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on				
	ine 12 86a				
b	Gross receipts, included on line 12, for public use of club facilities 86b				
87	501(c)(12) organizations Enter a Gross income from members or shareholders 87a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  87b				
	At any time during the year, did the organization own a 50% or greater interest in a taxable corpora or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 of If 'Yes,' complete Part IX	ation or partnership, and 301 7701-37	88		x
	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under				
	section 4911 ► , section 4912 ► , section 4955 ►	-1.7	115		
ь	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benduring the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' explaining each transaction	nefit transaction attach a statement	89 b		x
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the				
- 5	year under sections 4912, 4955, and 4958				0.
d	Enter Amount of tax on line 89c, above, reimbursed by the organization	-			
90 a	List the states with which a copy of this return is filed   none		_,	, <u>.</u> .	
b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions)		90 b		0
91 a	The books are in care of The Organization Telephone number	<b>(202)</b> 419-		)	
	Located at ► 1726 M Street, NW, Washington, DC	ZIP + 4 > 200	36		
b	At any time during the calendar year, did the organization have an interest in or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial account.)	er authority over a al account)?	91 b	Yes	No X
	If 'Yes,' enter the name of the foreign country	The Part of the Land			3
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreig	ın Bank and		Ĭ	
	At any time during the calendar year, did the organization maintain an office outside of the United	States?	91 c		x
c	, , , , , , , , , , , , , , , , , , ,		-		
	'f 'Yes.' enter the name of the foreign country ▶				
	If 'Yes,' enter the name of the foreign country  Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here				
92	If 'Yes,' enter the name of the foreign country  Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 92	7		L

22312

BAA

Alexandria

TEEA0108 10/18/05

Form 990 (2005)

Independent Women's Voice

36-4534086

Explanation Statement

Form/Line.

Forrm 990, Part V-A

line 75c

Explanation of:

Receipt of Compensation from Other Companies

Independent Women's Voice shares employees with Independent Women's
Forum, a 501(c)(3) organization. The entities have an understood affiliation
agreement, whereby common employees allocate time spent to each entity.
Independent Women's Voice reimburses Independent Women's Forum for
their share any expenses or salaries paid by Independent Women's Forum.
Following is a schedule of compensation paid by Independent Women's
Forum for their share of salaries:
Nancy Pfotenhauer \$54,837
Arianne Massey \$66,724

Michelle Bernard \$138,552

Form **8868** (Rev Døcember 2004)

#### Application for Extension of Time to File an Exempt Organization Return

OMB No 1545 1709

De	epartment of th	e Treasury Service		► File a sep	arate application for	each return.				
7	If you are	filing for an	Automatic 3-Month E							X
	If you are	filing for an A	Additional (not autor	matic) 3-Month l	Extension, complete	only Part II (on	page 2 of this	form).		
D	o not comp	lete Part II un	less you have alread	dy been granted	an automatic 3-mor	oth extension on	a previously fil	ed Form 88	.68	
F	art I	Automatic	3-Month Extens	ion of Time -	- Only submit o	riginal (no co	pies needed			
F	orm 990-T c	orporations r	equesting an automa	atic 6-month ext	ension - check this	box and comple	te Part I only			
$\rho$	artnershins	REMICS and	uding Form 990-C fil trusts must use Fori	m 8/36 to reque	st an extension of ti	me to lile culli i	000, 1000, 01	10-11		0.704004
El be ex fo	ectronic Filelow (6-more tension, instrumental control of the cont	ing (e-file). For other for corporate of your must we are goveriled.	orm 8868 can be file rate Form 990-T filer at submit the fully co	d electronically rs). However, you impleted signed	f you want a 3-mon u cannot file it electr page 2 (Part II) of F	th automatic exteriorically if you was form 8868 For m	ension of time t ant the addition ore details on	o file one on nal (not auto the electron	omatic) 3-mol	noteo nth is
		Name of Exempt						Employer id	entification numb	ber
Ty	pe or				×					
pr	int le by the	Independ	ent Women's	Voice				36-453	4086	
du	e date for		and room or suite number.		Vuctions					
	ng your turn. See	1726 M S	treet, NW, #	10th Floor	V				-تبحلب	
	structions.		office For a foreign addre					state	ZIP code	
		Washingt	on					DC	20036	
C	eck type o	f return to be	filed (file a separate	application for	each return):					
X	Form 990			Form 990-T (c	orporation)		Form 47			
	Form 990	-BL	<u>.</u>	Form 990-T (s	ection 401(a) or 408	(a) trust)	Form 52			
	Form 990	EZ		Form 990-T (tr	ust other than above	e)	Form 600	59		
	Form 990	PF		Form 1041-A			Form 88	70		
•			re of <u>The Organia</u>		FAX No. ► (20	2) 419-182	1			
•			not have an office of							
	-		turn, enter the organ					this is for th	ne whole gro	up, =
			If it is for part of the							
	the extens	on will cover.			_					
1	I request	an automatic	3-month (6-months	for a Form 990	T corporation) exte	nsion of time uni	ld Aug 1!	5, 20	06_,	
	to file the	e exempt orga	nization return for th	he organization i	named above. The e	xtension is for th	e organization	's return for	•	
	► X c	alendar year	20 05 or							
	► []t	ax year begin	ning	, 20,	and ending	, 20				
	! If this tax	year is for le	ss than 12 months,	check reason:	Initial return			hange in ac	counting peri	lod
3	a If this appoint a life in a life i	plication is for dable credits.	Form 990-BL, 990- See instructions	PF, 990-T, 4720	, or 6069, enter the	tentative tax, les	s any •	\$		0.
	b If this application include a	olication is for ny prior year	Form 990-PF or 99 overpayment allowed	0-T, enter any red d as a credit	efundable credits an	d estimated tax p	payments mad	e. \$		0.
	c Balance l coupon o	Due, Subtract r, if required,	line 3b from line 3a by using EFTPS (Ele	. Include your pa ectronic Federal	ayment with this form Tax Payment Syste	n, or, if required, m). See instructi	deposit with F	TD \$		0.
aı ay	ition, If you ment instru	are going to i	make an electronic f	fund withdrawal	with this Form 8868,	see Form 8453-	EO and Form	8879-EO fo	•	
_			aperwork Reduction	Act Notice, see	instructions.			Form	8868 (Rev 12	2-2004)



### Exhibit 6

Form **990** 

#### Return of Organization Exempt From Income Tax

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

OMB No 1545 0047 2006

Open to Public

A	rnal Revenue Service   The organization may have to use				
	For the 2006 calendar year, or tax year beginning	, 2006,	and ending		
В	Check if applicable C Name of organization			D Employer Idea	ntification Number
	Address change   Please use Independent Women	's Voice	,	36-453	4086
	Name change or type. Number and street (or P O box	f mail is not delivered to street a	ldr) Room/suite	E Telephone nu	mber
	Initial return   See specific   1726 M Street, NW		10th Floo	r (202)	419-1820
	Final return tions City, town or country	Stat	e ZIP code + 4	F Accounting	Cash X Accre
	Amended return Washington	DC	20036	Other (s	pecify)
	Application pending • Section 501(c)(3) organizations ar			plicable to section 527	
	charitable trusts must attach a co (Form 990 or 990-EZ).	mpleted Schedule A	H (a) is this a g	roup return for affiliate	s? Yes X
G	Web site: ► N/A		H (C) Are all at	filiates included?	Yes
J	Organization type (check only one)   X   501(c) 4   4   (insert	no ) 4947(a)(1) or	r I	Itach a list. See instructions a list seems that the seems are seen as the seems are seems	
ĸ	Check here If the organization is not a 509(a)(3) sup			on covered by a group	
Γ.	gross receipts are normally not more than \$25,000 A ret		113	Exemption Numb	
	organization chooses to file a return, be sure to file a con	nplete return		► X If the organiz	
1	Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶	175		Schedule B (Form 99	
	art I Revenue, Expenses, and Changes in I			TO STATE OF THE ST	
1 0			Dalances (See (	in instructions	3./
	1 Contributions, gifts, grants, and similar amounts rec	.eiveu	1 1-1		
	a Contributions to donor advised funds		1a		
	b Direct public support (not included on line 1a)		16		
	c Indirect public support (not included on line 1a)		1c		
	d Government contributions (grants) (not included on	line 1a)	1 d		
	e Total (add lines la ihrough ld) (cash \$		)	1 e	
	2 Program service revenue including government feet	s and contracts (from Pai	t VII, line 93)	2	
	3 Membership dues and assessments			3	
	4 Interest on savings and temporary cash investment	s		4	17.
	5 Dividends and interest from securities			5	
	6a Gross rents		6a		
	b Less rental expenses		6b		
	c Net rental income or (loss) Subtract line 6b from III	ne 6a		6c	
	7 Other must meet market (describe	10 00		) 7	
BE>E20E	7 Other investment income (describe	(A) Securities	(B) O		
Ě	8a Gross amount from sales of assets other	(A) occurred	8a		
N	than inventory				
Ě			8b		
	c Gain or (loss) (attach schedule)				
			8c		
	d Net gain or (loss) Combine line 8c, columns (A) an			8d	
	9 Special events and activities (attach schedule) If a	ny amount is from <b>gamin</b>		- Bd	
	Special events and activities (attach schedule) If a a Gross revenue (not including \$		g, check here	<b>8d</b>	
	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b)	ny amount is from <b>gamin</b> of contributions	g, check here	8d	
	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$	ny amount is from <b>gamin</b> of contributions ses	g, check here		
	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$	ny amount is from gamin of contributions ses line 9b from line 9a	g, check here	8d ▶□ 9c	
	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b) b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract 10a Gross sales of inventory, less returns and allowance.	ny amount is from gamin of contributions ses line 9b from line 9a	g, check here  9a 9b		
	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b) b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract 10 a Gross sales of inventory, less returns and allowance b Less, cost of goods sold.	ny amount is from gamin of contributions ses line 9b from line 9a es	g, check here		
	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b) b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract 10 a Gross sales of inventory, less returns and allowance b Less, cost of goods sold.	ny amount is from gamin of contributions ses line 9b from line 9a es	g, check here  9a 9b		
	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b) b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract 10a Gross sales of inventory, less returns and allowance b Less, cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule).	ny amount is from gamin of contributions ses line 9b from line 9a es	g, check here  9a 9b	9c	
	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b) b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract 10 a Gross sales of inventory, less returns and allowance b Less, cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule). S Other revenue (from Part VII, line 103)	ny amount is from gamin of contributions ses line 9b from line 9a es ubtract line 10b from line 10a	g, check here  9a 9b	9c 10c	17
	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b)  b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract 10 a Gross sales of inventory, less returns and allowance b Less, cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule). Second 11 Other revenue (from Part VII, line 103). Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9d, 13. Program services (from line 44, column (B)).	ny amount is from gamin of contributions ses line 9b from line 9a es ubtract line 10b from line 10a c, 10c, and 11	g, check here  9a 9b  10a 10b	9c 10c 11 12	
Ex	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b)  b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract 10 a Gross sales of inventory, less returns and allowance b Less, cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule). Second 11 Other revenue (from Part VII, line 103). Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9d, 13. Program services (from line 44, column (B)).	ny amount is from gamin of contributions ses line 9b from line 9a es ubtract line 10b from line 10a c, 10c, and 11	9a 9b 10a 10b	9c 10c 11 12 13	17: 36,560 1,62:
EXPL	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b)  b Less direct expenses other than fundraising expenion content of	ny amount is from gamin of contributions ses line 9b from line 9a es ubtract line 10b from line 10a c. 10c, and 11	g, check here  9a 9b  10a 10b	9c 10c 11 12 13	36,56 1,62
шхршхь	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b)  b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract 10 a Gross sales of inventory, less returns and allowance b Less, cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule). Second 11 Other revenue (from Part VII, line 103). Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9d. 13 Program services (from line 44, column (B)). Management and general (from line 44, column (C)).	ny amount is from gamin of contributions ses line 9b from line 9a es ubtract line 10b from line 10a c. 10c, and 11	g, check here  9a 9b  10a 10b	9c 10c 11 12 13	36,56 1,62
ENSE	9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b)  b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract 10 a Gross sales of inventory, less returns and allowance b Less, cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule). Second 11 Other revenue (from Part VII, line 103). Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9d. 13 Program services (from line 44, column (B)). Management and general (from line 44, column (C)). Fundraising (from line 44, column (D)). Payments to affiliates (attach schedule).	ny amount is from gamin of contributions ses line 9b from line 9a es ubtract line 10b from line 10a c, 10c, and 11	g, check here  9a 9b  10a 10b	9c 10c 11 12 13	36,56 1,62 ~ 2
EXPERSES	<ul> <li>9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b)</li> <li>b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract 10 a Gross sales of inventory, less returns and allowance b Less, cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule). Solution 11 Other revenue (from Part VII, line 103). Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9d. 13 Program services (from line 44, column (B)). Management and general (from line 44, column (C)). Fundraising (from line 44, column (D)). Payments to affiliates (attach schedule). Total expenses. Add lines 16 and 44, column (A).</li> </ul>	ny amount is from gamin of contributions ses line 9b from line 9a es ubtract line 10b from line 10a c, 10c, and 11	9a 9b 10a 10b	9c 10c 11 12 13 14 15 16 17	36,56 1,62 ~ 2 38,21
EN SES	<ul> <li>9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b)</li> <li>b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract 10 a Gross sales of inventory, less returns and allowance b Less, cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule). Solution 11 Other revenue (from Part VII, line 103). Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9d. 13 Program services (from line 44, column (B)). Management and general (from line 44, column (C)). Fundraising (from line 44, column (D)). Payments to affiliates (attach schedule). Total expenses. Add lines 16 and 44, column (A).</li> </ul>	ny amount is from gamin of contributions ses line 9b from line 9a es ubtract line 10b from line 10a c, 10c, and 11	9a 9b 10a 10b	9c 10c 11 12 13 14 15 16 17 18	36,56 1,62 21 38,21 -38,04
E N S E S	<ul> <li>9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b)</li> <li>b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract 10 a Gross sales of inventory, less returns and allowance b Less, cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule). Solution 11 Other revenue (from Part VII, line 103). Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9d. 13 Program services (from line 44, column (B)). Management and general (from line 44, column (C)). Fundraising (from line 44, column (D)). Payments to affiliates (attach schedule). Total expenses. Add lines 16 and 44, column (A).</li> </ul>	ny amount is from gamin of contributions ses line 9b from line 9a es ubtract line 10b from line 10a c, 10c, and 11	9a 9b 10a 10b	9c 10c 11 12 13 14 15 16 17 18 19	36,56 1,62 
E N S E	<ul> <li>9 Special events and activities (attach schedule) If a a Gross revenue (not including \$ reported on line 1b)</li> <li>b Less direct expenses other than fundraising expenic Net income or (loss) from special events. Subtract:</li> <li>10 a Gross sales of inventory, less returns and allowance b Less, cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule). Subtract:</li> <li>11 Other revenue (from Part VII, line 103). Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9d.</li> <li>13 Program services (from line 44, column (B)). Management and general (from line 44, column (C)). Fundraising (from line 44, column (D)). Payments to affiliates (attach schedule). Total expenses. Add lines 16 and 44, column (A).</li> <li>18 Excess or (deficit) for the year. Subtract line 17 from the page 12 from 17 from 18 from 19 from</li></ul>	ny amount is from gamin of contributions ses line 9b from line 9a es ubtract line 10b from line 10a c, 10c, and 11  The line 12 rom line 73, column (A) ch explanation	9a 9b 10a 10b	9c 10c 11 12 13 14 15 16 17 18	36,56 1,62 21 38,21 -38,04

Form 990 (2006)

36-4534086 Page 2 Independent Women's Voice Form 990 (2006) Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others Part II (C) Management (B) Program (D) Fundraising Do not include amounts reported on line (A) Total and general 6b, 8b, 9b, 10b, or 16 of Part I 22a Grants paid from donor advised funds (attach sch) (cash \$ 36,568. 0.) \$ non-cash If this amount includes 36,568 22 a 36,568 foreign grants, check here 22 b Other grants and allocations (att sch) (cash non-cash \$ If this amount includes 22 b foreign grants, check here Specific assistance to individuals (attach schedule) 23 24 Benefits paid to or for members 24 (attach schedule) 25a Compensation of current officers, directors, key employees, etc listed in Part V-A (attach sch) 0 0 0 25 a b Compensation of former officers, directors, key employees, etc listed in Part V-B (attach sch) 0 0 0 25 b c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule) 25 c Salaries and wages of employees not included on lines 25a, b, and c 26 26 Pension plan contributions not 27 included on lines 25a, b, and c Employee benefits not included on 28 28 lines 25a - 27 29 29 Payroll taxes 30 Professional fundraising fees 0. 770 770. 0. 31 31 Accounting fees 0. 0. 135 32 135. 32 Legal fees 33 33 Supplies 34 34 Telephone 0. 40 40. 0. 35 35 Postage and shipping 36 36 Occupancy 37 37 Equipment rental and maintenance 38 Printing and publications 38 39 39 40 40 Conferences, conventions, and meetings 41 41 42 Depreciation, depletion, etc (attach schedule) 42 43 Other expenses not covered above (itemize) 678 0 678 43 a a Bank charges b Charitable solicitation 25 0 0 43 b 43 c 43 d 43e 43 f 43 g Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15) 25. 36,568. 1,623 38,216. Joint Costs. Check I if you are following SOP 98-2 ► Yes X No Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ; (ii) the amount allocated to Program services \$ If 'Yes,' enter (i) the aggregate amount of these joint costs ; and (iv) the amount allocated \$ , (iii) the amount allocated to Management and general to Fundraising

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Part III   Statement of Program Service Accomplishments  form 990 is available for public inspection and, for some people, serves as the primary or sole source of inform		(c) (c)
arm 000 is available for public inspection and, for some appella, sooner as the primary or sole source of inform		
rganization. How the public perceives an organization in such cases may be determined by the information prolease make sure the return is complete and accurate and fully describes, in Part III, the organization's program	esented on	its return. Therefore.
That is the organization's primary exempt purpose? To educate women on public policy issues important to the lift organizations must describe their exempt purpose achievements in a clear and concise manner. State the nients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and ations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to off	number of (4) organ- hers)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a Grant to assist affiliated entity, Independent Women's Forum (IW) with general operating revenue. IWF fosters public education, reseand discussion of various women's issues.	E)	
(Grants and allocations \$ 36,568.) If this amount includes foreign grants, check he	ere	36,568.
b		
(Grants and allocations \$ ) If this amount includes foreign grants, check he		
(Grants and allocations \$ ) If this amount includes foreign grants, check he	ere ► П	
d		
(Grants and allocations \$ ) If this amount includes foreign grants, check he	ere ► 🗍	
e Other program services (Grants and allocations \$ ) If this amount includes foreign grants, check he	ere ► 🗌	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	31/	36,568.

BAA

44,788.

49,905.

73

74

6,746.

6,746.

Total liabilities and net assets/fund balances. Add lines 66 and 73

	rm <b>990 (</b> 2006) Independent Wo			36-453	
P	art IV-A Reconciliation of Revenue (Instructions.)	enue per Audited Financial	Statements with F	Revenue per Retur	n(See the
					N/A
а	Total revenue, gains, and other supp	·	nts	a	
Ь	Amounts included on line a but not o		î Î		
	1 Net unrealized gains on investments		b1		
	2Donated services and use of facilities	5	b2		
	3Recoveries of prior year grants	distribution of	b3		
	4Other (specify)		b4		
	Add lines b1 through b4			ь	
c	Subtract line b from line a			c	
d	Amounts included on Part I, line 12,	but not on line a:			
	1 Investment expenses not included or		d1		
			d2		
	Add lines d1 and d2	4.			
e	Total revenue (Part I, line 12) Add I art IV-B Reconciliation of Expe		ol Statements with	Evnoncos nor Pot	
F	art IV-B   Reconciliation of Expe	enses per Auditeu rinancia	ai Statements with	Expenses per Ner	N/A
а	Total expenses and losses per audito	ed financial statements		a	11,72
Ь	Amounts included on line a but not o				
_	1 Donated services and use of facilitie		b1		
	2Prior year adjustments reported on F		b2		
	3Losses reported on Part I, line 20	u. ( ), iii u	b3		
	4Other (specify)				
			b4		
	Add lines b1 through b4			b	
С	Subtract line b from line a			С	
d	Amounts included on Part I, line 17,	but not on line a:			
	1 Investment expenses not included or		d1		
	2Other (specify)				
			d2		
	Add lines d1 and d2			d	
e	Total expenses (Part I, line 17) Add			► e	
P	Current Officers, Director key employee at any time	ctors, Trustees, and Key E	mployees (List each	person who was an off	ficer, director, trustee,
-	or key employee at any time	(B) Title and average hours	(C) Compensation	(D) Contributions to	(E) Expense
	(A) Name and address	per week devoted	(if not paid,	employee benefit	account and other
	(A) Haine and address	to position	enter -0-)	plans and deferred compensation plans	allowances
Ca	arol Crawford				
	726 M Street, NW				
	ashington, DC	Director Nom	0.	0.	0.
_	ancy Pfotenhauer				
	726 M Street, NW				
	ashington, DC	President/Director 1	0.	0.	0.
	ichelle Bernard				
	726 M Street, NW		100		
	ashington, DC	Senior VP 1	0.	0.	0.
-					
-					
-					
BA	A	TEEA0105 0	11/18/07		Form 990 (2006)

Form 990 (2006) Independent Women's Vo		- American	36-453408	6		age 6
Part V-A Current Officers, Directors, Tru					Yes	No
75 a Enter the total number of officers, directors, and trustees pe				- 1		
b Are any officers, directors, trustees, or key emplisted in Schedule A, Part I, or highest compen A, Part II-A or II-B, related to each other through identifies the individuals and explains the relation.	sated professional and gh family or business re onship(s)	other independent con- lationships? If 'Yes,' a	tractors listed in Schedule	75 b		_x_]
c Do any officers, directors, trustees, or key emplisted in Schedule A, Part I, or highest compen A, Part II-A or II-B, receive compensation from to the organization? See the instructions for the	loyees listed in form 99 sated professional and any other organization e definition of 'related o	Part V-A, or highest other independent con s, whether tax exempt rganization'	compensated employees	75 c	х	الـــا
If 'Yes,' attach a statement that includes the in		the instructions		75.4		v I
d Does the organization have a written conflict of		~		75d		Χ_
Part V-B Former Officers, Directors, Trus Benefits (If any former officer, director during the year, list that person below a the instructions)	r trustee or key emplo	yee received compens compensation or other	ation or other benefits (des benefits in the appropriate	cribed b column	elow) See	
(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Ex account a allow	pense and ot ances	ther
		2				
		25-5-2-2				
	=					
					,	
			<u> </u>	سيند		
Part VI Other Information (See the Insti	ructions.)			-	Yes	No
76 Did the organization make a change in its activity if 'Yes,' attach a detailed statement of each change in its activity.	ities or methods of cor	ducting activities?		76		x I
77 Were any changes made in the organizing or o			257	77		X
If 'Yes,' attach a conformed copy of the change		it not reported to the ii				
78a Did the organization have unrelated business of		or more during the vea	er covered by this return?	78a		x l
b If 'Yes,' has it filed a tax return on Form 990-T		,	,	78b		
79 Was there a liquidation, dissolution, terminatio year? If 'Yes,' attach a statement	n, or substantial contra	ction during the		79		x.
80 a is the organization related (other than by asso membership, governing bodies, trustees, office	ciation with a statewide ers, etc, to any other ex	or nationwide organiza	ation) through common ganization?	,80a	х.	
b If 'Yes,' enter the name of the organization ►	Independent was and ch	lomen's Forum eck whether it is X e	exempt or nonexemp	ex l		
81 a Enter direct and indirect political expenditures	(See line 81 instruction	ns.)	81 a			
b Did the organization file Form 1120-POL for th	is year?			81 b		X
BAA				Form	990	(2006)

Form 990 (2006) Independent Women's Voice	36-453408	6	F	age 7
Part VI Other Information (continued)			Yes	No
82 a Did the organization receive donated services or the use of materials, equipment, or fail substantially less than fair rental value?	cilities at no charge or at	82a		х
bil 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II.)	826			
83a Did the organization comply with the public inspection requirements for returns and exe	emption applications?	83a	х	
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements relating to quid pro quo comply with the disclosure requirements requi	ontributions?	83Ь	Х	
84a Did the organization solicit any contributions or gifts that were not tax deductible?		84a	Х	
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that sinot tax deductible?	uch contributions or gifts were	84b	х	
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by men	nbers?	85 a	Х	
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85 b	N/	A
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unlivariver for proxy tax owed for the prior year	less the organization received a		-	
c Dues, assessments, and similar amounts from members	85c N/A		_	
d Section 162(e) lobbying and political expenditures	85d N/A			1
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A	1 1		1
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A			
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	Maria de la companya della companya della companya della companya de la companya della companya	85g	N/	A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line85f to it	a recensible estimate of	000		in .
dues allocable to nondeductible lobbying and political expenditures for the following tax year?  86 501(c)(7) organizations, Enter: a Initiation fees and capital contributions included on	s reasonable estimate of	85h	N/	Α
line 12	86a   N/A		- 7	l
	86b N/A	- I		
<ul> <li>b Gross receipts, included on line 12, for public use of club facilities</li> <li>501(c)(12) organizations Enter a Gross income from members or shareholders</li> </ul>	87a N/A	- 1		
67 Sur(c)(12) organizations Effect a Gross income from (nembers of shareholders	0/4 N/A			1
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b N/A			
88 a At any time during the year, did the organization own a 50% or greater interest in a tax or an entity disregarded as separate from the organization under Regulations sections If 'Yes,' complete Part IX	cable corporation or partnership, 301.7701-2 and 301 7701-37	88a		x
b At any time during the year, did the organization, directly or indirectly, own a controlled section 512(b)(13)? If 'Yes,' complete Part XI	d entity within the meaning of	88 b		х
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the y	year under			
section 4911 ► ; section 4912 ► ; sec	ction 4955 ►			
b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 during the year or did it become aware of an excess benefit transaction from a prior ye explaining each transaction	B excess benefit transaction ar? If 'Yes,' attach a statement	89ь		х
c Enter Amount of tax imposed on the organization managers or disqualified persons du year under sections 4912, 4955, and 4958	uring the			
d Enter Amount of tax on line 89c, above, reimbursed by the organization	<b>▶</b> 0.			
e All organizations. At any time during the tax year, was the organization a party to a pro-	ohibited tax shelter transaction?	89 e		X
f All organizations Did the organization acquire a direct or indirect interest in any applic		89 f		х
g For supporting organizations and sponsoring organizations maintaining donor advised organization, or a fund maintained by a sponsoring organization, have excess business the year?	funds Did the supporting sholdings at any time during	89 g	N/	A
90a List the states with which a copy of this return is filed - none		11111		
b Number of employees employed in the pay period that includes March 12, 2006 (See instructions)		90 b	_	0
91a The books are in care of ► The Organization Telepho Located at ► 1726 M Street, NW, Washington, DC	ziP + 4 > 2003			
b At any time during the calendar year, did the organization have an interest in or a sign	ature or other authority over a		Yes	No
financial account in a foreign country (such as a bank account, securities account, or of if 'Yes,' enter the name of the foreign country.	other financial account)?	91 b		X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report Financial Accounts	ort of Foreign Bank and			
BAA		Form	990	(2006)
				/

rm 990 (2006) Independent Women' Part VI Other Information (continue				36-4534	Yes No
c At any time during the calendar year, did		aintain an offici	e outside of the Unite	ed States?	91 c X
If 'Yes,' enter the name of the foreign cou	untry >				
2 Section 4947(a)(1) nonexempt charitable	trusts filing Form 9	90 ın lıeu of <b>Fo</b>	rm 1041 - Check he	re	<b>-</b> [
and enter the amount of tax-exempt inter				▶ 92	
Part VII Analysis of Income-Produc	ing Activities (S	See the instr			
	Unrelated busin	ness income	Excluded by secti	on 512, 513, or 514	(E)
ote: Enter gross amounts unless herwise indicated	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt function income
93 Program service revenue					
ab					
c					
d				W 15	
e				7 2 2 2 2	
f Medicare/Medicaid payments					
g Fees & contracts from government agencies				No. 2	
94 Membership dues and assessments				3 2 8	
95 Interest on savings & temporary cash invinits			14	175.	24.00
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property				W 8 4 500	and the same
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
00 Gain or (loss) from sales of assets other than inventory					
01 Net income or (loss) from special events					
02 Gross profit or (loss) from sales of inventory				3	
03 Other revenue a					
b		= JA		1 0 00	
-C					
d			7		
e	0.8.				
O4 Subtotal (add columns (B), (D), and (E))				175.	
05 Total (add line 104, columns (B), (D), a		- III			17
te: Line 105 plus line 1e, Part I, should equ	al the amount on lu	ne 12, Part I		Con the mateur	fiana )
art VIII Relationship of Activities to					
ine No. Explain how each activity for which of the organization's exempt purpo	h income is reported oses (other than by	d in column (E) providing funds	of Part VII contribut for such purposes)	ed importantly to the	accomplishment
N/A			7		
			L V V		
Part IX Information Regarding Tax					
(A)	(B)		(C)	(D)	(E)
Name, address, and EIN of corporation,	Percentage of	Nature	of activities	Total	End-of-year assets
partnership, or disregarded entity	ownership interest			income	assets
	- %				
	8	V			
	8				
		ted with Por	sonal Renefit Co	entracts/See the	instructions )
Dart V Information Degarding T-	HISTELS ASSUCIA	ted willi Let	Solidi Dellelli CC	JIM acts (See (He	
Part X Information Regarding Tra		, to non-nec	on a personal hearful cont	tract?	Yae IX No
Part X   Information Regarding Tra a Did the organization, during the year, receive any fu b Did the organization, during the year, pa	inds, directly or indirectly				Yes X No

Form	990 (2006) Independent Women's Voice			36-4534	086	F	age 9
Par	t XI Information Regarding Transfers To ar	d From Controlled Er	ntities, Comp	lete only if the	9		
	organization is a controlling organization	n as defined in section	n 512(b)(13).			N/A	
						Yes	No
106	Did the reporting organization make any transfers to a	controlled entity as definer	d in section 512/	b)(13) of the Co	te7 If		
100	'Yes,' complete the schedule below for each controlled	entity	3 III 36CHOII 312(	(0)(13) 01 110 000	,c		
				C)		14	
	(A) Name, address, of each	(B) Employer Identification	Descri	C) ption of	Amount	D)	
	controlled entity	Number	trar	isfer	Amount	oi tran	SICI
			FREE W. F	TE.			
а							
ь							
- 1		¥.					
		<del></del>	-				
c							
_			1				
	Totals						
	W District Control of the Control of					Yes	No
107	Did the reporting organization receive any transfers fr	and a southelland and the an ele	of and in agetion	E12/6\/12\ af th	o Codo2 If		
107	'Yes,' complete the schedule below for each controlled	i entity	ennea in Section	512(0)(13) 01 111	e Code · II		
$\overline{}$	(A)			C)			
	Name, address, of each	(B) Employer Identification	Descri	C) ption of	Amount	D)	sefor
	controlled entity	Number	trai	nsfer	Alliount	or da	13101
a							
b							
С			1				
				200			
	Tatala						
	Totals						,
						Yes	No
108	Did the organization have a binding written contract in	effect on August 17, 2006.	. covering the in	terest, rents, rov	alties, and		
	annuities described in question 107 above?						
	Under penalties of perjury, I declare that I have examined this ret true, correct, and complete Declaration of preparer (other than of	urn, including accompanying schedu	iles and statements, a	and to the best of my k	nowledge and l	oelief, it	IS
		0	man proporor rido d	17-	107		
Plea		<i>X</i>		3/25/	/0 (		
Sign	Signature of officer	`		Date			
Here	(100) (200)	Director					
	Type or print name and title			·		DTIM	10
Paid	Preparer's	Date	62/2	Check if self	Preparer's SSN General Instruc	ion W)	(266
Pre-	signature		107/0-1	employed >			
pare							
Use	employed), boul Little River Tri			EIN -		-	
Only	ZIP + 4 Alexandria	VA 22312	-1303	Phone no		4	
BAA					Forn	n <b>990</b>	(2006)

Independent Women's Voice

36-4534086

**Explanation Statement** 

Form 990, Part V-A line 75c Form/Line. Explanation of.

Receipt of Compensation from Other Companies

Independent Women's Voice (IWV) shares employees with Independent Women's Forum (IWF), a 501(c)(3) organization. The entities have an understood affiliation agreement, whereby common employees allocate time spent to each entity. IWV reimburses IWF for their share of any expenses or salaries paid by IWF. There were no salaries allocated to IWV in 2006.

Form **8868** (Rev December 2006)

### Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

	=	th Extension, complete only Part I and check this box utomatic) 3-Month Extension, complete only Part II (on			► <u>x</u>
		eady been granted an automatic 3-month extension on a			868.
		nsion of Time. Only submit original (no copies			
Section 501	(c)(3) corporations required to f	le Form 990-T and requesting an automatic 6-month ext	Ansion che	eck this box	and complete
	porations (including 1120-C file	rs), partnerships, REMICS, and trusts must use Form 70			on of time to file
returns noted electronically composite of	d below (6 months for section 5  of (1) you want the additional ( consolidated Form 990-T. Insti-	electronically file Form 8868 if you want a 3-month auto 01 (c)(3) corporations required to file Form 990-T). Howe not automatic) 3-month extension or (2) you file Forms 9 ad, you must submit the fully completed and signed pagw.irs.gov/efile and click on e-file for Charities & Nonprofile	ver, you can 990-BL, 6069 ge 2 (Part II)	ion of time not file Forn , or 8870, g of Form 88	to file one of the n 8868 froup returns, or a 68. For more detail
	Name of Exempt Organization			Employer idea	ntification number
Type or print					
Calm bar Alex	Independent Women's	Voice		36-4534	086
due date for filing your	Number, street, and room or suite number				
return, See	1726 M Street, NW,			atal-	700 1001
instructions.	emin section	dress, see instructions.		state	ZIP code
	Washington			DC	20036
	•	ate application for each return):			
X Form 990		Form 990-T (corporation) Form 990-T (section 401(a) or 408(a) trust)	Form 472		
Form 990		Form 990-1 (section 401(a) or 408(a) trust) Form 990-T (trust other than above)	Form 522	-	
Form 990		Form 1041-A	Form 887	_	
Telephone If the orga If this is for check this the extension	anization does not have an office or a Group Return, enter the orgon box    in Discourse Discourse of the control of the contr	FAX No. (202) 419-1821 e or place of business in the United States, check this biganization's four digit Group Exemption Number (GEN) the group, check this box. In and attach a list with this for a section 501(c)(3) corporation required to file Fo	ox If the names ar	this is for the nd EINs of a	e whole group, ill members
until At	ug 15 , 20 07 , to file	e the exempt organization return for the organization nareturn for:, 20, and ending, 20	med above.		
2 If this ta	x year is for less than 12 month	is, check reason: Initial return Final return	n Ch	ange in acc	ounting period
nonrefur	dable credits. See instructions	90-PF, 990-T, 4720, or 6069, enter the tentative tax, less		3a\$	0.
b If this ap made, In	plication is for Form 990-PF or clude any prior year overpayment	990-T, enter any refundable credits and estimated tax part allowed as a credit	ayments	3Ь\$	0.
deposit v See instr	vith FTD coupon or, if required, ructions	3a Include your payment with this form, or, if required, by using EFTPS (Electronic Federal Tax Payment Syste		3c \$	0.
payment instru	ections.	ic fund withdrawal with this Form 8868, see Form 8453-E	EO and Form		
DIA C. D.L.	Act and Denonvarie Deduct	on Act Notice see instructions		Form 8	RER (PAY 12-2006)

## Exhibit 7

Form 990-EZ

## **Short Form**

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

Sponsoring organizations of donor advised funds and controlling organizations sponsoring organizations with gross receipts less than \$500,000 and total assets
less than \$1,250,000 at the end of the year may use this form

OMB No 1545-1150

2009

Open to Public

Interr	nal Revenue Service  The organization may have to use a copy of this return to satisfy state repoi	rling requirements		Inspection
A	For the 2009 calendar year, or tax year beginning , 2009, and end			
	Check if applicable C Name of organization		ployer I	dentification number
	Address change Use IRS Independent Women's Voice	3	6-45	34086
	Name change   Number and street (or P O box, if mail is not delivered to street address)   Room			number
	Initial return type 4400 Jenifer Street 240	0 1 7	2021	362-1147
-	Amended return Specific Instruc-			
	Application pending tions. Washington DC 200	D15 F Gr	oup E: imber	xemption
		G Accounting metho	d	Cash X Accrual
	<ul> <li>Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).</li> </ul>	Other (specify) ▶		,
				ganization is not
	Website: www.iwvoice.org	required to attach	Sched	dule B (Form 990,
	Tax-exempt status (check only one) —   X   501(c) ( 4 ) ◄ (insert no )   4947(a)(1) or   527	990-EZ, or 990-P	-	
	Check If the organization is not a section 509(a)(3) supporting organization and its gri	oss receipts are norm	ally no	ot more than
	\$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses		e to fil	e a complete return
L /	Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Forn instead of Form 990-EZ	n <b>99</b> 0	P ¢	236,770.
Pa		es (See the instri	iction	
٣	Contributions, gifts, grants, and similar amounts received	es (occ the math	1	236,770.
- 1	Program service revenue including government fees and contracts		2	230,110.
	3 Membership dues and assessments		3	
	4 Investment income		4	130"
	5a Gross amount from sale of assets other than inventory 5a			
	b Less cost or other basis and sales expenses 5b			
R	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
REVEZ DE	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check	c-here		
Ň	a Gross revenue (not including \$ of contributions		- 1	
Ę	reported on line 1) 6a			
	b Less direct expenses other than fundraising expenses 6b			THE RES
- 1	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)		6c	12
- 1	7a Gross sales of inventory, less returns and allowances 7a			
- 1	b Less cost of goods sold 7b			
- 1	c Gross profit or (loss) from sales of receiver (5) btractline 7b from line 7a)		7 c	
	8 Other revenue (describe	)	8	
_	9 Total revenue. Add I നുട്ടെ 1, ഒട്ടു 4.5c.,6c, 7c, and 60		9	236,770.
	10 Grants and similar amounts paid (attach schedule)	The state of the s	10	
= <sub>6</sub>	11 Benefits paid to or for members.	,	11	
집	12 Salaries, other compensation and project pendits  13 Professional fees and other payments in the pending contractors		12	68,206.
É	13 Professional fees and other payments-to-independent contractors		13	119,715.
Š	14 Occupancy, rent, utilities, and maintenance		14	
Š	15 Printing, publications, postage, and shipping		15	5,431.
	16 Other expenses (describe ► See Other Expenses Statement	)	16	55,471.
$\dashv$	17 Total expenses. Add lines 10 through 16	-	17	248,823.
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-12,053.
N S	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree	ee with end-of-vear		
N S E E	figure reported on prior year's return)	2. <b>,</b> .	19	-76,495.
Š	20 Other changes in net assets or fund balances (attach explanation)		20	
_	21 Net assets or fund balances at end of year Combine lines 18 through 20	<b>•</b>	21	-88,548.
Pa	rt II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more	A CONTRACTOR OF THE PROPERTY OF THE PARTY OF		orm 990-EZ
	(See the instructions for Part II )	(A) Beginning of ye		(B) End of year
22	, , ,	4,009	$\overline{}$	97,735.
23		0		0.
24		6,850		10,569.
25	1	10,859		108,304.
26		87,354		196,852.
21	Net assets or fund balances (line 27 of column (B) must agree with line 21)	-76,495	. 127	-88,548.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2009)

TEEA0812 01/30/10

Form 990-EZ (2009) Independent Wor	nen's Voice			-453	4086 Page 2
Partillin Statement of Program Se	rvice Accomplishments	(See the instruction	ns,)		Expenses
What is the organization's primary exempt purpose? Pro	omote limited government, fre	ee markets and personal	responsibility	5016	ured for section )(3) and (4) izations and section (a)(1) trusts, optional
Describe what was achieved in carrying out the describe the services provided, the number of	e organization's exempt purpor	ses in a clear and cond	ise manner,	organ	izations and section
describe the services provided, the number of	persons benefited, or other rel	levant information for ea	ach	for of	hers )
program title				100	10107
28 Domestic policy and econ	<u>omica</u>			1 1	
					2.30
(Grants \$ 0.) If the	nis amount includes foreign gra	ants, check here		28 a	207,221.
29 Communications/Earned Me	dia	1 520 6		34	
				29a	27,332.
	nis amount includes foreign gra	ants, check here		25a	2110021
30				£ (	
					57 0
(Grants \$ ) If t	his amount includes foreign gra	ants, check here		30 a	
31 Other program services (attach schedule	e)		14 . 1		
	his amount includes foreign gra	ants, check here	P.	31 a	No.
32 Total program service expenses (add I		III C I.t		32	234,553.
Partily List of Officers, Directors	. Trustees, and Kev Em	ployees. List each or	e even if not con	npensa	ted (See the instrs)
production List of Officers, Bricotors	(b) Title and average hours	(c) Compensation (If	(d) Contribution	s to	(e) Expense account
(a) Name and address	per week devoted	not paid, enter -0)	employee benefit pl	ans and	and other allowances
and the second	to position		deferred compens	sation	
Michelle Bernard			40 6		
4400 Jenifer St, NW	Pres, CEO & Director				
Washingon DC 20015	15.00	30,000.	N - V - V	0.	
Heather Higgins					
4400 Jenifer St, NW	Director/Consultant	I		٥.	
Washington DC 20015	12.00	94,375.		0.	
Carol Crawford					
4400 Jenifer St, NW	Director				
Washington DC 20015	3.00	0.	No. W	0.	
Ron Crawford					
4400 Jenifer St, NW	Director				
Washington DC 20015	3.00	0.		0.	
	13.00		to the second se	1101.	
Regina Truslow					
4400 Jenifer St, NW	Secretary/Treas	1.20		•	
Washington DC 20015	15.00	1,787.		0.	L
Midge Decter	_				
4400 Jenifer St, NW	Director				
Washington DC 20015	3.00	0.	F	0.	
M. M. Marie					
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		<u></u>			Form 990-EZ (200
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orm	990-EZ (2009) Independent Women's Voice 3	6-4534086		Pa	ge 3
Par	V Other Information (Note the statement requirements in the instrs for Part V.)				
			- '	Yes	No
3	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed descri				
	each activity	-	3	-	X
4	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the c	nanges 3	14	+	X
5	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on attach a statement explaining why the organization did not report the income on Form 990-T	Form 990-T,			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 603	3(e) notice.			
-	reporting, and proxy tax requirements?	3	35 a	_	X
Ь	If 'Yes,' has it filed a tax return on Form 990-T for this year?	_3	35 b	_	_
6	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets duri year? If 'Yes,' complete applicable parts of Schedule N	ng the	36		X
7 a	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a	0.			
b	Did the organization file Form 1120-POL for this year?	_3	37 b		X
8 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	,	38 a		x
Ь	If 'Yes,' complete Schedule L, Part II and enter the total				
_	amount involved 38b				
9	Section 501(c)(7) organizations Enter				
	Initiation fees and capital contributions included on line 9		1		
	Gross receipts, included on line 9, for public use of club facilities 39b		- 1		
) a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under				
	section 4911 ►, section 4912 ►, section 4955 ►	<u> </u>			_
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 'Yes,' complete Schedule L, Part I	erson in a -EZ? If	40 Б		X
	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958				
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization			778.2	-
е	All organizations: At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T		40 e		X
11	List the states with which a copy of this return is filed >		×	či.	_
42 a		0 ► <u>(202)</u> 4 ► <u>20015</u>	<u>419-</u>	182	0_
_	At any time during the calendar year, did the organization have an interest in or a signature or other authority	over a	F	Yes	N
	financial account in a foreign country (such as a bank account, securities account, or other financial account)	) Vei a	42b		3
	If 'Yes,' enter the name of the foreign country	4 72 1			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts	4 1 1 1 1	H.		
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		42c		2
	If 'Yes,' enter the name of the foreign country	_	-		
		A a			
3	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here	No.		- 🗐	
	and enter the amount of tax-exempt interest received or accrued during the tax year	► 43 I		-5	
		-	-	Yes	٨
4	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead	1			
•	of Form 990-EZ	-	44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If	'Yes,'			
	Form 990 must be completed instead of Form 990-EZ		45 n 990		X
AA	TEA0812 01/30/10	C	- 000		~~

Patil VII		Voice		36-45340			age 4
	Section 501(c)(3) organizations 501(c)(3) organizations and sec 46-49b and complete the tables	tion 4947(a)(1) nor	nexempt charitable	charitable trusts only e trusts must answer	duestion	ition is	
46 D1 15	ne organization engage in direct or indirect	political comparan octi	ution on hebalf of or in	opposition to candidates		Yes	No
46 Did the	blic office? If 'Yes,' complete Schedule C,	Part I	rities on benan or or ii	opposition to candidates	46		
47 Did th	ne organization engage in lobbying activitie	s? If 'Yes,' complete So	hedule C, Part II		47		
48 Is the	organization a school as described in sec	tion 170(b)(1)(A)(ii)? If	'Yes,' complete Sched	lule E	48		71.
49 a Did th	ne organization make any transfers to an e	xempt non-charitable re	elated organization?		49 a		
b if 'Ye	s,' was the related organization a section 5	27 organization?			49 b		
50 Comp	plete this table for the organization's five his oyees) who each received more than \$100	ghest compensated em ,000 of compensation fr	ployees (other than of om the organization	ficers, directors, trustees at f there is none, enter 'None	nd key		
	Name and address of each employee pard more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account other allo	I and	
					No		
		ж.					
					Bio El		
				5,03			
f Total	number of other employees paid over \$10	0.000 ►					
comp	censation from the organization of there is (a) Name and address of each independent contra			(b) Type of service	(c) Comp	ensatio	n
d Tota	I number of other independent contractors	each receiving over \$10	00,000				
d Tota	I number of other independent contractors  Under penalties of perjury, I declare that I have examitrue, correct, and complete Declaration of preparer (contractors)			tements, and to the best of my know	vledge and be	elief, it i	S
<u>,</u>	The second of the National Contract of the Nat			1	vledge and be	elief, it i	S
Sign	The second of the National Contract of the Nat			Date	vledge and be	shef, d d	s
Sign	Under penalties of perjury, I declare that I have examine, correct, and complete Declaration of preparer (			Date President			X-14-
Sign Here Paid	Under penalties of perjury, I declare that I have examine, correct, and complete Declaration of preparer (constitution).  Signature of officer  Heather Higgins			Date President	viedge and be		X-14-
Sign Here Paid Pre-	Under penalties of perjury, I declare that I have examine, correct, and complete Declaration of preparer (state of the control	ined this return, including according to the other than officer) is based on	mpanying schedules and state and sta	Date President  Check if Self- Self- Self-			X-14-
Sign Here Paid Pre- parer's Use	Under penalties of perjury, I declare that I have examine, correct, and complete Declaration of preparer (state of the complete Declaration of preparer (state of the complete Declaration of preparer (state of the complete	ined this return, including according to the other than officer) is based on Associates, P	mpanying schedules and state and sta	Date  President  Check if self-employed   Free (Self-EIN)	parer s Identi e instructions	lying No	umber
Sign Here Paid Pre- parer's Use Only	Under penalties of perjury, I declare that I have examined true, correct, and complete Declaration of preparer (construction)  Signature of officer  Heather Higgins Type or print name and title  Preparer's signature  Firm's name (or pouglas Corey & yours if self-	Associates, Per Trnpk, Suit	Date C VA 22312	Date  President  Check if self-employed President	parer s Identi e instructions	lying Nu	umber

'Form 990-EZ Part II

### **Other Assets and Liabilities**

2009

Name as Shown on Return

Independent Women's Voice

Employer Identification No 36-4534086

Line 24 - Other Assets:	Beginning of Year	End of Year
Pledge receivable		5,000
Intangible assets, net of depreciaion	6,850.	5,569
Totals to Form 990-EZ, Part II, line 24	6,850.	10,569
Line 26 - Total Liabilities:	Beginning of Year	End of Year
Accounts payable		13,792
Contribution refund payable		18,555
Due to affiliate	87,354.	164,505
Totals to Form 990-EZ, Part II, line 26	87,354.	196,852

TEEW1801 SCR 02/11/10

Independent Women's Voice 36-4534086		
Form 990; EZ, Part I, Line 16 Other Expenses Statement		
Other expenses (describe)		
Depreciation	2,531.	
Issue advertising/paid media	7,193.	
Prizes awarded	5,000.	
Payroll taxes	3,381.	
Business registration	973.	
Cable/telephone	318.	
Communications	195.	
Bank charges	156.	
Overhead allocated from affiliate	35,724.	
Total	55,471.	

# **Exhibit 8**

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493316009011

Form **990** 

## **Return of Organization Exempt From Income Tax**

2010

, 01,111		Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue	Code (except	black lur	ıg	2010
Internal Re	nt of the Treasury evenue Service	benefit trust or private foundation)  The organization may have to use a copy of this return to satisfy st		requirem	ents	Open to Public Inspection
A For	the 2010 ca	lendar year, or tax year beginning 01-01-2010 and ending 12-31-2010		D Front		1-16-10
_	k if applicable	C Name of organization INDEPENDENT WOMEN'S VOICE		====		dentification number
Addre	ess change	Doing Business As		36-4	5340	086
Name	e change	bong dances no		E Telepi	hone	number
Initia Tem	l return	Number and street (or P O box if mail is not delivered to street address) 1875 I STREET NW	Room/suite	(202	) 857	-3293
_	nded return	City or town, state or country, and ZIP + 4 WASHINGTON, DC 20006		<b>G</b> Gross	receip	ts \$ 2,436,560
Apple	cation pending	WASHINGTON, DC 20006				
		F Name and address of principal officer	H(a) Is this a	group return	for affili	ates? Yes Vo
		HEATHER HIGGINS 1875 I STREET NW				
		WASHINGTON, DC 20006	H(b) Are all a			
						(see instructions)
Tax-	exempt status	501(c)(3) ▼ 501(c) (4) ◀ (insert no )	H(c) Group	exempt	ion ni	umber 🟲
Wel	bsite:   www	v iwvoice org				
Form	of agazanation	✓ Corporation Trust Association Other ►	L Year of form	30	02 1	M. Circle of Control of Control
Par		mary	L Year or form	nation 20	03	M State of legal domicile D
7 01						
	17962075555555555555555	escribe the organization's mission or most significant activities				
. [	Promote	limited government, free markets and personal responsibility			_	
					_	
					_	
	2 Check th	nis box 🔭 if the organization discontinued its operations or disposed o	f more than 25	% of its	net a	issets
		of voting members of the governing body (Part VI, line 1a)		1	3	
:		of independent voting members of the governing body (Part VI, line 1b)		-	4	
		mber of individuals employed in calendar year 2010 (Part V, line 2a)			5	
			1.0)		_	
		mber of volunteers (estimate if necessary)			6	
		related business revenue from Part VIII, column (C), line 12			7a	
-	P Net unre	lated business taxable income from Form 990-T, line 34			7b	
			Prior	Year	_	Current Year
a.	8 Contri	butions and grants (Part VIII, line 1h)		236,7	770	2,436,560
Havenue	9 Progra	m service revenue (Part VIII, line 2g)				(
ž  :	10 Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)				(
*  :	11 Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				
:		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		236,7	770	2,436,560
		and similar amounts paid (Part IX, column (A), lines 1-3)		-		
- 1			***************************************		$\dashv$	
			_		-	
\$	10)	sa, other compensation, employee benefits (Fait IX, Column (A), thes 5		68,2	206	81,864
£ :	16a Profes	sional fundraising fees (Part IX, column (A), line 11e)				3,523
Ž	<b>b</b> Total fu	ndraising expenses (Part IX, column (D), line 25) \$\rightarrow 72,424				
		33 T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		180.6	517	1,901,550
- 1			-		-	1,986,937
- 10					$\rightarrow$	449,623
_			Beginning		$\rightarrow$	
ğ	- 12	* *		аг		End of Year
猫!	20 Total a	assets (Part X, line 16)		108,3	304	378,279
[ 말	21 Total i	nabilities (Part X, line 26)		196,	352	15,624
22   1	22 Net as	sets or fund balances Subtract line 21 from line 20		-88,	548	362,655
Part	Sign	ature Block				
of Assets or Expenses and Balances	15 Salarie 10) 16a Profes b Total fu 17 Other 18 Total e 19 Reven	ndraising expenses (Part IX, column (D), line 25) \$\int 72,424 expenses (Part IX, column (A), lines 11a-11d, 11f-24f) expenses Add lines 13-17 (must equal Part IX, column (A), line 25) ue less expenses Subtract line 18 from line 12 essets (Part X, line 16)	Beginning	180,6 248,6 -12,6 of Currel 208,6 196,6	517 323 053 nt 304 852	1,90 1,98 44 End of Year 37
ेष्ट्र ।	21 Total i	iabilities (Part X, line 26)		196,8	852	15,62
				-88,	548	362,659
		ature Block erjury, I declare that I have examined this return, including accompanying sc	Seeded		40.0	
	dge and belie	f, it is true, correct, and complete. Declaration of preparer (other than officer	r) is based on a	ll informa		
ign		ture of officer	Dat	1-05-06 e		
ign lere	10 1					
		HER HIGGINS PRESIDENT or print name and title			-	
-		Proparate emosture				
	Print/Type preparer's	name ROBERT J MORROW ROBERT J MORROW		heck if sel		PTIN
aid		CPA CPA  me ▶ MORROW PC		pwycu I	14	
Prepar	rer					Firm's EIN
Jse Qı	nly   Firm's add	fress ▶ 8665 SUDLEY RD 230				Phone no 🕨 (571) 331-
	-	MANASSAS, VA 201104588				0348
May th	e IRS discus	MANASSAS, VA 201104588 ss this return with the preparer shown above? (see instructions)	3.00 J.00 J.00 J.00			TYes TNo

Part	1111	Statement of Check of Sched	of Program Servi ule O contains a resp	ce Accomplishments onse to any question in the	s Part III		» ж «Г
1	Briefl	y describe the o	rganızatıon's mıssıon				
ee A	ttache	ed Note					
	the pr	rior Form 990 or	990-EZ?	ant program services durin	ig the year whi	ch were not listed on	Yes ✓ No
			se new services on So	nake significant changes ii	n how it conduc	rts any nrogram	
3	servi	ces?			· · · ·		Yes 🗸 No
		•	se changes on Sched				
4	Secti	on 501(c)(3) an	d 501(c)(4) organizat	s for each of the organizations and section 4947(a)( nd revenue, if any, for each	1) trusts are re	est program services by ex equired to report the amour ice reported	penses It of grants and
4a	(Cod	e	) (Expenses \$	1,833,000 including gra	ints of \$	) (Revenue \$	2,436,560 )
	•	ATTACHED NOTE					
4b	(Cod	e	) (Expenses \$	including gra	nts of \$	) (Revenue \$	)
4c	(Coc	de	) (Expenses \$	ıncludıng gra	nts of \$	) (Revenue \$	)
- Si							
10							
4d		ner program serv penses \$	ices (Describe in Scl	nedule O ) luding grants of \$		) (Revenue \$	)
		al program servi		1,833,000			

Pai	t IV Checklist of Required Schedules			1 age
			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part 122	3	Yes	
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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
Ь	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	1.2b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
Ь	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20ь		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1° If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νo
23	Did the organization answer "Yes" to Part VII, Section A, questions 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		No
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-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	n opened	No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes			
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		
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197  Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Form	990 (2010)			Page <b>5</b>
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V		, F	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		
	1b   C	4 1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1		
	Statements filed for the calendar year ending with or within the year covered by this			
	return	4		
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		NO
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a	Yes	
	organization solicit any contributions that were not tax deductible?			
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь	Yes	
7	Organizations that may receive deductible contributions under section 170(c).	65	162	-
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	12	No
_	services provided to the payor?			
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		No
a	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	1		
	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a required?	s 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C7	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
11				
a	Gross income from members or shareholders	4		
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
		1		
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			
13	year	1		
	Is the organization licensed to issue qualified health plans in more than one state?			-
-	Note. See the instructions for additional information the organization must report on Schedule O	13a		
Ь	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	-		
c	Enter the amount of reserves on hand			
142	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule 0 🕝

14b

PETER LIPS

(540) 888-4752

1875 I STREET NW WASHINGTON, DC 20006

FORM 990 (	2010)
Part VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for
	a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule
	O. See instructions.
	Classification of the control of the control of the part VI

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
ь	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)	27/	Yes	No
102	Does the organization have local chapters, branches, or affiliates?	10a		Νο
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	11	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	, ,	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶AL , AR , AZ , AK , CA , CO , CT , FL , G MD , ME , MA , MN , MO , MS , ND , NH OK , OR , PA , RI , SC , TN , UT , VA , V	, NJ , I	NY,NC	5 , KY , , O H ,
18	1000 T (501/c)			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			

State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨

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Page 7

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

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

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

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

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

(A) Name and Title	(B) A verage hours		tion that a			11		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) HEATHER R HIGGINS President & CEO		х		x				0	0	
(2) MIDGE DECTER Director		х						- 0	0	E
					-					
3				-	-					
			-							
-			$\vdash$	-	+					
									V	¥
					_		_	T T		

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

	(A) Name and Title	(B) Average hours per		(tion that a			,		(D) Reportable compensation from the	(E) Reportable compensation from related	amou		ted other ation
		week (describe hours for related organizations in Schedule O)	Individual trustes or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	fr organ r	om tl	ne on and d
				┢		H	-	-			+	-	
_	la train a train a						-						
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	V 80							LD.	· ·				
				-	<u> </u>	ļ.,						-	
,				-	_	-		-			-		
	0			-				-			12		
1b	Sub-Total	<del></del>	<u>.                                    </u>	<u>.                                    </u>	<u>ب</u>	H	٠.	<u> </u>					-
С	Total from continuation shee				_	_							
d	Total (add lines 1b and 1c) .							•					
2	Total number of individuals (ir \$100,000 in reportable comp					ted	above	) wh	o received more tha	in	**************************************	es	No
3	Did the organization list any <b>f</b> on line 1a? <i>If "Yes," complete</i> :								or highest compens	ated employee	3	es	No
4	For any individual listed on lin organization and related organ individual										4		No
5	Did any person listed on line 3 services rendered to the orga								-	or individual for	5		Νo
S	ection B. Independent Co												
1	Complete this table for your fi \$100,000 of compensation fr			ınde	end	ent	contra	ctor	s that received mor	e than			
		(A) Name and business ad	Idress						Desc	(B) ription of services	Co	(C) mpen	sation
_	× **	V-4	1150			_		-				2000 Y	
			****				-						

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

	Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1a b	Federated campaigns 1b					
d	Fundraising events 1c  Related organizations 1d  Government grants (contributions)					
f g	All other contributions, gifts, grants, and similar amounts not included above  Noncash contributions included in lines 1a-1f \$	2,436,560				
h	Total. Add lines 1a-1f	. •	2,436,560			
2a		Business Code				
Ь						
c						
l a						
•						
f	All other program service revenue					
g	Total. Add lines 2a-2f					
3	Investment income (including dividends, inte					<b></b>
1.0	and other similar amounts)	▶				
4	Income from investment of tax-exempt bond proceeds					
5	Royalties					
"		(u) Barranal				$\vdash$
	(i) Real	(II) Personal				
6a	Gross Rents					1 1
Ь	L'ess rental expenses					
'c	Rental income					-
d	or (loss)  Net rental income or (loss)	•				1
۳						
7a	Gross amount from sales of assets other than inventory	(ii) Other				
Ь	Less cost or other basis and sales expenses					
c	Gain or (loss)	Mark Control				1 1
d	Net gain or (loss)	>	Decision 1			
8a	Gross income from fundraising events (not including					
	\$					
	a Less direct expenses b					V
	Net income or (loss) from fundraising events					
_	Gross income from gaming activities See Part IV, line 19 . a					
ь	Less direct expenses					
c	b  Net income or (loss) from gaming activities					
_	Gross sales of inventory, less	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	returns and allowances					
Ь	Less cost of goods sold b					
	Net income or (loss) from sales of inventory					
	Miscellaneous Revenue	Business Code				
c	LITA CELIGITE ON S VCAGILIE	Pasilless Code				Y
11a	<del></del>					
	<del></del>					110
11a	<del></del>					

2.436.560

12 Total revenue. See Instructions . . .

Part IX Statement of Functional Expenses

All other organizations must complete column (A) but are not required to o	ompiere column	(B)	(b).	(D)
Do not include amounts reported on lines 6b; 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	-			
Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members	5 1 3 167 1			4
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	19.8	8 -		
7 Other salaries and wages	76,402	60,257	8,577	7,568
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	5,462	4,332	556	574
a Fees for services (non-employees) Management	92,000	92,000	-0	0
<b>b</b> Legal	29,577	6,902	22,675	0
c Accounting	23,637	0	23,637	¥ C
d Lobbying			1. 1.	14.1
e Professional fundraising services See Part IV, line 17	3,523			3,523
f Investment management fees		14 1 11 11 11		
g Other	111,750	111,747	-260	263
12 Advertising and promotion	1,119,597	1,119,572	25	
13 Office expenses	5,107	425	4,682	
14 Information technology				
15 Royalties			F 52 - 9	
16 Occupancy	2,216	805	1,411	(
17 Travel	22,075	18,161	2,306	1,608
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				520 4 8
20 Interest				
21 Payments to affiliates	30,879	1,293	29,586	
22 Depreciation, depletion, and amortization	9,486		9,486	
23 Insurance				
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a Postage and Printing	28,121	. 335	585	27,201
b Business Licenses	4,108	3 (	108	4,000
c Communications	183,209	179,303	693	3,21
d Dues and Subscriptions	9,413	9,346	67	
e Donations	123,000	123,000	0	
f All other expenses	107,375	105,522	-22,621	24,47
25 Total functional expenses. Add lines 1 through 24f	1,986,937	1,833,000	81,513	72,42
26 Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the				
organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				orm <b>990</b> (2010

4		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	97,735	1	331,759
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net	5,000	3	
4	Accounts receivable, net		4	12,602
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of			
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers, and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions)			
	Schedule L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	9,062
10a	Land, buildings, and equipment cost or other basis Complete Part  VI of Schedule D			7.00
ь	Less accumulated depreciation [10b] 1,0	96	10c	7,522
11	Investments—publicly traded securities		11	
12	Investments—other securities See Part IV, line 11		12	
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	5,569	15	17,334
16	Total assets. Add lines 1 through 15 (must equal line 34)	108,304	16	378,279
17	Accounts payable and accrued expenses .	196,852	1.7	15,624
18	Grants payable		18	1 31
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		1	
	persons Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	196,852	26	15,624
	Organizations that follow SFAS 117, check here ► 🔽 and complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	-112,772	27	362,655
28	Temporarily restricted net assets	24,224	28	44-1
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds	(+	32	
33	Total net assets or fund balances	-88,548	33	362,655
34	Total liabilities and net assets/fund balances	108,304		378,279

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI		· • Γ	
1	Total revenue (must equal Part VIII, column (A), line 12)		2,4	136,560
2	Total expenses (must equal Part IX, column (A), line 25)		1,9	986,937
3	Revenue less expenses Subtract line 2 from line 1			149,623
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			-88,548
5	Other changes in net assets or fund balances (explain in Schedule O)			1,580
::6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))			362,655
Par	The triang of the triangle of tr	mg	г	
1	Accounting method used to prepare the Form 990		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
ь	Were the organization's financial statements audited by an independent accountant?	. 2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separated basis	1		
3a		3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<b>3b</b>		

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DLN: 93493316009011 OMB No 1545-0047

SCHEDULE C

## Political Campaign and Lobbying Activities

(Form 990 or 990-EZ)	For Organizat	ions Exempt From Income T  Complete if the organiz			2010
Department of the Treasury Internal Revenue Service	▶.	Attach to Form 990 or Form 990			Open to Public Inspection
then Section 501(c)(3) org Section 501(c) (other Section 527 organization and Section 501(c)(3) org Section 501(c)(3) org If the organization and	anizations Completed than section 501(attentions Complete Painswered "Yes," anizations that have anizations that have severed "Yes,"	to Form 990, Part IV, Line 4, o ve filed Form 5768 (election unde ve NOT filed Form 5768 (election to Form 990, Part IV, Line 5 (F	ete Part FC arts FA and C belo r Form 990-EZ, F r section 501(h)) under section 501	w Do not complete Part I-B  Part VI, line 47 (Lobbying A  Complete Part II-A Do not cor  I(h)) Complete Part II-B Do n	mpaign Activities),  Activities), then  mplete Part II-B ot complete Part II-A
Section 501(c)(4), (5) Name of the organiza	**	ons Complete Part III		Employer iden	tification number
INDEPENDENT WOMEN'S					the delon flattibet
Part I-A Comple	te if the organ	nization is exempt under	section 501(	36-4534086 c) or is a section 527	organization.
	ption of the organi	zation's direct and indirect polit			\$ 772,435 0
Part I-B Comple	te if the organ	nization is exempt under	section 501(	c)(3).	
		c incurred by the organization ui			\$
2 Enter the amount	t of any excise tax	cincurred by organization mana	gers under sectio	n 4955 <b>&gt;</b>	\$
3 If the organization	in incurred a secti	on 4955 tax, did it file Form 47	20 for this year?		☐ Yes ☐ No
4a Was a correction	made?				┌ Yes ┌ No
b If "Yes," describ	e in Part IV				
Part I-C Comple	te if the organ	nization is exempt under	section 501(	c) except section 501	.(c)(3).
2 Enter the amount exempt funtion a	t of the filing organ	d by the filing organization for s	ther organization	s for section 527	\$
		s Add lines 1 and 2 Enterhere	and on Form 112	20-POL, line 176	\$
5 Enter the names, organization mad amount of politic	, addresses and e le payments For e al contributions re	n 1120-POL for this year?  mployer identification number (leach organization listed, enter taceived that were promptly and tical action committee (PAC). I	he amount paid fro directly delivered	om the filing organization's f to a separate political orga	unds Also enter the nization, such as a
(a) Name		(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
- 10			1		
( 1				**************************************	
2					
		V			
				TI.	

Schedule C (Form 990 or 990-EZ) 2010

f Grassroots lobbying expenditures

Par	t II-A Complete if the organization under section 501(h)).	is exempt under s	ection 501(c)	(3) and file	d Form 5768	(election
A C	heck I if the filing organization belongs to a	an affiliated group				
	heck if the filing organization checked bo	x A and "limited control"	provisions apply	··		r
	Limits on Lobbying E (The term "expenditures" means a	expenditures mounts paid or incurred.			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobb	ying)			
Ь	Total lobbying expenditures to influence a legist	ative body (direct lobby	ng)	4		
	Total lobbying expenditures (add lines 1a and 1					
	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount columns		n both			is
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on line				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		1
	Over \$17,000,000	\$1,000,000				1
	If there is an amount other than zero on either lisection 4911 tax for this year?  4-Year A  (Some organizations that made a columns below. See the second s	veraging Period U	nder Section :	501(h) have to con	iplete all of t	⊢Yes ┌Ne
		enditures During			ugc 41)	
_	Lobbying Exp	enditures During .	- Teal Avela	ging Ferrou	I	
	Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
_c	Total lobbying expenditures					
d	Grassroots non-taxable amount				1	
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Pt I-A Line 1

	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).				
		(a	a)	(b)	
		Yes	No	A mou	ınt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			702	
a	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	_			
c	Mailings to members, legislators, or the public?	_			
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?  Other activities? If "Yes," describe in Part IV	_			_
i	Total lines 1c through 1:				-
j		1	-	-	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  If "Yes," enter the amount of any tax incurred under section 4912	_			
Ь			-	_	_
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912  If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1	-		-
d Dat	t III-A Complete if the organization is exempt under section 501(c)(4), section 5	01(c	1(5) 01	section	nn.
	501(c)(6).	,01(0	,(3), 0.	3000	JII
			94	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		:	L Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 Yes	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	No
	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II answered "Yes".	II-À,			on
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
a	Current year	2a			
b	Carryover from last year	2b			_
c	Total	2c		_	_
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			_
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
Pa	art IV Supplemental Information				
	mplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and o, complete this part for any additional information	l Part I	l-B, line	1/1	
	Identifier Return Reference Explanat	ion			

See attached statement

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SCHEDULE D (Form 990)

Supplemental Financial Statements

DLN: 93493316009011

OMB No 1545-0047

		Ouppien	Torred I marrola otatomo.		201	U
	nent of the Treasury Revenue Service	Pai	he organization answered "Yes," to Forn rt IV, line 6, 7, 8, 9, 10, 11, or 12. o Form 990. ▶ See separate instructions		Open to Po Inspecti	
Nar	ne of the organiz	zation		Employe	r identification number	1
IND	EPENDENT WOMEN'S	VOICE		36-453	4006	
Da	t I Organi	zations Maintaining Donor	Advised Funds or Other Simila			e if the
ra	organiz	ation answered "Yes" to Form	990, Part IV, line 6.			
			(a) Donor advised funds	(b) F	unds and other accoun	ts
1	Total number at	end of year				
2	Aggregate cont	ributions to (during year)	P.			100
3	Aggregate gran	ts from (during year)		3	A	
4	Aggregate value	e at end of year				
5	Did the organiz funds are the o	ation inform all donors and donor a rganization's property, subject to t	advisors in writing that the assets held i the organization's exclusive legal contro	n donor advised ol?	├ Yes	┌ No
6	used only for cl	naritable purposes and not for the rmissible private benefit	and donor advisors in writing that grant benefit of the donor or donor advisor, or	for any other pu	, res	Г No
Par	t III Conse	vation Easements. Comple	ete if the organization answered "Y	es" to Form 99	90, Part IV, line 7.	
2	Protection Preservati Complete lines	on of land for public use (e g , recr of natural habitat on of open space 2a-2d if the organization held a q ie last day of the tax year		of a certified his	ly importantly land area storic structure ervation	
	easement on tr	le last day of the tax year			Held at the End of the	Year
	Total number o	f conservation easements		2a		
b		restricted by conservation easeme	ents	2b		-
c	_		d historic structure included in (a)	2c		
d		servation easements included in (		2d		
3			nsferred, released, extinguished, or term	ninated by the o	rganization during	
3	the taxable yea		male red, released, extinguished, or term	initiated by the c	, , ,	
4	Number of stat	es where property subject to cons	ervation easement is located 🕨			
5		nization have a written policy regai The conservation easements it ho	rding the periodic monitoring, inspection olds?	n, handling of vio	lations, and Yes	∏ No
6			inspecting and enforcing conservation (			
7	A mount of exp	enses incurred in monitoring, insp	ecting, and enforcing conservation ease	ments during th	e year ►\$	
8	170(h)(4)(B)(ı	) and 170(h)(4)(B)(II)?	ine 2(d) above satisfy the requirements		☐ Yes	Г No
9	balance sheet, the organization	and include, if applicable, the tex on's accounting for conservation e		ancial statemen	its that describes	
Pa	Organ	izations Maintaining Collects of the organization	ctions of Art, Historical Treasured "Yes" to Form 990, Part IV, line	res, or Othe	r Similar Assets.	
1a	If the organiza	tion elected, as permitted under S treasures, or other similar assets	FAS 116, not to report in its revenue st held for public exhibition, education or r ts financial statements that describes the	atement and bal	lance sheet works of erance of public service	),
Ь	historical trea:	tion elected, as permitted under S sures, or other similar assets held lowing amounts relating to these i	FAS 116, to report in its revenue states I for public exhibition, education, or rese tems	ment and balanc earch in furtherai	nce of public service,	
	(i) Revenues i	ncluded in Form 990, Part VIII, li	ine 1		<b>▶</b> \$	
	(ii) Assets Inc	luded in Form 990, Part X			<b>&gt;</b> \$	
2	If the organiza	tion received or held works of art,	historical treasures, or other similar as SFAS 116 relating to these items	sets for financia	I gain, provide the	
а	D	uded in Form 990 Part VIII line	1		<b>b</b> - ¢	

Sche	edule D (Form 990) 2010										Page 2
Par	t III Organizations Maintaining Co	llections of Ar	t, His	itori	cal T	reasure	s, or C	ther !	Similar A	ssets (	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne fol	lowing	that are a	signific	ant use	of its collec	tion	
a	Public exhibition		ď	$\Gamma$	Loan	orexchan	ge prog	rams			
ь	Scholarly research		e	$\Gamma$	Othe	r					
e c	Preservation for future generations			15	4	871		100			
4	Provide a description of the organization's co	ollections and expla	ain ho	w the	y furth	er the orga	ınızatıor	ı's exer	npt purpose	ın	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					ır	Г Yes	Г№
Pa	Part IV, line 9, or reported an an						nswere	d "Yes	" to Form	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interm	ediary	for c	ontribi	utions or o	therass	ets not		☐ Yes	□ No
b	If "Yes," explain the arrangement in Part XIV	V and complete the	follov	ving t	able						
									A	mount	
C	Beginning balance							1c			
d	Additions during the year						ļ	1d			
e	Distributions during the year							1e			
f	Ending balance						- [	1f	_		
2a	Did the organization include an amount on Fe	orm 990, Part X, lir	ne 21?	•						┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/									
Pa	rt V Endowment Funds. Complete										
1a	Paginning of year balance	(a)Current Year	(b	)Ргюг	Year	(c)Two Ye	ears Back	(d)Thr	ee Years Back	(e)Four	Years Back
b	Beginning of year balance						_	-			
c	Investment earnings or losses			-				-		-	-
d	Grants or scholarships							+			
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as								
а	Board designated or quasi-endowment										
ь	Permanent endowment										
c	Term endowment >										
3a	Are there endowment funds not in the posse organization by	ssion of the organia	zation	that	are hel	ld and adm	iinistere	d for th	e	Yes	No
	(i) unrelated organizations	<del> </del>							3a	(i)	
	(ii) related organizations								3a	(ii)	9 (1

Describe in Part XIV the intended uses of the organization's endowment funds Part VI Investments-Land, Buildings, and Equipment. See Form 990, Part X, line 10. (a) Cost or other (b)Cost or other (c) Accumulated (d) Book value Description of investment basis (investment) basis (other) depreciation c Leasehold improvements d Equipment . 8,618 1,096 7,522 Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) 7,522

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

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

ge 4
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,937
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DLN: 93493316009011

**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization INDEPENDENT WOMEN'S VOICE

Employer identification number

36-4534086

ldentifier	Return Reference	Explanation
Pt VI-B, Line 11a	14 A 74	A copy of the 990 is circulated to the board and approved before filing

#### MUR718100108

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c	1	See Attached Note

#### MUR718100109

ldentifier	Return Reference	Explanation
Pt VFB, Line 15		See Attached Note

# MUR718100110

ldentifier	Return Reference	Explanation	
Pt VI-C, Line 19		MV makes its documents available by appointment in its offices	

#### MUR718100111

ldentifier	Return Reference	Explanation
Form 990, Part IX, Line 24f		DIRECT MAIL 99739 78335 0 21404 BANK CHARGES 7051 2155 4896 0 MISCELLANEOUS 585 585 0 0 ALLOCATED GENERAL AND ADMINISTRATIVE 0 24447 -27517 3070

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

(b)

Primary activity

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(a)
Name, address, and EIN of disregarded entity

SCHEDULE R (Form 990)

# **Related Organizations and Unrelated Partnerships**

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

► Attach to Form 990. ► See separate instructions.

(c)

Legal domicile (state

(d)

Total income

OMB No 1545-0047

DLN: 93493316009011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
INDEPENDENT WOMEN'S VOICE

Employer identification number

Direct controlling

36-4534086

(e) End-of-year assets

		or foreign country	'_		entity		
<u> </u>							
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	nizations (Complete the tax year.)	of the organization	n answered "Yes"	on Form 990, Par	t IV, line 34 becau	se it had	d one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13 controlled organization	
						Yes	No
(1) INDEPENDENT WOMEN'S FORUM 1875 I STREET NW	REBUILD CIVIL SOCIETY	DC	501(c)(3)	l N/A	NA		No
WASHINGTON, DC 20006 54-1670627			(-)(-)				
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a * = 2							
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					k		
For Privacy Act and Paperwork Reduction Act Notice, see the Instruc	tions for Form 990.	Cat No 5	0135Y		Schedule R (	Form 990	) 2010

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		prtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Genei mana parti	aging 🚽	(k) Percentage ownership
	1					Yes	No	1	Yes	No	
									1	-	<b></b>
	4									9	
	T.										
		-	4-3	/L (-) (-)							

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 country)	(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
						3	
	-						
			- pa			Z.	
-0.							

Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
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?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to other organization(s)	1b		No
c Gift, grant, or capital contribution from other organization(s)	1c		No
d Loans or loan guarantees to or for other organization(s)	1d		No
e Loans or loan guarantees by other organization(s)	1e		No
f Sale of assets to other organization(s)	1f		No
g Purchase of assets from other organization(s)	1g	_	No
h Exchange of assets	1h	_	No
i Lease of facilities, equipment, or other assets to other organization(s)	11		No
			1_
j Lease of facilities, equipment, or other assets from other organization(s)	<u>1j</u>	-	No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	_	No
l Performance of services or membership or fundraising solicitations by other organization(s)	11	-	No
m Sharing of facilities, equipment, mailing lists, or other assets		n Yes	
n Sharing of paid employees	1n	Yes	<u>'                                    </u>
		_	
o Reimbursement paid to other organization for expenses	10	-	_
p Reimbursement paid by other organization for expenses	1p	-	No
q Other transfer of cash or property to other organization(s)	1q		No
r Other transfer of cash or property from other organization(s)	1r		No

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) INDEPENDENT WOMEN'S FORUM	n	81,864	Actual Cost
(2) INDEPENDENT WOMEN'S FORUM	mo	30,879	Actual Cost
(3)			du les
(4)			8
(5)			
(6)			-

# 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)	Are parti sect 501(corganiz	ners Ion	(e) Share of end-of-year assets	Disprop allocar	ortionate cions?	(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man pan	agın tner
182			Yes	No		Yes	No		Yes	N
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Page 5

# Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Ident if ier	Return Reference	Explanation

Schedule R (Form 990) 2010

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DLN: 93493316009011

Form 4562

# **Depreciation and Amortization** (Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasury See separate instructions.
Attach to your tax return. Sequence No 67 Internal Revenue Service (99) Name(s) shown on return Identifying number Business or activity to which this form relates INDEPENDENT WOMEN'S VOICE 36-4534086 Form 990 / Form 990EZ **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount. See the instructions for a higher limit for certain businesses \$ 500,000 2 2 Total cost of section 179 property placed in service (see instructions) . . . 3 Threshold cost of section 179 property before reduction in limitation (see instructions) \$ 2,000,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use 6 (a) Description of property (c) Elected cost 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property, Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election . . . . . . . . 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 1,570 17 MACRS deductions for assets placed in service in tax years beginning before 2010 18 If you are electing to group any assets placed in service during the tax year into one or more . ▶ Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (g)Depreciation (d) Recovery year placed in (e) Convention (f) Method (business/investment property deduction period service only—see instructions) 200 DB 19a 3-year property 18,575 HY 6,192 200 DB b 5-year property c 7 - year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L h Residential rental 27 5 yrs MM S/L property 27 5 yrs MM S/L MM S/L i Nonresidential real 39 yrs property S/L Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L c40-year 40 yrs MM S/L Summary (see instructions) 21 Listed property Enter amount from line 28 . 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 9,486 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

form 4562 (2010)																age 2
enter Note: compl	tainment, For any ete <b>only</b>	y (Include au recreation, o vehicle for w 24a, 24b, coll	r amu <i>hich y</i> umns	isement. 'ou are ι (a) throi	.) using th ugh (c)	e star of Se	ndar ction	d milea <u>d</u> n A, all d	ge ra of Sec	te or ction	dedi B, ar	icting nd Se	lease	expe if ap	sed for ense, oplicab	r ole.
Section A—Depre																
24a Do you have evidenc	e to support (	the business/inves	tment u	ise claimed	? Yes	l No		241	olf "Y	ės," is 1	the ev	idence	written?	l Yes	s T No	•
(a) Type of property (list pehicles first)	(b) Pate placed in service	(c) Business/ investment use percentage		l) rother sıs	Basis for (business use			(f) Recovery period	Me	g) thod/ rention		(h Depreci deduc	ation/		(i) Elected section 1 cost	
25Special depreciation allow 50% in a qualified busine			placed	ın service d	lunng the	tax yea	randı	used more	than	25						
6 Property used more	than 50%		ısıness	use												
		%							_		-			+-		
		%														
7 Property used 50%	or less ın a		ess us	е	16						-					
		%							5/L - 5/L -		-			-		
		%							5/L -					1		
28 Add amounts in col	umn (h), lır	es 25 through	27 En	ter here a	and on lu	ne 21,	page	1 .	28							
29 Add amounts in col	umn (ı), lın	e 26 Enterher	e and o	on line 7,	page 1		•					29				
		Sect	ion B	-Infor	mation											
Complete this section f f you provided vehicles to y	for vehicles	used by a sole	propri	etor, part	tner, or o	ther "	more	than 5%	owne	er," or	relate	d per	son for the	wobic	los	
r you provided vehicles to y	our employee	es, first answer the	questio		a)		b)	ап ехсерік	(c)	Impleti	ng cris			e)		f)
30 Total business/inve year (do not includ			g the	Vehi	•	, ·	icle 2	2 Vel	nicle	3	Vehic	•	Vehi	-		cle 6
31 Total commuting m	ııles drıven	during the year	r .													
32 Total other persona	al(noncomn	nuting) miles di	iven													
33 Total miles driven of through 32	during the y	ear Add lines	30						-			-				
34 Was the vehicle av	aılable for p	ersonal use		Yes	No	Yes	No	Yes	N	lo '	Yes	No	Yes	No	Yes	No
during off-duty hou	rs?		•			_			_	_				<u> </u>		
35 Was the vehicle us owner or related pe	rson?														11	
<b>36</b> Is another vehicle														$\bot$		
Section Answer these question Some owners or related p	s to determ		an ex	yers W ception to	ho Pro comple	vide ting S	Veh ectio	n B for ve	or Us hicle	se by susec	The by e	mploy	nploy ees wh	ees o are	<b>not</b> mo	re tha
37 Do you maintain a vemployees? .				hibits all	persona	luse o	f veh	ıcles, ınc	ludın •	g com	mutin	g, by	your •	Y	es	No
38 Do you maintain a semployees? See th	written poli	cy statement ti	nat pro	hibits per	rsonal us	e of v	ehicle	es, excep	t con	nmutin	ig, by	your				
39 Do you treat all use						•	•				•					
40 Do you provide mo	re than five	vehicles to yo	uremp			ormatı •	on fro	om your e	mplo	yees a	bout.	the us	e of th	e		
41 Do you meet the re				automob	ile demo	nstrat	ion u	se? (See	ınstr	uction	s)					
Note: If your answe	er to 37, 38	3, 39, 40, or 41	ıs "Y€	s," do no	t comple	ete Se	ction	B for the	cove	red ve	hicle	s				
	tization															
(a) Description of co	osts	(b) Date amortization		A mort	c) tizable			(d) Code section	A	(e) mortiz period	ation			(f) ortizati his ye		*
		begins			ount ————			3500011	P	ercen	tage			y e		
42 A mortization of co	sts that be	gıns during you	r 2010	tax year	(see ins	tructi	ons)									
									$\perp$							

43 A mortization of costs that began before your 2010 tax year . . .

44 Total. Add amounts in column (f) See the instructions for where to report

43 44

# **Exhibit 9**

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493319032282

Form 990

# Return of Organization Exempt From Income Tax

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

2011

		benefit trust o	r private foundation)				2011
	nent of the Treas Revenue Servio	The assessment	f this return to satisfy	state report	ing require	ements	Open to Public
		calendar year, or tax year beginning 01-01-2011	and ending 12-31-20	11			Inspection
	eck if applica	C Name of organization			D Emp	oloyer ide	ntification number
☐ Add	iress change	INDEPENDENT WOMEN'S VOICE		_		453408	
┌ Naı	me change	Doing Business As			E Tele	phone nu	mber
[ Init	tial return	Number and street (or P O box if mail is not delivered	to street address) Room/s	suite	-	2)857-3	
┌ Ter	minated	1875 I STREET NW			<b>G</b> Gros	s receipts:	\$ 720,038
┌ Am	ended return	City or town, state or country, and ZIP + 4					
☐ App	plication pend	mg WASHINGTON, DC 20006					
		F Name and address of principal officer		H(a) Is	this a gro	un return	for
		HEATHER HIGGINS 1875 I STREET NW			iliates?	ap rocur	「Yes ▼No
		WASHINGTON, DC 20006		H(b) Ar	a all affiliat	es includ	ed?   Yes   No
				1			(see instructions)
I Ta	x-exempt sta	lus 501(c)(3)  501(c)(4)  (insert no)  4	947(a)(1) or 527	1	roup exem		
) W	ebsite: ►	www.twvoice.org					
K For	n of organiza	con Corporation Trust Association Other		L Year o	f formation	2003 M	State of legal domicile DC
	200000000000000000000000000000000000000	immary				75.75	
. 110-	-	describe the organization's mission or most sign	ificant activities				
_		ote limited government, free markets and personal		1.00			
<u>5</u>	1-22					4	
	-			_			
şe.	2 Chec	this box   if the organization discontinued its	operations or disposed	of more tha	n 25% of	its net as	sets
Š		er of voting members of the governing body (Part )		IC		1 3	2
න් ග	1 '	er of independent voting members of the governing		b)		4	2
IIIe	5 Total	number of individuals employed in calendar year 2	.011 (Part V, line 2a)			5	0
Activities & Governance	6 Total	number of volunteers (estimate if necessary) .				6	0
ď	7a Total	unrelated business revenue from Part VIII, colum	ın (C), line 12			7a	.0
_	b Net u	nrelated business taxable income from Form 990-	T, line 34			7b	
				P	rior Year		Current Year
<b>a.</b>	8 Co	ntributions and grants (Part VIII, line 1h)			2,43	6,560	719,786
3	9 Pro	gram service revenue (Part VIII, line 2g)		1			0
Revenue		estment income (Part VIII, column (A), lines 3, 4					-324
-		er revenue (Part VIII, column (A), lines 5, 6d, 8c					252
		al revenue—add lines 8 through 11 (must equal Pa		ne	2.42		
				T. D. L.	2,43	6,560	719,714
	12 01	nts and similar amounts paid (Part IX, column (A)			2,43	6,560	719,714 0
			, lines 1–3 )		2,43	6,560	
υh	14 Be 15 Sa	nts and similar amounts paid (Part IX, column (A) lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Pai	, lines 1-3) line 4)				0
ses	14 Be 15 Sa 5-	nts and similar amounts paid (Part IX, column (A) lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Pai 10)	i, lines 1–3) line 4) t IX, column (A), lines		8	1,864	0 0 38,631
	14 Be 15 Sa 5- 16a Pro	nts and similar amounts paid (Part IX, column (A) lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Pai 10) fessional fundraising fees (Part IX, column (A), lin	, lines 1–3) line 4) t IX, column (A), lines		8		0
Expenses	14 Be 15 Sa 5- 16a Pro b Tot	nts and similar amounts paid (Part IX, column (A), lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Pail I)) fessional fundraising fees (Part IX, column (A), linul I fundraising expenses (Part IX, column (D), line 25)	, lines 1–3 ) line 4)		8	1,864	0 0 38,631 0
	14 Be 15 Sa 5- 16a Pro b Tot 17 Ot	nts and similar amounts paid (Part IX, column (A), lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Pail O) fessional fundraising fees (Part IX, column (A), lind I fundraising expenses (Part IX, column (D), line 25) 83,59 her expenses (Part IX, column (A), lines 11a-11d	o, lines 1-3) line 4) t IX, column (A), lines se 11e) 0 , 11f-24e)		1,90	1,864 3,523	0 0 38,631 0 945,747
	14 Be 15 Sa 5- 16a Pro b Tot 17 Ot 18 To	nts and similar amounts paid (Part IX, column (A), lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Pail O) fessional fundraising fees (Part IX, column (A), lind I fundraising expenses (Part IX, column (D), line 25) \$\int_{\text{83,59}} \text{ir} expenses (Part IX, column (A), lines 11a-11d all expenses Add lines 13-17 (must equal Part IX).	, lines 1-3)		1,90 1,98	1,864 3,523 1,550 6,937	0 38,631 0 945,747 984,378
Expen	14 Be 15 Sa 5- 16a Pro b Tot 17 Ot 18 To	nts and similar amounts paid (Part IX, column (A), lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Pail O) fessional fundraising fees (Part IX, column (A), lind I fundraising expenses (Part IX, column (D), line 25) 83,59 her expenses (Part IX, column (A), lines 11a-11d	, lines 1-3)		1,90 1,98 44	1,864 3,523 1,550 6,937 9,623	945,747 984,378 -264,664
Expen	14 Be 15 Sa 5- 16a Pro b Tot 17 Ot 18 To	nts and similar amounts paid (Part IX, column (A), lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Pail O) fessional fundraising fees (Part IX, column (A), lind I fundraising expenses (Part IX, column (D), line 25) \$\int_{\text{83,59}} \text{ir} expenses (Part IX, column (A), lines 11a-11d all expenses Add lines 13-17 (must equal Part IX).	, lines 1-3)		1,90 1,98	1,864 3,523 1,550 6,937 9,623	0 0 38,631 0 945,747
Expen	14 Be 15 Sa 5- 16a Pro 17 Ot 18 To 19 Re	nts and similar amounts paid (Part IX, column (A), lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Pail O) fessional fundraising fees (Part IX, column (A), lind I fundraising expenses (Part IX, column (D), line 25) \$\int_{\text{83,59}} \text{ir} expenses (Part IX, column (A), lines 11a-11d all expenses Add lines 13-17 (must equal Part IX).	, lines 1-3)		1,90 1,98 44 ning of Cui Year	1,864 3,523 1,550 6,937 9,623	945,747 984,378 -264,664
Expen	14 Be 15 Sa 5- 16a Pri b Tot 17 Ot 18 To 19 Re 20 To 21 To	nts and similar amounts paid (Part IX, column (A) lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Part IO) fessional fundraising fees (Part IX, column (A), line of fundraising expenses (Part IX, column (D), line 25) fer expenses (Part IX, column (A), lines 11a-11d al expenses Add lines 13-17 (must equal Part IX renue less expenses Subtract line 18 from line 12 al assets (Part X, line 16)	, lines 1-3)		1,90 1,98 44 44 Year	1,864 3,523 1,550 6,937 9,623	0 38,631 0 945,747 984,378 -264,664 End of Year
Not Assets or Exp en Fund Balances	14 Be 15 Sa 5- 16a Pri b Tot 17 Ot 18 To 19 Re 20 To 21 To 22 Ne	nts and similar amounts paid (Part IX, column (A) lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Part IO)  fessional fundraising fees (Part IX, column (A), line of fundraising expenses (Part IX, column (D), line 25)  fer expenses (Part IX, column (A), lines 11a-11d and expenses Add lines 13-17 (must equal Part IX renue less expenses Subtract line 18 from line 12 and assets (Part X, line 16)  fer all assets (Part X, line 26)	, lines 1-3)		1,90 1,98 44 44 19ear 37	1,864 3,523 1,550 6,937 9,623 rrent	945,747 984,378 -264,664 End of Year
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Met Assets or Expenses Fund Balances	14 Be 15 Sa 5- 16a Pri b Tot 17 Ot 18 To 19 Re 20 To 21 To 22 Ne 111 S r penalties ledge and be 11 Se	nts and similar amounts paid (Part IX, column (A), lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Pail IO) fessional fundraising fees (Part IX, column (A), lind I fundraising expenses (Part IX, column (D), line 25) \$83,59 for expenses (Part IX, column (A), lines 11a-11d all expenses Add lines 13-17 (must equal Part IX renue less expenses Subtract line 18 from line 12 formulations (Part X, line 16)	n, lines 1-3 ) line 4) rt IX, column (A), lines set 11e) 0 , 11f-24e) K, column (A), line 25) 2 set 20	Begini schedules an	1,90 1,98 44 ning of Cur Year 37 1 36	1,864 3,523 1,550 6,937 9,623 rrent 8,279 5,624 2,655	0 0 0 38,631 0 945,747 984,378 -264,664 End of Year 110,433 12,442 97,991 o the best of my
Net Assets or Expendion	14 Be 15 Sa 5- 16a Pri b Tot 17 Ot 18 To 19 Re 20 To 21 To 22 Ne Tall Se ledge and be ledge.	nts and similar amounts paid (Part IX, column (A), lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Pail IO) fessional fundraising fees (Part IX, column (A), lind I fundraising expenses (Part IX, column (D), line 25) \$83,59 for expenses (Part IX, column (A), lines 11a-11d all expenses Add lines 13-17 (must equal Part IX renue less expenses Subtract line 18 from line 12 fenue less expenses Subtract line 18 from line 12 for line 18 from line 12 from line 12 from line 15 from line 15 from line 16 from line 17 from line 17 from line 17 from line 18 from line 18 from line 19 fro	n, lines 1-3 ) line 4) rt IX, column (A), lines set 11e) 0 , 11f-24e) K, column (A), line 25) 2 set 20	Begini schedules an	1,90 1,98 44 ning of Cur Year 37 1 36 d statement on all information all infor	1,864 3,523 1,550 6,937 9,623 rrent 8,279 5,624 2,655	0 0 0 38,631 0 945,747 984,378 -264,664 End of Year 110,433 12,442 97,991 o the best of my f which preparer has any
Net Assets of Expendences Page 19 Page	14 Be 15 Sa 5- 16a Pri b Tot 17 Ot 18 To 19 Re 20 To 21 To 22 Ne 21 To 22 Ne 21 To 22 Ne 21 To 22 Pre 22 Pre 23 Sign 24 Pre 25 Sign 26 Sign 27 Sign 28 Sign 28 Sign 28 Sign 29 Sign 20 Pre 20 Sign 20 Sign 20 Sign 20 Sign 21 Sign 22 Sign 23 Sign 24 Sign 25 Sign 26 Sign 27 Sign 28	nts and similar amounts paid (Part IX, column (A), lefits paid to or for members (Part IX, column (A), aries, other compensation, employee benefits (Part IO) fessional fundraising fees (Part IX, column (A), line (I fundraising expenses (Part IX, column (D), line 25) 83,59 fer expenses (Part IX, column (A), lines 11a-11d at expenses Add lines 13-17 (must equal Part I) from line 12 from line 13 from line 14 from line 15 from line 16 from line 17 from line 17 from line 18 from line 19	n, lines 1-3) line 4) t IX, column (A), lines e 11e) 0 , 11f-24e) K, column (A), line 25)	Begins schedules an cer) is based	1,90 1,98 44 ning of Cur Year 37 1 36 d statement on all information all infor	1,864 3,523 1,550 6,937 9,623 rrent 8,279 5,624 2,655	0 0 0 38,631 0 945,747 984,378 -264,664 End of Year 110,433 12,442 97,991 o the best of my f which preparer has any

ALEXANDRIA, VA 223121303

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

(Expenses \$

Other program services (Describe in Schedule O )

) (Revenue \$

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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part 1991	3	Yes	
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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Νo
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	_^	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15		15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No ———
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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		No
	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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	0.	No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	r 174	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	_ 5	:=	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part $IV$ .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line $2 \cdot \cdot$	35b		No
36	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197  Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V		10	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	* * * * * * *	.		
	1-1-	6		
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	ا اه		
_	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1 1		
•	gaming (gambling) winnings to prize winners?	1c		
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			0
	return	۱ F		y .
U		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year <sup>7</sup>	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account or securities account)?	4a		No
ь				
	If "Yes," enter the name of the foreign country  See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
_	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	1		
	If yes to fine 36 of 30, and the organization menoring occupy.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a	Yes	
	organization solicit any contributions that were not tax deductible?			
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gift were not tax deductible?	5 6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).	-	12	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	to _		
	file Form 82827	7c		-
ď	If "Yes," indicate the number of Forms 8282 filed during the year	-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		1	
_	contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	7g		
_	required?	79		$\vdash$
n	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		-
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9Ь		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	-		
Ь	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		
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
12	year Section 501(c)(29) qualified nonprofit health insurance issuers.			1
	111 11	-		-
a	Is the organization licensed to issue qualified health plans in more than one state?  Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	on 13a		
	allocated to each state		-	-
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  13b			
c	Enter the aggregate amount of reserves on hand			
	13c	_		
	Did the organization receive any payments for indoor tanning services during the tax year?	148		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 🔒 🔒	14b		

Our Course Manager A Distance For each West response to lines 2 through 7	, bolo	w 200	Page 6
O. See instructions.	nges i	n Sche	dule
		741	
the state of the s		Yes	No
Enter the number of voting members of the governing body at the end of the tax			
year			
Independent			
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
	5		No
Did the organization have members or stockholders?	6		No
Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,	7b		No
Did the organization contemporaneously document the meetings held or written actions undertaken during the			
The governing body?	8a	Yes	
Each committee with authority to act on behalf of the governing body?	8b	Yes	
	9	- X X	No
ction B. Policies (This Section B requests information about policies not required by the Internal		-	
venue Code.)			
Did the exception have lead shorters broughes as office as	102	Yes	No No
9 "	104		140
affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10Ь		
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
Describe in Schedule O the process, if any, used by the organization to review the Form 990			
Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
CARLANCA	12c	Yes	
Did the organization have a written whistleblower policy?	13	Yes	
Did the organization have a written document retention and destruction policy?	14		No
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?			
The organization's CEO, Executive Director, or top management official	15a	Yes	
Other officers or key employees of the organization	15b	Yes	
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	160		No
If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	104		140
organization's exempt status with respect to such arrangements?	16b		
	0.00	71 1/1	- 101
MD, ME, MA, MN, MO, MS, ND, NH	1, CN,	Y, NC	
Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	nızatıo	n ►
PETER LIPS 1875 I STREET NW WASHINGTON,DC 20006			
	a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or chail O. See Instructions.  Check if Schedule O contains a response to any question in this Part VI  Cition A. Governing Body and Management  Enter the number of voting members of the governing body at the end of the tax year.  Enter the number of voting members included in line 1a, above, who are independent.  2 to July of the companies of the governing body at the end of the tax year.  Enter the number of voting members included in line 1a, above, who are independent.  2 to July of the companies of the companies of the governing body at the end of the tax year.  Enter the number of voting members included in line 1a, above, who are independent.  2 to July of the companies of the governing body at the end of the tax year.  2 to July of the companies of the governing body at the end of the tax year.  3 to July of the companies of the governing body at the end of the companies of the governing body?  4 to July of the companies, stockholders, or the persons who had the power to elect or appoint one or more members of the governing body?  5 to July of the companies of the governing body?  5 to Had body of the governing body?  6 the repanies on contemporaneously document the meetings held or written actions undertaken during the year by the following  7 the governing body?  8 Each committee with authority to act on behalf of the governing body?  8 Each committee with authority to act on behalf of the governing body?  8 Each committee with authority to act on behalf of the governing body?  8 Each committee with authority to act on behalf of the governing body?  9 Each committee with authority to act on behalf of the governing body?  15 there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's making address? If "Yes," provide the names and addresses in Schedule O  1 to the organization have withing the provide in the makes and addresses.  1 The governing body	a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes 1.  O. See instructions. Check if Schedule O contains a response to any question in this Part VI.  Cition A. Governing Body and Management  Enter the number of voting members of the poverning body at the end of the tax year.  Enter the number of voting members included in line 1a, above, who are independent.  Due any effect of director, trustee, or key employee have a family relationship or a business relationship with any other organization delegate control over management duties customanily performed by or under the direct business. The control of the organization make any significant changes to its governing documents since the prior Form 990 was failed.  Dut the organization make any significant changes to its governing documents since the prior Form 990 was failed.  Dut the organization have members are stockholders?  Dut the organization have members, stockholders or other persons who had the power to elect or appoint one or pressions better than the governing body?  Due the organization have members, stockholders, or other persons who had the power to elect or appoint one or pressions better than the governing body?  As any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or organization and the power to elect or appoint one or pressions better than the governing body?  Dut the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.  The governing body?  But the propagation have be the organization reserved to (or subject to approval by) members, stockholders, or pressions better than the governing body?  But the organization contemporaneously document the meetings held or written actions undertaken during the year by the original godders at 71 "res", governing the activation of the organization of the organizat	a "No" response to lines Sa, Bb, or 10b below, describe the circumstances, processes, or changes in Sche O. See instructions.  Cition A. Governing Body and Management  Yes  Ester the number of voting members of the governing body at the end of the tax  Ester the number of voting members of the governing body at the end of the tax  Ester the number of voting members included in line 1a, above, who are  Ester the number of voting members included in line 1a, above, who are  Ester the number of voting members included in line 1a, above, who are  Ester the number of voting members included in line 1a, above, who are  Ester the number of voting members included in line 1a, above, who are  Ester the number of voting members included in line 1a, above, who are  Ester the number of voting members included in line 1a, above, who are  Did any difficer, directors of trustee, or key employee a line of the companies of the

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Part VII

Page 7

Employees, and independent contractors						
Check if Schedule O contains a response to any question in th	ııs Part VII					

Circle in Science of Contains a response to any question in this case of the contains a response to any question in this case of the contains a response to any question in this case of the contains a response to any question in this case of the contains a response to any question in this case of the contains a response to any question in this case of the contains a response to any question in this case of the contains a response to any question in this case of the contains a response to any question in this case of the contains a response to any question in this case of the contains a response to any question in this case of the contains a response to the response to the contains a respo

# 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

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

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

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

(A) Name and Title	(B) Average hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
(1) HEATHER R HIGGINS President & CEO	20 00	×		x				o		
(2) MIDGE DECTER Director	1 00	х				-		0		
a a										
68										
							1			
			-	-	-	-	-			
	P 5									
				_	1		Ļ			

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

	(A) Name and Title	(B) Average hours per week (describe	unles an	on (d e tha	n one son er al	e bo ıs b nd a	x, oth	1.0 23.22	Repo compo froi organiz	D) ortable ensation m the ation (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	-	(F) Estima mount o compens from t ganizati	ted fother ation he on and
**		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustae	Officer	Key employee	Highest compensated employee	Former			MISC)		relati organiza	
	ă													
											- 1 202			
				-		-			<i>E</i>	2 2 .				
											100			
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				-		L		┼				+		
						L		-	-			4.		
												_		
										55:	3 5 300			
											ve.	4		
1b	Sub-Total							-						
С	Total from continuation sheets			_	_	_		<b>P</b>			4,			
_d	Total (add lines 1b and 1c)	· ·· · ·		-		_		<b>&gt;</b>			- 25	_ ا		
2	Total number of individuals (incl \$100,000 of reportable compen					ited	above	) Who	o receive	d more tha	in <sub>::=</sub>			
						-		-				_	Yes	Na.
3	Did the organization list any <b>for</b>	mer officer, dire	ctor or	trust	ee. k	ev e	emplov	/ee. r	or highes	t compens	ated employee		res	No
_	on line 1a? If "Yes," complete Sch							•	· • •	• •		3		No
4	For any individual listed on line organization and related organization	1 a, is the sum o ations greater t	f report han \$1!	able 50,00	com	pen If ")	sation /es," co	and omple	other co ete Sched	mpensatio ule J for su	n from the			B4 =
5	Did any person listed on line 1a	receive or accr	ue com	nene:	- atior	• n fre	m anv	unre	lated ord	anization	or individual for	4		No
	services rendered to the organiz								_			5		No
	ection B. Independent Con													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organization	nsated on Repo	inder ort co	mpe	ent ensa	contra ition fo	ctors r the	s that red calenda	eived mor r year endi	e than ng with			
	Nar	(A) ne and business ad	dress							Desc	(B) ription of services		(C Comper	
710 E	TAM COMMUNICATIONS AST NORTHWAY LANE NTA, GA 30341	= 7 - 10									ion consulting			127,855
						_	_					1		

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

\$100,000 of compensation from the organization 1-1

Dart		Statement o	f Davanua					rages
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
Contributions, gifts, grants and other similar amounts	la b c d e	Related organiz	es 1b ents 1c rations 1d s (contributions) 1e ons, gifts, grants, and 1f	719,786				
Contrib and of	g h	Noncash contri lines 1a-1f \$ _ Total. Add lines			719,786			
Program Service Revenue	2a b c d e f	All other progra	am service revenue	Business Code				
ጅ	g	Total. Add lines	s 2a – 2f					
	3 4 5	and other simil	ome (including dividence ar amounts)	•		1.		
	b c d	Less rental expenses Rental income or (loss) Net rental inco	me or (loss)	(ii) Other				
	7a b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss)		324				
	ď		ss)		-324			-324
Other Revenue	8a	Gross income to events (not income to see Part IV, line	from fundraising cluding s reported on line 1c) ne 18 a	-				
Ě	ь	Less direct ex						
0	9a		(loss) from fundraising of from gaming activities ne 19	events				
	ь	Less direct ex Net income or		vities				
	10a b c	_		entory •				
		Miscellaneou	s Revenue	Business Code	253	253		
	11a b	Otherincome		900099	252	252		
	°	All and						
	d	All other rever						
	12		See Instructions		252 719,714			-324

#### Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, (A) Management and Program service Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 2 Grants and other assistance to individuals in the United States See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees . . . 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . 35,031 23,039 7,094 4,898 Other salaries and wages 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . Other employee benefits . . . . 9 3,600 2,484 657 459 10 Payroll taxes . . . . Fees for services (non-employees) Management . . . . 0 40,068 b Legal . . . 0 11,937 0 Accounting . . . . . . 11,937 Lobbying . . Professional fundraising See Part IV, line 17 . . . Investment management fees . . . . . 292,423 253,033 25,365 14,025 Other . . . . . . . a 440,028 125 1,841 12 Advertising and promotion . . . 441,994 312 557 0 13 Office expenses . . . 869 Information technology . 14 Royalties . . 15 16 Occupancy . . 2,022 776 435 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . . Conferences, conventions, and meetings . . . 19 20 Interest . . . . . Payments to affiliates . . . . . . 21 22 Depreciation, depletion, and amortization . . . 10,227 0 10,227 0 1,407 0 1,407 23 0 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) 41,665 38,176 1,607 1,882 Postage and printing 5,472 0 19,266 Other professional fees 24,738 19,434 125 0 19,309 Direct mail 15,325 Overhead allocated from affiliate 15,325 d e 21,475 f All other expenses 43.638 56,070 -33,907 Total functional expenses. Add lines 1 through 24f 819,515 81,273 83,590 25 984,378 Joint costs. Check here ▶ ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

			(A)		(B)
			Beginning of year		End of year
	1	Cash—non-interest-bearing	331,759	1	51,984
	2	Savings and temporary cash investments		2	
ns*	3.	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	12,602	4	14,572
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$ Complete Part II of			
92		Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
3	8	Inventories for sale or use		8	
•	9	Prepaid expenses and deferred charges	9,062	9	29,572
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 27,543			
	ь	Less accumulated depreciation	24,856	10c	14,305
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	1 1 1
	16	Total assets. Add lines 1 through 15 (must equal line 34)	378,279	16	110,433
	17	Accounts payable and accrued expenses .	15,624	17	12,442
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
'n	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		Ī	
윤		persons Complete Part II of Schedule L		22	
<b>=</b>	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	1 1
)))	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	15,624		12,442
	-	Organizations that follow SFAS 117, check here ▶ 🌠 and complete lines 27	3.,		
ės		through 29, and lines 33 and 34.			
ang.	27	Unrestricted net assets	362,655	27	97,991
<u> </u>	28	Temporarily restricted net assets		28	
<u> </u>	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	79
455	32	Retained earnings, endowment, accumulated income, or other funds		32	15
Net /	33	Total net assets or fund balances	362,655	33	97,991
ž	34	Total liabilities and net assets/fund balances	378,279		110,433

1 0111	990 (2011)				age <b>1</b> 2
Pa	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI		•	зĒ	
1	Total revenue (must equal Part VIII, column (A), line 12)			-	19,71
2	Total expenses (must equal Part IX, column (A), line 25)			g	84,378
3	Revenue less expenses Subtract line 2 from line 1				64,664
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				862,65
5	Other changes in net assets or fund balances (explain in Schedule O)				
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))				97,99
1	Accounting method used to prepare the Form 990 Cash Z Accrual COther		1	Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in				
2a	Schedule O  Were the organization's financial statements compiled or reviewed by an independent accountant?	1 2	a		No
b		. 2	ь	Yes	
c	The state of the s		2c	Yes	
		-   -4		165	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue on a separate basis, consolidated basis, or both	<u> </u>		165	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	<u> </u>	*	165	
	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue on a separate basis, consolidated basis, or both	d	a	7 65	No

OMB No 1545-0047

# **SCHEDULE C**

# efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | SCHEDULE C | Political Campaign and Lobbying Activities

(Form 990 or 990-EZ) For Organizations Exempt From Income Tax Under section 501(c) and section 527

	nent of the Treasury Revenue Service	Open to Public Inspection				
		swered "Yes," to F	Form 990, Part IV, Line 3,	or Form 990-EZ, Pa	ort V, line 46 (Political Car	npaign Activities),
• Sec • Sec If the	ction 501(c)(3) orga ction 501(c) (other ction 527 organizati corganization an	than section 501(c)(3 ons Complete Part Fa swered "Yes," to f	Form 990, Part IV, Line 4,	Parts I-A and C below or Form 990-EZ, Pa	Do not complete Part I-B art VI, line 47 (Lobbying A omplete Part II-A Do not cor	activities), then
<ul><li>Sec If the</li></ul>	ction 501(c)(3) orga e organization an	anizations that have N	NOT filed Form 5768 (election Form 990, Part IV, Line 5	on under section 501(	h)) Complete Part II-B Do no n 990-EZ, line 35c (Proxy	ot complete Part II-A
Nar	ne of the organizat EPENDENT WOMEN'S V	ion			36-4534086	tification number
Part	I-A Complet	e if the organiz	ation is exempt und	er section 501(c	) or is a section 527	organization.
1	in opposition to c	andidates for public	ion's direct and indirect po office in Part IV	olitical campaign acti	vities on behalf of or	
2 3	Political expendit Volunteer hours	ures			MED INC.	\$ 349,001
Par	A Complet	e if the organiz	ation is exempt und	er section 501 <i>(c</i>	2)(3).	
1		1217	curred by the organization			\$
2	177		curred by organization mai			*
3			4955 tax, did it file Form 4			⊤ Yes
4a	Was a correction		1555 tax, are te me 1 orm	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 2 3	☐ Yes ☐ No
ь	If "Yes," describe					1 165 1 115
			ation is exempt und	er section 501(c	) except section 501	(c)(3).
1			y the filing organization for		Service Company of the Company of th	\$ 349,001
2		of the filing organiza	ation's funds contributed to		147/07 1469	\$
3			Add lines 1 and 2 Enter he	ere and on Form 112	0-POL, line 17b	\$ 349,00:
4	Did the filing orga	inization file Form 11	L20-POL for this year?			√ Yes ✓ No
5	organization mad amount of politics	e payments For eac al contributions rece	h organization listed, ente ived that were promptly ar	r the amount paid fro nd directly delivered	527 political organizations m the filing organization's f to a separate political orga is needed, provide informa	unds Also enter the nization, such as a
	(a) Name		(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political
						organization If none, enter -0-
<del>) -</del>			To all the same		50	
_						
-						
				ж		

Sehi	odula C (Form 990 or 990-F7) 2011					Page :
CLOSE STORY	edule C (Form 990 or 990-EZ) 2011  rt II-A Complete if the organization	n is exempt under	section 501(	c)(3) and file	ed Form 5768	
<b>A</b> (	under section 501(h)).  Check If the filing organization belongs to	an affiliated group (and	R			
B (	expenses, and share of excess lob check if the filing organization checked bo	bying expenditures) ox A and "limited contro	I" provisions app	olv		
	Limits on Lobbying ( (The term "expenditures" means a	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
_	T. 1.1.1.1	( l-b	h=2		100015	- Totals
	Total lobbying expenditures to influence public  Total lobbying expenditures to influence a legis	7		-		
			yiiig)	-		+
	Total lobbying expenditures (add lines 1a and 1	.0)		-		+
	Other exempt purpose expenditures			+		1
	Total exempt purpose expenditures (add lines 1	261 17	0	-		
f	Lobbying nontaxable amount Enter the amount columns	from the following table	in both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ie 1e			1
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,	000	4	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500	,000		1
	Over \$17,000,000	\$1,000,000	10			
	5	7, 5				
g	Grassroots nontaxable amount (enter 25% of li	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, en	ter -0 -	, 3			
i	Subtract line 1f from line 1c If zero or less, ent	er -0-				
j	If there is an amount other than zero on either l section 4911 tax for this year?	ine 1h or line 1i, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	4-Year A (Some organizations that made a columns below. See	veraging Period U section 501(h) el the instructions fo	ection do not	t have to con	iplete all of t age 4.)	he five
	Lobbying Exp	enditures During	4-Year Avera	ging Period		-
	Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) Total
2a	Lobbying non-taxable amount	1)	. A			
Ь	Lobbying ceiling amount (150% of line 2a, column(e))				1	
C	Total lobbying expenditures		-			

d Grassroots non-taxable amount

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule	С	(Form	990	or 990-EZ	)2011

Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

		(	a)	(b)	
		Yes	No	Amour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  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? If "Yes," describe in Part IV	-			
j	Total lines 1c through 1:				
2a b	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 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	100	-	_	_
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				77
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c	)(5), or	sectio	n
1	Were substantially all (90% or more) dues received nondeductible by members?			Yes	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		1 2	_	-0
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		3	res	No
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part answered "Yes".	501(c III-A,	)(5), or	sectio	
1	Dues, assessments and similar amounts from members	11			-
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tay was paid.				

# a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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

5 Taxable amount of lobbying and political expenditures (see instructions)

#### Part IV Supplemental Information

political expenditure next year?

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 11 Also, complete this part for any additional information

Identifier	Return Reference	Explanation
Pt I-A Line 1		IWV is an educational and issue advocacy organization engaged
		IN REACHING CONSERVATIVE AND MAINSTREAM INDEPENDENTS AND WOMEN ON THE MOST IMPORTANT POLICY AND LEGISLATIVE BATTLES OF THE DAY IWV FOCUSES ON IDENTIFYING MESSAGES THAT WORK WITH THOSE KEY TARGET AUDIENCES AND THEN REACHES THEM WITH MULTI-FACETED ISSUE CAMPAIGNS, WHICH CAN INCLUDE PAID ADVERTISING.

4

5

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DLN: 93493319032282

# **SCHEDULE D**

(Form 990)

# Supplemental Financial Statements

OMB No 1545-0047

	,	Supplem	entai Financi	ai Statements			<b>ZU I</b>	l
	ent of the Treasury Revenue Service	Part IV, line 6, 7,	e organization answe 9, 10, 11a, 11b, 11c, o Form 990. ► See sej	11d, 11e, 11f, 12a, oı	90, · 12b		pen to Pu Inspectio	
	ne of the organi				Employ	yer identificat	ion number	
	PENDENT WOMEN'S		2 .90	*	25.45	24006		
	AT Oscani	izations Maintaining Donor	Advised Funds	or Other Similar		Accounts.	Complete	if the
Раг	organiz	ation answered "Yes" to Form	990, Part IV, line	6.			A	
	organiz	and the state of t		r advised funds	(b)	) Funds and ot	her account	ts
L	Total number at	t end of year						750m
2	Aggregate cont	ributions to (during year)	V The					
3	Aggregate gran	its from (during year)						
ı	Aggregate valu	e at end of year				2		
5	Did the organiz	cation inform all donors and donor a rganization's property, subject to t	dvisors in writing that the organization's exc	t the assets held in c lusive legal control?	donor advise	<b>ad</b>	├ Yes	┌ No
•	used only for c	ration inform all grantees, donors, a haritable purposes and not for the l ermissible private benefit	and donor advisors in benefit of the donor o	writing that grant fui r donor advisor, or fo	nds may be rany other p	purpose	☐ Yes	No
Par		rvation Easements. Comple	te if the organizat	ion answered "Yes	" to Form	990, Part IV	, line 7.	
L 2	Preservati Protection Preservati	conservation easements held by the conservation of land for public use (e.g., recreated in the conservation of open space is 2a-2d if the organization held a q	eation or pleasure)	Preservation o	f a certified	historic struct		
	easement on th	he last day of the tax year					Fad of the Y	Van-
			141		2a	Held at the	end of the	rear
a		of conservation easements	-4-		Za 2b			
b	-	restricted by conservation easeme		aluidad in (5)				
C		servation easements on a certified			2c		-	3.
d		servation easements included in (d			2d			
3	Number of con	servation easements modified, trai	nsferred, released, ex	ktinguished, or termii	nated by the	organization o	luring	
	the taxable ye	ar ▶	S 5 0	3 / 1 / 3 / 2		1 1 1 1 1 1 1 1	100	201
4	Number of stat	tes where property subject to cons	ervation easement is	located 🛌				
5		nization have a written policy regar f the conservation easements it ho		nitoring, inspection, l	handling of v	iolations, and	☐ Yes	┌ No
6	Staff and volur	nteer hours devoted to monitoring,	inspecting and enfor	ing conservation ea	sements dui	ring the year 🕨	<del></del>	
7		enses incurred in monitoring, inspi						
,	<b>&gt;</b> \$							
8		nservation easement reported on li i) and 170(h)(4)(B)(ii)?	ne 2(d) above satisfy	the requirements of	section		☐ Yes	┌ No
9	balance sheet	escribe how the organization repor , and include, if applicable, the text	t of the footnote to th	ments in its revenue e organization's finar	and expens	e statement, a ents that desc	ind ribes	
Par	Organ	on's accounting for conservation ex nizations Maintaining Collect lete if the organization answer	ctions of Art, His	storical Treasure	s, or Oth	er Similar	Assets.	
1a	If the organiza	ation elected, as permitted under S treasures, or other similar assets of XIV, the text of the footnote to it	FAS 116, not to repo	rt in its revenue stat tion, education or res	ement and became	palance sheet therance of pu	works of blic service	,
b	If the organiza historical trea	ation elected, as permitted under S isures, or other similar assets held llowing amounts relating to these if	FAS 116, to report in for public exhibition,	its revenue stateme	ent and bala	nce sheet work ance of public	cs of art, service,	
	(i) Revenues	included in Form 990, Part VIII, li	ne 1			<b>►</b> \$		
		cluded in Form 990, Part X				<b>&gt;</b> \$		
2	If the organiza	ation received or held works of art, unts required to be reported under	historical treasures, SFAS 116 relating to	or other similar asse these items	ts for financ			
а		luded in Form 990, Part VIII, line				<b>▶</b> \$		
ь		led in Form 990, Part X				<b>▶</b> \$		-
			and the second second second					

Sch	edule D (Form 990) 2011								Dogo 3
	rt III Organizations Maintaining Co	llections of Art	. Histo	rical T	easur	es. or Othe	Similar As	sets /	Page 2
3	Using the organization's accession and other items (check all that apply)								continuedy
a	Public exhibition		d [	Loan	or exch	ange programs			
Ь	Scholarly research		eГ	- Othe	r				
ii C	<u> </u>	Section 400							
4	Provide a description of the organization's co	ollections and expla	ın how th	ey furth	er the or	ganızatıon's ex	empt purpose	n	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							┌ Yes	┌ No
Pa	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an					answered "Y	es" to Form 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					other assets r		┌ Yes	□ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	following	table			An	nount	o (1
c	Beginning balance					1c	All	WHILE	
d	Additions during the year					1d			
e	•					1e		-	
f	Distributions during the year								
	Ending balance					1f		_	
2a	Did the organization include an amount on Fo		217					Yes	∏ No
ь					-11 4- 5	000 P-			
Pe	art V Endowment Funds. Complete	(a)Current Year		red Ye			Three Years Back	(e)Four	Years Back
1a	Beginning of year balance						THE TOTAL PROPERTY.	(G) Gui	Tears both
b	Contributions							-	
c	Investment earnings or losses			1				-	
d	Grants or scholarships								
e	Other expenditures for facilities and programs	-		(					
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the yea	r end balance held a	s						
a	Board designated or quasi-endowment								
Ь	Permanent endowment >								
_									
c 3a	Term endowment Are there endowment funds not in the posses organization by	ssion of the organiza	ation tha	t are hel	d and ac	iministered for	the	Ye	s No
	(i) unrelated organizations						3a(		
	(ii) related organizations						3a(	ii)	
b	If "Yes" to 3a(II), are the related organization	ns listed as required	d on Sch	edule R?			3	b	
4	Describe in Part XIV the intended uses of th								
Pa	rt VI Land, Buildings, and Equipme	ent. See Form 99	0, Part	X, line	10.				
	Description of property			(a) Cost basis (inv		(b)Cost or other basis (other)	(c) Accumulate depreciation	(d)	Book value
1a	Land	** * ** * **							
b	Buildings	300 W 300 W 500							
c	Leasehold improvements		,						
d	Equipment		,			8,618	2,1	319	5,799

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

14,305

Page 3

hedule D (Form 990) 2011		
(a) Description of security or category		(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests	<del> </del>	
her		
12		
	<u> </u>	
	D 1.121	19
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		WCC 5 2
		<u> </u>
	V 30 30	Land to the second seco
		-
	116.6	
tal. (Column (b) should equal Form 990, Part X, col (B) line 12)	Y Y	
Investments—Program Related. Se		13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) bestription of investment type		Cost or end-of-year market value
- 124		19
		THE RESERVE OF THE PARTY OF THE
		W =
	I .	200
X		1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	<b>P</b>	
art IX Other Assets. See Form 990, Part X, I	ine 15.	
	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, I	ine 15.	(b) Book value
art IX Other Assets. See Form 990, Part X, (a) Descr	ine 15.	(b) Book value
otel. (Column (b) should equal Form 990, Part X, col.(B) line	ine 15. iption	
otal. (Column (b) should equal Form 990, Part X, col.(B) line	ine 15. iption	
otal. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15. ription  2.15.) X, line 25.	
otal. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15. ription  2.15.) X, line 25.	
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otal. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15. ription  2.15.) X, line 25.	
otal. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15. ription  2.15.) X, line 25.	
otal. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15. ription  2.15.) X, line 25.	
otal. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15. ription  2.15.) X, line 25.	
otal. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15. ription  2.15.) X, line 25.	
otal. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15. ription  2.15.) X, line 25.	
otal. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15. ription  2.15.) X, line 25.	
otal. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	ine 15. ription  2.15.) X, line 25.	
otal. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15. ription  2.15.) X, line 25.	
otal. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15. ription  2.15.) X, line 25.	
otal. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part (a) Description of Liability	tine 15. Inption  2.15.)  X, line 25.  (b) Amount	

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statem	ents	
1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	719,714
Total expenses (Form 990, Part IX, column (A), line 25)	2	984,378
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	-264,664
4 Net unrealized gains (losses) on investments	4	
5 Donated services and use of facilities	5	
6 Investment expenses	6	
7. Prior period adjustments	7	
8 Other (Describe in Part XIV)	8	
9 Total adjustments (net) Add lines 4 - 8	9	
10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-264,664
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1 Total revenue, gains, and other support per audited financial statements	1 1	719,714
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	H-	723/621
a Net unrealized gains on investments	1 1	
b Donated services and use of facilities		
c Recoveries of prior year grants	= 1	
d Other (Describe in Part XIV) 2d	1 1	
e Add lines 2a through 2d		
3 Subtract line 2e from line 1	3	719,714
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b Other (Describe in Part XIV) 4b	-	
c Add lines 4a and 4b	4c	
5 Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	719,714
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expens	es per Retu	rn
1 Total expenses and losses per audited financial statements	1	984,378
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	W.,	
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	984,378
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	_	
b Other (Describe in Part XIV) 4b		
c Add lines 4a and 4b	4c	
5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	. 5	984,378

# Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
PtX		IWV is exempt from income taxes on all activities directly
		RELATED TO ITS EXEMPT PURPOSE UNDER THE INTERNAL REVENUE SERVICE CODE SECTION 501 (C)(4) THE ORGNIZATION IS LIABLE FOR INCOME TAXES ON UNRELATED BUSINESS INCOME THERE WAS NO TAXABLE NET UNRELATED BUSINESS INCOME FOR THE YEAR ENDED DECEMBER 31, 2011 ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THESE FINANCIAL STATEMENTS THE ORGANIZATION EVALUATED ITS TAX POSITIONS AND DETERMINED IT HAS NO UNCERTAIN TAX POSITIONS AS OF DECEMBER 31, 2011 THE ORGANIZATION'S
		2009 THROUGH 2011 TAX YEARS ARE OPEN FOR EXAMINATION BY FEDERAL TAXING AUTHORITIES

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DLN: 93493319032282

**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization INDEPENDENT WOMEN'S VOICE **Employer identification number** 

36-4534086

ldentifier	Return Reference	Explanation
Pt VI, Line 12c	· · · · · · · · · · · · · · · · · · ·	Board members are given the policy. The review is ongoing
8 0		via review of the invoices/financial data. In addition,
9		the CEO regularly points out to Board members and consultants
- '		that compliance policies are worthless without an ethical
		culture The Board requires assurance that there are no
		conflicts in any contractual relationship, while requiring
		full disclosure and evaluation where there may be a conflict
Pt VI, Line 15		IWV's top management official is a volunteer and will remain
ıl E		a volunteer until MV attains sufficient size Compensation of
		others is at fair market rates based on available market
		data
Pt VI, Line 11a		The 990 is reviewed by the board prior to filing
Form 990, Part IX, Line 24f		PRIZES 9000 9000 0 0 MAILING LIST 8000 0 0 8000 DONATIONS 7888 7888 0 0 BANK CHARGES 6105 0 4627 1478 STATE REGISTRATION FEES 4478 0 0 4478 DUES AND SUBSCRIPTIONS 3598 3267 331 0 CABLE/TELEPHONE 2412 1728 684 0 COMMUNICATIONS 2157 700 1057 400 ALLOCATED G & A COSTS 0 33487 -40606 7119

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DLN: 93493319032282

SCHEDULE R (Form 990)

# **Related Organizations and Unrelated Partnerships**

2011

(Form 990)	► Complete if t	he organization answered ' Attach to Form 990.			5, 36, or 37.	1	201	1
Department of the Treasury Internal Revenue Service					J:=1 4	Ir	en to Pu Ispectio	ıblic on
Name of the organization INDEPENDENT WOMEN'S VOICE					Employer iden	tification number		
INDEFENDENT WORLD'S TOICE					36-4534086			
Part I Identification	on of Disregarded Entities (Co	mplete if the organization	on answered "Yes'	" on Form 990, Pa	art IV, line 33.)			
Name, address,	(a) and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	<b>(f)</b> Direct controlling entity		
	201							
	(a) EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section	(g) 512(b)(: ntrolled anization
							Yes	No
(1) INDEPENDENT WOMEN'S FORU 1875 I STREET NW WASHINGTON, DC 20015	JM	RESEARCH AND EDUCATION	DC	501 (c)(3)	no	NO		No
54-1670627								
	2							-
	* * * * * * * * * * * * * * * * * * *		X1					

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			E2 -00				Yes	No		Yes	No	
				i X								
							-				_	
							-			-	_	
								-		_		
							-	-		-	_	

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) Pnmary activity	(c) Legal domicile (state or foreign country)	(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
							8
				-			
		10					
				1			
		-					
						Calc	dule P (Form 990) 2011

Schedule R (Form 990) 2011

Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	
<b>1</b> D	uring the tax year, did the orgranization 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 (iv) rent from a controlled entity	1a		ı
b	Gift, grant, or capital contribution to related organization(s)	1b		ı
c	Gift, grant, or capital contribution from related organization(s)	1c		ı
4	Loans or loan guarantees to or for related organization(s)	1d		ĺ

f	Sale	ofassets	to	related	organization(s)	

g Purchase of assets from related organization(s)

Loans or loan guarantees by related organization(s)

- h Exchange of assets with related organization(s)
- i Lease of facilities, equipment, or other assets to related organization(s)
- j Lease of facilities, equipment, or other assets from related organization(s)
- k Performance of services or membership or fundraising solicitations for related organization(s)
- l Performance of services or membership or fundraising solicitations by related organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- n Sharing of paid employees with related organization(s)
- o Reimbursement paid to related organization(s) for expenses
- p Reimbursement paid by related organization(s) for expenses
- **q** Other transfer of cash or property to related organization(s)
- r Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c		No
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
11		No
1m	Yes	
<b>1</b> n	Yes	
10		No
1р		No
1q		No
1r		No

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) INDEPENDENT WOMEN'S FORUM	m	15,324	pro-rata based on time
(2) INDEPENDENT WOMEN'S FORUM	n	38,638	pro-rata based on time
(3)			
(4)			
(5)			

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

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)	income(related, unrelated, excluded from tax under sections 512-	5	(e) Are all partners section 01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate al	locations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	j) eral or aging tner?	(k) Percentage ownership
			514)	Yes	- No			Yes	No		Yes	No	
	= 60												
							-						
									4				
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											-	$\vdash$	
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Schedule R (Form 990) 2011

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Schedule R (Form 990) 2011

Page 5

### Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Ü	Identifier	Return Reference	Explanation

Schedule R (Form 990) 2011

## **Additional Data**

**Software ID:** 11000175

**Software Version:** 

**EIN:** 36-4534086

Name: INDEPENDENT WOMEN'S VOICE

Form 990, Special Condition Description:

**Special Condition Description** 

# Exhibit 10

DLN: 93493214009113

Form 990

### **Return of Organization Exempt From Income Tax**

OMB No 1545-0047 2012

Yes No

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Department of the Treasury Open to Public ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012 D Employer Identification number B Check if applicable INDEPENDENT WOMEN'S VOICE Address change 36-4534086 Doing Business As Name change Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite 1875 I STREET NW E Telephone number Terminated (202) 857-3293 Amended return City or town, state or country, and ZIP + 4 WASHINGTON, DC 20006 Application pending G Gross receipts \$ 5,599,972 Name and address of principal officer H(a) Is this a group return for HEATHER HIGGINS TYes V No affiliates? 1875 I STREET NW WASHINGTON, DC 20006 H(b) Are all affiliates included? Yes No If "No," attach a list (see instructions) 「 501(c)(3) **▼** H(c) Group exemption number ▶ Website: ► www.iwvoice.org K Form of organization 

Corporation 

Trust 

Association 

Other 

✓ L Year of formation 2003 M State of legal domicile DC Part I Summary 1 Briefly describe the organization's mission or most significant activities Engage more women in the political process, educate them about the impact of public policies on their lives and our economy, and build support for policies that empower individuals by giving them greater freedom and autonomy Governance 2 Check this box Fr if the organization discontinued its operations or disposed of more than 25% of its net assets Activities & 3 Number of voting members of the governing body (Part VI, line 1a) . 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) . . . . . 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year **Current Year** 719,786 5,592,117 Contributions and grants (Part VIII, line 1h) . Revenue Program service revenue (Part VIII, line 2g) . . 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d )  $\,$  . 10 -324 0 252 7,855 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 719,714 5,599,972 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 0 Benefits paid to or for members (Part IX, column (A), line 4) . . . . . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines Expenses 38,631 37,672 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 Total fundraising expenses (Part IX, column (D), line 25) >79,648 945,747 17 5,002,438 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . 984,378 5,040,110 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 18 264.664 Revenue less expenses Subtract line 18 from line 12 . 559,862 Assets or Balances **Beginning of Current End of Year Year** 110.433 699,192 20 Total assets (Part X, line 16) . . 21 Total liabilities (Part X, line 26) . 12,442 41,339 22 Net assets or fund balances Subtract line 21 from line 20 97,991 657,853 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge \*\*\*\*\* 2013-08-02 Signature of officer Sign Here HEATHER HIGGINS PRESIDENT Type or print name and title Print/Type preparer's name DOUGLAS S COREY CPA Preparer's signature Date PTIN Check T if Paid Firm's name DOUGLAS COREY & ASSOCIATES PC Preparer Firm's address ► 6601 LITTLE RIVER TRNPK SUITE 440 Phone no (703) 354-2900 **Use Only** 

ALEXANDRIA, VA 223121303 May the IRS discuss this return with the preparer shown above? (see instructions) .

_	Briefly describe the or		<del></del>	estion in this Part III		
_						
ngagi	e more women in the p	ontical process,				
, t	the prior Form 990 or	990-EZ?		rvices during the year	which were not listed on	「Yes ▼ No
	If "Yes," describe thes					
	Did the organization co services? If "Yes," describe thes			t changes in how it cor	nducts, any program	「Yes ▼ No
4 😁	Describe the organizat	tion's program service 1(c)(3) and 501(c)(4	e accomplishm ) organizations	are required to report	ee largest program services, as i the amount of grants and allocat	measured by ions to others,
4-	(Code	) (Expenses \$	4,867,405	including grants of \$	) (Revenue \$	)
4a		OUT THE IMPACT OF PUBL	IC POLICIES ON A	MERICAN FAMILIES AND TH	E ECONOMY, AND ENCOURAGE THEIR E	NGAGEMENT AND ACTION
4b	(Code	) (Expenses \$	-	including grants of \$	) (Revenue \$	)
						•
4c	(Code	) (Expenses \$	y	including grants of \$	) (Revenue \$	)
	77					
4d	Other program service	ces (Describe in Scho	edule O )			
14	(Expenses \$		uding grants o	f \$	) (Revenue \$	
4e	Total program servic	e evnenses b	4,867,405			

Pai	t IV Checklist of Required Schedules			rage
			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Nο
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	. 9	No
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	- 21	No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	97	No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	Tid
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a		14a		No
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Gr.	No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule $H$	20a		No
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

Pel	Statements Regarding Other IRS Filings and Tax Compilance			_
-	Check if Schedule O contains a response to any question in this Part V	• • • •	Yes	No
12	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a	ااه	1 62	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	e 1c		
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	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other author over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	rity 4a		No
b	If "Yes," enter the name of the foreign country   See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.	nts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	, 5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	55	-	
		5c		
	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	Yes	
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions of were not tax deductible?	or gifts 6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).			-
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Form 8282?	red to 7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8 required?	. 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization form 1098-C?	. 7h		2
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	Did 8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	. 9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	-	
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
ь	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		
	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.			
	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a	- 1	
b	Enter the amount of reserves the organization is required to maintain by the states  13b			
_	in which the organization is licensed to issue qualified health plans			
	the tay year?	. 14a	į	No
14a	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			
	, at 1 way 19 may 19 migg at 4 min 1 and 12 feet min 2			

Form 990 (2012) Page 6

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI . . . . . . . . . . . . . . Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo 5 Nο Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Νo Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Νó more members of the governing body? No Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes Yes Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Nο b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 11a Yes Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . . . Yes Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Yes Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes 13 Yes Did the organization have a written document retention and destruction policy? . . . . . 14 Yes Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . . 15a Yes 15b No If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a No b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the States with which a copy of this Form 990 is required to be filed AL, AR, AZ, WI, CA, CO, CT, FL, GA, HI, IL, KS, KY, MD, ME, MA, MN, MO, MS, ND, NH, NJ, NY, NC, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Vpon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

►PETER LIPS 1875 I STREET NW WASHINGTON, DC (540) 888-4752

Form 990 (201	21	
FUIII 330 (20)	L Z J	

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours	(C) Position (do not c more than one box, person is both an o and a director/trus				x, unless n officer		(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	MISC)	MISC)	from the organization and related organizations
(1) HEATHER R HIGGINS	40 00	×		x	T			198,500	0	
President & CEO (2) MIDGE DECTER		21		4		+ 2	-			
	1 00	x						0	0	
Director		-			H		H			
Unit Day 1000										
			_							
										2 1
					L					
			_	_	L					
to be because of the later.			5	_						

,	•				
Part VII	Section A.	Officers, Directors,	Trustees, Key Employees, and Highe	st Compensate	i Employees (continued)

		-D. 4									_		
	(A) Name and Title	(B) A verage hours per week (list any hours	more t	han o	ne I both	oox,	heck unless officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	am . cc	(F) Estimat lount of Impense from the	other ition e
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke, employee	Highest compensated emicrosee	Former	2/1099-MISC)	2/1099-MISC)		anizatio relate rganizat	d
	i site i i										_		
									11				
	200										ļ		
					_	_	_	-			ļ		
		_	-	<u> </u>							-		
_				-	-	-		T,			╂		
_		-	-	-	-	-	-	1.			-		
			-	-	-	-	-	-			-		
				-	-	-		-	400		-		
1b	Sub-Total							·	h		+		
C	Total from continuation she	ets to Part VII,	 Section	Α.	•								
d	Total (add lines 1b and 1c)							Þ	198,50				
2	Total number of individuals ( \$100,000 of reportable com						ed abov	/e) w	vho received more t	han			
							40.00					Yes	No
3	Did the organization list any on line 1a? If "Yes," complete							oyee •	e, or highest compe	nsated employee	3		No
4	For any individual listed on I organization and related org										4	Yes	
5	Did any person listed on line		crue co	mpei	nsat	ء on f	rom an	y un	related organization	n or individual for	-	162	
	services rendered to the org										5		No

#### Section B. Independent Contractors

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
VICTORY MEDIA GROUP 429 MILL STREET CORAOPOLIS PA 15108	Communications services	2,362,187
CAMPAIGNGRID 414 COMMERCE DR FT WASHINGTON PA 19034	Communications services	992,035
GEB INTERNATIONAL 710 E NORTHWAY LANE ATLANTA GA 30342	Communications services	500,772
ASHDOWN FOREST STRATEGIES 35 N MOORE ST APT 2A NEW YORK NY 10013	Management consulting	198,500
ANTIETAM COMMUNICATIONS 710 E NORTHWAY LANE ATLANTA GA 30342	Communications services	172,000
a. Tatal sumbay of independent contractors (including but not limited to these	a listed above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶5

Part V	/111		THE NAME OF STREET			r age
		Check if Schedule O contains a response to any question	in this Part VIII . (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a				
	ь	Membership dues 1b				
	c	Fundraising events 1c				
ar	d	Related organizations 1d	1			
s, C	e	Government grants (contributions) 1e	Stran o	₹ <sup>17</sup> oc		
tion r S	f	All other contributions, gifts, grants, and 1f 5,592,117 similar amounts not included above			500 000	
ib e	9	Noncash contributions included in lines				
ont od C		1a-1f \$	E E02 117			· ·
<u>ة ت</u>	h	Total. Add lines 1a-1f	5,592,117			
a E	   2a	Business Code				
Program Serwce Revenue	b					
er Fr	c				_	
¥ 45	d					
<u>ک</u> ر ج	e					
Grar	f	All other program service revenue				
8	g	Total. Add lines 2a-2f				
	3	Investment income (including dividends, interest,				
		and other similar amounts)				
	5	Royalties				
		(i) Real (ii) Personal				
	6a	Gross rents				
	ь	Less rental expenses				
	С	Rental income or (loss)				
	ď	Net rental income or (loss)				
		(i) Securities (ii) Other				
	7a	from sales of assets other				
	L.	than inventory Less cost or			,	
	ь	other basis and sales expenses				
	c	Gain or (loss)				
	d	Net gain or (loss)				
đa .	8a	Gross income from fundraising events (not including				
Other Revenue		\$				
e e		of contributions reported on line 1c) See Part IV, line 18				
<u>-</u>		a				
ţ	ь					
O	C	Net income or (loss) from fundraising events				
	) 3a	Gross income from gaming activities See Part IV, line 19	12			
		a				
	c b	Net income or (loss) from gaming activities				
	1	Gross sales of inventory, less				
		returns and allowances .				
	ь	Less cost of goods sold b				
	c					
		Miscellaneous Revenue Business Code				7"
	11a	O ther income 900099	7,855	7,855		
	Ь					
	C					
	d	All other revenue				
	e	100 mm and	7,855			-
	12	Total revenue. See Instructions	5,599,972	7,855		

5,599,972

Page **10** 

ectio	n 501(c)(3) and 501(c)(4) organizations must complete all columns. All			iete column (A)	
\\ na	Check if Schedule O contains a response to any question in this Pa t include amounts reported on lines 6b,	(A)	(B)	(c)	(D)
	, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16		F 8		4:
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	4.			i)
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		21		
7	Other salaries and wages	34,492	30,824	3,626	42
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits		83		
.0	Payroll taxes	3,180	2,881	296	
.1	Fees for services (non-employees)				
а	Management		4 4 5 5		
b	Legal	33,272	0	33,272	
c	Accounting	11,135	0	11,135	
d	Lobbying		1. 4		
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	547,552	457,720	23,825	66,00
12	Advertising and promotion	1,132,390		<del>                                     </del>	
.3	Office expenses	1,660		1,660	
 L4	Information technology			· · · · · · · · · · · · · · · · · · ·	
.5	Royalties				
.6	Occupancy		***************************************		
. <b>7</b>	Travel	11,277	10,528	0	74
L <b>8</b>	Payments of travel or entertainment expenses for any federal, state, or local public officials	-			
<b>L9</b>	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,000	6,192	1,808	
23	Insurance	1,478	0	1,478	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)			\$2 52	
а	Web design	181,798	181,723	0	7
b	Active engagement	2,183,024	2,183,024	0	
C	Polling	502,247	502,247	0	
d	Phone banks	165,376	165,376	0	
e	All other expenses	223,229	194,500	15,957	12,77
25	Total functional expenses. Add lines 1 through 24e	5,040,110	4,867,405	93,057	79,64
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)				

	Check if Schedule O contains a response to any question in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	51,984	1	656,162
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	14,572	4	7,340
5	Loans and other receivables from current and former officers, directors, trustees, keeployees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employer and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	5	6	
7	Notes and loans receivable, net		7	i4
8	Inventories for sale or use	3	8	
9	Prepaid expenses and deferred charges	29,572	9	28,334
10a	Land, buildings, and equipment cost or other basis Complete			
	Part VI of Schedule D 28,5	93		
Ь	Less accumulated depreciation 10b 21,2	37 14,305	10c	7,356
11	Investments—publicly traded securities		11	
12	Investments—other securities See Part IV, line 11		12	
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	16 - E
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	110,433	16	699,192
17	Accounts payable and accrued expenses	12,442	17	41,339
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D	,	21	
22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		4	
	persons Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule		25	
26	D	12,442	26	41,339
20	Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.		20	41,000
27	Unrestricted net assets	97,991	27	657,853
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and	TP 8		
1	complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	97,991	33	657,853
34	Total liabilities and net assets/fund balances	110,433	34	699,192

Par	Check if Schedule O contains a response to any question in this Part XI		•		୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,5	599,972
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,0	40,110
3	Revenue less expenses Subtract line 2 from line 1				559,862
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			97,991
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			557,853
Par	t XII Financial Statements and Reporting				
_	Check if Schedule O contains a response to any question in this Part XII				· [
		1.8	200	Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		6		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis		- 8		
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate		1	
	Separate basis Consolidated basis Both consolidated and separate basis		- 2		
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n	1.5		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the laudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		
	, , , , , , , , , , , , , , , , , , , ,		F	orm <b>99</b> 0	(2012)

DLN: 93493214009113

# SCHEDULE C

## Political Campaign and Lobbying Activities

OMB No 1545-0047

	For Organizations Exempt From Income Tax Under section 501(c) and section 527  Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.								
•	tment of the Treasury al Revenue Service	r complete i	► See separate		0 330 0. 1 0 330 E.E.		o Public ection		
f th	Section 501(c)(3) of Section 501(c) (oth Section 527 organize organization and Section 501(c)(3) of Section 501(c)(3) of e organization and section and section and section section section and section section section sec	organizations Co er than section ( zations Complete iswered "Yes' organizations that organizations that iswered "Yes'	to Form 990, Part IV, Line 3, or implete Parts I-A and B Do not con 501(c)(3)) organizations. Complete a Part I-A only to Form 990, Part IV, Line 4, or thave filed Form 5768 (election unit have NOT filed Form 5768 (election to Form 990, Part IV, Line 5 (Pattions Complete Part III	nolete Part I-C Parts I-A and C be r Form 990-EZ, Pa der section 501(h) on under section 50	low Do not complete Part I-B art VI, line 47 (Lobbying Ac ) Complete Part II-A Do not co D1(h)) Complete Part II-B Do I	paign Activities), the complete Part not complete	ities), then en ⊩B Part ⊩A		
Na	me of the organiza	tion			Employer identi	ification num	ıber		
INL	DEPENDENT WOMEN'S	VOICE			36-4534086				
Par	t I-A Comple	te if the org	anization is exempt under	section 501(		organizati	ion.		
1	Provide a descri	ption of the orga	nization's direct and indirect polit	ical campaign acti	ivities in Part IV				
2	Political expendi	tures			▶ 4	\$ <u></u>	382,542		
3	Volunteer hours						0		
Dar	T-B Comple	te if the ora	anization is exempt under	section 501/	c)(3)	-			
1			ax incurred by the organization u						
2			ax incurred by organization mana				7		
3			ction 4955 tax, did it file Form 47			т — Г Yes	s [No		
4a	Was a correction		V TELLELETE			Γ Yes	1 1 1 1 1 1 1		
ь			V I I			,			
			anization is exempt under	section 501(	c), except section 501	(c)(3).			
1	Enter the amoun	t directly expen	ded by the filing organization for s	ection 527 exemp	ot function activities 🕨 🧍	\$	382,542		
2	Enter the amountexempt function		anization's funds contributed to o	other organizations	s for section 527	\$			
3	Total exempt fun	iction expenditu	res Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b ►	4	382,542		
4	Did the filing org	anızatıon file <b>Fo</b>	m 1120-POL for this year?			⊤ Ye:			
5	organization mad amount of politic	le payments Fo al contributions	employer identification number ( reach organization listed, enter t received that were promptly and blitical action committee (PAC) I	he amount paid fro directly delivered	om the filing organization's fu to a separate political organ	to which the inds Also en iization, such	filing iter the n as a		
10,647.0	(a) Name		(b) Address	(c) EIÑ	(d) A mount paid from filing organization's funds If none, enter -0-	contribution and prom directly del separate	livered to a		

CM7.0	(a) Name	(b) Address	(c) EIÑ	(d) A mount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter 40-
	81	(5)			
					4
_	The state of the s				

Part Part	ule C (Form 990 or 990-EZ) 2012  III-A Complete if the organization under section 501(h)).	is exempt under s	section 501(c	:)(3) and fil	ed Form 5768	(election
	neck  if the filing organization belongs to a expenses, and share of excess lobb neck  if the filing organization checked bo	ying expenditures)			up member's name	e, address, EIN
	Limits on Lobbying E (The term "expenditures" means ar	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a T	otal lobbying expenditures to influence public o	pinion (grass roots lobb	oying)			
	otal lobbying expenditures to influence a legisla					
	otal lobbying expenditures (add lines 1a and 1)					
	ther exempt purpose expenditures					
	otal exempt purpose expenditures (add lines 1	c and 1d)				
f L	obbying nontaxable amount Enter the amount follows	and the same of th	in both			
Ē	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxa	ble amount is:			
N	Not over \$500,000	20% of the amount on line	e 1e			
- 6	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	excess over \$500,0	00		
ō	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	excess over \$1,000,	,000		
į.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
d	Over \$17,000,000	\$1,000,000				
g G	Grassroots nontaxable amount (enter 25% of li	ne 1f)				<b>!</b>
h S	Subtract line 1g from line 1a If zero or less, ent	er -0-				
	Subtract line 1f from line 1c If zero or less, ente			- 1		
	f there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1i, did the	organization file	Form 4720 rep	porting	┌ Yes ┌ No
	4-Year A (Some organizations that made a columns below. See t	veraging Period U section 501(h) elo the instructions for	ection do not	have to co	mplete all of t page 4.)	he five
	Lobbying Exp	enditures During	4-Year Avera	ging Period		r
	Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total
					i i	
2a	Lobbying nontaxable amount					

	Lobbying Expe	nditures During	4-Year Avera	ging Period		r
	Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures				dula C (Form 000	

	Complete if the organization is exempt filed Form 5768 (election under section	n 501(h)).	NUI			
For each "Yes"						
	response to lines 1a through 11 below, provide in Part IV	/ a detailed description of the lobbying	(a)		(b)	
activity.	= 30 10 18 7 32 7 4	and the labelying	Yes	No	Am	ount
legislat	the year, did the filing organization attempt to influence ion, including any attempt to influence public opinion the use of	ce foreign, national, state or local on a legislative matter or referendum,				
a Volunte						
<b>b</b> Paid sta	aff or management (include compensation in expense:	s reported on lines 1c through 1i)?				
	dvertisements?					
	s to members, legislators, or the public?					
	tions, or published or broadcast statements?					
	to other organizations for lobbying purposes?			11		
	ontact with legislators, their staffs, government offici			35		
	demonstrations, seminars, conventions, speeches, le	ectures, or any similar means?				
	ctivities?					
-	dd lines 1c through 1i		١.			
	activities in line 1 cause the organization to be not di " enter the amount of any tax incurred under section of					
	enter the amount of any tax incurred under section and the section of any tax incurred by organization of any tax incurred under section of any tax incurred by organization organization of any tax incurred by organization or organiza					
	ing organization incurred a section 4912 tax, did it fil			1		
	Complete if the organization is exempt		504/-	<u></u>		
LIE Z J L MAI	501(c)(6).	under section sor(c)(4), section	201(C	(5), 0	rsec	tion
		THE STATE OF THE S			Y	es I
	ibstantially all (90% or more) dues received nondedu				1 Y	25
	organization make only in-house lobbying expenditur				2 Y	es
	organization agree to carry over lobbying and politica				3	N
Part III-B	Complete if the organization is exempt	under section 501(c)(4), section	501(c)	(5), o	rsect	ion
	501(c)(6) and if either (a) BOTH Part II line 3, is answered "Yes."	11-A, lines 1 and 2, are answered	"No" O	R (b)	Part I	II-A
L Dues, as	ssessments and similar amounts from members		11	-		. 11 7
2 Section	162(e) nondeductible lobbying and political expendit	ures (do not include amounts of political		-		
expense	es for which the section 527(f) tax was paid).					
a Current	•		2a			
·	er from last year		2b			
c Total			2c			
	ate amount reported in section 6033(e)(1)(A) notices		3			
1 If notice	es were sent and the amount on line 2c exceeds the a e organization agree to carryover to the reasonable es	mount on line 3, what portion of the excess				
political	e organization agree to carryover to the reasonable es expenditure next year?	stimate of nondeductible lobbying and	4			
	amount of lobbying and political expenditures (see in	nstructions)	5		^	
Part IV	Supplemental Information			-		
Complete th	is part to provide the descriptions required for Part  -	A, line 1, Part I-B, line 4, Part I-C, line 5, P	art II-A	(affiliate	d grou	p list)
	ne 2, and Part II-B, line 1 Also, complete this part for	any additional information			5/6-1	
	Identifier Return Reference	Explan	ation			
t I-A Line 1		IWV is an educational and issue				ngag
	**	IN REACHING CONSERVATIVE INDEPENDENTS AND WOMEN OF POLICY AND LEGISLATIVE BA	ON THE	MOST I	MPORT DAY IV	W

DLN: 93493214009113 QMB No 1545-0047

**SCHEDULE D** 

(Form 990)

**Supplemental Financial Statements** 

	ent of the Treasury Revenue Service	Part IV, line 6, 7, 8, 9, 10	mization answered "Yes," to Form 99 ), 11a, 11b, 11c, 11d, 11e, 11f, 12a, 01 1990. ► See separate instructions.	· 12b	Open to Inspec	
	ne of the organi			Employe	er identification numb	er
INDE	PENDENT WOMEN'	S VOICE		36-453	34086	V. III.
Pai	tti Organ	izations Maintaining Donor Advi	ised Funds or Other Similar	Funds or	Accounts. Comple	te if the
	organiz	zation answered "Yes" to Form 990,	Part IV, line 6.  (a) Donor advised funds	(b)	Funds and other acco	unts
	Total number a	t and of year	(a) Donot advised failes	1 1-17		
		tributions to (during year)				
_	33 3	nts from (during year)			21 19 19 19	
4		le at end of year				
5	Did the organiz	zation inform all donors and donor advisor organization's property, subject to the org	rs in writing that the assets held in di janization's exclusive legal control?	onor advised	d Yes	广 No
6	Did the organizused only for c	zation inform all grantees, donors, and do tharitable purposes and not for the benefit ermissible private benefit?	nor advisors in writing that grant fund	ds can be any other p	urpose <b>Yes</b>	广 No
Par		rvation Easements. Complete if	the organization answered "Yes"	to Form 9	90, Part IV, line 7.	
2	Preservation Preservation Complete lines	conservation easements held by the orga on of land for public use (e g , recreation of of natural habitat on of open space s 2a through 2d if the organization held a	or education) Preservation of Preservation of	a certified h	istoric structure	
	easement on t	he last day of the tax year		Г Т	Held at the End of th	е Үеаг
а	Total number of	of conservation easements	- 4 - 1	2a		
b		restricted by conservation easements		2b	A	I
c		servation easements on a certified history	ric structure included in (a)	2c		
d	Number of con	iservation easements included in (c) acquire listed in the National Register		2d	SEL SELECTION	
3	Number of con	servation easements modified, transferre	ed, released, extinguished, or termina	ited by the o	organization during	
	the tax year 🕨			400	· ·	
4	Number of sta	tes where property subject to conservation	on easement is located 🛌			
5	Does the orga	nization have a written policy regarding to		andling of vi	olations, and <b>Yes</b>	No
6	Staff and volu	nteer hours devoted to monitoring, inspec	cting, and enforcing conservation eas	ements dur	ing the year	
7		penses incurred in monitoring, inspecting	, and enforcing conservation easeme	nts during t	he year	
8		nservation easement reported on line 2(d 70(h)(4)(B)(ii)?	I) above satisfy the requirements of s	section 170	(h)(4)(B)(ı)	├ No
9	balance sheet	describe how the organization reports cor t, and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financ	and expense ial stateme	e statement, and nts that describes	
Par	Organ	nizations Maintaining Collection lete if the organization answered "Y	s of Art, Historical Treasure	s, or Othe	er Similar Assets.	
1a	If the organize	ation elected, as permitted under SFAS 1 historical treasures, or other similar asse ide, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its re ts held for public exhibition, education	venue state in, or resear	ch in furtherance of pu	et blic
b	works of art, h	ation elected, as permitted under SFAS 1 historical treasures, or other similar asse ide the following amounts relating to thes	ts held for public exhibition, education	ue statemer on, or resear	ch in furtherance of pu	
	(i) Revenues	included in Form 990, Part VIII, line 1			<b>▶</b> \$	
	(ii) Assets in	cluded in Form 990, Part X			<b>&gt;</b> \$	
2	If the organiz	ation received or held works of art, histor ounts required to be reported under SFAS	ical treasures, or other similar asset 116 (ASC 958) relating to these ite	s for financi ms	al gain, provide the	
a	Revenues inc	luded in Form 990, Part VIII, line 1			<b>▶</b> \$	

ς	chi	uhe	ما	n	(Form	990	١.	20	17

Page 2

Par	III	Organizations Maintaining Col	lections of Art,	His	tori	cal Tı	easur	es, or Oth	er:	Similar	Asset	s (co	ntinued)
3		ng the organization's acquisition, accession accession items (check all that apply)	on, and other record	ls, ch	neck :	any of	the follow	wing that are	a si	gnificant	use of	ts	
a	Γ	Public exhibition		d	Γ	Loan	orexcha	ange program	15				
b	Γ	Scholarly research		e		Other	•						
c	$\Gamma$	Preservation for future generations	7 2 7										
4		vide a description of the organization's co t XIII	llections and explai	n hov	w the	furthe	r the or	ganızatıon's (	exer	npt purpo	se in		
5		ring the year, did the organization solicit o ets to be sold to raise funds rather than to							mıla	ır	Г	ſes	∏ No
Par	t IV	Escrow and Custodial Arrange Part IV, line 9, or reported an am						answered "	Yes	" to For	m 990	į.	
1a	ıncl	he organization an agent, trustee, custodi uded on Form 990, Part X?					itions or	other assets	no	t	Г	ſes	┌ No
b	If "	Yes," explain the arrangement in Part XII	I and complete the	follov	wing t	able		Г	Т		Amou	nt	
С	Beg	ginning balance						10	1				
d	A d	ditions during the year						1d					
е	Dis	tributions during the year						1e					
f		ding balance						1f					
2a	Did	the organization include an amount on Fo	rm 990, Part X, line	21?				<del>7</del>			Гγ	/es	Г No
b	If"	res," explain the arrangement in Part XIII	Check here if the	expla	anatio	n has	been pro	ovided in Part	XI	11 222	3776 E	2 2	
Par	rt V											•	
			(a)Current year	(b	)Рпог	year	b (c)Tw	o years back (	1)Th	ree years b	ack (e)	Four ye	ars back
1a	Beg	jinning of year balance											
b		ntributions		5						-		1.64	-
С	Net	investment earnings, gains, and losses						1 -					
d	Gra	nts or scholarships											
e		ner expenditures for facilities											
f	Adı	ministrative expenses											
g	End	of year balance [									- 1		
2	Pro	vide the estimated percentage of the curr	ent year end balanc	e (lın	ne 1g	, colum	ın (a)) he	eld as					
а	Boa	rd designated or quasi-endowment 🟲											
b	Per	manent endowment 🕨											
c		nporarily restricted endowment > percentages in lines 2a, 2b, and 2c shou	ld equal 100%										
За	orga	there endowment funds not in the posses anization by	sion of the organiza	ition	that	are hel	d and ad	lmınıstered fo	r th	e = 10,		Yes	No
		unrelated organizations		•						- ·- ·	3a(i)		THE PERSON
E.		related organizations			Schoo	 lule Ba	•		٠	• •	3a(ii) 3b		
4		res to sa(ii), are the related organization cribe in Part XIII the intended uses of the	•						•		.50		
_	t VI						10.						
1		Description of property	ne occ rollings	.,		a) Cost	or other estment)	(b)Cost or other		(c) Accum depreca		(d) B	ook value
1a	Land				1				$\top$				
	Build		# 140 # 100 # 1										
		ehold improvements							1				
d	Equi	pment						9,6	68		4,627	-	5,041
_e	0 the	r	* (*) * (*)	•:				18,9	25		16,610		2,315
Tota	l. Ad	d lines 1a through 1e (Column (d) must ed	qual Form 990, Part X	(, colu	ımn (	B), line	10(c).)		-	>	-		7,356

(a) Description of security or category	Form 990, Part X, line 12	(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
her		
		10.51
<del></del>	A. I	
	<del></del>	
		4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
	<del></del>	
to the second of		
	18 18 18 18 18	
The second secon		
that I design to I have added to the state of the state o	Form COO Part V June	13
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) bescription of investment type	192	Cost or end-of-year market value
	1 18/10/14	
7.	12 12	9) 900 is id
	Par I	**************************************
		L. F. L.
otal. (Column (b) must equal Form 990, Part X, col (B) line 13 )	P .	
Part IX Other Assets. See Form 990, Part X,	line 15.	
(a) Descri	ription	(b) Book value
The state of the s		
	2 2	
the state of the s		
otal (Column (h) must equal Form 990, Part X, col (R) line	15.)	
Part X Other Liabilities. See Form 990, Part	t X, line 25.	
Part X Other Liabilities, See Form 990, Part (a) Description of liability		
Part X Other Liabilities, See Form 990, Part (a) Description of liability	t X, line 25.	
Part X Other Liabilities, See Form 990, Part (a) Description of liability	t X, line 25.	
Part X Other Liabilities, See Form 990, Part (a) Description of liability	t X, line 25.	
Part X Other Liabilities, See Form 990, Part (a) Description of liability	t X, line 25.	
Part X Other Liabilities, See Form 990, Part (a) Description of liability	t X, line 25.	
Part X Other Liabilities, See Form 990, Part (a) Description of liability	t X, line 25.	
Part X Other Liabilities, See Form 990, Part (a) Description of liability	t X, line 25.	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	t X, line 25.	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	t X, line 25.	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	t X, line 25.	
otal. (Column (b) must equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of liability  ederal income taxes	t X, line 25.	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	t X, line 25.	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	t X, line 25.	
Part X Other Liabilities, See Form 990, Part (a) Description of liability	t X, line 25.	

Par	XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per Retui	n
1	Total revenue, gains, and other support per audited financial statements	1	5,599,972
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII ) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	5,599,972
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII ) 4b		
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	5,599,972
Pari	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per Ret	urn
1	Total expenses and losses per audited financial statements	1	5,040,110
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	1 1	
ь	Prior year adjustments	]	
C	Other losses		
d	Other (Describe in Part XIII ) 2d	1 1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	5,040,110
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	1	
b	Other (Describe in Part XIII ) 4b		
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	5,040,110

#### Part XIII Supplemental Information

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

I dentifier	Return Reference	Explanation
Pt X Line 2		IWV is exempt from income taxes on all activities directly
		RELATED TO ITS EXEMPT PURPOSE UNDER THE INTERNAL REVENUE SERVICE CODE SECTION 501 (C)(4) THE ORGNIZATION IS LIABLE FOR INCOME TAXES ON UNRELATED BUSINESS INCOME THERE WAS NO TAXABLE NET UNRELATED BUSINESS INCOME FOR THE YEAR ENDE DECEMBER 31, 2012 ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THESE FINANCIAL STATEMENTS THE ORGANIZATION EVALUATED ITS TAX POSITIONS AND DETERMINED IT HAS NO UNCERTAIN TAPOSITIONS AS OF DECEMBER 31, 2011 THE
		ORGANIZATION'S
		2010 THROUGH 2012 TAX YEARS ARE OPEN FOR EXAMINATION BY FEDERAL TAXING AUTHORITIES

DLN: 93493214009113

Schedule J (Form 990)

**Compensation Information** 

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

**Compensated Employees** ▶ Complete if the organization answered "Yes" to Form 990,

Part IV, question 23. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

Name of the organization INDEPENDENT WOMEN'S VOICE

Employer identification number

36-4534086

Pa	rt I Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form		1.00	
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III	~ <sub>~</sub>		
	Compensation committee Written employment contract	**		
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
•	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	-		
	The so any of fines fare, not the persons and provide the applicable amounts for each form in that are			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		No
ь	Any related organization?	5b		No
U	If "Yes," to line 5a or 5b, describe in Part III	-55	700	11,0
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	6a		No
ь	Any related organization?	6b		No
U		- 00		140
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
_	<b>I</b>	0	-	140
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Schedule J (Form 990) 2012

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS		(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported as deferred		
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			benefits (5)(1) (5		ın prior Form 990
(1)HEATHER R HIGGINS	(i) (ii)	126,000		72,500			198,500	21		

Schedule J (Form 990) 2012

Schedule J (Form 990) 2012

Page 3

Part III Supplemental Information

**Identifier** 

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

**Return Reference** 

Also complete this part for any additional information

Explanation

Schedule J (Form 990) 2012

Schedule L (Form 990 or 990-EZ) **Transactions with Interested Persons** 

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,

OMB No 1545-0047

DLN: 93493214009113

		103 011101			t V, line 38a or		,			-	-0 :		
Department of the Treasury		► Attach to			-EZ. ► See sep					I	en to l	tior	
Name of the orga							Em	ploye	r ident i	ficatio	n numb	er	
INDEPENDENT WOME	IN S VOICE						36	-4534	1086				
Part I Exces	s Benefit Trar	sactions (	section	501(c)(3) a	and section 5	01(c)(4) or	ganıza	tions	only).				
	te if the organizat											_	
1 (a) Name (	of disqualified pers			np between dis and organizati		(c) Descri	ption o	ftrans	saction	-	(d) Co	_	
		_	person	and organizati	-					$\rightarrow$	Yes		10
		_								-			
												_	
	5a)											_	
												_	
												-	
												-	
2 Enter the am	ount of tax incurre	ed by organiza	ition ma	anagers or dis	qualified perso	ns during the	yearu	nders	ection \$				
	ount of tax, if any,								<b>F</b> \$				
3 Enter the am	ount of tax, if any,	on mie 2, ab	046, 161	illouised by th	e organization	-3 let	No.					-	
Part II Loai	ns to and/or F	rom Inter	ested	Persons.						-			
	olete if the organiz					ine 38a, or Fo	rm 99	), Par	t IV, lin	e 26, d	or if the		
	ization reported a					T		_	21	Server.	Law		_
(a) Name of Interested	(b) Relationship with organization			oan to	(e)Original principal	(f)Balance	(g) defa	In ult?	Appre		agree	/ritte	
person	With organization	Of Idail	oan or from the principal organization? amount		due	deladic.		by board o		D-13 - 0.57 - 0.57			
									comm	ttee?			
			То	From			Yes	No	Yes	No	Yes		No
										-	<u>—</u> ;:		
							-		-				
			-		+		-	_	-	+	-		
		1	-	_						$\vdash$			
otal			<b>▶</b>	ś				_		-	7		
	ts or Assistan	ce Benefit			Persons.	-		-		-			
Comp	plete if the orga	nization ans	wered	"Yes" on Fo	rm 990, Pari	t IV, line 27.							
(a) Name of inte	rested (b) Re	lationship bei	tween	(c) A mount of	of assistance	(d) Type o	fassis	tance	(e)	Purpos	se of as	sıst	ance
person		ted person ar	nd the										
		organization											_
			11-11-1		1			-				_	
					-,		-4.		75. 5		0.0		
	2 1												
				_									

Part IV Business Transactions In Complete if the organization	nvolving Interested n answered "Yes" on F	l Persons. Form 990, Part IV, lin	e 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	ation's
				Yes	No
(1) ASHDOWN FOREST STRATEGIES LLC	See Supplemental info	198,500	Management consulting		No
			12		

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
Part IV, line 1, col b	William I will be made to the second	The owner of Ashdown Forest Strategies is the President/CEO
	BESTURE ELL COLUMN	of Independent Women's Voice

Schedule L (Form 990 or 990-EZ) 2012

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493214009113

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047
2012
Open to Public

Inspection

Name of the organization INDEPENDENT WOMEN'S VOICE

Employer identification number 36-4534086

ldentifier	Return Reference	Explanation
Pt VI, Line 12c		Board members are given the policy and are asked to confirm there are no conflicts, or if there are,
		to address them with the board. The review is ongoing via review of the invoices/financial data. In addition,
		the CEO regularly points out to Board members and consultants
		that compliance policies are worthless without an ethical
	•	culture The Board requires assurance that there are no
		conflicts in any contractual relationship, while requiring
		full disclosure and evaluation where there may be a conflict
Pt VI, Line 15a		MV's top management official has a monthly consulting
	Ž.	contract. The board has the discretion at year end to
		adjust the annual compensation based on executive
		compensation of similar organiations
Pt VI, Line 11b	2 ( A)	The 990 is reviewed by the board prior to filing
Pt VI, Line 19		The documents will be provided if requested
Form 990, Part IX, Line 24f	4.+  	POSTAGE 4238 531 607 3100 MAILING LIST 104975 104975 0 0 OVERHEAD ALLOCATED FROM AFFILIATES 8496 0 8496 0 BANK CHARGES/MERCHANT FEES 26745 0 26745 0 STATE REGISTRATION FEES 9643 0 0 9643 DUES AND SUBSCRIPTIONS 3274 2959 315 0 CABLE/TELEPHONE 298 298 0 0 COMMUNICATIONS 63935 63935 0 0 ALLOCATED G & A COSTS 0 21630 -21659 29 STORAGE 1051 0 1051 0 GIFTS 574 172 402 0

# Exhibit 11

DLN: 93493216001234

Form **990** 

## **Return of Organization Exempt From Income Tax**

Denado	nent of the	Treasury	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue foundations)  Do not enter Social Security numbers on this form as it may be made to the fo	•	• •	TDS	2013		
Internal	Revenue	Service	generally cannot redact the information on the Information about Form 990 and its instructions is at <a href="https://www.irs.gov">www.irs.gov</a> ,	form /form990		1K3	Open to Public Inspection		
A Fo	or the 2	013 cale	ndar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31	-2013					
	eck if ap	pikabie	C Name of organization Independent Women's Voice		D Employer identification numbe				
_	dress cha me chan	· F	Doing Business As		36-4	36-4534086			
[ In	tial retur								
_	mmated	- 1	Number and street (or P O box if mail is not delivered to street address) Room/suite 1875 I Street NW	e		one numbe			
AIT AIT	ended n	etum 📗	City or town, state or province, country, and ZIP or foreign postal code	7	(202	857-329	93		
Ap	plication	pending	Washington, DC 20006		<b>G</b> Gross	receipts \$ 1,	,982,834		
			F Name and address of principal officer HEATHER HIGGINS		s this a group				
			1875 I Street NW	s	ubordinates?		「Yes ▼ No		
			Washington, DC 20006	H(b) A	re all subord	ınates	ΓYes ΓΝο		
T Ta	v-evem	ot status	Francisco F rocción de la Francisco Francisco		ncluded?				
_			501(c)(3)  501(c) (4)  (Insert no )  4947(a)(1) or  527	I	f "No," attaci	nalist (s	ee instructions)		
				H(c) (	Group exemp	tion numb	er ►		
	n of orga rt I	Summ	Corporation Trust Association Other ►	L Year	of formation 26	003 M Sta	ate of legal domicile DC		
			cribe the organization's mission or most significant activities						
Activities & Governance	-		ort for policies that empower individuals by giving them greater freedor  box F if the organization discontinued its operations or disposed of						
3		HECK CHIS	obox P in the organization discontinued its operations or disposed or	more th	an 25% of its	net asse	ts		
ag ey	3 N	umber of	voting members of the governing body (Part VI, line 1a)			3	2		
뜵	4 N	umber of	independent voting members of the governing body (Part VI, line 1b)			4	1		
E E		-	ber of individuals employed in calendar year 2013 (Part V, line 2a) .	* *		5	0		
₫			ber of volunteers (estimate if necessary)			6	. 0		
			lated business revenue from Part VIII, column (C), line 12			7a	0		
_	b N	et unrela	ted business taxable income from Form 990-T, line 34			7b			
		G b b		_	Prior Year		Current Year		
₫.	8	,	itions and grants (Part VIII, line 1h)		5,592,	117	1,981,744		
Revenue	10		service revenue (Part VIII, line 2g)				0		
즆	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7	055	0		
	12	Total rev	venue—add lines 8 through 11 (must equal Part VIII, column (A), line			855	1,090		
	13		and similar amounts paid (Part IX, column (A), lines 1–3 )	-	5,599,	9/2	1,982,834		
	14		paid to or for members (Part IX, column (A), line 4)	-		_	0		
	15		, other compensation, employee benefits (Part IX, column (A), lines				0		
Expenses	13	5-10)			37,	672	145,779		
<u>a</u>	16a	Professi	onal fundraising fees (Part IX, column (A), line 11e)				0		
শ্র	ь		raising expenses (Part IX, column (D), line 25) 131,805						
	17	Otherex	openses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,002,	438	2,173,016		
	18		penses Add lines 13-17 (must equal Part IX, column (A), line 25)		5,040,	110	2,318,795		
. 02	19	Revenue	less expenses Subtract line 18 from line 12		559,	_	-335,961		
Net Assets or Fund Balances				Begin	ning of Curre Year	nt	End of Year		
Bak	20	Total as:	sets (Part X, line 16)		699,	192	347,337		
32	21	Total Ira	bilities (Part X, line 26)		41,	339	25,445		
	22		ets or fund balances Subtract line 21 from line 20		657,	853	321,892		
	t II	-	ture Block						
Under my kr	penalt	ties of pe	rjury, I declare that I have examined this return, including accompanyi lief, it is true, correct, and complete Declaration of preparer (other tha	ing sche in officer	dules and sta ) is based on	itements, all inform	and to the best of ation of which		
c:		Signatur	re of officer		2014-07-25 Date				
Sign Here	Jose I				Date				
			R HIGGINS PRESIDENT & CEO print name and title						
		Prin	t/Type preparer's name Preparer's signature Dat		Check f	PTIN			
Paid	l		JGLAS S COREY CPA 201  1's name ▶ Douglas Corey & Associates PC	14-08-04	self-employed				
Pre	parer	· [ˈ""	- Production of Production of Associates PC		Firm's EIN				
	Only		s address ► 6601 Little River Tripk Suite 440		Phone no (703	354-2900			
			Alexandra, VA 223121303						
Mayt	he IRS	discuss	this return with the preparer shown above? (see instructions)		2 1907 1901 1907		· FYes No		

Total program service expenses ▶

4e

(Expenses \$ including grants of \$

2,086,796

Part IV Checklist of Required Schedules

E.		Yes	No	
Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		Νo	
Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes		
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 1	3	Yes		
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		No	
Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No	
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		No	
	7		No	
	8		Νo	
Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No	
Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No	
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	100			
Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes		
Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No	
Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No	
Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	- A	No	
Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No	
Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes		
Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes		
Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No	
Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No	
	14a		No	
Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No	
	15		No	
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No	
	17		No	
Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	L I	No	
Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If	19		No	
	20a		No	
If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь			
	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?   Did the organization engage in direct or indirect political campaing activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part 159.  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax yea? If "Yes," complete Schedule C, Part III.  Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 "Yes," complete Schedule C, Part III.  Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II.  Did the organization receive or hold a conservation essement, including essements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  Did the organization report an amount in Part X, ine 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V.  Did the organization developed the part X, ine 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or younged credit Counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V.  Did the organization developed the part X, ine 15 for yes, "complete Schedule D, Part V.  If the organization and credit or through a related organizat	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?    2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? 1º Yes, "complete Schedule C, Part I"  3 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 Is the organization a section 501 (c)(4), 501 (c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If Yes,"complete Schedule C, Part II  5 Is the organization maintain any donor advised funds or any similar funds or accounts for which donors have the opposition provide advice on the distribution or investment of amounts in such funds or accounts 7 If Yes," complete Schedule D, Part II  6 Id the organization maintain collections of works of art, historical treasures, or other similar assess? If Yes," complete Schedule D, Part III  7 Id the organization maintain collections of works of art, historical treasures, or other similar assess? If Yes," complete Schedule D, Part III  8 Id the organization maintain collections of works of art, historical treasures, or other similar assess? If Yes, complete Schedule D, Part III  8 Id the organization distribution or other organization properts an amount in Part X, in provide credit counseling, debt management, credit repair, or debt negotiations exceeds If Yes, complete Schedule D, Part V III  9 Id the organization report an amount for land, buildings, and equipment in Part X, line 10 If Yes, complete Schedule D, Part V III  10 If Yes, complete Schedule D, Part V III  11 If Yes, complete Schedule D, Part V III  11 If Yes, complete Schedule D, Part V III  11 If Yes, complete Schedule D, Part X III  12 Id the organization report an amount for investments—organized schedule D, Part X III  12 Id the organization report an amou	Is the organization described in section 501(c/(3) or 4947(a)(1) (other than a private foundation) If "Yes," complete Schedule B. Schedule of Contributors (see instructions)? \$\frac{1}{2}\$.  Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)? \$\frac{1}{2}\$.  Dot the organization and infect or indirect politicula campaign activities on behalf of or in opposition to a conditates for Per ("Re", complete Schedule C, Part I" B.  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501 (in) (4) conditions are conditions or accounts for which donors have the reparation or section 501 (c)(4), 501 (c)(5), or 501 (c)(6) organization that receives membership dues, assessments, or similar anounts as defined in Revenue Procedule B. 19 19 17 "Per", complete Schedule C, Part II I.  Is the organization arounts as offened in Revenue Procedule B. 19 19 17 "Per", complete Schedule D. Part II I.  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the received of the procedule D. Part II I.  Did the organization receive or hold a conservation easement, including assements to preserve open space, the environment, instoric land areas, or historic structures? If "Yes," complete Schedule D, Part II "Per," complete Schedule D, Part II "Per, complete Schedule D,	Is the organization described in section 501(c/3) or 4947 (a)(1) (other than a private foundation)? If "Yes," complete Schedule 8, Schedule of Continuouss (see instructions)? If 1

	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	7.	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	77	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	1111	
d		24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	31	No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	-		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part  IV	28a	9	No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Part I	31		No
32	Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33		No
34	and Part V, line 1	34	سبيد	No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Τ.	No
b	If "Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197  Note. All Form 990 filers are required to complete Schedule O	38	Yes	

14b

990 (2				Page !
rt V	Statements Regarding Other IRS Filings and Tax Compliance	E):		
	Check if Schedule O contains a response or note to any line in this Part V	• •	· ·	1
Entor	the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   26		Yes	No
	the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 26 the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	e organization comply with backup withholding rules for reportable payments to vendors and reportable			
	g (gambling) winnings to prize winners?	1c		
Tax S	tatements, filed for the calendar year ending with or within the year covered sereturn			
If at le	east one is reported on line 2a, did the organization file all required federal employment tax returns?  If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
	e organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
over,	time during the calendar year, did the organization have an interest in, or a signature or other authority a financial account in a foreign country (such as a bank account, securities account, or other financial nt)?	4a		No
If "Ye See in	s," enter the name of the foreign country - structions for filing requirements for Form TD F90-22 1, Report of Foreign Bank and Financial Accounts			
Was ti	ne organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	ly taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	s," to line 5a or 5b, did the organization file:Form 8886-T?			
		5c 6a	Yes	
organi	the organization have annual gross receipts that are normally greater than \$100,000, and did the zation solicit any contributions that were not tax deductible as charitable contributions?	oa	res	
were r	s," did the organization include with every solicitation an express statement that such contributions or gifts not tax deductible?	6b	Yes	
	izations that may receive deductible contributions under section 170(c).			
	e organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and es provided to the payor?	7a		
If"Ye	s," did the organization notify the donor of the value of the goods or services provided?	7b		
	e organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7c		
	s," indicate the number of Forms 3282 filed during the year		40	
	e organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		
Did th	e organization, during the year; pay premiums, directly or indirectly, on a personal benefit contract?	7f		
If the	organization received a controution of qualified intellectual property, did the organization file Form 8899 as	<b>7</b> g		
	organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
Spons the su	oring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did apporting organization, or a donor advised fund maintained by a sponsoring organization, have excess ess holdings at any time during the year?	8		
	oring organizations maintaining donor advised funds.	_		
	e organization make any taxable distributions under section 4966?	9a		
	e organization make a distribution to a donor, donor advisor, or related person?	9b		
	on 501(c)(7) organizations. Enter			
	tion fees and capital contributions included on Part VIII, line 12 10a			
facilit				
	on 501(c)(12) organizations. Enter			
	Income from members or shareholders			
Gross again	income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them )			
Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	es," enter the amount of tax-exempt interest received or accrued during the			
	on 501(c)(29) qualified nonprofit health insurance issuers.		-	
Teth	e organization licensed to issue qualified health plans in more than one state? See the instructions for additional information the organization must report on Schedule O	13a		
Enter	the amount of reserves the organization is required to maintain by the states ich the organization is licensed to issue qualified health plans			
	the amount of reserves on hand	1	-	1
D. J.	the amount of reserves on hand	14a	i	No

**b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . .

_	330 (2013)			fa
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 71 "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes See instructions.	belo es in :	w, ana Schedu	le O.
	Check if Schedule O contains a response or note to any line in this Part VI		W X	
Se	ction A. Governing Body and Management		V T	No
1a	Enter the number of voting members of the governing body at the end of the tax year		Yes	NO
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent	- 2		
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	-	No_
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a 7b		No_
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	/5		
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	8a	Yes	
	The governing body?	8b	Yes	
	Each committee with authority to act on behalf of the governing body?  Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		103	
-	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	in Cod	No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	even	Yes	No.
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	V. A	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	, i
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		1	
	The organization's CEO, Executive Director, or top management official	15a 15b	Yes	No
b	O ther officers or key employees of the organization	130		. 140
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
		16b		L
	ection C. Disclosure  List the States with which a copy of this Form 990 is required to be filed▶AL , AR , AZ , WI , CA , CO , CT , FL , G	Д НТ	II K	S . KY
17	MD, ME, MA, MN, MO, MS, ND, NH OK, OR, PA, RI, SC, TN, UT, VA, V	), CN,	NY,NC	,он,
18	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
19	Own website Another's website Vipon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of t PETER LIPS 1875 I Street NW	he orga	anızatıo	n
	Washington, DC 20006 (540) 888-4752		2001	

	000		
orm	990	リリノロ	) 1 3 1

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours	more pers and	than on is	one bot rect	not box h ar or/ti	offic rustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key smployee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations	
(1) HEATHER R HIGGINS	40 00	T,		Ţ	Г			130 500			
President & CEO		×		X				128,500	0		
(2) MIDGE DECTER	1 00	T.						0			
Director		Х						0	A		
							Г				
		1		T			Т				
					1		-				
<del></del>				H	H		1				
				+	H	-	-				
*)			-	┝	┝		-				
			-	-	-	-	-				
	L			_	_	-	-				
				┖	_			12 E			
-A.									*		
			F				1		7 30		
+			-	1	+			1 2			
			$\vdash$	+	+	1	+				
3 3											

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

												4			
	(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	than d on is	one l both	box, and r/tru:	officer stee)	-	(D) Reportable compensation from the organization (W- 2/1099-MISC)		from related organizations (W-		(F) Estimated amount of other compensation from the organization and		
		organizations below dotted line)	Institutional Trustee Individual trustee or director		Officei	Key employee	Highest compensated emido; ee	Former	12		2,222		related organization		
				Ľ.	_		2	_			3 3 4 4 4	-			
		1										-			
														Q.	
											15.4				
									145			1			
_			_	-	$\vdash$	$\vdash$	1-					1			
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				100		11				i 4 2	P-1				
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	* * * * * * * * * * * * * * * * * * * *			1	$\vdash$	1									
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_			-	-	-	+	-	-				╁			
	- V		<u> </u>		$\vdash$	_						-		-3844	
1b	Sub-Total				٠	•	•0	-							
C	Total from continuation shee				i.•	•2				120 50		-			
d	Total (add lines 1b and 1c)					- 100		-		128,500					
2	Total number of individuals (ii \$100,000 of reportable comp						ed abo	ve) w	no receive	d more ti	han				
_				+		-							Yes	No	
3	Did the organization list any f on line 1a? If "Yes," complete					, key	y empl	oyee •	, or highes	t comper	nsated employee	3		No	
4	For any individual listed on lir organization and related orga														
_	individual				•	•	•	• •		• • •		4	Yes		
5	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										No				
Section B. Independent Contractors															
1															
(A) (B) Name and business address Description of services											(C) Compensation				
	ry Media Group 429 Mill Street Coraop		-								cations services	$\bot$	859,776		
	Brushfire Group 2280 Satellite Blvd Dul own Forest Strategies 35 N Moore St		10013							Grassroots Managem	services ent Consuting	+	274,000 128,500		
Antietam Communications 710 E Northway Lane Atlanta GA 30342 Communications Services												120,000			

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

\$100,000 of compensation from the organization >4

Part \	ΛΠΙ	Statement of Revenue	Processor Advisor Woodship Waren			=
		Check if Schedule O contains a response or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
10 L	1a	Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues 1b				
Gr.	c	Fundraising events 1c	-			
ž Ž			-			
Gif	d	Related organizations 1d	-			
ıs,	e	Government grants (contributions) 1e				
ti S	f	All other contributions, gifts, grants, and 1f 1,981,744 similar amounts not included above	1 1			1
the the	١,	Noncash contributions included in lines				
ξĒ	g	1a-1f \$				
a Co	h	Total. Add lines 1a-1f	1,981,744			
	1	Business Code				1
Program Service Revenue	2a				EL EL	1
E K	ь					
96	c					
\$ .	d					
Š	e					
<u>~</u>	f	All other program service revenue				
700						
	g	Total. Add lines 2a-2f				
	3	Investment income (including dividends, interest, and other similar amounts)	-			
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties			Α	
		(I) Real (II) Personal				
	6a	Gross rents	]			
	Ь	Less rental expenses				
	ç	Rental income				
	d	or (loss)  Net rental income or (loss)	-			
	140	(i) Securities (ii) Other				<b></b>
	7a	Gross amount				
		from sales of assets other				
	Ь	Less cost or				1
		other basis and sales expenses				
	c	Gain or (loss)				
	d	Net gain or (loss)				
	8a	Gross income from fundraising				
Other Revenue		events (not including				
₹ 2		of contributions reported on line 1c)				1
æ		See Part IV, line 18	l l			
<u>Φ</u>	- b		4			
	c	Less direct expenses	-			
_		Gross income from gaming activities				<del></del>
		See Part IV, line 19		- 0 - 1		
	1	a				
	1	Less direct expenses b				
	l .	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances .				
		а				
	b	Less cost of goods sold b				
	C	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Code				
	11a	O ther income 9000	1,090	1,090		
	ь	ű.				
	c					
	d	All other revenue			-1 -10	
	e	Total. Add lines 11a-11d	1,090			
	12	Total revenue. See Instructions	1,982,834	1,090		
	1		1,902,034	1,090		

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) (B) Do not include amounts reported on lines 6b, Fundraising Management and Program service Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses expenses general expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the 2 United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees . . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . 61,030 19,288 54,554 134,872 Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . 9 Other employee benefits . . . . . 4,420 4,701 1,786 10,907 10 Payroli taxes . . . . Fees for services (non-employees) 11 10,250 240,312 214,340 15,722 Management . . . 31,884 Ó 40,817 8,933 Legal , . . . . . 0 11,482 0 11,482 Accounting . . . . . . Lobbying . . . . Professional fundraising services See Part IV, line 17 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 127,195 115,500 11,695 Schedule O) . . . . . . . . Advertising and promotion . . . 12 170 1,376 1,880 3,426 13 Office expenses . . . . Information technology . . . . 14 Royalties . 15 16 Occupancy . . . . . . . 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials . . . . . . 31,240 10,147 589 41,976 19 Conferences, conventions, and meetings . . . . Interest . . . . . . . . . 20 21 Payments to affiliates . . . . . . 0 4,179 0 4,179 Depreciation, depletion, and amortization . 22 0 0 1,923 1,923 23 Insurance . . . Other expenses Itemize expenses not covered above (List 24 miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 307,499 307,499 0 0 Grass roots activity 0 0 963,703 963,703 Active engagement 0 298,938 298,938 0 Polling C 45,641 45,641 0 Communications 17,766 85,925 56,194 11,965 All other expenses Total functional expenses. Add lines 1 through 24e 2,318,795 2,086,796 100,194 131,805 25 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► [ if following SOP 98-2 (ASC 958-720)

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	656,162	1	212,829
	2	Savings and temporary cash investments		2	"
	3	Pledges and grants receivable, net		3	110,000
	4	Accounts receivable, net	7,340	4	9,088
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
				5	
Assets	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			Î.
Se	-	Nahaa and lana araawahii wak		6	
A <sub>S</sub>	7   8	Notes and loans receivable, net		7	
		Inventories for sale or use	20.00	8	
	9 10a	Prepaid expenses and deferred charges	28,334	9	9,951
		Part VI of Schedule D 30,885			
	Ь	Less accumulated depreciation	7,356	10c	5,469
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	5
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	699,192	16	347,337
	17	Accounts payable and accrued expenses	41,339	17	25,445
	18	Grants payable		18	-
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
8	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	-
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>.</u> E		persons Complete Part II of Schedule L		22	
7	23	Secured mortgages and notes payable to unrelated third parties		23	
.9	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	41,339	26	25,445
Ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🂢 and complete lines 27 through 29, and lines 33 and 34.			
ลม	27	Unrestricted net assets	657,853	27	321,892
Ba	28	Temporarily restricted net assets		28	
<u> </u>	29	Permanently restricted net assets		29	
Assets or Fund Balance	m	Organizations that do not follow SFAS 117 (ASC 958), check here ▶   and complete lines 30 through 34.	W		
0	30	Capital stock or trust principal, or current funds		30	
et.	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Ass	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	657,853		321,892
<b>ラ</b> !	34	Total liabilities and net assets/fund balances	699,192	34	347,337

Par	Reconcilliation of Net Assets  Check if Schedule O contains a response or note to any line in this Part XI	S(*E) (S(*E)	(*) (*)	**	_,
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,9	82,834
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,3	18,795
3	Revenue less expenses Subtract line 2 from line 1	3		-3	35,961
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		6	57,853
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7, 2	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3	21,892
	Check if Schedule O contains a response or note to any line in this Part XII	• •	· ·	Yes	No No
	Accounting method used to prepare the Form 990				-
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	red on			
	Separate basis Consolidated basis Both consolidated and separate basis		1		
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both	ate			
	Separate basis Consolidated basis Both consolidated and separate basis				é
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
38	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	:	3a		No
ь	Single Audit Act and OMB Circular A-133?  If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		L	orm <b>99</b> 0	(2013)

DLN: 93493216001234

## SCHEDULE C

### Political Campaign and Lobbying Activities

OMB No 1545-0047

	m 990 or 990-EZ)		ations Exempt From Income 1			
	ment of the Treasury Il Revenue Service	► See separ	ate instructions. > Information a instructions is at ww	50 ESC UNION	60 % A	Open to Public Inspection
f th	Section 501(c)(3) of Section 501(c) (oth Section 527 organize e organization an Section 501(c)(3) of Section 501(c)(3) of e organization and	organizations Co per than section of zations Complet aswered "Yes" organizations that organizations that aswered "Yes"	"to Form 990, Part IV, Line 3, of pmplete Parts I-A and B Do not core 501(c)(3)) organizations. Complete e Part I-A only." to Form 990, Part IV, Line 4, of at have filed Form 5768 (election unat have NOT filed Form 5768 (election to Form 990, Part IV, Line 5 (P	r Form 990-EZ, Pai nplete Part I-C Parts I-A and C bel r Form 990-EZ, Pai nder section 501(h)) on under section 50	rt V, line 46 (Political Cam low Do not complete Part I-B rt VI, line 47 (Lobbying Ac ) Complete Part II-A Do not co 01(h)) Complete Part II-B Do	paign Activities), then tivities), then complete Part II-B not complete Part II-A
	me of the organiza		izations Complete Part III	H	Employer ident	ification number
Ind	ependent Women's Vo	ice			36-4534086	
Par	t I-A Comple	te if the ora	anization is exempt unde	r section 501(c		organization.
1	* 535 + 175 - 17		anization's direct and indirect poli			
2	Political expendi		amzacion's direct and munect pon	dear campaign dea	h-	\$ 958,770
3	Volunteer hours	itures				938,770
_	volunteer nours					
Par	t I-B Comple	te if the org	anization is exempt unde	r section 501(c	c)(3).	
1	Enter the amoun	t of any excise	tax incurred by the organization (	inder section 4955	<b>•</b>	\$
2	Enter the amoun	t of any excise	tax incurred by organization mana	agers under section	n 4955 🕨	\$
3	If the organization	on incurred a se	ction 4955 tax, did it file Form 4	720 for this yea <b>r</b> ?		┌ Yes ┌ No
4a	Was a correction	n made?				☐ Yes ☐ No
b	If "Yes," describ	e in Part IV				
Par			anization is exempt unde	r section 501(d	c), except section 501	l(c)(3).
1			nded by the filing organization for			\$ 958,770
2		t of the filing or	ganization's funds contributed to			\$
3	Total exempt fur	nction expenditi	ures Add lines 1 and 2 Enter her	e and on Form 112	0-POL, line 17b	\$ 958,770
4	Did the filing org	ianization file Fo	orm 1120-POL for this year?			Yes V No
5	Enter the names organization made amount of politic	, addresses and de payments Fo al contributions	d employer identification number or each organization listed, enter s received that were promptly and collical action committee (PAC)	the amount paid fro I directly delivered	om the filing organization's fo to a separate political organ	unds Also enter the nization, such as a
	(a) Name	e	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter - 0-
_						
	34 + 77					
	10 4					
		-				
					100	
		a 1				
_						

Schedule C (	Form 990	or 990-EZ) 2013
--------------	----------	-----------------

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

Ā	Check	F	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
			expenses, and share of excess lobbying expenditures)

B Check	if the filing organization checked box A and "limited control"	provisions appl	y
---------	--	-----------------	---

	Limits on Lobbying E (The term "expenditures" means a		(a) Filing organization's totals	(b) Affiliated group totals
a	Total lobbying expenditures to influence public of	opinion-(grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1	b)	P.	
d	Other exempt purpose expenditures			
e	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	118	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of in	ne 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er - 0 -		
i	Subtract line 1f from line 1c If zero or less, ent	er -0-		
j	If there is an amount other than zero on either li	ne 1h or line 1i, did the organization file Form 472	0 reporting	┌ Yes ┌ No

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period					
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Tota
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount		<u> </u>			
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

THE REAL PROPERTY.	till-B Complete if the organization is exempt under section 501(c)(3) and ha filed Form 5768 (election under section 501(h)).	s NOT		Page <b>3</b>
		(4	a)	(b)
activi	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of		1	
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 h	Direct contact with legislators, their staffs, government officials, or a legislative body?	-		
i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Other activities?	-		
j	Total Add lines 1c through 1i	-		
J 2a			ř	
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  If "Yes," enter the amount of any tax incurred under section 4912	-	L	1
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		ř.	
	t III-A Complete if the organization is exempt under section 501(c)(4), section	- FO1/-	\/E\	l continu
rei	501(c)(6).	n sor(c	)(5),	or section
			8	Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?		[	1 Yes
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		Ī	2 Yes
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3 No
Part	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes."			
1	Dues, assessments and similar amounts from members	1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
а	Current year	2a		
Ь	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 exce does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and			
_	political expenditure next year?	4		
5	Taxable amount of lobbying and political expenditures (see instructions)	5		
	art IV Supplemental Information			,
	vide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated of II-B, line 1 Also, complete this part for any additional information	group list),	, Part I	(-A, line 2, and
1	Return Reference Explanation			
Pt I-	A Line 1  IWV is an educational and issue advocacy organization engaged in r mainstream independents and women on the most important policy a IWV focuses on identifying messages that work with those key targe them with multi-faceted issue campaigns, which can include paid ad-	ind legisla t audience	tive bat	tles of the day
Pt I-	A Line 1 social media outreach, phone calls, tele-townhalls, websites, polling efforts		nd othe	r viral media

Page 4

Part IV Supplemental Information (continued)				
Return Reference	Explanation			

Schedule D (Form 990) 2013

DLN: 93493216001234

**SCHEDULE D** (Form 990)

#### **Supplemental Financial Statements**

OMB No 1545-0047

•	330)	Part IV, line 6, 7, 8, 9,	rganization answered "Yes," to Form : 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a,	or 12b		201	3
	artment of the Treasury nal Revenue Service	Attach to Form 990. Fr See separat and its instru	e instructions. Information about S ctions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a> .	chedule D	(Form 990)	Open to I	
N	ame of the organi	zation		Emp	loyer identif	ication numb	
ID	dependent Women's V	Voice					
P	art I Organi	zations Maintaining Donor Ac ation answered "Yes" to Form 99	tvised Funds or Other Similar	Funds	or Accour	ıts. Comple	te if the
		The state of the s	(a) Donor advised funds		(b) Funds ar	nd other accou	unts
1	Total number at	t end of year					
2	Aggregate cont	ributions to (during year)					
3	Aggregate gran	ts from (during year)					
4	Aggregate value	e at end of year					
5	Did the organization of th	ation inform all donors and donor advis rganization's property, subject to the o	sors in writing that the assets held in o organization's exclusive legal control?	donor adv	sed	┌ Yes	┌ No
6	used only for ch conferring impe	naritable purposes and not for the bene ermissible private benefit?	donor advisors in writing that grant fur efit of the donor or donor advisor, or fo	rany othe	r purpose	┌ Yes	┌ No
Pa	rt III Conser	rvation Easements. Complete	f the organization answered "Yes	" to Forn	n 990, Part	IV, line 7.	
2	Preservation Preservation Preservation Complete lines	X	ganization (check all that apply) n or education) Preservation of Preservation of a qualified conservation contribution	a certifie	d historic str	ructure	"
					Held at t	he End of the	Vear
а	Total number of	conservation easements		2a			
b	Total acreage re	estricted by conservation easements		2b			
C	Number of cons	ervation easements on a certified hist	coric structure included in (a)	2c			
d	Number of cons historic structur	ervation easements included in (c) ac re listed in the National Register	quired after 8/17/06, and not on a	2d			
3	Number of cons	ervation easements modified, transfer	rred, released, extinguished, or termin	ated by th	e organizatio	n during	
	the tax year 🛌						
4	Number of state	es where property subject to conserva	tion easement is located 🕨				
5	Does the organi		the periodic monitoring, inspection, h	andling of	violations, a	nd <b>Yes</b>	□ No
6	Staff and volunt	eer hours devoted to monitoring, inspe	ecting, and enforcing conservation eas	ements d	uring the yea	ar	
7	A mount of expe	nses incurred in monitoring, inspectin	g, and enforcing conservation easeme	nts durinç	the year		
8	Does each cons and section 170	ervation easement reported on line 2(0/h)(4)(B)(ii)?	(d) above satisfy the requirements of s	ection 17	'0(h)(4)(B)(i	) 「Yes	┌ No
9	the organization	and include, if applicable, the text of the 's accounting for conservation easem		ıal staten	nents that de	scribes	
Par	Organiz	zations Maintaining Collection	ns of Art, Historical Treasures	s, or Oth	ner Simila	r Assets.	
1a	If the organization works of art, his service, provide	on elected, as permitted under SFAS torical treasures, or other similar assi , in Part XIII, the text of the footnote	Yes" to Form 990, Part IV, line 8. 116 (ASC 958), not to report in its re- ets held for public exhibition, educatio to its financial statements that descri	venue stat n, or rese bes these	arch in furthe items	rance of publ	ıc
b	works of art, his service, provide	torical treasures, or other similar assi the following amounts relating to thes	116 (ASC 958), to report in its revent ets held for public exhibition, educatio se items	ie statem n, or resea	ent and balar arch in furthe	nce sheet grance of publi	ıc
	(i) Revenues in	cluded in Form 990, Part VIII, line 1			<b>▶</b> \$		
	(ii) Assets inclu	ided in Form 990, Part X			<b>▶</b> \$		
2	If the organization following amount	on received or held works of art, histor ts required to be reported under SFAS	rical treasures, or other similar assets 116 (ASC 958) relating to these iten	for financ			
a	Revenues includ	ted in Form 990, Part VIII, line 1			<b>►</b> \$		

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

18,925

350

5,469

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

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

DETERMINED IT HAS NO UNCERTAIN TAX POSITIONS AS OF D

2011 through 2013 tax years are open for examination by federal taxing authorities

Pt X Line 2

Datum Dafawanaa	Evalanation		
Return Reference	Explanation		
4			
		# 5	

Schedule D (Form 990) 2013

Part I Questions Regarding Compensation

DLN: 93493216001234

#### Schedule J (Form 990)

#### Compensation Information

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

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

Open to Public Inspection

Name of the organization Independent Women's Voice

**Employer identification number** 

36-4534086

	0.09				Yes	No
1a	Check the appropriate box(es) if the organization provi 990, Part VII, Section A, line 1a Complete Part III to	ded ar	ny of the following to or for a person listed in Form			
		o prov	Housing allowance or residence for personal use			
	First-class or charter travel  Travel for companions	<u>'</u>	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	i-				
	Discretionary spending account	i-	Personal services (e.g., maid, chauffeur, chef)			
	proceedings of the process of the pr	,	, , , , , , , , , , , , , , , , , , , ,			
b	If any of the boxes in line 1a are checked, did the organism reimbursement or provision of all of the expenses des	anızatı cribed	ion follow a written policy regarding payment or l above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to rei directors, trustees, officers, including the CEO/Execu	mburs itive D	sing or allowing expenses incurred by all prector, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all that used by a related organization to establish compensation.	t appl	y Do not check any boxes for methods			
	Compensation committee	Г	Written employment contract	1		
	Independent compensation consultant	12				
	Form 990 of other organizations	ত	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	art VII	I, Section A, line 1a with respect to the filing organization			
a	Receive a severance payment or change-of-control pa	aymer	nt?	4a		No
ь	Participate in, or receive payment from, a supplement	al nor	nqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-bas	sed co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and prov					
	Only 501(c)(3) and 501(c)(4) organizations only mus	t com	plete lines 5-9.	1		
5	For persons listed in Form 990, Part VII, Section A, I compensation contingent on the revenues of					
а	The organization?			5a		No
ь	Any related organization?			5b		No
_	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, I compensation contingent on the net earnings of	ine 1 a	a, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III				1	1
_	For persons listed in Form 990, Part VII, Section A,	lina 1 :	a did the erganization provide any non-fixed			l
7	payments not described in lines 5 and 67 If "Yes," de	escrib	e in Part III	7	ļ	No
8	Were any amounts reported in Form 990, Part VII, pa subject to the initial contract exception described in	aid or a Regula	accured pursuant to a contract that was ations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	-		8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	rebuti	table presumption procedure described in Regulations	9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MI			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported as deferred	
		(i) Base compensation	(Ii) Bonus & (Iii) Other reportable compensation compensation		compensation	Defferies	(5)(1) (5)	ın prior Form 990	
(1)HEATHER R HIGGINS	(i) (ii)	126,000		2,500			128,500		

Schedule J (Form 990) 2013

Schedule J (Form 990) 2013

Page 3

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference

Explanation

Schedule J (Form 990) 2013

DLN: 93493216001234

#### Schedule L

(Form 990 or 990-EZ)

#### **Transactions with Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, OMB No 1545-0047

2013

	i			or	Form 990-E2	, Part V, line 38a	or 40b.	-, -, -,	,		4		U
artment of the Treasumal Revenue Service	Market Survey ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.						s. ns is at	t		en to F Inspect			
ame of the or	ganization				7 7 7	3.g0v/10/11/390	W/22	V. 6	Employ	er ident	tification	on numbe	er
ndependent Worr	ien's Voice			13.00	3. 7.								•
art I Exc	ess Bene	fit Tra	nsactio	ons (sec	tion 501(c)	(3) and section	n 501(c)(4)	organi	zatioi	34086	1		
	olete if the	organiza	ation ansv	wered "Ye	s" on Form 9	90, Part IV, line	25a or 25b,	or Form	990-	EZ, Parl	t V , line	40b	
1 (a) Nam	e of disqua	lified pe	erson (	(b) Relati	onship betwe	en disqualified				nsactio		(d) Cor	rected
		91.		per	son and orga	nization						Yes	No
													-0:
											-		•0:
													20
													27
				-									•
Enter the a	mount of t	ax incur	red by or	ganızatıo	n managers o	or disqualified pe	rsons during	the yea	runde	rsectioi	n		
4958 .			1.7					•		<b>&gt;</b> \$	-	-	
e cotter the a	imount of ta	ax, ir an	y, on line	2, above	, reimbursed	by the organizat	ion			<b>&gt;</b> \$			
art II Lo	ans to a	nd/or	From I	nteres	ed Persor	1S.			_				
Co	mplete if th	e organ	ızatıon ar	nswered "	Yes" on Form	n 990-EZ, Part V	, line 38a, or	Form 9	90, Pa	art IV, lı	ne 26.	or if the	
org	anization r	eported	an amou	nt on For	n 990, Part )	(, line 5, 6, or 22							
) Name of oterested	(b) Relations	hin B	(c) urpose of	(d) Loa		(e)Original	(f)Balance	1.00		(h)		(i)Wr	
person	with	mp IF.	loan	organiza		principal amount	due	defaul	τ,	A pprov	ed	agreer	nent?
	organizat	tion						1		board			
			(6.00					1		or	++002		
- Y-				То	From			Yes	No	Yes	No	Yes	No
		11.00						103	140	163	NO	162	140
												-	
		F											
		11				7 4 4						<b>-</b> 2	
												=	
												= =	
al			\$		1 7								
						ed Persons,		~~					
a) Name of in	W. S.					n Form 990, P				- 101			
persor			elationsh sted pers			unt of assistanc	e (d) Typ	e of ass	ıstanc	e (e)	) Purpo:	se of ass	istanc
			organiza										
						1							
							_						
		A.											
		i a											
		i a											

Part IV Business Transactions Complete if the organizat  (a) Name of interested person	Involving Interested on answered "Yes" on Formula (b) Relationship between interested person and the organization	orm 990, Part IV, lin (c) Amount of transaction	e 28a, 28b, or 28c.  (d) Description of transaction	(e) Sh of organiz reven	f zation's
	organization.			Yes	No
(1) Ashdown Forest Strategies LLC	See Supplemental info	128,500	Management consulting		No
			2 11 9		
				1	
				-	ļ

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation		
Part IV, line 1, col b	The owner of Ashdown Forest Strategies is the President/CEO		
Part IV, line 1, col b	of Independent Women's Voice		200 57) 7042

Schedule L (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493216001234

**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

• Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization Independent Women's Voice **Employer identification number** 

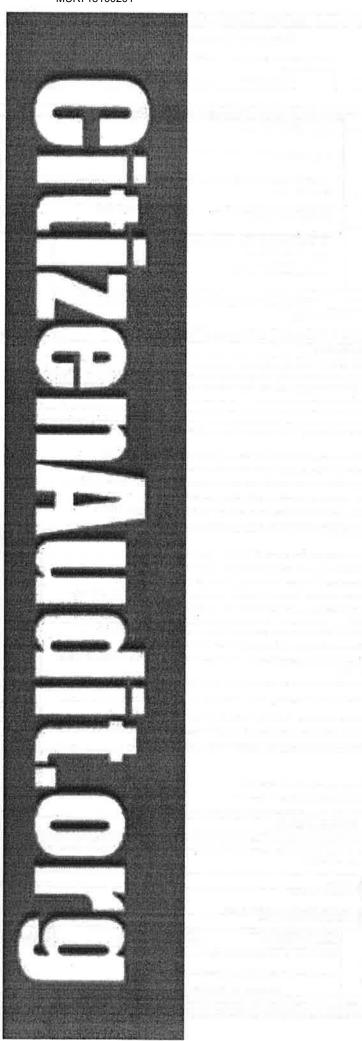
36-4534086

990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 12c	Board members are given the policy and are asked to confirm there are no conflicts, or if there are,
Pt VI, Line 12c	to address them with the board. The review is ongoing via review of the invoices/financial data. In addition,
Pt VI, Line 12c	the CEO regularly points out to Board members and consultants
Pt VI, Line 12c	that compliance policies are worthless without an ethical
Pt VI, Line 12c	culture The Board requires assurance that there are no
Pt VI, Line 12c	conflicts in any contractual relationship, while requiring
Pt VI, Line 12c	full disclosure and evaluation where there may be a conflict
Pt VI, Line 15a	MV's top management official has a monthly consulting
Pt VI, Line 15a	contract. The board has the discretion at year end to
Pt VI, Line 15a	adjust the annual compensation based on executive
Pt VI, Line 15a	compensation of similar organiations
Pt VI, Line 11b	The 990 is reviewed by the board prior to filing
Pt VI, Line 19	The documents will be provided if requested
Form 990, Part IX, Line 24f	POSTAGE 1079 57 243 779 OVERHEAD ALLOCATED FROM AFFILIATES 8284 0 8284 0 BANK CHARGES/MERCHANT FEES 8242 0 8242 0 STATE REGISTRATION FEES 10278 0 0 10278 DUES AND SUBSCRIPTIONS 3050 2730 320 0 CABLE/TELEPHONE 3826 9 3682 135 ALLOCATED G & A COSTS 0 5640 -10681 5041 GIFTS 2878 335 1875 668 WEB DESIGN/PRODUCTION 22373 22373 0 0 EVENTS (NON-FUNDRAISING) 24122 23257 0 865 BAD DEBT EXPENSE 1793 1793 0 0

# Exhibit 12

MUR718100201



Form 990

Return of Organization Exempt From Income Tax

DLN: 93493219007315

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public
 Information about Form 990 and its instructions is at <a href="https://www.IRS.gov/form990">www.IRS.gov/form990</a>

Inspection

4		<u> </u>	g 01-01-2014 , and ending 12-31-20	14		_	AVE
	1	endar year, or tax year beginning C Name of organization	g 01-01-2014 , and ending 12-31-20		D Employer	identifica	ation number
Address cha	nge	Independent Women's Voice		1	36-4534	086	2
Name chang		Doing business as					
Initial return Final		Number and street (or P O box if in 1875 I Street NW	nail is not delivered to street address) Room/s	suite	E Telephone (202) 85		
return/term		City or town state or province con	ntry, and ZIP or foreign postal code			-	
Application (		Washington, DC 20006	nary, and Ex or roleigh posterior		G Gross rece	ipts \$ 6,39	6,825
		F Name and address of pri HEATHER HIGGINS 1875 I Street NW Washington, DC 20006	ncipal officer	SU	this a group re bordinates? e all subordina		. TYes TNo
				inc	luded? "No," attach a		instructions)
Tax-exemp		<del></del>	(insert no ) 4947(a)(1) or 527	-1.3			3.5
		w iwvoice org			roup exemption	-	
K Form of org		Corporation Trust Associate	on Other -	L Year o	formation 2003	M State	of legal domicile DC
) 3 N 3 N 4 N 5 T	Number Number Total nu	of voting members of the gover of independent voting members imber of individuals employed in	ning body (Part VI, line 1a)	b)	n 25% of its n	3 4 5 6	2 1 0
- 1			Part VIII, column (C), line 12			7a	C
ь	Net unre	elated business taxable income	from Form 990-T, line 34			7b	
				. 1.3	1,981,74	_	6,176,619
σ <sub>0</sub> 8		nbutions and grants (Part VIII,		72000	1,961,7		37. 0
Revenue		am service revenue (Part VIII,	nn (A), lines 3, 4, and 7d)			-	
2 10 11 11 11 11 11 11 11 11 11 11 11 11			), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,09	90	1,164
12	Total		1 (must equal Part VIII, column (A),	line	1,982,83	34	6,177,785
13			rt IX, column (A), lines 1-3)			-	2,793,000
14 15		•	: IX, column (A), line 4) yee benefits (Part IX, column (A), line		145,7	79	326,196
16a	5-10	)) ssional fundraising fees (Part I)	Y column (A) line 11e)				
		fundraising expenses (Part IX, column (					
ਕੂ । •					2,173,0	16	2,371,33
17 18		r expenses (Part IX, column (A)	nust equal Part IX, column (A), line 25	,	2,318,7		5,490,529
19		nue less expenses Subtract lin			-335,9		687,256
Net Assets or 20 51 52 52 52 52 52 52 52 52 52 52 52 52 52			- 14 - 14 - 14 - 14 - 14 - 14 - 14 - 14	Begir	ning of Curren Year	t	End of Year
20	Total	l assets (Part X, line 16)			347,3	37	1,021,58
SE 21		l liabilities (Part X, line 26) .			, 25,4	45	12,43
	-	assets or fund balances Subtra	ct line 21 from line 20		321,8	92	1,009,14
my knowle	alties o	nature Block f perjury, I declare that I have ed belief, it is true, correct, and coknowledge	examined this return, including accom omplete Declaration of preparer (othe	panying sche er than office	edules and stat r) is based on a	ements, all inform	and to the best of ation of which
		****	4 2-4	- 45-4	2015-08-07 Date		( to the time
Sign Here	HE	nature of officer  ATHER HIGGINS PRESIDENT & CEO pe or print name and title	and the second second			-	
-	I V	Print/Type preparer's name	Preparer's signature	Date	Check f	PTIN	
Paid		DOUGLAS S COREY CPA	DOUGLAS S COREY CPA	2015-08-07	self-employed		
Prepare Use On		Firm's address • 6601 Little River Trr	npk Suite 440		Phone no (703)	354-2900	
Use On	nly	DOUGLÂS S COREY CPA  Firm's name ▶ Douglas Corey & As  Firm's address ▶ 6601 Little River Trr  Alexandria, VA 223	DOUGLAS S COREY CPA ssociates PC hipk Suite 440	2015-08-07	self-employed Firm's EIN ► Phone no (703)	354-2900	√ Yes

Par	t IV Checklist of Required Schedules		V 1	Na
	F F	-	Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Vaa	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🐯	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part 1983	3	Yes	
	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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	the state of the s	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
	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, Part VI.*	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII **  If "Yes," complete Schedule D, Parts XI **  If "Yes," comple	12a	Yes	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
1	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	<ul> <li>Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)</li> </ul>	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Da Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	ļ	No
	b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
<b>22</b>	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		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	٠	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
Ь	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	6	No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	L- 1	No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	- 5
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	8 A-	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	12	No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		l No
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	35a 35b		No No
				-
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	35b	- X	-

	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	• •	<u> </u>	
	Substitute and the Pow 3 of Form 1006 Enter-Out pot applicable   1a   30	-	Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0-1 not applicable 122	4 · 1		
	Enter the number of Forms W-2G included in line 1a Enter -0- it not applicable	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		-
Зa	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in 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		No
Ь	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)		0.00	
F.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
С	Trinyes," to line 5a or 5b, did the organization line Point 6000-17.	5c		
	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	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7			- ×	
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7Ь		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1857
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	4		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		
	contract?	-		
ī	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a		-	
g	required?	7g	21	
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?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
ь	and the state of t	9b		8 4
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders	_		
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		
	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.			
	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
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			
c	Enter the amount of reserves on hand	_	İ	ļ
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Washington, DC 20006 (540) 888-4752

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7 "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or change See instructions.  Check if Schedule O contains a response or note to any line in this Part VI	b belo jes in	ow, and Sched	Page d for a ule O
Se	ction A. Governing Body and Management	)*		25
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		res	140
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No.
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	- 7	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			P
	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
e	ction B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Cod	e.)
			Yes	No
a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			K
a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	1
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
	Did the organization have a written whistleblower policy?	13	Yes	
	Did the organization have a written document retention and destruction policy?	14	Yes	
	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
ie	tion C. Disclosure			-
	List the States with which a copy of this Form 990 is required to be filed▶AL , AR , AZ , WI , CA , CO , CT , FL , GA MD , ME , MA , MN , MO , MS , ND , NH ,	NJ, N	Y,NC	OH,
	OK, OR, PA, RI, SC, TN, UT, VA, W.  Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)  (3)s only) available for public inspection. Indicate how you made these available. Check all that apply	~ , VVV	, №11 , ſ	1 V
)	Own website  Another's website  Upon request  Other (explain in Schedule 0)  Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of			
)	nterest 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	i		
İ	▶PETER LIPS 1875 I Street NW			

Form 990 (2014)	
FUITH 330 (2014)	

Page 7

. 200 F

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter-0- in columns (D), (E), and (F) if no compensation was paid

List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot recto	not box h ar	office ustee	ss er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) HEATHER R HIGGINS President & CEO	40 00	×		х				226,000	0	0
(2) MIDGE DECTER  Director	1 00	x						0	0	0

ANY DESCRIPTION OF THE PERSON			
Part VII	Section A. Officers, Directors,	Trustees, Key Employees, and Highest Compensated Employees (continued)	1

	<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related	person is both an officer and a director/trustee) or			(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-					
ř.		organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations	
	- 40	- 10	9									
1b Su	b-Total							<b>•</b>				
	tal from continuation sheets		ection A	Α.	٠			•				
2 Tot	tal (add lines 1b and 1c) . tal number of individuals (inc	luding but not	· ·	to the	ose :	liste	d abov	re)w	226,000 ho received more th		L	
\$1	00,000 of reportable compe	nsation from th	e organ	ızatı	on <b>⊳</b> 1	L						
3 Dic	the organization list any <b>fo</b> line 1a? <i>If "Yes," complete Sc</i>	rmer officer, dir	ector o	r trus	tee,	key	emple	oyee,	or highest compen	sated employee	Yes	
4 For	any individual listed on line anization and related organi	1a, is the sum	of repo	rtabl	e co	mpe	nsatio "Yes,"	n and	d other compensation	on from the uch	3 Yes	No
5 Did ser	i any person listed on line 1a vices rendered to the organi	a receive or acc ization? <i>If "Yes,</i>	rue co ." comp	mpen lete S	satı ched	on fr ule .	om an I for su	y unr Ich pe	related organization erson	or individual for	5	No
	on B. Independent Co											
1 Cor	mplete this table for your fiven opensation from the organiza	e highest comp ation Report co	ensate mpens	d inde	epen for t	den	t conti	acto arve	rs that received mo ar ending with or wi	re than \$100,000 o	of n's tay ve	ar
		(A) ame and business a					***			(B) cription of services		(C) ensation
Victory Med 429 Mill Str	dia Group							-		ations services	Comp	783,907
	PA 15108 ion Strategies				_				Polling		-	170,000
214 N Faye Alexandпа,	ette Street											170,000
35 N Moore New York,	NY 10013									nt Consuling		226,000
GEB Strates 710 East N Atlanta, GA	orthway Lane								Polling			166,981
National Ba 1111 Steep	Illot Access						1 2 2		Grassroots	services		179,630

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

		Check IT Schedu	le O contains a respons	e or note to any line	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated camp	aigns 1a					
	b	Membership due	es 1b		N2:			
֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	С	Fundraising eve	nts 1c					
E A	d	Related organiz	ations 1d					
D HE	e	Government grants	(contributions) 1e				~	
Contributions, Gills, Glans and Other Similar Amounts	f	All other contribution	ns, gifts, grants, and <b>1f</b> t included above	6,176,619				İ
5 S	g	Noncash contribution	ons included in lines	219,040				
and	h	Total. Add lines	1a-1f	a as 🕨	6,176,619			
				Business Code				
Program Service Revenue	2a							
<u>8</u>	b							
МСе	C C							
38	d e					4		
ran	f	All other progra	ım service revenue				45 - 15 - 15 - 15 - 15 - 15 - 15 - 15 -	
<u>ر</u>								<del></del>
_	3		s 2a-2f					
		and other simil	ar amounts)	3 P				
	4		stment of tax-exempt bond	<u>.</u> 1				
	5	Royalties .	(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	c	Rental income or (loss)						
	d		me or (loss)	2 2 2 2 <b>F</b>				
			(i) Securities	(II) Other	9.	U.S.		
	7a	Gross amount from sales of	219,040					
		assets other than inventory	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	P	Less cost or other basis and	219,040					
	c	sales expenses Gain or (loss)						
	d	Net gain or (lo	ss)	g geografia de de				
	8a		from fundraising					
Other Revenue		events (not ind \$	s reported on line 1c)					
er i		1	a				190	
oth Oth	C		xpenses b (loss) from fundraising			0 2 2		
		Gross income	from gaming activities ne 19					
		Less direct e						
	11		· (loss) from gaming act f inventory, less lowances .	ivities				
	b	Less cost of	a goods sold 😨 🕠 b					
	С		r (loss) from sales of in-				<b></b>	
	44	Miscellaneo		Business Code 900099	1,10	1,16	4	
	11a							
	"						1	***************************************
			nue					,
	e		es 11a-11d	, , , <b>&gt;</b>	1,1	54	101	
	12	Total revenue	. See Instructions		6,177,7			

Part IX	Statement of Functional Expense	

	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21			general expenses	схреноез
		2,793,000	2,793,000		
	Grants and other assistance to domestic individuals. See Part IV, line 22				
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors, trustees, and key employees				
	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
	Other salaries and wages	302,070	133,324	57,476	111,27
	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
	Other employee benefits				
	Payroll taxes	24,126	10,796	4,604	8,72
	Fees for services (non-employees)				
1	Management	341,495	99,749	158,497	83,24
•	Legal	42,921	15,267	27,654	
2	Accounting	11,988	0	11,988	
1	Lobbying				
•	Professional fundraising services See Part IV, line 17				
•	Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	252,591	197,000	0	55,59
	Advertising and promotion				
	Office expenses	599	0	223	37
	Information technology				
	Royalties				
	Occupancy				
	Travel	65,720	12,917	0	52,80
	Payments of travel or entertainment expenses for any federal, state, or local public officials				02,00
	Conferences, conventions, and meetings				
	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization	2,501	0	2,501	
	Insurance	3,104	0	3,104	
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	Grass roots activity	243,500	243,500	0	
Ь	Active engagement	898,775	898,775	0	
c	Polling	364,881	364,881	0	
d	Communications	45,880	45,566	0	31
e	All other expenses	97,378	119,242	-79,321	57,45
	Total functional expenses. Add lines 1 through 24e	5,490,529	4,934,017	186,726	369,78
	joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check		,== ,,==		303,70

3, 0	X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			· · · · ·
			(A) Beginning of year		(B) End of year
т	1	Cash-non-interest-bearing	212,829	1	953,613
	2	Savings and temporary cash investments	8	2	
	3	Pledges and grants receivable, net	110,000	3	
	4	Accounts receivable, net	9,088	4	48,192
	5	Loans and other receivables from current and former officers, directors, trustees, key	zw. z. Ali i i i i		
	,	employees, and highest compensated employees Complete Part II of Schedule L	. v .,		
				5	
<u>.</u>	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
clacen	7	Notes and loans receivable, net		7	
2	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	9,951	9	16,809
- 1	_	Land, buildings, and equipment cost or other basis Complete		1	1 1
	10a	Part VI of Schedule D	1 1	10c	2,968
	b	Less accumulated depreciation		11	
	11	Investments—publicly traded securities		12	
	12	Investments—other securities See Part IV, line 11		13	
	13	Investments—program-related See Part IV, line 11		14	
	14	Intangible assets		15	
	15	Other assets See Part IV, line 11	347,337	16	1,021,58
	16	Total assets. Add lines 1 through 15 (must equal line 34)	25,445	17	12,43
	17	Accounts payable and accrued expenses	25,445	18	,
	18	Grants payable		19	
	19	Deferred revenue		20	- · · · · ·
	20	Tax-exempt bond liabilities			
က္	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	-
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		22	
<del>K</del>		persons Complete Part II of Schedule L		-	
_:	23	Secured mortgages and notes payable to unrelated third parties	# - * - · · · · · · · · · · · · · · · · ·	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule		25	
	20	D	25,445	26	12,43
	26	Organizations that follow SFAS 117 (ASC 958), check here		-	
S E E		lines 27 through 29, and lines 33 and 34.	321,892	27	1,009,14
ian a	27	Unrestricted net assets	321,082	28	1,000,11
20	28	Temporarily restricted net assets		-	
2	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
S	30	Capital stock or trust principal, or current funds		30	
ž	31	Paid-in or capital surplus, or land, building or equipment fund		31	
AS.	32	Retained earnings, endowment, accumulated income, or other funds	425	32	
₩.	33	Total net assets or fund balances	321,892	33	1,009,14
Ż	34	Total liabilities and net assets/fund balances	347,337	34	1,021,5

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI	s s			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,	177,785
2	Total expenses (must equal Part IX, column (A), line 25)	2		5.	490,529
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		(	687,256
7	wet assets of fund balances at beginning of year (must equal Part X, line 33, Column (A))	4			321,892
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1,0	009,148
Par	Time the transfer of the transfer of the transfer of the transfer of the transfer of the transfer of the transfer of transfer				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If Yes, check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both	ate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	of the	2c	Yes	00
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3 <b>a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

DLN: 93493219007315

### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury

### Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

OMB No 1545-0047

Open to Public

	ii Revenue Service	www.irs.go	v /form990.		Inspection
lf th	e organization answered "Ye	s" to Form 990, Part IV, Line 3, o	r Form 990-EZ, Par	t V, line 46 (Political Camp	paign Activities), then
	Section 501(c)(3) organizations	Complete Parts I-A and B Do not cor	nplete Part I-C		
•	Section 501(c) (other than section	n 501(c)(3)) organizations Complete	Parts FA and Cibel	ow Do not complete Part FB	
	Section 527 organizations Compl	ete Part FA only	- Form 000 F7 Par	t VI line 47 (Lobbying Act	rivities), then
If th	e organization answered "Ye	s" to Form 990, Part IV, Line 4, o hat have filed Form 5768 (election ur	r FORM 990-62, Fai	Complete Part II-A Do not co	omolete Part I⊦B
	Section 501(c)(3) organizations t	hat have NOT filed Form 5768 (election di	on under section 50	1(h)) Complete Part II-B Do	not complete Part II-A
If th	e organization answered "Ye	s" to Form 990, Part IV, Line 5 (P	roxy Tax) (see se	parate instructions) or Fo	rm 990-EZ, Part V,
line	35c (Proxy Tax) (see separat	e instructions), then	1 1 8	E TO	
•	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III		3 1 10	
Na	me of the organization			Employer identi	fication number
Ind	ependent Women's Voice			36-453408,6	
Par	t I-A Complete if the or	ganization is exempt unde	r section 501(c	) or is a section 527	organization.
1		ganization's direct and indirect pol			
2	Political expenditures	-		. ▶ \$	747,359
3	Volunteer hours				. 0
Pa		rganization is exempt unde			
1	Enter the amount of any excis	e tax incurred by the organization i	ınder section 4955	<b>•</b> •	
2	Enter the amount of any excis	e tax incurred by organization man	agers under section	1 4955	
3	If the organization incurred a	section 4955 tax, did it file Form 4	720 for this year?		☐ Yes ☐ No
4a	Was a correction made?			2 241	☐ Yes ☐ No
b	If "Yes," describe in Part IV	×			
	T C Complete if the o	rganization is exempt unde	section 501(	c), except section 501	(c)(3).
77	E la the annual describe our	ended by the filing organization for	section 527 event	ot function activities	\$ 747,359
1					
2	Enter the amount of the filing exempt function activities	organization's funds contributed to	other organizations	s for section 527	\$
	· ·			0.001 line 17h	247.250
3	Total exempt function expend	litures Add lines 1 and 2 Enter he	re and on Form 112	0-POL, IIIIe 170	\$ 747,359
4		Form 1120-POL for this year?			「Yes ▼ No
5	Enter the names, addresses	and employer identification number	(EIN) of all section	527 political organizations	to which the filing
	organization made nayments	For each organization listed, enter ons received that were promptly and	the amount paid fro	om the filing organization's it	Inds Also effice the
	amount of political contribution	ons received that were promptly and a political action committee (PAC)	If additional space	is needed, provide informat	ion in Part IV
	Separate Degregated rame of				
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from	(e) Amount of political contributions received
				filing organization's funds If none, enter -0-	and promptly and
				lunds It hone, enter -o-	directly delivered to a
					separate political
				1	organization If none, enter - 0 -
_					
	11.2.2.2	A A TABLE MINISTER CO. CO. CO. CO. CO. CO. CO. CO. CO. CO.	and the second second		
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	edule C (Form 990 or 990-EZ) 2014					Page 2		
Pa	ort II-A Complete if the organization	n is exempt under	section 501(	c)(3) and fil	ed Form 5768	(election		
	under section 501(h)).  Check ► if the filing organization belongs to expenses, and share of excess lob  Check ► if the filing organization checked by	bying expenditures)			up member's nam	ne, address, EIN,		
	Limits on Lobbying (The term "expenditures" means a	Expenditures			(a) Filing organization's totals	(b) Affiliated group totals		
1a	Total lobbying expenditures to influence public			1 .				
Ь	Total lobbying expenditures to influence a legis	lative body (direct lobb	ying)		1 1 1			
c	Total lobbying expenditures (add lines 1a and 1	.b)						
d	Other exempt purpose expenditures		1.20		72.17	A L		
e	Total exempt purpose expenditures (add lines 1	c and 1d)						
f	Lobbying nontaxable amount Enter the amount columns	from the following table	e in both	U 13				
	If the amount on line 1e, column (a) or (b) is:							
	Not over \$500,000	20% of the amount on li	ne 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of th	e excess over \$500,0	000				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of th	0,000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	000					
	Over \$17,000,000	\$1,000,000						
g	Grassroots nontaxable amount (enter 25% of li	ne 1f)						
h	Subtract line 1g from line 1a If zero or less, ent	ter -0 -		Ī				
i	Subtract line 1f from line 1c If zero or less, ent	er-0-						
j 	If there is an amount other than zero on either li section 4911 tax for this year?	ine 1h or line 1i, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No		
	4-Year A (Some organizations that made a columns below. See		ection do not	have to con		he five		
	Lobbying Exp	enditures During	4-Year Avera	ging Period				
	Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) Total		
2a	Lobbying nontaxable amount		T.E.					
ь	Lobbying ceiling amount (150% of line 2a, column(e))							
_c	Total lobbying expenditures							

d Grassroots nontaxable amount

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	J1				
-		(a	)		(b)	
ictivity.		Yes	No	A	mount	t
legislation through	e year, did the filing organization attempt to influence foreign, national, state or local in, including any attempt to influence public opinion on a legislative matter or referendum, the use of					
a Voluntee			-	-		
<b>b</b> Paid stat	for management (include compensation in expenses reported on lines 1c through 1i)?			-		
	vertisements?	-				_
	to members, legislators, or the public?			$\vdash$		-
	ons, or published or broadcast statements?					-
	o other organizations for lobbying purposes?		_	-		
	ontact with legislators, their staffs, government officials, or a legislative body?			-		
h Rallies,	demonstrations, seminars, conventions, speeches, lectures, or any similar means?			├-	_	
i Otherac	tivities?			_		
	dd lines 1c through 1:	ï				
	ctivities in line 1 cause the organization to be not described in section 501(c)(3)?			-		
	enter the amount of any tax incurred under section 4912					_
	enter the amount of any tax incurred by organization managers under section 4912	٠,				_
d If the file	ng organization incurred a section 4912 tax, did it file Form 4720 for this year?			_		
Part III-A	Complete if the organization is exempt under section 501(c)(4), section 5	01(c	)(5),	or s	ectio	n
	501(c)(6).				Yes	No
1 Minro su	ostantially all (90% or more) dues received nondeductible by members?		ſ	1	Yes	-
						_
			Ì	2	Yes	45773
2 Did the	organization make only in-house lobbying expenditures of \$2,000 or less?			2	Yes	No
2 Did the 3 Did the	organization make only in-house lobbying expenditures of \$2,000 or less?  Organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 5	01(c	)(5),	3 or s	ectio	n
2 Did the 3 Did the	organization make only in-house lobbying expenditures of \$2,000 or less?  Organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 5	01(c No" C	)(5), )R (b)	3 or s	ectio	n
2 Did the 3 Did the Part III-B	organization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 5  501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I line 3, is answered "Yes."	No. C	)(5), )R (b)	3 or s	ectio	n
2 Did the 3 Did the Part III-B	organization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  is essments and similar amounts from members	01(c No" C	)(5), )R (b)	3 or s	ectio	n
2 Did the 3 Did the Part III-B 1 Dues, as 2 Section	organization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  is essements and similar amounts from members  162(e) nondeductible lobbying and political expenditures (do not include amounts of political	No. C	)(5), )R (b)	3 or s	ectio	n
2 Did the 3 Did the Part III-B 1 Dues, a: 2 Section	organization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  is essments and similar amounts from members	1	)(5), )R (b)	3 or s	ectio	n
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current	organization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  is essements and similar amounts from members  162(e) nondeductible lobbying and political expenditures (do not include amounts of political so for which the section 527(f) tax was paid).	1 2a	)(5), )R (b)	3 or s	ectio	n
2 Did the 3 Did the Part III-B  1 Dues, as 2 Section expense a Current b Carryov	corganization make only in-house lobbying expenditures of \$2,000 or less?  Organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Sessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of political sefor which the section 527(f) tax was paid).	1 2a 2b	)(5), )R (b)	3 or s	ectio	n
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total	organization make only in-house lobbying expenditures of \$2,000 or less? Organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Issessments and similar amounts from members  162(e) nondeductible lobbying and political expenditures (do not include amounts of political sfor which the section 527(f) tax was paid).  Year  er from last year	1 2a 2b 2c	)(5), )R (b)	3 or s	ectio	n
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total 3 Aggrega	organization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  is essements and similar amounts from members  162(e) nondeductible lobbying and political expenditures (do not include amounts of political sor which the section 527(f) tax was paid).  year  er from last year  atte amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	1 2a 2b	)(5), )R (b)	3 or s	ectio	n
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total 3 Aggrega 4 If notice does the	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Is sessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of political so for which the section 527(f) tax was paid).  Year er from last year  It e amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are serial and the amount on line 2c exceeds the amount on line 3, what portion of the excess a organization agree to carryover to the reasonable estimate of nondeductible lobbying and	1 2a 2b 2c	)(5), )R (b)	3 or s	ectio	n
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total 3 Aggrega 4 If notice does th politica	organization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Issessments and similar amounts from members  162(e) nondeductible lobbying and political expenditures (do not include amounts of political so for which the section 527(f) tax was paid).  In the amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess a organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?	1 2a 2b 2c 3	)(5), DR (b)	3 or s	ectio	n
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total 3 Aggrega 4 If notice does th politica 5 Taxable	Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Is sessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of political sort which the section 527(f) tax was paid).  Year er from last year  It a amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess a organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  amount of lobbying and political expenditures (see instructions)	1 2a 2b 2c 3	)(5), DR (b)	3 or s	ectio	n
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total 3 Aggrega 4 If notice does th politica 5 Taxable Part IV	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Is sessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of political sfor which the section 527(f) tax was paid).  Year er from last year  It e amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess a organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  amount of lobbying and political expenditures (see instructions)  Supplemental Information	2a 2b 2c 3 4 5	ж (в)	3 or s ) Par	ectio t III	n -A,
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total 3 Aggrega 4 If notice does th politica 5 Taxable Part IV	Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Is sessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of political sort which the section 527(f) tax was paid).  Year er from last year  It a amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess a organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  amount of lobbying and political expenditures (see instructions)	2a 2b 2c 3 4 5	ж (в)	3 or s ) Par	ectio t III	n -A,
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total 3 Aggrega 4 If notice does th politica 5 Taxable Part IV Provide the 2 (see instri	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Sessments and similar amounts from members  162(e) nondeductible lobbying and political expenditures (do not include amounts of political sfor which the section 527(f) tax was paid).  Year er from last year  It is amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues see were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  amount of lobbying and political expenditures (see instructions)  Supplemental Information  descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground in the part II-B, line 1 Also, complete this part for any additional information turn Reference  Explanation	2a 2b 2c 3 4 5	ж (в)	3 or s ) Par	ectio	n -A,
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total 3 Aggrega 4 If notice does th politica 5 Taxable Part IV Provide the 2 (see instri	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Seessments and similar amounts from members  162(e) nondeductible lobbying and political expenditures (do not include amounts of political sfor which the section 527(f) tax was paid).  year  er from last year  ite amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues is were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess a organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  amount of lobbying and political expenditures (see instructions)  Supplemental Information  descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground turn Reference  Explanation  IWV is an educational and issue advocacy organization	2a 2b 2c 3 4 5	ж (в)	3 or s ) Par	ectio	n -A,
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total 3 Aggrega 4 If notice does th politica 5 Taxable Part IV Provide the 2 (see instr	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Sessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of political so for which the section 527(f) tax was paid).  It is amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess are organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  amount of lobbying and political expenditures (see instructions)  Supplemental Information  descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground turn Reference  Explanation  IWV is an educational and issue advocacy organization engaged in reaching conservative and mainstream	2a 2b 2c 3 4 5	ж (в)	3 or s ) Par	ectio	n -A,
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total 3 Aggrega 4 If notice does th politica 5 Taxable Part IV Provide the 2 (see instri	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Seessments and similar amounts from members  162(e) nondeductible lobbying and political expenditures (do not include amounts of political sfor which the section 527(f) tax was paid).  year  er from last year  ite amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues is were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess a organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  amount of lobbying and political expenditures (see instructions)  Supplemental Information  descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground turn Reference  Explanation  IWV is an educational and issue advocacy organization	2a 2b 2c 3 4 5	ж (в)	3 or s ) Par	ectio	n -A,
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total 3 Aggrega 4 If notice does th politica 5 Taxable Part IV Provide the 2 (see instri	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Sessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of political so for which the section 527(f) tax was paid).  It is amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess are organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  amount of lobbying and political expenditures (see instructions)  Supplemental Information  descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground turn Reference  Explanation  IWV is an educational and issue advocacy organization engaged in reaching conservative and mainstream	2a 2b 2c 3 4 5	ж (в)	3 or s ) Par	ectio	n -A,
2 Did the 3 Did the Part III-B  1 Dues, a: 2 Section expense a Current b Carryov c Total 3 Aggrega 4 If notice does th politica 5 Taxable Part IV  Provide the 2 (see instri	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Issessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of political sfor which the section 527(f) tax was paid).  Is were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  amount of lobbying and political expenditures (see instructions)  Supplemental Information  descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grounts), and Part II-B, line 1 Also, complete this part for any additional information  IWV is an educational and issue advocacy organization engaged in reaching conservative and mainstream independents and women on the most important policy and	2a 2b 2c 3 4 5	ж (в)	3 or s ) Par	ectio	n -A,

Page **4** 

Part IV Supplemental In	formation (continued)	, age
Return Reference	Explanation	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493219007315

**SCHEDULE D** (Form 990)

Department of the Treasury

### **Supplemental Financial Statements**

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

► Attach to Form 990.

OMB No 1545-0047

Open to Public

nternal Revenue Service Information about	ut Schedule D (Form 990) and its instructi		
Name of the organization Independent Women's Voice		3   3	oyer identification number
			534086
Part I Organizations Mainta organization answered "	ining Donor Advised Funds or Ot Yes" to Form 990, Part IV, line 6.		
	(a) Donor adv	ised 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 (du	ang year)		
4 Aggregate value at end of year			
5 Did the organization inform all done funds are the organization's proper	ors and donor advisors in writing that the a ty, subject to the organization's exclusive	assets held in donor advis e legal control?	yes No
6 Did the organization inform all granused only for charitable purposes conferring impermissible private b	itees, donors, and donor advisors in writin and not for the benefit of the donor or dono anoth?	g that grant funds can be or advisor, or for any other	r purpose Yes No
Part II - Conservation Faseme	ents. Complete if the organization ar	nswered "Yes" to Form	990, Part IV, line 7.
	ents held by the organization (check all th		
	use (e g , recreation or education)	Preservation of an historic	cally important land area
Protection of natural habitat		Preservation of a certified	i historic structure
Preservation of open space	,		
	e organization held a qualified conservation	on contribution in the form	of a conservation
easement on the last day of the ta			the state of the s
		* 2.3	Held at the End of the Year
a Total number of conservation ease		2a	
b Total acreage restricted by conse		2b	
-	s on a certified historic structure included		
historic structure listed in the Nat		Zu	
3 Number of conservation easement	s modified, transferred, released, extingu	ished, or terminated by th	ie organization during
the tax year ▶	a la fi	¥i	T 10
4 Number of states where property :	subject to conservation easement is locat	:ed ▶	
	en policy regarding the periodic monitorin		violations, and Yes No
6 Staff and volunteer hours devoted	to monitoring, inspecting, and enforcing o	onservation easements d	during the year
7 Amount of expenses incurred in m	nonitoring, inspecting, and enforcing conse	ervation easements during	g the year
	it reported on line 2(d) above satisfy the r	equirements of section 17	70(h)(4)(B)(ı)
and section 170(h)(4)(B)(II)?			i ies i ito
balance sheet, and include, if app	anization reports conservation easement: licable, the text of the footnote to the orga conservation easements	anization's financial stater	ments that describes
Part III Organizations Mainta Complete if the organization	aining Collections of Art, Historic ation answered "Yes" to Form 990, F	Part IV, line 8.	Andrew Committee of the
works of art, historical treasures, service, provide, in Part XIII, the	or other similar assets held for public exh text of the footnote to its financial statem	nibition, education, or rese nents that describes thesi	earch in furtherance of public e items
b If the organization elected, as per works of art, historical treasures, service, provide the following amounts.	or other similar assets held for public exh	port in its revenue statem hibition, education, or rese	nent and balance sheet earch in furtherance of public
(i) Revenue included in Form 990	), Part VIII, line 1		<b>&gt;</b> \$
(ii) Assets included in Form 990,	Part X		<b>*</b> \$
a If the organization received or he	ld works of art, historical treasures, or oth reported under SFAS 116 (ASC 958) rela	ner similar assets for finar iting to these items	ncial gain, provide the
Revenue included in Form 990, P			<b>*</b> \$
<b>b</b> Assets included in Form 990, Pa	rt X		<b>-</b> \$
Part III Organizations Mainte Complete if the organization elected, as per works of art, historical treasures, service, provide, in Part XIII, the b If the organization elected, as per works of art, historical treasures, service, provide the following ame (i) Revenue included in Form 990 (ii) Assets included in Form 990 If the organization received or he following amounts required to be Revenue included in Form 990, P	aining Collections of Art, Historic ation answered "Yes" to Form 990, Frmitted under SFAS 116 (ASC 958), not to or other similar assets held for public exhibited under SFAS 116 (ASC 958), to reor other similar assets held for public exhibited under SFAS 116 (ASC 958), to reor other similar assets held for public exhibited under SFAS 116 (ASC 958), to reor other similar assets held for public exhibited under SFAS 116 (ASC 958), to reor other similar assets held for public exhibited under SFAS 116 (ASC 958), related works of art, historical treasures, or other ported under SFAS 116 (ASC 958) related art VIII, line 1	Part IV, line 8. To report in its revenue standition, education, or resenents that describes these sport in its revenue statements that describes these sport in its revenue statements in its revenue statements and its revenue statements and its revenue statements are statements.	externent and balance sheet earch in furtherance of public items nent and balance sheet earch in furtherance of public items

Par	t III Organizations Maintaining Co	llections of Ar	t. Hi	stori	cal Tre	easur	es. or O	ther	Similar /	cce	te /c/	ntinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, c	heck	any of th	ne follo	wing that a	are a	significant u	se of	ıts	memaea)
a	Public exhibition		d	Γ	Loan o	rexch	ange progr	ams				
b	Scholarly research		e	Г	Other							
С	Preservation for future generations			,								
4	Provide a description of the organization's co	ollections and expla	ain ho	w the	y further	r the or	ganızatıon	's exe	empt purpos	e in		
5	During the year, did the organization solicition	or receive depoties			h							
_	assets to be sold to raise funds rather than t	to be maintained as	part	of the	organiz	reasur atıon's	es or otne collection	rsimi 17	lar	Г	Yes	□ No
Pa	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ı	f the	organiz	zation	answere	d "Ye	s" to Form	990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interm	ediar	y for c	ontribut		other ass	ets n	ot	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follo	wing t	able		_					
_							_			mou	nt	
C	Beginning balance							1c				
d	Additions during the year						-	1d				
e	Distributions during the year						-	1e				
f	Ending balance							1f		_		
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21	, for es	scrow or	custo	dial accou	nt liat	ulity?		Yes	∏ No
ь	If "Yes," explain the arrangement in Part XII	I Check here if the	eaxp	lanatio	on has b	een pr	ovided in F	art X	III	٠.,		Γ
Pa	rt V Endowment Funds. Complete	f the organization	n an	swere	ed "Yes	" to Fo	orm 990,	Part	IV, line 10	i.		
1a	Beginning of year balance	(a)Current year	(t	)Pnor y	year I	b (c)Tw	years back	(d)T	nree years back	(e)	Four ye	ears back
ь	Contributions			-				-		+		
c	Net investment earnings, gains, and losses		-						0.00	H	-	
												Silver Contract
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses	-										
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end baland	ce (li	ne 1g,	column	(a)) he	eld as					
a	Board designated or quasi-endowment 🕨											
b	Permanent endowment 🕨											
c	Temporarily restricted endowment ►											
	The percentages in lines 2a, 2b, and 2c show	ıld equal 100%										
3a	Are there endowment funds not in the posses	sion of the organiz	atıon	that a	re held	and ad	ministered	fort	he			
	organization by  (i) unrelated organizations									433	Yes	No
	(ii) related organizations		•			• •		•		a(i) (ii)	001	
ь	If "Yes" to 3a(II), are the related organization	ns listed as required	d on !	 Sched	ule R?				_	3b		
4	Describe in Part XIII the intended uses of th							-				
Par	t VI Land, Buildings, and Equipme	nt. Complete if t	the c	rgan	zation	answe	red 'Yes'	to F	orm 990, F	art	۷, lır	ne .
-	11a. See Form 990, Part X, line 1 Description of property	.0.		1 /-	- \ C \	-11	(a.)				- 1	
	Description of property	<			a) Cost or sis (invest		(b)Cost or basis (oth		(c) Accumula depreciation		(d) B	ook value
1a.:	Land											
	Buildings	se: ∗ se: ∗ se:										
	Leasehold improvements		•									
	Equipment		٠				11	1,960		9,342		2,618
	Other	(* * 10 TO 10)	•					3,925	1:	3,575		350
ota	I. Add lines 1a through 1e (Column (d) must ed	gual Form 990, Part )	K, colu	umn (E	3), line 10	0(c).)			E			2,968

(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
inancial derivatives		· · · · · · · · · · · · · · · · · · ·
losely-held equity interests		
er	1.5	
	+ )	
A CONTRACTOR OF THE CONTRACTOR		
	14.14	100 I 10 III
5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		· · · · · · · · · · · · · · · · · · ·
		1 20 4 4 20
tal. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>&gt;</b>	200 0 170 1-11
rt VIII Investments—Program Related. C	Complete if the organization	on answered 'Yes' to Form 990, Part IV, line 11
See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(0) 2001. 14.44	Cost or end-of-year market value
- X - X - X - X - X - X - X - X - X - X		
		2 24
A SALE OF SALE		Andrew Company of the State of
		70
		The same of the sa
otal. (Column (b) must equal form 990, Part X, col (B) line 13 ) Part IX Other Assets. Complete if the organizat (a) Des	ion answered 'Yes' to Form 9 cription	90, Part IV, line 11d See Form 990, Part X, line 15 (b) Book yalue
otal. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organizat (a) Des	ion answered 'Yes' to Form 9	90, Part IV, line 11d See Form 990, Part X, line 15 (b) Book yalue
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 9	90, Part IV, line 11d See Form 990, Part X, line 15 , (b) Book yalue
Part IX Other Assets. Complete if the organizat (a) Des	e 15.)	(B) Book Yalug
Fotal. (Column (b) must equal Form 990, Part X, col.(B) lin  Part X Other Liabilities. Complete if the or	e 15.)	(B) Book Yalug
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.	e 15.) e and answered 'Yes' to Form 9 cription	(B) Book Yalug
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.)	(B) Book Yalug
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) e and answered 'Yes' to Form 9 cription	(B) Book Yalug
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) e and answered 'Yes' to Form 9 cription	(b) Book Yalue
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) e and answered 'Yes' to Form 9 cription	(B) Book Yalug
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) e and answered 'Yes' to Form 9 cription	(b) Book Yalue
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) e and answered 'Yes' to Form 9 cription	(B) Book Yalug
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) e and answered 'Yes' to Form 9 cription	(B) Book Yalug
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) e and answered 'Yes' to Form 9 cription	(b) Book Yalue
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) e and answered 'Yes' to Form 9 cription	(b) Book Yalue
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) e and answered 'Yes' to Form 9 cription	(b) Book Yalue
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.	e 15.) e and answered 'Yes' to Form 9 cription	(b) Book Yalue
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) e and answered 'Yes' to Form 9 cription	(b) Book Yalue
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) e and answered 'Yes' to Form 9 cription	(B) Book Yalug
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) e and answered 'Yes' to Form 9 cription	(B) Book Yalug
Total. (Column (b) must equal Form 990, Part X, col.(B) Inn  Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  (a) Description of liability	e 15.) rganization answered 'Yes' (b) Book value	(B) Book Yalug

Pa	Reconciliation of the organization ar	Revenue per Audited Financial Statements With Revenue swered 'Yes' to Form 990, Part IV, line 12a.	per Retu	rn Complete if
1		ther support per audited financial statements	1	6,177,785
2	Amounts included on line 1	but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losse	s) on investments		
b	Donated services and use o	of facilities 2b	7	
c	Recoveries of prior year gra	ints		
d	Other (Describe in Part XII	I)	7	940
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	6,177,785
4	Amounts included on Form	990, Part VIII, line 12, but not on line 1		
а	Investment expenses not in	ncluded on Form 990, Part VIII, line 7b . 4a		
Ь	Other (Describe in Part XII	I ) 4b	1	
C	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 a	and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	6,177,785
Par	Reconciliation of if the organization a	Expenses per Audited Financial Statements With Expense answered 'Yes' to Form 990, Part IV, line 12a.	s per Ret	turn. Complete
1		per audited financial statements	1	5,490,529
2	Amounts included on line 1	but not on Form 990, Part IX, line 25		
а	Donated services and use o	f facilities		
b	Prior year adjustments .	2b	7	
c	Other losses		1	
d	Other (Describe in Part XIII	( )	1	
e	Add lines 2a through 2d .	<u></u>	2e	
3	Subtract line 2e from line 1		3	5,490,529
4	Amounts included on Form 9	990, Part IX, line 25, but not on line 1:		
а	Investment expenses not in	cluded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII	(1)		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3	and 4c. (This must equal Form 990, Part I, line 18)	5	5,490,529
Part	Supplemental I	nformation		
Part	ride the descriptions required f V, line 4, Part X, line 2, Part X mation	or Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2 II, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part i	b, o provide an	y additional
	Return Reference	Explanation		
Pt X, I	Line 2	IWV is exempt from income taxes on all activities		
Pt X, I	ine 2	directly related to its exempt purpose under the		
D . W .				

Return Reference	Explanation					
Pt X, Line 2	IWV is exempt from income taxes on all activities					
Pt X, Line 2	directly related to its exempt purpose under the					
Pt X, Line 2	Internal Revenue Service Code Section 501(c)(4) The					
Pt X, Line 2	Organization is liable for income taxes on unrelated					
Pt X, Line 2	business income There was no taxable net unrelated					
Pt X, Line 2	business income for the year ended December 31, 2014	N-1				
Pt X, Line 2 Accordingly, no provision for income taxes has been made						

Schedule D (Form 990) 2013

Return Reference	Explanation
Pt X, Line 2	in these financial statements
Pt X, Line 2	The Organization evaluated its tax positions and
Pt X, Line 2	determined it has no uncertain tax positions as of
Pt X, Line 2	December 31, 2014 The Organization's 2012 through 2014
Pt X, Line 2	tax years are open for examination by federal taxing
Pt X, Line 2	authorities

Schedule D (Form 990) 2014

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

Schedule I Grants and Other Assistance to Organizations,

(Form 990)

Department of the Treasury

Internal Revenue Service

DLN: 93493219007315

OMB No 1545-0047

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

Attach to Form 990.

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

Open to Public

Name of the organization Independent Women's Voice	Employer identification number
	36-4534086
Part I General Information on Grants and Assistance	
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantee	s' eligibility for the grapts or accistance, and

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) American Commitment 1300 Penn Ave NW 190- 406 Washington, DC 20004	45-2600535	501(c)(4)	1,350,000		n/a	· ·	Education on Healthcare
(2) Donors Trust 1800 Diagonal St 280 Alexandria, VA 22314	52-2166327	501(c)(3)	950,000		n/a	•	Healthcare & free markets
(3) Let Freedom Ring 603 Fairway Drive West Chester, PA 19382	06-1719990	501(c)(4)	493,000		n/a	n/a	Healthcare

2	Enter total number of section $501(c)(3)$ and government organizations listed in the line 1 table .					( <b>*</b> )			<b>&gt;</b>		
	Enter total number of other organizations listed in the line 1 table									 	 _

Schedule I (Form 990) 2014

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Info	rmation. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation

Schedule I (Form 990) 2014

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DLN: 93493219007315

Schedule J (Form 990)

### Compensation Information

OMB No 1545-0047

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

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

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Independent Women's Voice

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

Inspection Employer identification number

	36-4534086			
Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			1
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III	-		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	6a	Yes	
b	Any related organization?	6Ь		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations			110

Schedule J (Form 990) 2014

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

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

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

(A) Name and Title	(B) Breakdown of	FW-2 and/or 1099-MIS	C compensation	(C) Retirement and		(E) Total of columns (B)(ı)-(D)	(F) Compensation in column(B) reported
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(6)(1)-(0)	as deferred in prior Form 990
1 HEATHER R HIGGINS, (i)	126,000	100,000				226,000	128,500

Schedule J (Form 990) 2014

#### Part III Supplemental Information

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

Return Reference		Explanation	
Pt I Line 6a	The year-end bonus is based on end of year net revenue		
Pt I Line 6a	No bonus is paid if there is no net revenue		H

Schedule J (Form 990) 2014

DLN: 93493219007315 efile GRAPHIC print - DO NOT PROCESS | As Filed Data -OMB No 1545-0047 **Transactions with Interested Persons** Schedule L (Form 990 or 990-EZ) ► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. Open to Public ► Attach to Form 990 or Form 990-EZ. Department of the Treasury Inspection ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at Internal Revenue Service www.irs.gov/form990. Employer identification number Name of the organization Independent Women's Voice 36-4534086 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (d) Corrected? (c) Description of transaction (a) Name of disqualified person (b) Relationship between disqualified person and organization Yes 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 **(g)** In (i)Written (h) (f)Balance (b) Relationship (a) Name of (c) (d) Loan to (e)Original Approved agreement? principal default? Purpose of or from the interested with organization by board or amount loan organization? person committee? Yes No Yes No Τo From Total Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (e) Purpose of assistance (d) Type of assistance (b) Relationship between (a) Name of interested (c) Amount of assistance interested person and the person organization

Part IV Business Transactions Complete if the organiza			ne 28a, 28b, or 28c.	4	
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh organiz reven	f zation's
				Yes	No
(1) Ashdown Forest Strategies LLC	See Supplemental info	226,000	Management consulting		No

Part V Supplemental Informa	ation		
Provide additional information	n for responses to questions of	Schedule L (see instructions)	
Return Reference		Explanation	

Schedule L (Form 990 or 990-EZ) 2014

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DLN: 93493219007315

Employer identification number

OMB No 1545-0047

Open to Public Inspection

**SCHEDULE M** (Form 990)

Department of the Treasury

9

15 16

17

18

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23

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25 26

27

28

**Noncash Contributions** 

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

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

Internal Revenue Service Name of the organization Independent Women's Voice

36-4534086 Part I Types of Property (d) (c) (b) (a) Method of determining Number of contributions Noncash contribution Check noncash contribution amounts amounts reported on or items contributed ıf Form 990, Part VIII, line applicable 1 g 1 Art-Works of art . . . . Art—Historical treasures Art—Fractional interests Books and publications Clothing and household goods . . . . . . Cars and other vehicles . . Boats and planes . . . . Intellectual property . . . 219,040 Market value 1,100 Securities-Publicly traded . 10 Securities-Closely held stock 11 Securities—Partnership, LLC, or trust interests . . . . Securities-Miscellaneous . . Qualified conservation contribution-Historic structures . . . . 14 Qualified conservation contribution+Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . Collectibles . . . . Food inventory . . . Drugs and medical supplies . Taxidermy . . . . . Historical artifacts . . . Scientific specimens . . Archeological artifacts . . . Other ► (\_ Other > (\_ Other >( Other ► ( Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . Yes No

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a	No
		300	1,1,0
	If "Yes," describe the arrangement in Part II	l	207
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	No
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	No
b	If "Yes," describe in Part II		
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,		
	describe in Part II	2.4	 

Part II Suppleme

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

Return Reference

Explanation

Schedule M (Form 990) (2014)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493219007315

OMB No 1545-0047

2014

Open to Public Inspection

### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

• Attach to Form 990 or 990-EZ.

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

Name of the organization Independent Women's Voice Employer identification number

36-4534086

990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 12c	Board members are given the policy and are asked to
Pt VI, Line 12c	confirm there are no conflicts, or, if there are, to
Pt VI, Line 12c	address them with the board. The review is ongoing via
Pt VI, Line 12c	review of invoices/financial data. In addition, the CEO
Pt VI, Line 12c	regularly points out to board members and consultants
Pt VI, Line 12c	that compliance policies are worthless without an ethical
Pt VI, Line 12c	culture The board requires assurance that there are no
Pt VI, Line 12c	conflicts in any contractual relationship, while
Pt VI, Line 12c	requiring full disclosure and evaluation where there may
Pt VI, Line 12c	be a conflict
Pt VI, Line 11b	The 990 is reviewed by the board prior to filing
Pt VI, Line 15a	MV's top management official has a monthly consulting
Pt VI, Line 15a	contract. The board has the discretion at year end to
Pt VI, Line 15a	adjust the annual compensation based on executive
Pt VI, Line 15a	compensation of similar organizations
Pt VI, Line 19	The documents are available upon request
Form 990, Part IX, Line 24f	POSTAGE 3062 1932 110 1020 OVERHEAD ALLOCATED FROM AFFILIATES 9061 0 9061 0 BANK C HARGES/MERCHANT FEES 11480 0 11480 0 STATE REGISTRATION FEES 8031 0 0 8031 DUES AN D SUBSCRIPTIONS 2690 2301 389 0 CABLE/TELEPHONE 2080 1589 0 491 ALLOCATED G & A CO STS 0 55736 -102252 46516 GIFTS 1257 879 114 264 WEB DESIGN/PRODUCTION 18162 1816 2 0 0 EVENTS (NON-FUNDRAISING) 39778 38643 0 1135 VACATION PAY 1777 0 1777 0

# **Exhibit 13**

05/07/2010 16:06

# FEC FORM 9 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

Individual, Organization or Qualified Nor	nprofit Corporation Making th	e Disbursement/Obligations
(a) Name Independent Women's Voice		
(b) Address (number and street)	2. FEC Identification Number	
(c) City, State and ZIP Code Washington	C C00000000	
(d) Name of Employer or Principal Place of Business	(e)	Occupation
Is This Statement or Amended	4. Covering Period	Mo M ' 0 3 ' 2 0 1 0 ' through  M
(a) Date of Public Distribution(s) % 5 '	0 6 / Y 2 0 1 0 Y (b) Co	ommunication Title Case Closed
The filer is a(n): (a) Individual (b) (d) (d) Corporation, Labor Organization or Qualified (e) (e) Other, specify:	Unincorporated Organization (c)	
Were the disbursements for the elections from donations to a segregated bank acc Custodian of Records	eering communication made count?	exclusively Yes No No
(a) Name Robert Olshan		2.
(b) Address (number and street) Robert Olshan CPA		
(c) City, State and ZIP Code		
Washington	DC	20016
(d) Name of Employer or Principal Place of Business	(e)	Occupation
Robert Olshan, CPA	A.	ccountant
Total Donations This Statement		.00
Total Disbursements/Obligations This St	atement	237500.00
Under penalty of perjury, I certify that this statement is tru	· ·	
TYPE OR PRINT NAME OF PERSON COMPLETING F	FORM Holly Higgins	- Commence of the commence of
SIGNATURE Electronically Filed by Holly Higgs	ns DA	TE
NOTE: Submission of false, erroneous or incomplete in	formation may subject the person signing this	statement to the penalties of 2 U.S.C. 437g.

dditio	Person(s) Sharing/Exercising Control onal pages as necessary)	*	PAGE 2/4
9750	on(s) Sharing/Exercising Control		
<b>4.</b>	(a) Name		Transction ID: F91.000001
	Heather Higgins		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(b) Address (number and street) 4400 Jennifer Street NW Suite 240 Suite 240		
	(c) City, State and Zip Code	•)	11 - 11 - 1x 1 x y - 1
	Washington	DC	20015
	(d) Name of Employer or Principal Place of Business		(e) Occupation
	Independent Women's Voice		President & CEO

SCHEDULE 9-B
Disbursement(s) Made or Obligations

PAGE 3/4

Full Name (Last, First, Middle Initial) BrabenderCox	of Payee				Date of Disbursement or Obligation
Mailing Address of Payee					- "05" ´ 05 ´ 2010 `
932 Edwards Ferry Road, Ste. 107					Amount
City	State	Zip Cod	e ,		9500.00
Leesburg	VA	20176	9		Communication Date
Name of Employer		Occupation	-725		M M / D D / Y Y Y
					05 06 2010
	1911 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1				Transction ID: F93.000001
Purpose of Disbursement (including Media Production - Case Closed	due(s) of communication	K(S))			υ w
Name of Federal Candidate	Office Sought: ,	House	State:	н	Disbursement/Obligation For: 2010
Edward Espenett Case	,	Senate			Primary General
F04 000003		President	District:	01	X Other (specify) Special-General
F94,000002 Name of Federal Candidate	Office Sought:	353-13	-		Disbursement/Obligation For:
The state of the s	Times deagan.	House	State:		Primary General
		Senate	District:		<u>*</u> )-
		President			Other (specify)
Name of Federal Candidate	Office Sought:	House	State:		Disbursement/Obligation For:
		Senate			Primary General
		President	District:		Other (specify)
Full Name (Last, First, Middle Initial)	of Payee		-		Date of Disbursement or Obligation
/ictory Media Group	100				M_ M / D_ D / Y Y Y
Mailing Address of Payee					05 03 2010
1816 Garfield Ave.					Amount
	State	Zip Cod			50000.00
City		171	0		
Aurora	IL .	60506			Communication Date
Name of Employer		Occupation			05 06 2010
				-	Transction ID: F93.000002
Purpose of Disbursement (including	title(s) of communication	n(s))			. 33,30000
Media Buy - Case Closed  Name of Federal Candidate	Office Sought:	May 2	Chater	HI	Disbursement/Obligation For: 2010
Edward Espenett Case	office Godgen.	•	State:		Primary General
and sometime of		Senate President	District:	01	X Other (specify) Special-General
F94,000004	Office Coucht-				Other (speary)
Name of Federal Candidate	Office Sought:	House	State:		Disbursement/Obligation For.
		Senate	District:		Primary General
		President			Other (specify)
Name of Federal Candidate	Office Sought:	House	State:		Disbursement/Obligation For:
		Senate	_		Primary General
		President	District:		Other (specify)
					59500,00
SUBTOTAL of Disbursement/Oblig	ation This Page (optiona	l)			
TOTAL This Period (last page this (carry total from last page)					

Full Name (Last, First, Middle Initial	) of Payee		Lat.	Date of Disbursement of	-
Victory Media Group  Mailing Address of Payee					2010
1816 Garfield Ave.		100	9.4	Amount	
City	State	Zip Cod	e	1	78000.00
Aurore	IL.	60506	X 1	Communication Date	
Name of Employer	1 W I	Occupation .	8	05 09 Transction ID: F93,000	2010 °
Purpose of Disbursement (including	title(s) of communication	on(s))			
Media Buy - Case Closed	5 8 5	***		4 - COM 4-2	· · · · · · · · · · · · · · · · · · ·
Name of Federal Candidate Edward Espenett Case F94.000006	Office Sought:	X House Senate President	State: HI District: 01	Primary	For: 2010 General Special-General
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation	
		Senate President	District:	Primary Other (specify)	General
Name of Federal Candidate	Office Sought:	House Senate President	State: District:	Disbursement/Obligation Primary Other (specify)	For: General
· · · · · · · · · · · · · · · · · · ·	·			outer (opening)	
		5.00			
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	<u> 3</u> 3 ×				
				<del></del>	

237500.00

Federal Election Comm ENVELOPE REPLACEMENT PAGE FOR The FEC added this page to the end of this filing	NCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signa	ture Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Ne	ext Business Day Delivery
Received from House Records & Registration C	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify): WEb John #423	Date of Receipt or Postmarked 5/7/10
Ancel	\$7/10
PREPARER (3/2005)	DATÉ PREPARED

# Exhibit 14

Image# 10931346768 09/23/2010 22:25

# FEC FORM 9 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

4 halfada a la managaria	
1. Individual, Organization or Qualified Nonp  (a) Name	rofit Corporation Making the Disbursement/Obligations
(a) Name INDEPENDENT WOMEN'S VOICE	
(b) Address (number and street) check if differe 4400 JENNIFER STREET NW SUITE 240	nt than previously reported  2. FEC Identification Number
(c) City, State and ZIP Code WASHINGTON	DC 20015
(d) Name of Employer or Principal Place of Business	(e) Occupation
Now	
3. Is This Statement or	4. Covering Period through
x Amended	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
5. (a) Date of Public Distribution(s)	21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
6. The filer is a(n): (a) Individual (b)	Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)
(d) Corporation, Labor Organization or Qualified	Nonprofit Corporation making communications under 11 CFR 114.15
(e) Other, specify:	
7. Were the disbursements for the electione from donations to a segregated bank according to the second second segregated bank according to the second segregated bank according to the second segregated bank according to the second segregated bank according to the second segregated segregated bank according to the second segregated segregat	ering communication made exclusively
8. Custodian of Records	ount:
(a) Name	
Stacy Chin	
(b) Address (number and street) 4400 Jenifer Street	
(c) City, State and ZIP Code	
Washington	DC 20015
(d) Name of Employer or Principal Place of Business	(e) Occupation
Independent Women's Voice	Vice President of Operations & Admin.
9. Total Donations This Statement	61675.00
10.Total Disbursements/Obligations This Sta	tement 61675.00
Under penalty of perjury, I certify that this statement is true	e, correct and complete.
TYPE OR PRINT NAME OF PERSON COMPLETING F	ORM Heather Higgins
SIGNATURE Electronically Filed by Heather High	ggins DATEDATE

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalities of 2 U.S.C. 437g.

#### Image# 10931346769

# List of Person(s) Sharing/Exercising Control (use additional pages as necessary)

PAGE 2/7

ers	on(s) Sharing/Exercising Control			
A.	(a) Name Heather Higgins		Transction ID: F91.4099	
	(b) Address (number and street) 4400 Jenifer Street Suite 240 Suite 240			
	(c) City, State and Zip Code			
	Washington	DC	20015	
	(d) Name of Employer or Principal Place of Business		(e) Occupation	
	Independent Women's Voice		President & CEO	

Image# 10931346770 SCHEDULE 9-A Donation(s) Received

PAGE 3/7

	ull Name of Donor				ľ	Date of Receip	t
	HE ANNUAL FUND INC			1	M M /	17	2010
	Mailing Address of Donor				09		2010
5	AINT GERMAIN DR 341					Amount	
C	City St.	ate	Zip		L.,	-	61675.00
C	CENTERVILLE V/	4	20121		Transction ID:	F92.4111	
				35)			
	***						
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		181					
		10					
					Ti-		
		×					
4							
OTA	AL of Donations This Page (optional)						61675.00
_					handy miles b		
	nis Period (last page this line number only)						

Image# 10931346771 SCHEDULE 9-B Disbursement(s) Made or Obligations

PAGE 4/7

	barsement(s) made si					
A.	Full Name (Last, First, Middle Initial) o Intrepid Media, Inc.	of Payee	4	5		Date of Disbursement or Obligation  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
-	Mailing Address of Payee		-	- 84		
	210 Mill Branch Road		2 1			Amount
-	Olt.	State	Zip Code			1435.00
	City		32312	×		Communication Date
	Tallahassee	FL				The second secon
	Name of Employer		Occupation			0.9 / 21 / Y Y Y Y
						Transction ID: F93.4114
-	Purpose of Disbursement (including t	title(s) of communication	on(s))	, , , , , , , , , , , , , , , , , , , ,		
	Radio spot production: Creative, music			piect		
-				-	•••	Disbursement/Obligation For: 2010
	Name of Federal Candidate ROBIN CARNAHAN	Office Sought:	House	State:	MO	Primary X General
	ROBIN CARNADAN	1	X Senate	District:	00	
_	F94.4103		President			Other (specify)
	Name of Federal Candidate	Office Sought:	House	State:		Disbursement/Obligation For:
1			Senate	District:		Primary General
1		1	President	District.		Other (specify)
-	Name of Federal Candidate	Office Sought:	House	State:		Disbursement/Obligation For:
		1	Senate	State.		Primary General
			President	District:		Other (specify)
В.	Full Name (Last, First, Middle Initial)	of Payee				Date of Disbursement or Obligation
l _	William Pascoe					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
-	Mailing Address of Payee					Description of the last of the
1	2101 Mill Road #413					Amount
١-	City	State	Zip Cod	е		1500.00
ı	Alexandria	VA	22314			Communication Date
-	Name of Employer	141-4	Occupation			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
1	Self		Communicat	tions Cons	ultant	Instituted Instituted Section
-	District of Control of	title/s) of second unique	ion(a))			Transction ID: F93.4108
1	Purpose of Disbursement (including					
	Creative Design/Script Writing & Pro	uduction - IWV Dr. Ecl	k MO Project			
1	Name of Federal Candidate	Office Sought:	House	State:	MO	Disbursement/Obligation For: 2010
1	RÓBIN CARNAHAN		x Senate	Districts	00	Primary X General
	F94.4103		President	District.	.00	Other (specify)
-	Name of Federal Candidate	Office Sought:	House	State:		Disbursement/Obligation For:
1			Senate			Primary General
1			President	District:		Other (specify)
77	M. (F.) 10	Office Course				Disbursement/Obligation For:
	Name of Federal Candidate	Office Sought:	House	State:	-	Primary General
			Senate President	District:		
			Fresideill			Other (specify)
					Ē	
	SUBTOTAL of Disbursement/Oblig	ation This Page (option	nal)		. L	2935.00
_	CODIO I ALCO DISCUSCIONI CONIG	and the same of th				
	TOTAL This Period (last page this	line number only)			1	
	(carry total from last page this			- A-2000	-	
						and the state of t

Image# 10931346772

SCHEDULE 9-B			
Disbursement(s)	Made o	r Obligations	

PAGE

М.	Full Name (Last, First, Middle Initia	al) of Payee	Date of Disbursement or Obligation
	Smart Media Group		M M / D D / Y Y Y
	Mailing Address of Payee		
_	814 King Street #400		Amount
	City Alexandria	State Zip Code VA 22314	53975.00
	Name of Employer	Occupation	Communication Date
			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Purpose of Disbursement (including	ng title(s) of communication(s))	Transction ID: F93.4101
	Radio Media Flight 9/21-9/27 - IWV	Dr. Eck MO Project	
	Name of Federal Candidate	Office Sought: House State: MO	Disbursement/Obligation For: 2010
	ROBIN CARNAHAN	v Senate	Primary X General
	F94.4103	President District: 00	Other (specify)
	Name of Federal Candidate	Office Sought: House State:	Disbursement/Obligation For:
		Senate	Primary General
_		President District:	Other (specify)
	Name of Federal Candidate	Office Sought: House State:	Disbursement/Obligation For:
		Senate	Primary General
		President District:	Other (specify)
	Full Name (Last, First, Middle Initia	ıİ) of Payee	Date of Disbursement or Obligation
	Smart Media Group		
	Mailing Address of Payee		Mo 9 / 20 / Y 20 10 Y
	814 King Street #400		Amount
	City	State Zip Code	20.00
	Alexandria	VA 22314	Communication Date
	Name of Employer	Occupation	0.9 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
			0.9 2.1 2.0.1.0 Transction ID: F93.4104
	Purpose of Disbursement (including	g title(s) of communication(s))	11d13ction ID : F93.4104
	Wire Transfer Fees - IWV Dr. Eck N	MO Project	
	Name of Federal Candidate	Office Sought: House State: MO	Disbursement/Obligation For: 2010
	ROBIN CARNÁHAN	y Senate	Primary X General
	F94.4103	President District: 00	Other (specify)
	Name of Federal Candidate	Office Sought: House State:	Disbursement/Obligation For:
		Senate	Primary General
		President District:	Other (specify)
	Name of Federal Candidate	Office Sought: House State:	Disbursement/Obligation For:
-	The state of the s	Jale.	Primary General
		Senate	Li illiary Li Gerleral
		Senate President District:	_
			Other (specify)
_			
		President District:	
			Other (specify)
	SUBTOTAL of Disbursement/Oblig	President District:	Other (specify)

Image# 10931346773

_			
SCHE	DULE	9-B	

PAGE 6/7

of Payee #400  er  ursement (including)  or. Eck MO Project I Candidate HAN	State VA  title(s) of communication Office Sought:	House	State: MO	Amount    300.00
er ursement (including or. Eck MO Project I Candidate HAN	VA  title(s) of communication  Office Sought:	Occupation on(s)) House		Communication Date    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
er ursement (including or. Eck MO Project I Candidate HAN	VA  title(s) of communication  Office Sought:	Occupation on(s)) House		Communication Date    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ursement (including or. Eck MO Project I Candidate HAN	VA  title(s) of communication  Office Sought:	Occupation on(s)) House		Communication Date  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ursement (including or. Eck MO Project I Candidate HAN	title(s) of communication	Occupation on(s)) House	State: MO	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ursement (including or. Eck MO Project I Candidate HAN	Office Sought:	on(s))	State: MO	Transction ID: F93.4105
or. Eck MO Project I Candidate HAN	Office Sought:	House	State: MO	Dishursement/Obligation For: 2010
l Candidate HAN	+		State: MO	Dishursement/Obligation For: 2010
l Candidate HAN	+		State: MO	Disbursement/Obligation For: 2010
I Candidate		X Senate President	District: 00	Primary X General  Other (specify)
	Office Sought:	House Senate	State:	Disbursement/Obligation For: Primary General
		President		Other (specify)
al Candidate	Office Sought:	House Senate President	State:	Disbursement/Obligation For: Primary General Other (specify)
	of Payee			Date of Disbursement or Obligation  M M J D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
-				Amount
	State	Zip Code	е	3175.00
	VA	22314		Communication Date
oyer		Occupation		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		tion(s))		
	Office Sought:	X Senate	State: MO District: 00	Disbursement/Obligation For: 2010 Primary X General Other (specify)
al Candidate	Office Sought:		State:	Disbursement/Obligation For: Primary General Other (specify)
	Office Sought:	House		Disbursement/Obligation For:
il constant	oup s of Payee t #400  oyer  bursement (including	t, First, Middle Initial) of Payee oup s of Payee t #400  State VA  over  sbursement (including title(s) of communication - IWV Dr. Eck MO Project ral Candidate AHAN	al Candidate  Office Sought:  House Senate President  It, First, Middle Initial) of Payee oup s of Payee It #400  State VA  22314  Occupation  Subursement (including title(s) of communication(s)) Sion - IWV Dr. Eck MO Project ral Candidate AHAN  Office Sought: House Senate President  House	Al Candidate  Office Sought:  House State: Senate President  District:  It, First, Middle Initial) of Payee oup s of Payee t #400  State Zip Code VA 22314  Occupation  Sursement (including title(s) of communication(s)) sion - IWV Dr. Eck MO Project ral Candidate AHAN  Office Sought: House State: MC X Senate District: O0 President  House State: Senate District: O0 President  House State: Senate District: O0 President

Image# 10931346774 SCHEDULE 9-B

SCHEDULE 9-B		
Disbursement(s) Made or Obligations	PAGE	7/7

A. Full Name (Last, First, Middle Init Smart Media Group  Mailing Address of Payee 814 King Street #400  City Alexandria  Name of Employer  Purpose of Disbursement (includi	State Zip Cov VA 22314 Occupation	=3= 3	Date of Disbursement or Obligation  M M M / D D D / Y Y Y Y Y Amount  1270.00  Communication Date  M M M / D D / Y Y Y Y Y 0,9 / 2 1 / Y Y Y Y 2 0 1 0  Transction ID: F93.4107
Media Commission - Intrepid Media  Name of Federal Candidate ROBIN CARNAHAN  F94.4103  Name of Federal Candidate	Office Sought: House Senate President  Office Sought: House Senate President  Office Sought: House Senate	State:	Disbursement/Obligation For: 2010 Primary X General Other (specify) Disbursement/Obligation For: Primary General
Name of Federal Candidate	Office Sought: House Senate President	District:  State:  District;	Other (specify)  Disbursement/Obligation For: Primary General Other (specify)
		13	
			*
	gation This Page (optional)s line number only)to line 10)		61675.00

# Exhibit 15

# 1003037100

**FEC FORM 5** 

PAGE 1 / 2

07/14/2010 12:54

### REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

(a) Name of Individual, Organization or Corporation Independent Women's Voice	
(b) Address (number and street)	
(c) City, State and ZIP Code	
Washington DC 20015	3. FEC Identification Number
Corporate filers only  Is the filer a qualified nonprofit corporation?  X Yes No	C C00000000
Individual filers only Name of Employer	Occupation
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterty Report	ur Notice
☑ July 15 Quarterly Report	
October Quarterly Report	
☐ January 31 Year-End Report	
The same of the sa	
(b) Is this Report an amendment? Yes \(\subseteq\) No \(\text{X}\)	
5. COVERING PERIOD: FROM 04 01 2010	
THROUGH	
06 ' 30 ' 2010 '	
6. TOTAL CONTRIBUTIONS	.00
7. TOTAL INDEPENDENT EXPENDITURES	22500.00
nder penalty of perjury. I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consists request or suppession of, a candidate or a candidate's agent or authorized commisse or a postical perty commisse or its agent. In addition, if the independent were made by a corporation, I certify that the corporation is a qualified perpendicular under the Commission's regulations.	Don with, or at the condent expenditures
YPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Heather Higgins	07/14/2010

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20483 Toll Free 800-424-9530, Local 202-694-1100

HEDULE 5-E NIZED INDEPENDENT EXPENDITURES		8 1 11 5			PAGE 2	2
	5	14			FOR LINE	7 FOR FORM 5
OF FILER (In Full)						
ependent Women's Voice						
il Name (Last, First, Middle Initial) of Payee				Date		
/ictory Media Group				M_ M	′ <sup>D</sup> 15	′ Y 2010
failing Address			7 -	0.5		2010
1816 Garfield	s 2			Amount		4
City	State	Zip Code				14000.00
Aurora	IL	60506			10	W-1
Purpose of Expenditure		Category/	Off	ice Sought:	X House	State: PA
Phone Bank - In Support of Tim Burns		Туре	1 +	louse	Senate	
ame of Federal Candidate Supported or Opposed	by Expenditu	ле:			President	District: 12
imothy Burns			Che	ck One:	X Support	Oppose
		1,75	Diel	oursement Fo		
Calendar Year-To-Date Per Election		14000.00	1	2010	,	- Coloral
for Office Sought		1000.00		Other (specify	) <u>Special</u>	
ull Name (Last, First, Middle Initial) of Payee		%		Date	ti e	
Antietam Communications				"o s	1 5	′ × 2010
falling Address				1	15	2010
2101 Mill Road				Amount		
Suite 314 Sity	State	Zip Code		1		8500.00
Alexandria	VA	22314				*
Purpose of Expenditure		Category/	Оп	ice Sought:	X House	State: PA
Voter List Rental - In Support of Tim Burns		Туре	١,	łouse	Senate	
lame of Federal Candidate Supported or Opposed	by Expenditu	nte.	- '		President	District: 12
	-, - <del>, -, -</del> , -, -, -, -, -, -, -, -, -, -, -, -, -,	*	Ch	ack One:	X Support	Oppose
Fimothy Raymond Burns						
Timothy Raymond Burns			Dis	bursement Fo	T Drimon	Ceneral
Calendar Year-To-Date Per Election		22500.00		bursement Fo 2010	, 🗀,,,,,,,	General
		22500.00			, 🗀,,,,,,,	General
Calendar Year-To-Date Per Election		22500.00		2010		General
Calendar Year-To-Date Per Election		22500.00		2010		General
Calendar Year-To-Date Per Election	49	22500.00		2010		General
Calendar Year-To-Date Per Election	2	22500.00		2010		General
Calendar Year-To-Date Per Election		22500.00		2010		General
Calendar Year-To-Date Per Election	42	22500.00		2010		General
Calendar Year-To-Date Per Election for Office Sought	47	22500.00		2010		General
Calendar Year-To-Date Per Election for Office Sought	es			2010		General 22500.00
Calendar Year-To-Date Per Election for Office Sought				2010		
Calendar Year-To-Date Per Election for Office Sought  a) SUBTOTAL of Itemized Independent Expenditure				2010		

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DO The FEC added this page to the end of this filing to indicate ho	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirma	tion™ Label
USPS Express Mail	Postmarked
Postmark Illegible	ti
No Postmark	
No Postmark  Overnight Delivery Service (Specify):	Shipping Date
Overnight Delivery Service (Specify):	
Overnight Delivery Service (Specify):  Next Business I	Day Delivery
Overnight Delivery Service (Specify):  Next Business I  Received from House Records & Registration Office	Day Delivery  Date of Receipt
Overnight Delivery Service (Specify):  Next Business I  Received from House Records & Registration Office  Received from Senate Public Records Office  Received from Electronic Filing Office	Date of Receipt  Date of Receipt
Overnight Delivery Service (Specify):  Next Business I  Received from House Records & Registration Office  Received from Senate Public Records Office  Received from Electronic Filing Office  Date of Received	Date of Receipt  Date of Receipt  Date of Receipt

# Exhibit 16

Image# 10991263562 107/49F20140 18:11

### **FEC FORM 5**

### REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit (  1. (a) Name of Individual, Organization or Corporation	Corporations	
INDEPENDENT WOMEN'S VOICE		
(b) Address (number and street)		
(c) City, State and ZIP Code		
WASHINGTON DC 20015	FEC Identification Number	
2. Corporate filers only  Is the filer a qualified nonprofit corporation?  X Yes  No	C C90011115	
Individual filers only  Name of Employer	Occupation	
TYPE OF REPORT (check appropriate boxes):		
(a) April 15 Quarterly Report 24-Hour Notice 48-Hour	Notice	
☐ July 15 Quarterly Report		
X October Quarterly Report		
☐ January 31 Year-End Report		
	Not all the second	
(b) Is this Report an amendment? Yes No X		
5. COVERING PERIOD: FROM MOM / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
THROUGH  MO.9		
6. TOTAL CONTRIBUTIONS	66095.60	
7. TOTAL INDEPENDENT EXPENDITURES	66095.60	
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulation.	the independent expenditures	
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE	
Heather R. Higgins	10/11/2010	
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report	to the penalties of 2 U.S.C 437g.	

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

Image# 10991263563

## SCHEDULE 5-A

PAGE 2/4

NAME OF FILER (In Full)				
INDEPENDENT WOMEN'S VOICE		679	31 8 8 8 1	
Full Name (Last, First, Middle Initial)			0.00	Date of Receipt
Parker J. Collier  Mailing Address				$\begin{bmatrix} M & M \\ 0 & 9 \end{bmatrix}$ $\begin{bmatrix} D & D \\ 1 & 2 \end{bmatrix}$ $\begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
9045 Strade Still Court				
City	State	Zip Code		Transaction ID: F56.4103
Naples	FL	34107		Amount of Each Receipt this Period
FEC ID number of contributing				36263.12
federal political committee.	C			
			Occupation	
Name of Employer				
Equestrian Cntr at Horse Creek			Owner	in the second of
Full Name (Last, First, Middle Initial)				Date of Receipt
Parker J. Collier				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 9045 Strade Still Court				0.9 13 2010
City	State	Zip Code		Transaction ID: F56.4110
Naples	FL	34107	140	Amount of Each Receipt this Period
	1.7			
FEC ID number of contributing	C			29832,48
federal political committee.	<u> </u>			
Name of Employer			Occupation	
Equestrian Cntr at Horse Creek			Owner	

SUBTOTAL of Receipts This Page (optional)	66095.60
TOTAL This Period (last page carry total to Line 6)	66095.60

MUR718100254 Image# 10991263564 PAGE 3/4 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE Full Name (Last, First, Middle Initial) of Payee Date Connection Strategy, LLC 2010 Mailing Address Amount PO Box 2192 29013.12 Zip Code State City 22202 VA Arlington Office Sought: Purpose of Expenditure State: NH House Category/ **NH Phone Calls** Туре X Senate Senate District: 00 President Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM H BINNIE Support Check One: Oppose Disbursement For: X Primary General Calendar Year-To-Date Per Election 29013.12 Other (specify) for Office Sought Full Name (Last, First, Middle Initial) of Payee Date Connection Strategy, LLC 2010 Mailing Address **Amount** PO Box 2192 2250.00 Zip Code State City 22202 VA Arlington Office Sought: Purpose of Expenditure House State: NH Category/ Phone Number Database Purchase Type X Senate Senate District: \_00 President Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM H BINNIE Check One: Support Oppose Disbursement For: X Primary General Calendar Year-To-Date Per Election 2010 31263.12 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Connection Strategy, LLC ž 0 1 0 Y Mailing Address Amount PO Box 2192 29832.48 City State Zip Code VA 22202 Arlington Office Sought: Purpose of Expenditure House State: NH Category/ Phone Bank/Calls Type Х Senate Senate District: 00 President Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM H BINNIE Check One: Support Oppose Disbursement For: X Primary General Calendar Year-To-Date Per Election 2010 61095.60 Other (specify) for Office Sought 61095.60 (a) SUBTOTAL of Itemized Independent Expenditures ......

(b) SUBTOTALof Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures .....

(carry total from last page forward to Line 7)

Image# 10991263565 PAGE 4/4 **SCHEDULE 5-E** ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE Full Name (Last, First, Middle Initial) of Payee Date William W. Pascoe, III 2010 Mailing Address Amount 2101 Mill Road #413 5000.00 City State Zip Code Alexandria VA 22314 Purpose of Expenditure Office Sought: State: NH Category/ House Script drafting and production Type Senate Senate District: \_00 President Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM H BINNIE Check One: Support Oppose Disbursement For: X Primary General Calendar Year-To-Date Per Election 2010 5000.00 for Office Sought Other (specify) 5000.00 (a) SUBTOTAL of Itemized Independent Expenditures ...... (b) SUBTOTALof Unitemized Independent Expenditures..... 66095.60 (c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)

## Exhibit 17

Image# 11930258938 01F83F2019 12:41

### **FEC FORM 5**

#### REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit (         1. (a) Name of Individual, Organization or Corporation         INDEPENDENT WOMEN'S VOICE	
(b) Address (number and street) check if different than previously reported 4400 JENIFER STREET NW STE 204	
SUITE 240	
(c) City, State and ZIP Code	C. FFO Identification Number
WASHINGTON DC 20015	FEC Identification Number
	<b>C</b> C90011115
2. Corporate filers only  Is the filer a qualified nonprofit corporation?  X Yes  No	
Individual filers only Name of Employer	Occupation
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report 24-Hour Notice 48-Hou	ır Notice
☐ July 15 Quarterly Report	
October Quarterly Report	
(b) Is this Report an amendment? Yes No X  5. COVERING PERIOD: FROM  M  M  M  M  M  M  M  M  M  M  M  M	**************************************
THROUGH	
M_M / D_D / Y_YOY Y	
6. TOTAL CONTRIBUTIONS	66920,56
7. TOTAL INDEPENDENT EXPENDITURES	, , , , , , , , , , 66920,56,
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regula	, if the independent expenditures
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Heather R. Higgins	01/31/2011
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this repo	ort to the penalties of 2 U.S.C 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

Image# 11930258939

## **SCHEDULE 5-A**

EMIZED RECEIPTS	Ciation and the said second by	on for the number of ediciting contributions
y information copied from such Reports a for commercial purposes, other than usin	and Statements may not be sold or used by any person g the name and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee
NAME OF FILER (In Full)		
INDEPENDENT WOMEN'S VOICE	85 A 3+e	27.
Full Name (Last, First, Middle Initial) Parker J. Collier	27 60	Date of Receipt
Mailing Address 9045 Strade Still Court	· •	1,0 P 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Naples	State Zip Code FL 34107	Transaction ID: F56.4181
	0,10	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	c	29060,69
Name of Employer	Occup	pation
Equestrian Cntr at Horse Creek	Own	er
Full Name (Last, First, Middle Initial) ONE JERUSALEM		Date of Receipt
Mailing Address 767 5TH AVE STE 4200	The second secon	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: F56.4117
New York	NY 10153	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	c	37859.87
Name of Employer	Occur	pation
and the second second second second second	45 - 414 - 14	66920.56
SUBTOTAL of Receipts This Page (option	nal)	
		66920.56

MUR718100259 Image# 11930258940 SCHEDULE 5-E PAGE 3/9 ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE Full Name (Last, First, Middle Initial) of Payee Date Revolution Media Group, LLC 2010 Mailing Address Amount 1090 Vermont Avenue NW, #1230 37859.87 City State Zip Code Washington DC 20006 Purpose of Expenditure Office Sought: X State: NY Category/ House Creative Design, Production & Postage - Direct Mail - NY 4 Type House Senate District: \_04 President Name of Federal Candidate Supported or Opposed by Expenditure: FRANCIS X JR BECKER Check One: Support Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 37859.87 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group 2010 Mailing Address Amount 1816 Garfield Avenue 2443.07 Zip Code City State Aurora IL 60506 Purpose of Expenditure Office Sought: Χ State: AZ Category/ House **Phone Calls** Type House Senate District: \_03 President Name of Federal Candidate Supported or Opposed by Expenditure: **BEN QUAYLE** Check One: Support Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 2443.07 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group ž 0 1 0 Mailing Address Amount 1816 Garfield Avenue 1413.76 City State Zip Code IL 60506 Aurora Purpose of Expenditure Office Sought: Category/ X House State: AZ Phone Calls Type House Senate District: \_07 President Name of Federal Candidate Supported or Opposed by Expenditure: RUTH CRAWFORD MCCLUNG Check One: Support Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 1413.76 for Office Sought Other (specify) 41716.70 (a) SUBTOTAL of Itemized Independent Expenditures ......

(carry total from last page forward to Line 7)

Image# 11930258941 PAGE 4/9 SCHEDULE 5-E FOR LINE 7 FOR FORM 5 ITEMIZED INDEPENDENT EXPENDITURES NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group 2010 Mailing Address Amount 1816 Garfield Avenue 2563.61 State Zip Code City ΙL 60506 Aurora Office Sought: Purpose of Expenditure Х House State: AZ Category/ **Phone Calls** Туре House Senate District: 05 President Name of Federal Candidate Supported or Opposed by Expenditure: Oppose DAVID SCHWEIKERT Check One: Support Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 2563.61 Other (specify) for Office Sought Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group 2010 Mailing Address Amount 1816 Garfield Avenue 3412.08 Zip Code State City 60506 IL Aurora Office Sought: Purpose of Expenditure State: CT х House Category/ **Phone Calls** Type Senate House District: \_05 President Name of Federal Candidate Supported or Opposed by Expenditure: SAM CALIGIURI Oppose Support Check One: Disbursement For: General Primary Calendar Year-To-Date Per Election 2010 3412.08 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group ž010<sup>°</sup> Mailing Address **Amount** 1816 Garfield Avenue 1083.50 City State Zip Code IL 60506 Aurora Office Sought: Purpose of Expenditure X House State: IA Category/ Phone Calls Type Senate House District: 02 President Name of Federal Candidate Supported or Opposed by Expenditure: **GARY JOSEPH SICARD** Support Oppose Check One: Disbursement For: X General **Primary** Calendar Year-To-Date Per Election 2010 1083.50 Other (specify) for Office Sought 7059.19 (a) SUBTOTAL of Itemized Independent Expenditures ..... (b) SUBTOTALof Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... (carry total from last page forward to Line 7)

nage# 11930258942 CHEDULE 5-E			PAGE 5/9
<b>EMIZED INDEPENDENT EXPENDITUF</b> AME OF FILER (In Full)	ies		FOR LINE 7 FOR FORM 5
INDEPENDENT WOMEN'S VOICE			
·			
Full Name (Last, First, Middle Initial) of Payee			Date
Victory Media Group			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1816 Garfield Avenue			10 31 2010 Amount
City Aurora	State IL	Zip Code 60506	2934.23
Purpose of Expenditure			Office Sought: V House Out MD
Phone Calls		Category/ Type	House Senate
Name of Federal Candidate Supported or Oppos ANDREW P HARRIS	ed by Expenditure	<b>)</b> :	Check One: X Support Oppose
			Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		2934.23	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Victory Media Group			M M / D D / Y Y Y Y
Mailing Address 1816 Garfield Avenue			Amount
City	State	Zip Code	405.55
Aurora	IL	60506	
Purpose of Expenditure		Category/	Office Sought: X House State: MI
Phone Calls		Туре	House Senate District: 01
Name of Federal Candidate Supported or Oppos DANIEL J BENISHEK	ed by Expenditure	e:	Check One: X Support Oppose
			Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		405.55	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			
Victory Media Group			Date
Mailing Address			
1816 Garfield Avenue			Amount
City	State	Zip Code	592.69
Aurora	IL	60506	
Purpose of Expenditure		Category/	Office Sought: X House State: MI
Phone Calls		Туре	House Senate District: 09
Name of Federal Candidate Supported or Oppos ANDREW ROCKY RACZKOWSKI	ed by Expenditure	e:	President Oppose
			Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		592.69	2010 Cther (specify)
			0000.47
(a) SUBTOTAL of Itemized Independent Expend	itures		3932,47
(b) SUBTOTALof Unitemized Independent Expe	nditures		
(a) TOTAL ladare di 15			
(c) TOTAL Independent Expenditures(carry total from last page forward to I			

Image# 11930258943 PAGE 6/9 **SCHEDULE 5-E** ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group 2010 Mailing Address Amount 1816 Garfield Avenue 1730.86 Zip Code State City 60506 IL Aurora Office Sought: State: MS Purpose of Expenditure Х House Category/ Phone Calls Туре Senate House District: \_01 President Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK ALAN NUNNELEE Check One: Support Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 1730.86 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group 2010 Mailing Address Amount 1816 Garfield Avenue 1633.45 Zip Code State City ſL 60506 Aurora Purpose of Expenditure Office Sought: State: NY X House Category/ Phone Calls Туре Senate House District: 04 President Name of Federal Candidate Supported or Opposed by Expenditure: FRANCIS X JR BECKER Check One: Support Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2010 77353.19 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group 2010 Mailing Address Amount 1816 Garfield Avenue 1923.50 Zip Code State City 60506 Aurora IL Purpose of Expenditure Office Sought: State: NY House Category/ Phone Calls Туре Senate House District: 19 President Name of Federal Candidate Supported or Opposed by Expenditure: NAN HAYWORTH Check One: Support Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 1923.50 for Office Sought Other (specify) 5287.81 (a) SUBTOTAL of Itemized Independent Expenditures ...... (b) SUBTOTALof Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... (carry total from last page forward to Line 7)

Image# 11930258944 SCHEDULE 5-E

HEDULE 5-E	2		PAGE 7/9
MIZED INDEPENDENT EXPENDIT	URES		FOR LINE 7 FOR FORM 5
ME OF FILER (In Full)			
NDEPENDENT WOMEN'S VOICE			
Full Name (Last, First, Middle Initial) of Payee			Date
Victory Media Group			M M / D D / Y Y Y Y
Mailing Address			M10 / 31 / 2010 Y
1816 Garfield Avenue			Amount
City	State	Zip Code	1709.79
Aurora	IL	60506	
Purpose of Expenditure		Cotoson/	Office Sought: X House State: NY
Phone Calls		Category/ Type	State: 111
Name of Fadaval Cardidate Surrented as Co	and the Committee		House Senate District: 22
Name of Federal Candidate Supported or Opp GEORGE K PHILLIPS	oosed by Expenditure		
			Check One: X Support Oppose
Calendar Year-To-Date Per Election			Disbursement For: Primary X General
for Office Sought		1709.79	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			
Victory Media Group			Date
C 02	<u> </u>		10 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1816 Garfield Avenue			Amount
			2299.29
City	State	Zip Code	2233.23
Aurora	IL	60506	
Purpose of Expenditure		Category/	Office Sought: X House State: NC
Phone Calls		Туре	House Senate District: 02
Name of Federal Candidate Supported or Op	posed by Expenditure		President District
RENEE JACISIN ELLMERS			Check One: X Support Oppose
			Disbursement For: Primary X General
Calendar Year-To-Date Per Election		2299.29	2010 —
for Office Sought			Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Victory Media Group			M <sub>1,0</sub> / D <sub>3</sub> / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address	<del></del>		
1816 Garfield Avenue			Amount
City	State	Zip Code	2033.47
Aurora	IL	60506	
Purpose of Expenditure		Category/	Office Sought: X House State: PA
Phone Calls		Type	House Senate State: 1A
Name of Federal Candidate Supported or Op	nosed by Evpanditura		President District: 10
THOMAS ANTHONY MARINO	posed by Expenditure	•	
The world the second to the se		144	
Calendar Year-To-Date Per Election			Disbursement For: Primary X General
for Office Sought	L	2033.47	Other (specify)
			In the second se
(a) SUBTOTAL of Itemized Independent Exp	enditures		6042.55
LAP	U		
(b) SUBTOTALof Unitemized Independent E	xpenditures		
(a) Contained independent	- As as caused and commission in		
(c) TOTAL Independent Expenditures			
(carry total from last page forward			

Image# 11930258945 PAGE 8/9 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group 2010 Mailing Address Amount 1816 Garfield Avenue 490.77 Zip Code City State 60506 IL Aurora Purpose of Expenditure Office Sought: State: TX X House Category/ Phone Calls Туре House Senate District: 17 President Name of Federal Candidate Supported or Opposed by Expenditure: Support Oppose Check One: Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 490.77 Other (specify) for Office Sought Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group Mailing Address **Amount** 1816 Garfield Avenue 536.90 Zip Code State City ۱L 60506 Aurora Office Sought: Purpose of Expenditure State: TX House Category/ **Phone Calls** Type Senate House District: 23 President Name of Federal Candidate Supported or Opposed by Expenditure: FRANCISCO 'QUICO' CANSECO Support Oppose Check One: Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 536.90 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group ž010° Mailing Address Amount 1816 Garfield Avenue 839.48 City State Zip Code IL 60506 Aurora Purpose of Expenditure Office Sought: X House State: VA Category/ Phone Calls Type House Senate District: 02 President Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD SCOTT MR. RIGELL Support Oppose Check One: Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 839.48 for Office Sought Other (specify) 1867.15 (a) SUBTOTAL of Itemized Independent Expenditures ..... (b) SUBTOTALof Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... (carry total from last page forward to Line 7)

MUR718100265 Image# 11930258946 PAGE 9/9 **SCHEDULE 5-E** ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group 2 0 1 0 Y Mailing Address Amount 1816 Garfield Avenue 1014.69 Zip Code City State 60506 Aurora IL Purpose of Expenditure Office Sought: Х Category/ House State: VA Phone Calls Type House Senate District: 05 President Name of Federal Candidate Supported or Opposed by Expenditure: **ROBERT HURT** Check One: Support Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 2010 1014.69 for Office Sought Other (specify) 1014.69 (a) SUBTOTAL of Itemized Independent Expenditures ...... (b) SUBTOTALof Unitemized Independent Expenditures..... 66920.56

FEC Schedule 5 (Rev. 02/2003)

(c) TOTAL Independent Expenditures ..... (carry total from last page forward to Line 7)

## Exhibit 18

Image# 11931858253 07/49#21013 13:27

#### **FEC FORM 5**

#### REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

To be used by reisons (Other than routical Committees) including Quantied Nonpront	orporations
(a) Name of Individual, Organization or Corporation	
INDEPENDENT WOMEN'S VOICE	
(b) Address (number and street)	
1875 I Street NW	
5th Floor	
(c) City, State and ZIP Code	
WASHINGTON DC 20006	3. FEC Identification Number
	C C90011115
2. Corporate filers only  Is the filer a qualified nonprofit corporation?  X Yes No	t
Individual filers only Name of Employer	Occupation
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report 24-Hour Notice 48-Hour	r Notice
(4) = 1,000 (4)	·
X July 15 Quarterly Report	
October Quarterly Report	
Colober Qualterly Report	
January 31 Year-End Report	
Land the Land to the land to t	
(b) Is this Report an amendment? Yes No X	
1 10 10 10 10 10 10 10 10 10 10 10 10 10	
F COVERING REPION FROM M M / D D / Y Y Y Y	
5. COVERING PERIOD: FROM MOM / DOT / Y YOUTH	
THROUGH	4 11 Jan 144
	467 ( )
MO,6 / P30 / Y2011	
C. TOTAL CONTRIBUTIONS	0.00
6. TOTAL CONTRIBUTIONS	
7. TOTAL INDEPENDENT EXPENDITURES	14250.29
7. TOTAL INDEPENDENT EXPENDITORES	<del></del>
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or request of suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulation.	
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Heather R. Higgins	07/15/2011
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report	rt to the penalties of 2 U.S.C 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

Image# 11931858254 PAGE 2/3 SCHEDULE 5-E FOR LINE 7 FOR FORM 5 ITEMIZED INDEPENDENT EXPENDITURES NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE Full Name (Last, First, Middle Initial) of Payee Date William W. Pascoe, III 2011 Mailing Address Amount 2101 Mill Road #413 2500.00 Zip Code State City 22314 Alexandria VA Office Sought: Purpose of Expenditure X State: NY House Category/ Creation and Production Туре Senate House District: 26 President Name of Federal Candidate Supported or Opposed by Expenditure: JANE CORWIN Check One: Support Oppose Disbursement For: General Primary Calendar Year-To-Date Per Election 9168.21 for Office Sought Other (specify) Special-General Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group 2011 Mailing Address Amount 1816 Garfield Avenue 4127.17 Zip Code State City 60506 ΙL Aurora Office Sought: Purpose of Expenditure State: NY X House Category/ List Rental Type Senate House District: 26 President Name of Federal Candidate Supported or Opposed by Expenditure: JANE CORWIN Check One: Support Oppose Disbursement For: **Primary** General Calendar Year-To-Date Per Election 4127.17 for Office Sought Other (specify) Special-General Full Name (Last, First, Middle Initial) of Payee Date Victory Media Group 2011 Mailing Address Amount 1816 Garfield Avenue 2541.04 Zip Code State City 60506 Aurora 1L Office Sought: Purpose of Expenditure House State: NY Х Category/ Туре Phone Banks Senate House District: 26 President Name of Federal Candidate Supported or Opposed by Expenditure: JANE CORWIN Check One: Support Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2011 6668.21 Other (specify) for Office Sought Special-General 9168.21 (a) SUBTOTAL of Itemized Independent Expenditures ..... (b) SUBTOTALof Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... (carry total from last page forward to Line 7)

Image# 11931858255			
SCHEDULE 5-E TEMIZED INDEPENDENT EXPENDIT	LIDEC		PAGE 3/3
NAME OF FILER (In Full)	UNES		FOR LINE 7 FOR FORM 5
INDEPENDENT WOMEN'S VOICE			
Full Name (Last, First, Middle Initial) of Payee			Date
Victory Media Group			0.5 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1816 Garfield Avenue			Amount
City Aurora	State IL	Zip Code 60506	2541.04
Purpose of Expenditure		Category/	Office Sought: X House State: NY
Phone Banks & Calls		Туре	House Senate District: 26
Name of Federal Candidate Supported or Op JANE CORWIN	posed by Expenditure:		President  Check One: X Support Oppose
Calendar Year-To-Date Per Election	T	20877.46	Disbursement For: Primary General
for Office Sought	L	20077.40	Other (specify) <u>Special-General</u>
Full Name (Last, First, Middle Initial) of Payee			Date
Victory Media Group			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1816 Garfield Avenue	· · · · · · · · · · · · · · · · · · ·	1-31-	Amount 22 2011
City	State	Zip Code	2541.04
Aurora	IL .	60506	
Purpose of Expenditure Phone Banks		Category/ Type	Office Sought: X House State: NY House Senate
Name of Federal Candidate Supported or Op JANE CORWIN	posed by Expenditure:		Check One: X Support Oppose
			Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	L,	25959.54	2011 Special-General
			·
15			1 7 31 1 4
	# #1.#		
			P
		1979 - 1975	process of the same of the sam
(a) SUBTOTAL of Itemized Independent Expe	enditures		5082.08
(b) SUBTOTALof Unitemized Independent E	xpenditures		
(c) TOTAL Independent Expenditures			14250.29
(carry total from last page forward	to Line /)		

## Exhibit 19

### **FEC FORM 5**

#### REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations 1. (a) Name of Individual, Organization or Corporation INDEPENDENT WOMEN'S VOICE (b) Address (number and street) check if different than previously reported 1875 I Street NW 5th Floor 3. FEC Identification Number (c) City, State and ZIP Code WASHINGTON DC 20006 Corporate filers only C C90011115 Is the filer a qualified nonprofit corporation? X Yes ☐ No Individual filers only Name of Employer Occupation 4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report July 15 Quarterly Report ☐ 24-Hour Report October 15 Quarterly Report January 31 Year-End Report 48-Hour Report Yes No 🗵 b) Is this Report an amendment? 5. COVERING PERIOD: FROM 01 2011 THROUGH 09 2011 30 6. TOTAL CONTRIBUTIONS ..... 15000.00 7. TOTAL INDEPENDENT EXPENDITURES ...... 14349.59 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations. TYPE OR PRINT NAME OF PERSON COMPLETING FORM **SIGNATURE** DATE [Electronically Filed] Heather R. Higgins Heather R. Higgins 10/11/2011 NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

## SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE 2 OF 4

ny information copied from such Reports and	Statements may not be sold or used by any	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF FILER (In Full)	ie figure and address of any pointed committee	
INDEPENDENT WOMEN'S VOICE		
Full Name (Last, First, Middle Initial) Virginia James		Date of Receipt
Mailing Address PO Box 60	- A	09 13 2011
City Lambertville	State Zip Code NJ 08530	Transaction ID : F56,4233  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000.00
Name of Employer Self-Employed	Occupa Investor	
Full Name (Last, First, Middle Initial)	year and a second	
Myles Pollin		Date of Receipt
Mailing Address 270 Broadway, Apt. 16 D		09 12 2011
City New York	State Zip Code NY 10007	Transaction ID : F56.4235  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3000.00
Name of Employer Sidley & Austin	Öccupa Partner	tion
Full Name (Last, First, Middle Initial) Donald G. Tober		Date of Receipt
Mailing Address 620 Park Avenue		09 12 2011
City	State Zip Code	Transaction ID : F56.4232
New York	NY 10065	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupa	ation
Sugar Foods Corporation	Chairm	an of the Board
Full Name (Last, First, Middle Initial) Lewis Van Amerongen	26 17 2 27 18 18 18 18 18 18 18 18 18 18 18 18 18	Date of Receipt
Mailing Address 45 East 62nd Street		09 12 2011
City New York	State Zip Code NY 10065	Transaction ID : F56.4237  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		1000.00
Name of Employer	Occup	ation
Self Employed	Inves	tment Banker
SUBTOTAL of Receipts This Page (optional	)	15000.00
		15000.00

PAGE

OF

EMIZED INDEPENDENT EXPENDIT  AME OF FILER (In Full)  INDEPENDENT WOMEN'S VOICE	OTILO			FOR LINE 7 OF FORM 5
Full Name (Last, First, Middle Initial) of Pay	yee		Date	
Antietam Communications		2	M N	10 0000
Mailing Address 710 East Northway Lane			Amount	10 2011
City	State	Zip Code		2500.00
Atlanta	i GA	30342	Transact	2500.00 tion ID : F57.4220
Purpose of Expenditure Script Writing		Category/ Type 004	Office Sought:	House State: NY Senate District: 09
Name of Federal Candidate Supported or C ROBERT L TURNER	Opposed by Expendi	iture:	Check One:	President  Support  District:
Calendar Year-To-Date Per Election for Office Sought		7589.75	Disbursement Fo	or: Primary General
Full Name (Last, First, Middle Initial) of Pa	yee		Date	
Victory Media Group  Mailing Address 1816 Garfield Avenue	*		Date 09	10 2011
ISTO GARTIEID AVENUE			Amount	
City Aurora	State IL	Zip Code 60506		4089.75
Purpose of Expenditure		Cotogory	Transact Office Sought:	tion ID : F57.4215  House State NY
Phone List Rental	Opposed by F	Category/ Type 004	Jougift	Senate State: 09 President
Name of Federal Candidate Supported or ROBERT L TURNER	иу ⊏хрепо		Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought		4089.75	Disbursement F 201 Other	
Full Name (Last, First, Middle Initial) of Pa	iyee		Date	
Victory Media Group			09	M / D * D / Y * Y * Y * Y * Y * Y * Y * Y * Y * Y
Mailing Address 1816 Garfield Avenue	_8		Amount	
City	State	Zip Code	7	1000.00
Aurora	1L	60506		etion ID : F57.4219
Purpose of Expenditure Ad Management Fee		Category/ Type 004	Office Sought:	House State: NY Senate District: 09
Name of Federal Candidate Supported or ROBERT L TURNER	Opposed by Expend	diture:	Check One:	President Oppose
Calendar Year-To-Date Per Election for Office Sought		5089.75	Disbursement F 201 Other	For: Primary General  11 Special-General
(a) SUBTOTAL of Itemized Independent Ex	xpenditures		<b>&gt;</b>	7589,75
(b) SUBTOTAL of Unitemized Independent	Expenditures		-	
(c) TOTAL Independent Expenditures (carry total from last page forward			. >	

maye# 113/13010/0	
CHEDULE 5-E FEMIZED INDEPENDENT EXPENDITURES	PAGE 4 OF 4 FOR LINE 7 OF FORM 5
NAME OF FILER (In Full)	
INDEPENDENT WOMEN'S VOICE	
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	M x M / D = D / Y = Y = Y
Mailing Address 1816 Garfield Avenue	09 10 2011 Amount
City State Zip Code	2562.00
Aurora IL 60506	Transaction ID : F57.4222
Purpose of Expenditure Category/ 004	Office Sought:
Automated Calls Type	Senate District:09
Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT L TURNER	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  2011 Other (specify) Special-General
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	09 12 2011
Mailing Address 1816 Garfield Avenue	09 12 2011 Amount
City State Zip Code	2265.60
Aurora IL 60506	Transaction ID : F57.4228
Purpose of Expenditure Automated Calls  Category/ Type  O04  Name of Federal Candidate Supported or Opposed by Expenditure:	Office Sought: House State: NY Senate District: 09 President
ROBERT L TURNER	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2011 Other (specify) Special-General
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	09 13 2011
Mailing Address 1816 Garfield Avenue	Amount
City State Zip Code	1022.24
Aurora IL 60506	1932.24 Transaction ID : F57.4229
Purpose of Expenditure Automated Calls  Category/ Type  004	Office Sought: House State: NY Senate District: 09
Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT L TURNER	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 26766.94	Disbursement For: Primary General  2011  Other (specify) Special-General
(a) SUBTOTAL of Itemized Independent Expenditures	> 6759.84
(b) SUBTOTAL of Uniternized Independent Expenditures	
(c) TOTAL Independent Expenditures	▶ 14349.59

## Exhibit 20

### FEC FORM 5

#### REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations 1. (a) Name of Individual, Organization or Corporation INDEPENDENT WOMEN'S VOICE (b) Address (number and street) check if different than previously reported 1875 I Street NW 5th Floor (c) City, State and ZIP Code 3. FEC Identification Number WASHINGTON DC 20006 Corporate filers only С C90011115 Is the filer a qualified nonprofit corporation? Yes Yes ☐ No Individual filers only Name of Employer Occupation 4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report July 15 Quarterly Report 24-Hour Report October 15 Quarterly Report X January 31 Year-End Report L. 48-Hour Report No X b) Is this Report an amendment? Yes \_\_ 5. COVERING PERIOD: FROM 09 01 2012 THROUGH 12 2012 31 6. TOTAL CONTRIBUTIONS ..... 961018.60 7. TOTAL INDEPENDENT EXPENDITURES ...... 961018.60 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations. TYPE OR PRINT NAME OF PERSON COMPLETING FORM **SIGNATURE** DATE [Electronically Filed] Heather R. Higgins Heather R. Higgins 01/24/2013 NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g. For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

# SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE 2 OF 15 |

y information copied from such Reports a for commercial purposes, other than usin	nd Statements may not be sold or used by a g the name and address of any political comr	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF FILER (In Fuil) INDEPENDENT WOMEN'S VOICE	•	
Full Name (Last, First, Middle Initial) Independent Womens Voice - General Tro	easury Funds	Date of Receipt
Mailing Address 1875   Street NW, 5th F		10 31 2012
City Washington	State Zip Code DC 20006	Transaction ID : F56.4330  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	961018.60
Name of Employer	Occi	upation
Full Name (Last, First, Middle Initial)	According to the second	Date of Receipt
Mailing Address		MEN / DOD / TOTAL
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	and and a standard and and
Name of Employer  Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		Mam / Dad / Andrad
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occ	cupation
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		NAM ( DED ) ( YAYAYAY
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Oc	cupation
CURTOTAL of Receipts This Page (onti	onal)	961018.60
Air Air	I to Line 6)	961018.60

PAGE

OF

15

3

EMIZED INDEPENDENT EXPENDITURES	FOR LINE 7 OF FORM 5
AME OF FILER (In Full)	
NDEPENDENT WOMEN'S VOICE	
Full Name (Last, First, Middle Initial) of Payee	Date
BERNARD J. HUNT IMAGES	
TIESDUS I TITO	10 30 2012
Mailing Address 520 W 43rd ST 30J	houstoned benefitzend broadwardscoopman
	Amount
City State Zip Code	43000 00
NEW YORK NY 10036	17200.00 Transaction ID : F57.4219
Purpose of Expenditure  Category/  O04	Office Sought: House State:
Director/DP/Editor/Producer - 'Mr. Dependable' and 'Feeling Type U04 Guility'	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President District.
BARACK OBAMA	Check One: Support Oppose
Calendar Year-To-Date Per Election 149200.00	Disbursement For: Primary General
ior office sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
BRABENDER COX	Man   Dab   Ashahah
Mailing Address	10 30 2012
1218 Grandview Ave	Nettenditumenti Susandinativi Basandinassaftanapillansaf
	Amount
City State Zip Code	3200.00
PITTSBURG PA 15211	Transaction ID : F57.4221
Purpose of Expenditure Category/ 004	Office Country   House
Production - 'Mr. Dependable' & 'Feelling Guilty'  Type  Oategory  O04	
Technique materials 3	Senate District: 00 President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	, many
BARACK OBAINA	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought	2012 Cher (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Campaign Grid	Mam / Dad / Ashahah
Mailing Address	10 30 2012
PO BOX 824705	Amount
	Amount
City State Zip Code	132000.00
Philadelphia PA 19182	Transaction ID : F57.4216
Purpose of Expenditure Category/ COA	Office Sought: House State:
Production and Media Buy - 'Mr. Dependable' & 'Feeling Guilty'  Type  Outegory,  Outegory,  Type	Senate 00
Name of Federal Condidate Company of the Condidate Condidate Condidate Condidate Condidate Condidate Condidate Condidate Condidate Condidate Condidate Condidate Condidate	Senate District:00
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	
DATE OF CONTRACT	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought	2012 Other (specify)
	Carlot (appearly)
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 152400,00
(b) SUBTOTAL of Uniternized Independent Expenditures	
074474-01000-000-000	
(a) TOTAL Independent Funeaulities	* * * * * * * * * * * * * * * * * * *
(c) TOTAL Independent Expenditures	***
(our y total from total page formation to Elife 1)	

CHEDULE 5-E EMIZED INDEPENDENT EXPENDITU	JRES	* .5	9		PAGE 4 FOR LINE 7	OF 15 OF FORM 5
AME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE						n
Full Name (Last, First, Middle Initial) of Payer Campaign Grid  Mailing Address PO BOX 824705	90		D	ate	02	2012
			A	mount		
City Philadelphia	State PA	Zip Code 19182		Fransactic	on ID : F57.432	176991.00
Purpose of Expenditure Production and Display Advertisement: 'Romn Mourdock'	ney Wants	Category/ Type 004	Office 5		House Senate	State: IN District: 00
Name of Federal Candidate Supported or O RICHARD E MOURDOCK	pposed by Expenditu	ire:	Check	One:	President Support	Oppose
Calendar Year-To-Date Per Election for Office Sought	1141	176991.00	Disburs	ement Fo 2012 Other (	r: Primary specify)	General
Full Name (Last, First, Middle Initial) of Payer	ee			ate		
Capitol Resources, Inc. (Campaign HQ)		X		M * M	/ D = D /	2012
Mailing Address 700 E. Pleasant St			A	mount	d Constant	Remarks on Management of
City	State	Zip Code	- 1		K 8 8 4	2333.87
Brookly	IA	52211		Transaction	on ID : F57.425	
Purpose of Expenditure Automated Phone Banks		Category/ 004 Type	Office	Sought:	House Senate	State: NE 00
Name of Federal Candidate Supported or O DEBRA S FISCHER	pposed by Expenditu	ure:	Check	One:	President Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		17028.59	Disburs	sement Fo 2012 Other (		General
Full Name (Last, First, Middle Initial) of Pay Richard Miniter	ee			Date	/ D # D /	2012
Mailing Address 2420 South Queen Street				Amount	A longitumed	
City Arlington	State VA	Zip Code 22202		Transact	on ID : F57.422	2500.00 3
Purpose of Expenditure Script Writing		Category/ Type 004	Office	Sought:	House Senate	State:
Name of Federal Candidate Supported or C BARACK OBAMA	Opposed by Expendit	ure:	Check	One:	President Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		154900.00	Disbur	sement Fo 2012 Other		General General
(a) SUBTOTAL of Itemized Independent Exp	oenditures		• [		4.1.4	181824.87
(b) SUBTOTAL of Unitemized Independent I	Expenditures		•	- Annaham	<b>a</b> x s <b>a</b>	
(c) TOTAL Independent Expenditures(carry total from last page forward			· • [			

CHEDULE 5-E EMIZED INDEPENDENT EXPENDITURES	PAGE 5 OF 15 FOR LINE 7 OF FORM 5
AME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE	
Full Name (Last, First, Middle Initial) of Payee Victory Media Group	Date
Mailing Address 2516 Waukegan Rd, #115	11 01 2012 Amount
City State Zip Code	41850.82
Glenview IL 60025  Purpose of Expenditure List Pontal 8 Automated Phase Panks	Transaction ID : F57.4231  Office Sought: House State: AZ
List Rental & Automated Phone Banks  Type  Out  Type  Uut  Type  Type  Uut  Type  Uut  Type  Uut  Type  Uut  Type  Uut  Type  Uut  Type  Uut  Type  Uut  Type  Uut  Type  Type  Uut  Type  Type  Uut  Type	Senate District: 00 President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 41850.82	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	11 01 2012
Mailing Address 2516 Waukegan Rd, #115	Amount
City State Zip Code Glenview IL 60025	69700.30 Transaction ID : F57.4233
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  004	Office Sought: House State: MI Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: PETER HOEKSTRA	Check One: Support Oppose
Calendar Year-To-Date Per Election 69700.30	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Victory Media Group	Date
Mailing Address 2516 Waukegan Rd, #115	11 01 2012 Amount
City State Zip Code Glenview IL 60025	44257.60 Transaction ID : F57.4235
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  004	Office Sought: House State: VA Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: GEORGE ALLEN	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	155808,72
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	-

### **SCHEDULE 5-E**

CHEDULE 5-E TEMIZED INDEPENDENT EXPENDITURES	PAGE 6 OF 15 FOR LINE 7 OF FORM 5
NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE	
Full Name (Last, First, Middle Initial) of Payee Victory Media Group  Mailing Address 2516 Waukegan Rd, #115	Date 11 01 2012
City State Zip Code	71189.61
1 3. 7 1014	Transaction ID : F57.4237  Iffice Sought: House State: WI
	Senate District: 00 President  Check One: Support Oppose  isbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee  Victory Media Group  Mailing Address 2516 Waukegan Rd, #115	Date    M = N
City State Zip Code Glenview IL 60025  Purpose of Expenditure List Rental & Automated Phone Banks Category/ Type	33955.20  Transaction ID : F57,4239  Office Sought: House State: OH  Senate 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: Check One: Support Oppose
Calendar Year-To-Date Per Election 33955.20	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Victory Media Group  Mailing Address 2516 Waukegan Rd, #115	Date    M * M   / D * D   / Y * Y * Y * Y * Y * Y * Y * Y * Y * Y
City State Zip Code Glenview IL 60025	Amount 67242.43 Transaction ID : F57.4241
List Rental & Automated Phone Banks  Type  Out  Type  Type  Out  Type  Out  Type  Out  Type  Out  Type  Type  Out  Type  Out  Type  Out  Type  Type  Out  Type	Office Sought: House State: MO Senate District: 00 President Dispose
Calendar Year-To-Date Per Election for Office Sought 67242.43	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	172387,24
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL independent Expenditures	Liniairai

PAGE

OF

15

AME OF FILER (In Full)	FOR LINE 7 OF FORM 5
INDEPENDENT WOMEN'S VOICE	
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	M - W / [ D * D ] / [ Y - Y - Y - Y - ]
Mailing Address 2516 Waukegan Rd, #115	11 01 2012
2516 Waukegaii nu, #115	Amount
City State Zip Code	10677.49
Glenview IL 60025	Transaction ID : F57.4243
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  004	Office Sought: House State: ME Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES EDWARD JR SUMMERS	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 10677.49	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group  Mailing Address 0546 Westkages Pd #115	11 01 2012
Mailing Address 2516 Waukegan Rd, #115	Amount
City State Zip Code Glenview IL 60025	96117.04
Purpose of Evranditure	Office Sought; House State: PA
List Rental & Automated Phone Banks Type 004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH	Check One: Support Oppose
Calendar Year-To-Date Per Election 96117.04	Disbursement For: Primary General  2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	M M / B D / Y Y Y Y 11 01 2012
Mailing Address 2516 Waukegan Rd, #115	Amount
City State Zip Code	102093.55
Glenview IL 60025	Transaction ID : F57.4247
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  004	Office Sought: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:, CONNIE MACK	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 102093.55	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	> 208888.08
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	-

PAGE FOR LI	8	OF	15
FOR LI	VE 7	OF FO	RM 5

INDEPENDENT WOMEN'S VOICE		31 77	
Full Name (Last, First, Middle Initial) of Pa	2000		Dete
Victory Media Group	1966		Date
Mailing Address OF16 Workson Rd #1			11 01 _2012
2516 Waukegan Rd, #1	15		Amount
Cibi	State	Zip Code	Amount
City			14694.72
	IL .	60025	Office Sought: House State: NE
Purpose of Expenditure Automated Phone Banks		Category/ Type 004	Office cought.
Name of Federal Candidate Supported or	Opposed by Evpendi		Senate District: 00 President
DEBRA S FISCHER	Opposed by Expendi	iure.	Check One: Support Oppose
	25 15 16 1		
Calendar Year-To-Date Per Election for Office Sought	5 × 4	14694.72	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of P	ayee		Date
Victory Media Group			M = M / D = D / Y = Y = Y = Y
Mailing Address 2516 Waukegan Rd, #1	15	<del></del>	11 01 2012
2010 11001109411110, 11	. •		Amount
City	State	Zip Code	3948.99
Glenview	IL	60025	Transaction ID : F57.4251
Purpose of Expenditure		Category/ 004	Office Sought: House State: NV
List Rental & Automated Phone Banks		Type 004	Senate District: 00
Name of Federal Candidate Supported or	Opposed by Expendi	ture:	President
DEAN HELLER			Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		3948.99	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of P	ayee		Date
Victory Media Group		, R	Mam / Gad / Mam
Mailing Address	4F		11 01 2012
2516 Waukegan Rd, #1	15		Amount
City	State	Zip Code	2001001
Glenview	IL	60025	23210.21 Transaction ID : F57.4255
Purpose of Expenditure	* · · · · · · · · · · · · · · · · · · ·	Category/ 004	Office Sought: House State:
List Rental & Automated Phone Banks		Type 004	Senate 00
Name of Federal Candidate Supported or	Opposed by Expend	iture:	President District:
MITT / RYAN, PAUL D. ROMNEY			Check One: Support Oppose
Colondar Veer To Date Day Floridary			Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought		178110.21	Disbursement For: Primary General Other (specify)
	Republicant Constitution of the Constitution o		
(a) SUBTOTAL of Itemized Independent E	xpenditures		41853,92
(b) SUBTOTAL of Unitemized Independen	t Expenditures		
(-, 222121112 ). Simoniada masponada			Indiana de la contra dela contra de la contra de la contra de la contra de la contra de la contra de la contra de la contra de la contra de la contra de la contra de la contra de la contra de la contra de la contra de la contra de la contra dela contra de la contra del la contra del la contra del la contra del la contra de la contra del la contr
(c) TOTAL Independent Expenditures			
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EMIZED INDEPENDENT EXPENDITURES	FOR LINE 7 OF FORM 5
IAME OF FILER (In Full)	
INDEPENDENT WOMEN'S VOICE	
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	
	11 01 2012
Mailing Address 2516 Waukegan Rd, #115	Brownformed Brownformed Specialisation of
the control of the control of the provided by the first of the control of the con	Amount
City State Zip Code	4371.64
Glenview IL 60025	Transaction ID : F57.4257
Purpose of Expenditure Category/ 004	Office Sought: House State:
List Rental & Automated Phone Banks  Type	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President President
MITT / RYAN, PAUL D. ROMNEY	Check One: Support Oppose
	Disbursement For: Primary General
Calendar Year-To-Date Per Election 182481.85	2012
Tot Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	Mam / Dad / Kanadah
Mailing Address 2516 Waukegan Rd, #115	11 01 2012
2510 Waukegan nu, #115	Amount
City State Zip Code	Sametime Sam
Glenview IL 60025	2019.75
	Transaction ID : F57.4258  Office Sought: House State: NM
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  O04	State
Sandardon Company Comp	Senate District: 00 President
Name of Federal Candidate Supported or Opposed by Expenditure: HEATHER A WILSON	
	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	Date
	11 01 Y *Y *Y *Y *Y *Y *Y *Y *Y *Y *Y *Y *Y *
Mailing Address 2516 Waukegan Rd, #115	Business Bus
	Amount
City State Zip Code	1463.18
Glenview IL 60025	Transaction ID : F57.4260
Purpose of Expenditure  Category/  O04	Office Sought: House State: MD
List Rental & Automated Phone Banks	Senate District: 06
Name of Federal Candidate Supported or Opposed by Expenditure:	President Oistrict:
ROSCOE G. REP. BARTLETT	Check One: Support Oppose
	Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	2012
Tot Office Cought	Other (specify)
	how the standard of the standa
(a) SUBTOTAL of Itemized Independent Expenditures	7854,57
	Income and many many many many many many many many
(b) SUBTOTAL of Unitemized Independent Expenditures	
	Exercise and the second of
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	handrade de la company de la c

MUR718100285	
SCHEDULE 5-E TEMIZED INDEPENDENT EXPENDITURES	PAGE 10 OF 15 FOR LINE 7 OF FORM 5
NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE	
Full Name (Last, First, Middle Initial) of Payee Victory Media Group  Mailing Address OF16 Woukeren Rd #115	Date    M   M   D   D
2516 Waukegan Rd, #115	Amount
City State Zip Code Glenview IL 60025	2045.59
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  004	Office Sought: House State: NY Senate District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: NAN HAYWORTH	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 2045.59	Disbursement For: Primary General  2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Victory Media Group  Mailing Address 2516 Waukegan Rd, #115	Date    M = M   D = D   Y = Y = Y = Y
City State Zip Code Glenview IL 60025	3715.75 Transaction ID : F57.4265
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  004	Office Sought: House State: IA  Senate District: 04  President
Name of Federal Candidate Supported or Opposed by Expenditure: STEVE MR. KING	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 3715.75	Disbursement For: Primary General  2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Victory Media Group  Mailing Address 2516 Waukegan Rd, #115	Date    Date   D
City State Zip Code Glenview IL 60025	5026.52 Transaction ID : F57,4268
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  004	Office Sought: House State: IL Senate District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: JOE WALSH	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 5026.52	Disbursement For: Primary General Other (specify)

SCHEDULE 5-E FEMIZED INDEPENDENT EXPENDITURES	PAGE 11 OF 15 FOR LINE 7 OF FORM 5
NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE	
Full Name (Last, First, Middle Initial) of Payee Victory Media Group	Date
Mailing Address 2516 Waukegan Rd, #115	11 01 2012 Amount
City State Zip Code Glenview IL 60025	4858.90
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  004	Office Sought: House State: MI
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL J BENISHEK	Senate District: 01 President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 4858.90	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group  Mailing Address 0510 Weylesses Rd #445	11 01 2012
2516 Waukegan Rd, #115	Amount
City State Zip Code Glenview IL 60025	1368.86 Transaction ID : F57.4271
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  004	Office Sought: House State: OH Senate 06
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON	President District:  Check One: Support Oppose
Calendar Year-To-Date Per Election 1368.86	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Victory Media Group	Date
Mailing Address 2516 Waukegan Rd, #115	11 01 2012 Amount
City State Zip Code Glenview IL 60025	1237.71 Transaction ID : F57.4273
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  004	Office Sought: House State: AZ Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: JONATHAN PATON	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1237.71	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	7465,47
(b) SUBTOTAL of Uniternized Independent Expenditures	-
(c) TOTAL Independent Expenditures	·

CHEDULE 5-E EMIZED INDEPENDENT EXPENDIT	URES	a	PAGE 12 FOR LINE 7 C	OF 15 OF FORM 5
AME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE	n 2	* 1		÷ .
Full Name (Last, First, Middle Initial) of Pa	yee	Dat	е	
Victory Media Group	8 1	2	M = M / 10 = D /	Y 3 Y 2 Y 3 Y
Mailing Address 2516 Waukegan Rd, #11	5	Am	11 01 ount	2012
City	State Zip Code		W W W W W W W W W W W W W W W W W W W	1335.88
Glenview	IL 60025	I Tr	ansaction ID : F57.4275	1005.00
Purpose of Expenditure List Rental & Automated Phone Banks	Category/ Type	Office Sc		State: AZ 09
Name of Federal Candidate Supported or VERNON PARKER	Section 1		President	District:
VEHNON PARKER		Check O	W. promitt	Oppose
Calendar Year-To-Date Per Election for Office Sought	1335.88	- M	ment For: Primary 2012 Other (specify)	General
Full Name (Last, First, Middle Initial) of Pa	ауве	Da	te	
Victory Media Group	-	×	M = M / D × 0 /	2012
Mailing Address 2516 Waukegan Rd, #11	5	An	nount	especial leaves of the control of th
City	State Zip Code		* * * * *	1680.58
Glenview	IL 60025	Ti Ti	ansaction ID : F57.4277	Lecteralization
Purpose of Expenditure List Rental & Automated Phone Banks	Category/ Typè	Office S	Senate	State: GA District: 12
Name of Federal Candidate Supported or LEE I ANDERSON	Opposed by Expenditure:	Check 0	President	Oppose
Calendar Year-To-Date Per Election for Office Sought	1680.5	7 K	ment For: Primary 2012 Other (specify)	General
Full Name (Last, First, Middle Initial) of P	ayee	Da	ite	
Victory Media Group			N N / D N D /	2012
Mailing Address 2516 Waukegan Rd, #1	15	Ar	nount	kemmillumine/foresmill-restors
City	State Zip Code			2422.56
Glenview	IL 60025	i T	ransaction ID : F57.4279	L. J. Marile J. L. L. L. L. L. L. L. L. L. L. L. L. L.
Purpose of Expenditure List Rental & Automated Phone Banks	Category/ Type	Office S	Senate	State: IL District: 12
Name of Federal Candidate Supported or JASON PLUMMER	Opposed by Expenditure:	Check C	President	Oppose
Calendar Year-To-Date Per Election for Office Sought	2422.5		oment For: Primary 2012  Other (specify)	General
(a) SUBTOTAL of Itemized Independent E	xpenditures	- L		5439,02
(b) SUBTOTAL of Uniternized Independen	t Expenditures	E	3 4 4 4 4	
(c) TOTAL Independent Expenditures (carry total from last page forward)		· [		

PAGE

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	FOR LINE 7 OF FORM 5
ME OF FILER (In Full) NDEPENDENT WOMEN'S VOICE	
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	M - M   /   O - D   /   Y - Y - Y - Y - Y - Y - Y - Y - Y - Y
Mailing Address 2516 Waukegan Rd, #115	11 01 2012
	Amount
City State Zip Code	2114.33
Glenview IL 60025	Transaction ID: F57.4281
Purpose of Expenditure List Rental & Automated Phone Banks Category/ Type 004	Office Sought: House State: NC
Power Lands	Senate District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID CHESTON MR. ROUZER	☐ President  Check One: ☐ Support ☐ Oppose
Calendar Year-To-Date Per Election for Office Sought 2114.33	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	MAM / DED / PROPERTY
Mailing Address 2516 Waukegan Rd, #115	11 01 2012
City State Zip Code	Amount
Glenview IL 60025	1564.58 Transaction ID : F57.4283
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  004	Office Sought: House State: NC
Name of Federal Candidate Supported or Opposed by Expenditure:	President 08
RICHARD L. JR. HUDSON	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought	2012 Cother (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	Mam / DED / YOY SYSY
Mailing Address 2516 Waukegan Rd, #115	11 01 2012
Loto Hudhogaillia, #110	Amount
City State Zip Code	964.17
Glenview IL 60025	Transaction ID : F57,4285
Purpose of Expenditure List Rental & Automated Phone Banks  Category/ Type  004	Office Sought: House State: TX Senate 23
Name of Federal Candidate Supported or Opposed by Expenditure: FRANCISCO RAUL CANSECO	President District:
THANOISCO TRUE CANGLOC	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
a) SUBTOTAL of Itemized Independent Expenditures	4643.09
	4643,08
b) SUBTOTAL of Uniternized Independent Expenditures	-
c) TOTAL Independent Expenditures(carry total from last page forward to Line 7)	

PAGE FOR LI	14	OF	15
FOR LI	NE 7	OF FO	RM 5

AME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE			4
Full Name (Last, First, Middle Initial) of Payee		* * * * * * * * * * * * * * * * * * *	Date
Victory Media Group  Mailing Address 2516 Waukegan Rd, #115		N Y I S Y I	11 01 2012
	0	75 Ondo	Amount
City Glenview	State	Zip Code 60025	2158.86 Transaction ID : F57.4287
Purpose of Expenditure List Rental & Automated Phone Banks		Category/ 004	Office Sought: House State: VA Senate District: 02
Name of Federal Candidate Supported or Oppose EDWARD SCOTT MR. RIGELL	ed by Expendi	iture:	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		2158.86	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Victory Media Group			11 01 2012
Mailing Address 2516 Waukegan Rd, #115			Amount
City	State	Zip Code 60025	3888.46 Transaction ID : F57.4288
Purpose of Expenditure List Rental & Automated Phone Banks		Category/ Type 004	Office Sought: House State: WA Senate District: 01
Name of Federal Candidate Supported or Oppose JOHN KOSTER	ed by Expend	liture:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		3888.46	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Victory Media Group			M # M / D # D / Y # Y # Y # Y # Y # Y # Y # Y # Y # Y
Mailing Address 2516 Waukegan Rd, #115			Amount
City	State	Zip Code	3063.21
Glenview	IL.	60025	Transaction ID : F57.4290
Purpose of Expenditure List Rental & Automated Phone Banks		Category/ 004 Type	Office Sought: House State: WA Senate District: 10
Name of Federal Candidate Supported or Oppos RICHARD W MURI	ed by Expend	diture:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	1.4.4.	3063.21	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expendit	tures		9110,53
(b) SUBTOTAL of Uniternized Independent Exper	nditures		-
(c) TOTAL Independent Expenditures(carry total from last page forward to Lir			

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EMIZED INDEPENDENT EXPENDITURES	FOR LINE 7 OF FORM 5
IAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE	
INDEL ENDERT WOMENS VOICE	
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	W 1 W
Mailing Address 2516 Waukegan Rd, #115	11 05 2012
The second of the first second	Amount
City State Zip Code Glenview IL 60025	496.34
Purpose of Expenditure Category/ 004	Office Sought: House State: AR
List Acquisition Category Type 004	Senate District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: THOMAS COTTON	Check One: President Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	11 05 2012
Mailing Address 2516 Waukegan Rd, #115	Amount
City State Zip Code	Indiana de la companya del companya del companya de la companya de
Glenview 1L 60025	2058.90 Transaction ID : F57.4335
Purpose of Expenditure Category/ 004	Office Sought: House State: AR
Phone Banks Type	Senate District: 04  President
Name of Federal Candidate Supported or Opposed by Expenditure: THOMAS COTTON	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
*	MEM / DED / YEYEY
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure Category/	Office Sought: House State:
Type	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President  Check One: Support Oppose
	22.5 ID 7/2 - Ps
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2,555,24
(b) SUBTOTAL of Unitemized Independent Expenditures	·
(c) TOTAL Independent Expenditures	961018.60

# Exhibit 21

Image# 13964042479

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## **FEC FORM 5**

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

<ul> <li>Be Used by Persons (Other than Political Committees) in</li> <li>(a) Name of Individual, Organization or Corporation</li> <li>INDEPENDENT WOMEN'S VOICE</li> </ul>	oldanig adamica Nonprom	
(b) Address (number and street) check if different than previous 1875 I Street NW 5th Floor	ously reported	
(c) City, State and ZIP Code		3. FEC Identification Number
WASHINGTON	DC 20006	
Corporate filers only     Is the filer a qualified nonprofit corporation		C C90011115
Individual filers only Name of Employer		Occupation
TYPE OF REPORT (check appropriate boxes):		
(a) April 15 Quarterly Report		
☑ July 15 Quarterly Report	24-Hour Report	
October 15 Quarterly Report		
January 31 Year-End Report	48-Hour Report	Ž.
b) Is this Report an amendment? Yes No 🗵  5. COVERING PERIOD: FROM  04  01  THROUG	2013 H	
06 / 30 /	2013	
6. TOTAL CONTRIBUTIONS		160287.31
7. TOTAL INDEPENDENT EXPENDITURES		160287.31
Under penalty of perjury I certify that the independent expenditures reported herein suggestion of, any candidate or authorized committee or agent of either, or any posterion were made by a corporation) I certify that the corporation is a qualified non	olitical party committee or its agent. In	addition, (if the independent expenditures reported
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE Electronically Filed]
Heather R. Higgins	Heather R. Higgins	07/12/2013

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

# SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE	2	OF	7
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r for commercial purposes, other than usif	and Statements may not be sold or used by any ng the name and address of any political committ	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE		X
Full Name (Last, First, Middle Initial) Independent Womens Voice - General Tr	easury Funds	Date of Receipt
Mailing Address 1875 I Street NW, 5th	Floor	04 01 2013
City	State Zip Code	Transaction ID : F56.4375
Washington	DC 20006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	160287.31
Name of Employer	Occupa	tion
Full Name (Last, First, Middle Initial)		
Mailian Address		Date of Receipt
Mailing Address	<u> </u>	Man / DID / TITOTA
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		
Name of Employer	Occupa	ation
		the second secon
Full Name (Last, First, Middle Initial)	2	Date of Receipt
Mailing Address		MAN / DAD / YAYAYAY
City	State Zin Code	CS .
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing	Special the process of the other sections of	
FEC ID number of contributing federal political committee.  Name of Employer	C	ation .
FEC ID number of contributing federal political committee.  Name of Employer	C	
FEC ID number of contributing federal political committee.  Name of Employer  Full Name (Last, First, Middle Initial)	C	Date of Receipt
FEC ID number of contributing federal political committee.  Name of Employer  D. Full Name (Last, First, Middle Initial)  Mailing Address	Occupa	Date of Receipt
FEC ID number of contributing federal political committee.  Name of Employer  D. Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing	Occupa  State Zip Code	Date of Receipt  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer  D. Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.	State Zip Code	Date of Receipt  Amount of Each Receipt this Period

CHEDULE 5-E EMIZED INDEPENDENT EXPENDIT	TURES	PAGE 3 OF 7 FOR LINE 7 OF FORM 5
AME OF FILER (In Full) NDEPENDENT WOMEN'S VOICE		
Full Name (Last, First, Middle Initial) of Pa	yee	Date
Antietam Communications		Man   Dan   Yarayay
Mailing Address 710 East Northway Lane		05 02 2013 Amount
City	State Zíp Code	- I
Atlanta	GA 30342	10000.00 Transaction ID : F57.4352
Purpose of Expenditure Script Writing & Production Management - 1	Elizabeth' and 'Rich' Category/ 004	Office Sought: House State: SC
Name of Federal Candidate Supported or ELIZABETH COLBERT BUSCH	Opposed by Expenditure:	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	85431.95	Disbursement For: Primary General 2013 Special-General
Full Name (Last, First, Middle Initial) of Pa	yee	Date
Creative Associates LLC	6 "	05 02 2013
Mailing Address 12334 N> golf Drive		Amount
City Mequon	State Zip Code WI 53092	1795.49
Purpose of Expenditure Voice Talent - 'Elizabeth' and 'Rich'	Category/ Type 004	Office Sought: House State: SC Senate 01
Name of Federal Candidate Supported or ELIZABETH COLBERT BUSCH	Opposed by Expenditure:	President District:  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	18500.49	Disbursement For: Primary General 2013 Other (specify) Special-General
Full Name (Last, First, Middle Initial) of Pa Kasey Kirby	ауее	Date  05 02 2013
Mailing Address 1132 6th Street NE, #1		Amount
City Washington	State Zip Code DC 20002	2256.46 Transaction ID : F57.4349
Purpose of Expenditure Television Production - 'Elizabeth' and 'Rich	Category/ Type 004	Office Sought: House State: SC Senate District: 01
Name of Federal Candidate Supported or ELIZABETH COLBERT BUSCH	Opposed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	75431.95	Disbursement For: Primary General  2013 Other (specify) Special-General
(a) SUBTOTAL of Itemized Independent Ex	kpenditures	14051,95
(b) SUBTOTAL of Unitemized Independent	Expenditures	
(c) TOTAL Independent Expenditures (carry total from last page forward	d to Line 7)	

SCHEDULE 5-E FEMIZED INDEPENDENT EXPENDITU	RES		PAGE 4 OF 7 FOR LINE 7 OF FORM 5
NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE		######################################	
Full Name (Last, First, Middle Initial) of Payer	9	**************************************	Date
Kasey Kirby			M.M. ( D.O. ( Y.Y.Y.Y.)
Mailing Address 1132 6th Street NE, #1			05 03 2013
1102 341 34351112, #1			Amount
City	State	Zip Code	1000.00
Washington	DC	20002	Transaction ID : F57.4351
Purpose of Expenditure Television Production - 'Elizabeth' and 'Rich'		Category/ Type 004	Office Sought: House State: SC Senate District: 01
Name of Federal Candidate Supported or Op ELIZABETH COLBERT BUSCH	posed by Expend	iture:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		96584.95	Disbursement For: Primary General 2013 Other (specify) Special-General
Full Name (Last, First, Middle Initial) of Paye	e		Date
Post and Courier LLC			MEM / DED / YEVEYEY
Mailing Address 134 Columbus Street	- 14		05 05 2013 Amount
City	State	Zip Code	70450
Charleston	SC	29403	7941.52 Transaction ID : F57.4368
Purpose of Expenditure Print Ads, Sunday May 5		Category/ Type 004	Office Sought: House State: SC Senate District: 01
Name of Federal Candidate Supported or Op MARSHALL C ('Mark') SANFORD JR	pposed by Expend	diture:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	114	153179.91	Disbursement For: Primary General  2013 Special-General
Full Name (Last, First, Middle Initial) of Payer	90		Date
Post and Courier LLC			05 05 7 2013
Mailing Address 134 Columbus Street			Amount
City	State	Zip Code	7107.40
Charleston	sc	29403	Transaction ID : F57.4371
Purpose of Expenditure Print Ads, Monday May 6		Category/ Type 004	Office Sought: House State: SC Senate District: 01
Name of Federal Candidate Supported or O MARSHALL C ('Mark') SANFORD JR	pposed by Expend	diture:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		160287.31	Disbursement For: Primary General 2013  Other (specify) Special-General
(a) SUBTOTAL of Itemized Independent Exp.	enditures		16048.92
(b) SUBTOTAL of Unitemized Independent E	xpenditures		
(c) TOTAL Independent Expenditures(carry total from last page forward to		•••••••••••••••••••••••••••••••••••••••	

CHEDULE 5-E EMIZED INDEPENDENT EXPENDITURES	PAGE 5 OF 7 FOR LINE 7 OF FORM 5
AME OF FILER (In Full)	rent Ente 7 et 1 et inte
INDEPENDENT WOMEN'S VOICE	
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	W - W / O - O / Y - Y - Y
Mailing Address 2516 Waukegan Rd, #115	04 29 2013
S Water and Transport, it will be the training	Amount
City State Zip Code	1000.00
Glenview IL 60025	4600.00 Transaction ID : F57.4339
Purpose of Expenditure  Script Writing/Live Phone Calle:  Category/ 004	Office Sought:  House State: SC
Script Writing/Live Phone Calls;	Senate District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: ELIZABETH COLBERT BUSCH	☐ President
ELIZABETH COLBERT BUSCH	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought 4600.00	Other (specify) Special-General
Full Name (Last, First, Middle Initial) of Payee	Date
Victory Media Group	IN ON I / ID OD / IY OV OV
Mailing Address 2516 Waukegan Rd, #115	05 02 2013
2510 Waukeyan nu, #115	Amount
City State Zip Code	1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Glenview IL 60025	12105.00
Purpose of Expenditure Category/	Office Sought: House State. SC
Category/ Cable Air Time - 'Elizabeth' and 'Rich'  Category/ Type  Out  Out  Out  Out  Out  Out  Out  Ou	Senate State: SC State: SC O1
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:
ELIZABETH COLBERT BUSCH	Check One: Support Oppose
	Disbursement For: Primary General
Calendar Year-To-Date Per Election 16705.00	2013 Special-General
Full Name (Last, First, Middle Initial) of Payee	
Victory Media Group	Date
Mailing Address	05 02 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
2516 Waukegan Rd, #115	Succeived Semidentel Succeived
City State Zip Code	Amount
City State Zip Code Glenview IL 60025	54675.00
	Transaction ID : F57.4348
Purpose of Expenditure Cable Air Time - 'Elizabeth' and 'Rich' Category/ Type 004	Office Sought: House State: SC
Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District: 01  President
ELIZABETH COLBERT BUSCH	Check One: Support Oppose
	Texas
Calendar Year-To-Date Per Election 73175.49	Disbursement For: Primary General
Tol Office Sought	Other (specify) Special-General
(a) SUPTOTAL of Itamized Independent Expanditures	
(a) SUBTOTAL of Itemized Independent Expenditures	71380,00
(h) SURTOTAL of Uniterprized Independent Expanditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	

CHEDULE 5-E EMIZED INDEPENDENT EXPENDITUR	RES	PAGE 6 OF 7 FOR LINE 7 OF FORM 5
AME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE		
Full Name (Last, First, Middle Initial) of Payee Victory Media Group		Date
Mailing Address 2516 Waukegan Rd, #115		05 03 2013 Amount
City	State Zip Code	3100.00
Purpose of Expenditure	IL 60025  Category/ 004	Office Sought: House State: SC
DG Upload - 'Elizabeth' & 'Rich'  Name of Federal Candidate Supported or OppELIZABETH COLBERT BUSCH	posed by Expenditure:	Senate District: 01 President  Check One: Support Oppose  Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	88531.95	Other (specify) Special-General
Full Name (Last, First, Middle Initial) of Payer Victory Media Group		Date 0.5 0.3 2013
Mailing Address 2516 Waukegan Rd, #115	d d	Amount
City	State Zip Code	7053.00 Transaction ID : F57.4344
Purpose of Expenditure Cable Air Time - 'Elizabeth' and 'Rich'	Category/ 004	Office Sought: House State: SC Senate District: 01
Name of Federal Candidate Supported or Op ELIZABETH COLBERT BUSCH	posed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	95584.95	Disbursement For: Primary General 2013 Special-General
Full Name (Last, First, Middle Initial) of Paye Victory Media Group	е	Date 05 04 2013
Mailing Address 2516 Waukegan Rd, #115		Amount Institute
City Glenview	State Zip Code IL 60025	16005.00 Transaction ID : F57,4363
Purpose of Expenditure Additional Broadcast TV Time for 'Elizabeth' a	and 'Rich' Category/ 004	Office Sought: House State: SC Senate District: 01
Name of Federal Candidate Supported or Op ELIZABETH COLBERT BUSCH	posed by Expenditure:	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	112589.95	Disbursement For: Primary General  2013 Other (specify) Special-General
(a) SUBTOTAL of Itemized Independent Expe	enditures	26158,00
(b) SUBTOTAL of Unitermized Independent E	xpenditures	·· > [
(c) TOTAL Independent Expenditures(carry total from last page forward t	o Line 7)	· <b>·</b> · · · · · · · · · · · · · · · · ·

PAGE

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EMIZED INDEPENDENT EXPENDITU	RES	M		FOR LINE 7	OF FORM 5
AME OF FILER (In Full)					
NDEPENDENT WOMEN'S VOIÇE					
Full Name (Last, First, Middle Initial) of Paye	e	Martin, W. Z. W. W. W	Date		
Victory Media Group			W 10	1 0 4 0 1	νη γ. γ. γ. γ. γ. γ. γ. γ. γ. γ. γ. γ. γ.
Mailing Address 2516 Waukegan Rd, #115			house	05	2013
City	State	Zip Code	Amount	4-4-4-4-	all months and an all and
Glenview	IL	60025	Transaction	on ID : F57.4364	32648.44 1
Purpose of Expenditure Live Phone Calls		Category/ Type 004	Office Sought:	House Senate	State: SC District: 01
Name of Federal Candidate Supported or Op ELIZABETH COLBERT BUSCH	pposed by Expendit	ure:	Check One:	President Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		145238.39	Disbursement Fo 2013 Other (	r: Primary	General ecial-General
Full Name (Last, First, Middle Initial) of Paye	e		Date		
Mailing Address			- New	/ B # D /	[]
714			Amount	8	
City	State	Zip Code		<u> </u>	
Purpose of Expenditure		Category/ Type	Office Sought:	House Senate	State:
Name of Federal Candidate Supported or O	pposed by Expendi	ture:	Check One:	President Support	District:
Calendar Year-To-Date Per Election for Office Sought			Disbursement Fo	or: Primary (specify)	General
Full Name (Last, First, Middle Initial) of Payer	90		Date		
Mailing Address			M = M	/ 5 × 5 /	* 24 24 4
Ivialing Address		Я	Amount	and suppression and I	
City	Ştate	Zip Code		A 1 1 A	
Purpose of Expenditure		Category/ Type	Office Sought:	House Senate	State:
Name of Federal Candidate Supported or O	pposed by Expend	iture:	Check One:	President Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		4.4	Disbursement Fo	or: Primary (specify)	General
(a) SUBTOTAL of Itemized Independent Exp	enditures		- L.	A 1 4	32648,44
(b) SUBTOTAL of Unitemized Independent E	Expenditures		· • [	A. J. J. A.	
(c) TOTAL Independent Expenditures	to Line 7)		<b>-</b>		160287.31

## Exhibit 22

PAGE 1/5

## FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

to Be used by Persons (Other than Political Committees)	
(a) Name of Individual, Organization or Corporation     INDEPENDENT WOMEN'S VOICE	
(b) Address (number and street) check if different than previously reported  1875 I Street NW  5th Floor	
(c) City, State and ZIP Code  WASHINGTON DC 20006	3. FEC Identification Number  C C90011115
Occupation and Name of Employer (for Individual Filers Only)	Annal and and and and and an investment
TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report	
July 15 Quarterly Report	
October 15 Quarterly Report	
January 31 Year-End Report	
b) Is this Report an amendment? No Yes, it amends the report filed on  5. COVERING PERIOD:  FROM 04 01 2014  THROUGH 06 30 2014	
6. TOTAL CONTRIBUTIONS	209327.74
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultations are considered to a comparities or appropriate or appropriate constitution of appropriate or appropria	on, or concert with, or at the request or suggestion
of, any candidate or authorized committee or agent of either, or any political party committee or its agent.	
TYPE OR PRINT NAME OF PERSON COMPLETING FORM  Heather R. Higgins  Heather R. Higgins	DATE Clectronically Filed]  07/11/2014
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report	
For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800	-424-9530. Local 202-694-1100

# SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE 2 (	)F	5
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d by any person for the purpose of soliciting contributions
I committee to solicit contributions from such committee.
Date of Receipt
06 30 2014
Transaction ID : F56.4410  Amount of Each Receipt this Period
209327.74
Occupation
Date of Receipt
Mam / Ded / Terret
Amount of Each Receipt this Period
Occupation
Date of Receipt
MAN / DAD / YAYAYAY
Amount of Each Receipt this Period
Occupation
Date of Receipt
MAN / DED / ANALY
Amount of Each Receipt this Period
Occupation
209327.74

SCHEDULE 5-E TEMIZED INDEPENDENT EXPENDITURES		PAGE 3 OF 5 FOR LINE 7 OF FORM 5
NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE		
Full Name (Last, First, Middle Initial) of Payee	Da	ate of Public Distribution/Dissemination
Antietam Communications		06 19 2014
Mailing Address 710 East Northway Lane		13 2014
		nount
	ip Code 30342	1000.00 ransaction ID : F57.4394
Purpose of Expenditure Script Writing 'ObamaCare Quiz'  Cate	gory/ Type 004 Office S	ought: House State: MS Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: THAD COCHRAN	Check (	President
Calendar Year-To-Date Per Election for Office Sought	169755 08	ment For: Primary General 2014 Runoff
Full Name (Last, First, Middle Initial) of Payee	Da	ate of Public Distribution/Dissemination
Antietam Communications  Mailing Address 710 Fact Northway Lane		06 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
710 East Northway Lane	A	nount
City State 2	ip Code	A And And And And And And And And And An
Atlanta GA :	30342 <b>T</b>	1000.00 ransaction ID : F57.4395
Purpose of Expenditure Script Writing 'GOTV ObamaCare Quiz'  Cate	gory/ 004 Office S	ought: House State: MS Senate 00
Name of Federal Candidate Supported or Opposed by Expenditure: THAD COCHRAN	Check	President District:
Calendar Year-To-Date Per Election for Office Sought	201790.56	oment For: Primary General 2014 Other (specify) Runoff
Full Name (Last, First, Middle Initial) of Payee	D	ate of Public Distribution/Dissemination
Victory Media Group		Mam / Dab / Yayayay
Mailing Address 2516 Waukegan Rd, #115		06 19 2014
City State Z	ip Code	nount
	60025	20740.02 ransaction ID : F57.4387
Purpose of Expenditure Direct Mail 'Test'  Cate	gory/ Type 004 Office S	ought: House State: MS Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: THAD COCHRAN	Check C	President
Calendar Year-To-Date Per Election for Office Sought	20740.02	ment For: Primary General 2014 Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	•	22740.02
(b) SUBTOTAL of Unitemized Independent Expenditures	•	
(c) TOTAL Independent Expenditures(carry total from last page forward to Line 7)		
The same of the sa		

MIZED INDEPENDENT EXPENDIT	URES		F	FOR LINE 7 OF FORM 5
ME OF FILER (In Full)				
DEPENDENT WOMEN'S VOICE				
.20		4	- Al	
Full Name (Last, First, Middle Initial) of Pay	ee		Date of Public	Distribution/Dissemination
Victory Media Group		V 2	06	19 2014
Mailing Address 2516 Waukegan Rd, #115	,		Amount	Resouthered Becombined and States
City	State	Zip Code	I modern from to	112372.46
Glenview	IL	60025	Transaction I	H 2 AND H 1 AND J
Purpose of Expenditure Direct Mail 'Scowl'		Category/ Type 004	Office Sought:	House State: MS Senate District 00
Name of Federal Candidate Supported or C	Opposed by Expend			President District:
THAD COCHRAN			Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought	1 2 2	133112.48	Disbursement For: 2014 Other (spe	Primary General
Full Name (Last, First, Middle Initial) of Pay	/ee		Date of Public	Distribution/Dissemination
Victory Media Group			06	19 / Y Y Y Y Y Y Y Y 2014
Mailing Address 2516 Waukegan Rd, #115	;			Later I front methods
	04-4-	Zin Codo	Amount	and the state of t
City	State IL	Zip Code 60025		4607.12
Purpose of Expenditure		Category/ Cod	Transaction I Office Sought:	House State: MS
List Acquisition 'ObamaCare Quiz'		Type 004	×	Senate District:
Name of Federal Candidate Supported or THAD COCHRAN	Opposed by Expen	diture:	Check One:	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought	1 1 1	137719.60	Disbursement For: 2014 Other (spe	Primary General
Full Name (Last, First, Middle Initial) of Pa	yee		Date of Public	Distribution/Dissemination
Victory Media Group			N * N /	19 2014
Mailing Address 2516 Waukegan Rd, #1	15		Amount	Installment Installment Installment
City	State	Zip Code		21025 49
Glenview	IL	60025	Transaction	31035.48 ID : F57.4393
Purpose of Expenditure Telephone Banks 'ObamaCare Quiz'		Category/ Type 004	Office Sought:	House State: MS Senate District: 00
Name of Federal Candidate Supported or THAD COCHRAN	Opposed by Exper	nditure:	Check One:	President  Support Oppose
Calendar Year-To-Date Per Election for Office Sought		168755.08	Disbursement For: 2014  Other (sp	Primary General
(a) SUBTOTAL of Itemized Independent E	xpenditures			148015.06
(b) SUBTOTAL of Unitemized Independent	Expenditures			
() TOTAL I.d. and all E. Pinner			Andrew Control of the	* · · · · · · · · · · · · · · · · · · ·
(c) TOTAL Independent Expenditures (carry total from last page forwar	d to Line 7)		1 1 12	

PAGE 4 OF 5

PAGE

OF

FOR LINE 7 OF FORM 5

## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Victory Media Group 21 2014 Mailing Address 2516 Waukegan Rd, #115 **Amount** City State Zip Code 31035.48 Glenview IL 60025 Transaction ID: F57.4392 Purpose of Expenditure Category/ Office Sought: MS House State: Telephone Banks 'ObamaCare Quiz' 004 Type Senate 00 District: \_ Name of Federal Candidate Supported or Opposed by Expenditure: President THAD COCHRAN X Oppose Check One: Support Disbursement For: Calendar Year-To-Date Per Election Primary General 2014 200790.56 for Office Sought Other (specify) Runoff Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Victory Media Group 06 2014 Mailing Address 2516 Waukegan Rd, #115 Amount City State Zip Code 7537.18 Glenview IL 60025 Transaction ID: F57.4396 Purpose of Expenditure Office Sought: MS Category/ House State: 004 List Acquisition 'GOTV ObamaCare Quiz' Туре Senate 00 District: Name of Federal Candidate Supported or Opposed by Expenditure: President THAD COCHRAN Check One: X Oppose Support Disbursement For: Primary General Calendar Year-To-Date Per Election 209327.74 2014 for Office Sought Other (specify) Runoff Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Mailing Address **Amount** City State Zip Code Purpose of Expenditure Category/ Office Sought: House State: Type Senate District: Name of Federal Candidate Supported or Opposed by Expenditure: President Check One: Support Oppose Calendar Year-To-Date Per Election Disbursement For: General for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 38572.66 (b) SUBTOTAL of Uniternized Independent Expenditures ...... (c) TOTAL Independent Expenditures..... 209327.74 (carry total from last page forward to Line 7)

## Exhibit 23

## FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

(a) Name of Individual, Organization or Corporation IDEPENDENT WOMEN'S VOICE	
(b) Address (number and street) check if different than previously reported  1875 I Street NW  5th Floor	
(c) City, State and ZIP Code	
WASHINGTON DC 20006	3. FEC Identification Number
Occupation and Name of Employer (for Individual Filers Only)	C C90011115
TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report	
July 15 Quarterly Report	
October 15 Quarterly Report	
☑ January 31 Year-End Report	
	M . M
b) Is this Report an amendment? No Yes, it amends the report filed on  5. COVERING PERIOD:  FROM 10 01 2014	MAN ( BRO ) YAYAYAY
5. COVERING PERIOD:	MAM (DEG) (VEYEYEY
5. COVERING PERIOD: FROM 10 01 2014	574075.35
5. COVERING PERIOD: FROM 10 01 2014  THROUGH 12 31 2014	574075.35 574075.35
5. COVERING PERIOD:  FROM 10 01 2014  THROUGH 12 31 2014  6. TOTAL CONTRIBUTIONS	574075.35
5. COVERING PERIOD:  FROM 10 01 2014  THROUGH 12 31 2014  6. TOTAL CONTRIBUTIONS	574075.35
5. COVERING PERIOD:  FROM 10 01 2014  THROUGH 12 31 2014  6. TOTAL CONTRIBUTIONS	574075.35

# SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE 2	OF	15
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. In an amountal market as a thou there wells	nd Statements may not be sold or used by any g the name and address of any political committee	person for the purpose of soliciting contributions are to solicit contributions from such committee.
NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE	g the name and address of any political committee	
Full Name (Last, First, Middle Initial) Independent Womens Voice - General Tr	easury Funds	Date of Receipt
Mailing Address 1875   Street NW, 5th Flo		10 30 2014
City Washington	State Zip Code DC 20006	Transaction ID : F56.4426  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	44336.48
Name of Employer	Occupa	tion
Full Name (Last, First, Middle Initial) Independent Womens Voice - General Tr	easury Funds	Date of Receipt
Mailing Address 1875 I Street NW, 5th	Floor	M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Washington	State Zip Code DC 20006	Transaction ID : F56.4467  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19728.00
No. of Carolina	and the second s	At a m
Name of Employer	Occupa	RIOT
		Date of Receipt
Full Name (Last, First, Middle Initial)	easury Funds	
Full Name (Last, First, Middle Initial) Independent Womens Voice - General Tr	easury Funds	Date of Receipt
Full Name (Last, First, Middle Initial) Independent Womens Voice - General To Mailing Address 1875 I Street NW, 5th City	reasury Funds Floor State Zip Code	Date of Receipt  10 31 2014  Transaction ID: F56,4468
Full Name (Last, First, Middle Initial) Independent Womens Voice - General To Mailing Address 1875 I Street NW, 5th  City Washington  FEC ID number of contributing	easury Funds Floor State Zip Code DC 20006	Date of Receipt  10 31 2014  Transaction ID: F56,4468  Amount of Each Receipt this Period  57069.32
Full Name (Last, First, Middle Initial) Independent Womens Voice - General To Mailing Address 1875 I Street NW, 5th  City Washington  FEC ID number of contributing federal political committee.  Name of Employer	easury Funds Floor State Zip Code DC 20006  C	Date of Receipt  10 31 2014  Transaction ID: F56,4468  Amount of Each Receipt this Period  57069.32
Full Name (Last, First, Middle Initial) Independent Womens Voice - General To Mailing Address 1875 I Street NW, 5th  City Washington  FEC ID number of contributing federal political committee.  Name of Employer	reasury Funds  Floor  State Zip Code DC 20006  Occupa	Date of Receipt  10 31 2014  Transaction ID: F56,4468  Amount of Each Receipt this Period  57069.32
Full Name (Last, First, Middle Initial) Independent Womens Voice - General To Mailing Address 1875 I Street NW, 5th  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  Full Name (Last, First, Middle Initial) Independent Womens Voice - General To	reasury Funds  Floor  State Zip Code DC 20006  Occupa	Date of Receipt  10 31 2014  Transaction ID: F56,4468  Amount of Each Receipt this Period  57069.32  ation  Date of Receipt
Full Name (Last, First, Middle Initial) Independent Womens Voice - General To Mailing Address 1875 I Street NW, 5th  City Washington FEC ID number of contributing federal political committee.  Name of Employer  D. Full Name (Last, First, Middle Initial) Independent Womens Voice - General To Mailing Address 1875 I Street NW, 5th	reasury Funds  Floor  State Zip Code DC 20006  Cl  Occupa	Date of Receipt  Transaction ID: F56,4468  Amount of Each Receipt this Period  57069.32  ation  Date of Receipt  10 31 2014  Transaction ID: F56,4481
Full Name (Last, First, Middle Initial) Independent Womens Voice - General To Mailing Address 1875 I Street NW, 5th  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  D. Full Name (Last, First, Middle Initial) Independent Womens Voice - General To Mailing Address 1875 I Street NW, 5th  City Washington  FEC ID number of contributing	reasury Funds  Floor  State Zip Code DC 20006  C  Occupa  Treasury Funds  Floor  State Zip Code DC 20006	Date of Receipt  10 31 2014  Transaction ID: F56,4468  Amount of Each Receipt this Period  57069.32  ation  Date of Receipt  10 31 2014  Transaction ID: F56,4481  Amount of Each Receipt this Period  64333.60

### SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE 3 OF 15 |

Any information copied from such Reports	and Statements may not be sold or used by a	iny person for the purpose of soliciting contributions
NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE	ing the name and address of any political comr	nittee to solicit contributions from such committee.
- Full Name (Last, First, Middle Initial)	**************************************	
Independent Womens Voice - General 1	reasury Funds	Date of Receipt
Mailing Address 1875 I Street NW, 5th F	iloor	11 03 2014
City Washington	State Zip Code DC 20006	Transaction ID : F56.4487  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	23079.87
Name of Employer	Occi	upation
Full Name (Last, First, Middle Initial) Independent Womens Voice - General T	ressury Funde	
Variable Control of the Control of t		Date of Receipt
Mailing Address 1875 I Street NW, 5th	State Zip Code	11 03 2014
Washington	DC 20006	Transaction ID : F56.4502
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 243279.80
Name of Employer	Occu	pation
Full Name (Last, First, Middle Initial) Independent Womens Voice - General T	reasury Funds	Date of Receipt
Mailing Address 1875 I Street NW, 5th	Floor	11 03 2014
City	State Zip Code	Transaction ID : F56.4503
Washington	DC 20006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	122248.28
Name of Employer	Occu	pation
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		MAN / DEDI / YRYRY
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C , , , , , , , , , , , , , , , , , , ,	Automit of Each Headily Inis Pellod
Name of Employer	Occu	pation
	nal\	
SUBTOTAL of Receipts This Page (option	IQI)	388607.95

SCHEDU	LE	5-E			
ITEMIZED	IND	EPEND	DENT	<b>EXPEND</b>	<b>ITURES</b>

CHEDULE 5-E EMIZED INDEPENDENT EXPENDITUR	ES	PAGE 4 OF 15 FOR LINE 7 OF FORM 5
ME OF FILER (In Full) IDEPENDENT WOMEN'S VOICE	1 6	
Full Name (Last, First, Middle Initial) of Payee	to the second se	Date of Public Distribution/Dissemination
Antietam Communications	794 - B	10 30 2014
Mailing Address 710 East Northway Lane		Amount
City	State Zip Code	1000.00
Atlanta	GA 30342	Transaction ID : F57.4416
Purpose of Expenditure Script Writing	Category/ Type 004	Office Sought: House State: KS Senate District: 00
Name of Federal Candidate Supported or Oppor PAT ROBERTS	osed by Expenditure:	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	11865.69	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	No.	Date of Public Distribution/Dissemination
Antietam Communications		10 30 Y Y Y Y Y
Mailing Address 710 East Northway Lane		Amount
City	State Zip Code	1000.00
Atlanta	GA 30342	Transaction ID : F57.4419
Purpose of Expenditure Script Writing	Category/ Type 004	Office Sought: House State: KY Senate District: 00
Name of Federal Candidate Supported or Opposite MITCH MCCONNELL	osed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	8965.45	Disbursement For: Primary General  2014  Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination
Antietam Communications		10 30 Y Y Y Y Y Y
Mailing Address 710 East Northway Lane		Amount
City	State Zip Code	1000.00
Atlanta	GA 30342	Transaction ID : F57.4420
Purpose of Expenditure Script Writing	Category/ Type 004	Office Sought: House State: 1A Senate District: 00
Name of Federal Candidate Supported or Opp JONI K ERNST	osed by Expenditure:	Check One: President  Support Oppose
Calendar Year-To-Date Per Election for Office Sought	1000.00	Disbursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expen	nditures	3000.00
(b) SUBTOTAL of Unitermized Independent Exp	penditures	
(c) TOTAL Independent Expenditures	Line 7) =	

SCHEDULE 5-E TEMIZED INDEPENDENT EXPENDITURES	PAGE 5 OF 15 FOR LINE 7 OF FORM 5
IAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Antietam Communications	# # : O * O . Y * Y * Y * Y
Mailing Address 710 East Northway Lane	10 30 2014 Amount
City State Zip Code	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Atlanta GA 30342	1000.00 Transaction ID : F57.4422
Purpose of Expenditure Category/ Script Writing Category/ Type 004	Office Sought: House State: CO
Name of Federal Candidate Supported or Opposed by Expenditure: CORY GARDNER	Senate District: 00 President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2014 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Antietam Communications	Mam / DED / Yayayay
Mailing Address 710 East Northway Lane	11 03 2014
i need	Amount
City State Zip Code	1000.00
Atlanta GA 30342	Transaction ID : F57.4500
Purpose of Expenditure Script Writing  Category/ Type 004	Office Sought: House State: MI Senate District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: FREDERICK STEPHEN UPTON	Check One: Support Oppose
Calendar Year-To-Date Per Election 2396.82	Disbursement For: Primary General 2014 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Victory Media Group	10 30 2014
Mailing Address 2516 Waukegan Rd, #115	Amount
City State Zip Code	X 8 8 8 K K K K K
Glenview IL 60025	10865.69 Transaction ID : F57.4414
Purpose of Expenditure Automated Phone calls  Category/ Type  004	Office Sought: House State: KS Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: PAT ROBERTS	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	12865.69
(b) SUBTOTAL of Unitemized Independent Expenditures	-
(c) TOTAL Independent Expenditures	

CHEDULE 5-E EMIZED INDEPENDENT EXPENDITURES	PAGE 6 OF 15 FOR LINE 7 OF FORM 5
AME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE	*
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Victory Media Group	10 30 2014
Mailing Address 2516 Waukegan Rd, #115	Amount
City State Zip Code	7965.45
Glenview IL 60025	Transaction ID : F57.4417
Purpose of Expenditure Automated Phone calls  Category/ Type 004	Office Sought: House State: KY Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: MITCH MCCONNELL	Check One: President  Support Oppose
Calendar Year-To-Date Per Election 7965.45	Disbursement For: Primary General 2014 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Victory Media Group	10 30 2014
Mailing Address 2516 Waukegan Rd, #115	Amount
City State Zip Code	10345.76
Glenview IL 60025	Transaction ID : F57.4424
Purpose of Expenditure Automated Phone calls  Category/ Type  Out Type	Office Sought: House State: 1A Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: JONI K ERNST	Check One: Support Oppose
Calendar Year-To-Date Per Election 11345.76 for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Victory Media Group	10 30 2014
Mailing Address 2516 Waukegan Rd, #115	Amount
City State Zip Code Glenview IL 60025	11159.58
Glenview IL 60025  Purpose of Expenditure Category/ Type 004	Office Sought: House State: CO Senate 000
Name of Federal Candidate Supported or Opposed by Expenditure: CORY GARDNER	President District: Oppose
Calendar Year-To-Date Per Election 12159.58 for Office Sought	Disbursement For: Primary General 2014 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	29470.79
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures(carry total from last page forward to Line 7)	

PAGE

OF

15

ME OF FILER (In Full) IDEPENDENT WOMEN'S VOICE	nL3		FOR LINE 7 OF FORM 5
Full Name (Last, First, Middle Initial) of Payee			
Victory Media Group	,	¥	Date of Public Distribution/Dissemination
			10 31 2014
Mailing Address 2516 Waukegan Rd, #115	90		American Benedicted September 2
and the said of their ridge is a first of the second of th	11 h % U. 5	71-0-4	Amount
City Glenview	State IL	Zip Code 60025	1066.00 Transaction ID : F57.4435
Purpose of Expenditure Automated Phone calls		Category/ Type 004	Office Sought: House State: AR Senate District: 04
Name of Federal Candidate Supported or Opp BRUCE WESTERMAN	oosed by Expendi	iture:	President  Check One: Support Oppose
			Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		1066.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		<del>-</del>	Date of Public Distribution/Dissemination
Victory Media Group  Mailing Address 2516 Waykegen Rd #115			10 31 2014
2516 Waukegan Rd, #115			Amount
City	State	Zip Code	2888.00
Glenview	IL	60025	Transaction ID : F57.4437
Purpose of Expenditure Automated Phone calls		Category/ Type 004	Office Sought: House State: IA Senate 04
Name of Federal Candidate Supported or Opp STEVE KING	posed by Expend	iture:	President District:  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		2888.00	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	,		Date of Public Distribution/Dissemination
Victory Media Group			M = M / D N D / Y N Y N Y N Y N Y N Y N Y N Y N Y N Y
Mailing Address 2516 Waukegan Rd, #115			Amount
City	State	Zip Code	15938.40
Glenview	IL	60025	Transaction ID : F57.4438
Purpose of Expenditure Live Phone Banks		Category/ Type 004	Office Sought: House State: NH
Name of Federal Candidate Supported or Op	nosed by Expend	-	President District: 01
FRANK GUINTA	pood by Experio		Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		15938.40	Disbursement For: Primary General Other (specify)
a) SUBTOTAL of Itemized Independent Exper	nditures		19892.40
(b) SUBTOTAL of Unitemized Independent Ex	penditures		
c) TOTAL Independent Expenditures(carry total from last page forward to			

CHEDULE 5-E EMIZED INDEPENDENT EXPENDITURE	ES		F	PAGE 8 FOR LINE 7	OF 15 OF FORM 5
AME OF FILER (In Full) NDEPENDENT WOMEN'S VOICE		2			
Full Name (Last, First, Middle Initial) of Payee Victory Media Group			Date of Public	D P I	Y . Y . Y . Y
Mailing Address 2516 Waukegan Rd, #115			10 Amount	31	2014
City	State IL	Zip Code 60025	Transaction I	D : F57.4440	16228.40
Purpose of Expenditure Live Phone Banks		Category/ Type 004	Office Sought:	House Senate	State: NH District: 02
Name of Federal Candidate Supported or Oppo MARILINDA GARCIA	sed by Expenditu	ıre:	Check One:	President Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		16228.40	Disbursement For: 2014 Other (spe	Primary	General
Full Name (Last, First, Middle Initial) of Payee			Date of Public	Distribution/[	Dissemination
Victory Media Group			M.M.	D H D /	9 8 9 11 9 8 9
Mailing Address 2516 Waukegan Rd, #115			Amount	31	2014
City	State	Zip Code 60025	Transaction	D · E57 4442	3056.00
Purpose of Expenditure Automated Phone calls		Category/ 004 Type	Office Sought:	House Senate	State: NE District: 02
Name of Federal Candidate Supported or Oppo LEE TERRY	sed by Expendit	ure:	Check One:	President Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		3056.00	Disbursement For: 2014 Other (spe	Primary	General
Full Name (Last, First, Middle Initial) of Payee		- / /	Date of Public	Distribution/	Dissemination
Victory Media Group			M = M /	0 * 0 / 31	2014
Mailing Address 2516 Waukegan Rd, #115			Amount		Lutania Am
City	State	Zip Code		and and	2360.00
Glenview	1L	60025	Transaction	ID : F57.4444	_ North _ North _ North _
Purpose of Expenditure Automated Phone calls		Category/ Type 004	Office Sought:	House Senate	State: MI District: 01
Name of Federal Candidate Supported or Opportunity DANIEL J BENISHEK	osed by Expendi	ture:	Check One:	President Support	Oppose
Calendar Year-To-Date Per Election for Office Sought	2 2 4	2360.00	Disbursement For: 2014 Other (spe	Primary	General
(a) SUBTOTAL of Itemized Independent Expendent	ditures				21644.40
(b) SUBTOTAL of Unitermized Independent Exp	enditures				
(c) TOTAL Independent Expenditures(carry total from last page forward to L	ine 7)			1 1 49	

PAGE 9 OF 15 FOR LINE 7 OF FORM 5

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NDEPENDENT WOMEN'S VOICE	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Victory Media Group  Mailing Address 2516 Waykegap Rd #115	10 31 2014
2516 Waukegan Rd, #115	Amount
City State	Zip Code 1642.00
Glenview	60025 Transaction ID : F57.4445
Purpose of Expenditure Automated Phone calls	ttegory/ 004 Office Sought: House State: NY Type O04 District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: LEE MICHAEL ZELDIN	Check One: President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Victory Media Group  Mailing Address 2516 Waykegan Rd #115	10 31 2014
2516 Waukegan Rd, #115	Amount
City State Glenview IL	Zip Code 1712.00 Transaction ID : F57.4447
Purpose of Expenditure Automated Phone calls	Ategory/ Type 004 Office Sought: House State: NY Senate District: 18
Name of Federal Candidate Supported or Opposed by Expenditure NAN HAYWORTH	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2014 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Victory Media Group  Mailing Address OFIC Wouldered Rd #115	10 10 10 1 10 1 10 1 10 1 10 1 10 1 10
2516 Waukegan Rd, #115	Amount
City State	Zip Code 2422.00
Glenview IL  Purpose of Expenditure Ca	Transaction ID : F57.4448
Automated Phone calls	Ategory/ Type 004 Office Sought: House State: VA Senate 07
Name of Federal Candidate Supported or Opposed by Expenditure DAVID ALAN BRAT	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	5776.00
(b) SUBTOTAL of Uniternized Independent Expenditures	
(c) TOTAL Independent Expenditures(carry total from last page forward to Line 7)	-

PAGE

10

OF FOR LINE 7 OF FORM 5

SCHEDU	LE	5-E				
ITEMIZED	IND	<b>EPENI</b>	DENT	<b>EXPEN</b>	DITU	IRES

NAME OF FILER (In Full) INDEPENDENT WOMEN'S VOICE Date of Public Distribution/Dissemination Full Name (Last, First, Middle Initial) of Payee Victory Media Group 2014 Mailing Address 2516 Waukegan Rd, #115 Amount Zip Code City State 1935.00 Glenview IL 60025 Transaction ID: F57.4450 V۸ X House Office Sought: State: Purpose of Expenditure Category/ 004 **Automated Phone calls** Type Senate 10 District: President Name of Federal Candidate Supported or Opposed by Expenditure: BARBARA J. COMSTOCK X Support Oppose Check One: General Disbursement For: Primary Calendar Year-To-Date Per Election 2014 1935.00 Other (specify) for Office Sought Date of Public Distribution/Dissemination Full Name (Last, First, Middle Initial) of Payee Victory Media Group 2014 10 Mailing Address 2516 Waukegan Rd, #115 Amount City State Zip Code 1508.00 1L 60025 Glenview Transaction ID: F57.4452 WA Office Sought: House Purpose of Expenditure State: Category/ 004 Automated Phone calls Туре Senate 04 District:. President Name of Federal Candidate Supported or Opposed by Expenditure: **CLINT DIDIER** Check One: Support Oppose General Disbursement For: 2014 Primary Calendar Year-To-Date Per Election 1508.00 Other (specify) for Office Sought Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Victory Media Group 2014 10 Mailing Address 2516 Waukegan Rd, #115 **Amount** City State Zip Code 1139.00 IL 60025 Glenview Transaction ID: F57.4454 WA Purpose of Expenditure X House Office Sought: Category/ State: 004 Automated Phone calls Type Senate 02 District: President Name of Federal Candidate Supported or Opposed by Expenditure: ALEXANDER XAVIER MOONEY **Support** Check One: Oppose **K** General Primary Disbursement For: Calendar Year-To-Date Per Election 1139.00 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures...... 4582.00 (b) SUBTOTAL of Unitermized Independent Expenditures ... (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)

CHEDULE 5-E EMIZED INDEPENDENT EXPENDIT	ΓURES		PAGE 11 OF 15 FOR LINE 7 OF FORM 5
ME OF FILER (In Full) IDEPENDENT WOMEN'S VOICE			
Full Name (Last, First, Middle Initial) of Pa	yee	· · · · · · · · · · · · · · · · · · ·	Date of Public Distribution/Dissemination
Victory Media Group			W - W   D - D   Y - Y - Y - Y - Y - Y - Y - Y - Y - Y
Mailing Address 2516 Waukegan Rd, #11	5		10 31 2014
and the second s	grade to the		Amount
City	State	Zip Code	23695.24
Glenview	IL	60025	Office Sought: House State GA
Purpose of Expenditure Automated Phone calls		Category/ Type 004	Senate District: 11
Name of Federal Candidate Supported or DAVID PERDUE	Opposed by Expend	fiture:	Check One: President Support Oppose
Calendar Year-To-Date Per Election for Office Sought		2369 <u>5</u> .24	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Pa	iyee		Date of Public Distribution/Dissemination
Victory Media Group			M - M / D - D / Y - Y - Y
Mailing Address 2516 Waukegan Rd, #11	5		10 31 2014
			Amount
City	State	Zip Code	10135.63
Glenview Street of Everanditure	IL.	60025	Office Sought: House State: LA
Purpose of Expenditure Automated Phone calls	3 1	Category/ Type 004	Senate District: 00
Name of Federal Candidate Supported or WILLIAM CASSIDY	Opposed by Expend	diture:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		10135.63	Disbursement For: Primary General  2014 Other (specify)
Full Name (Last, First, Middle Initial) of Pa	уее	u u	Date of Public Distribution/Dissemination
Victory Media Group			M = M / 0 = D / Y Y Y Y 10 10 31 2014
Mailing Address 2516 Waukegan Rd, #1	15		Amount
City	State	Zip Code	23238 45
Glenview	IL	60025	23238.45 Transaction ID : F57.4474
Purpose of Expenditure Automated Phone calls		Category/ Type 004	Office Sought: House State: NC Senate District: 00
Name of Federal Candidate Supported or THOM R TILLIS	Opposed by Expend	diture:	President Oppose
Calendar Year-To-Date Per Election for Office Sought		23238.45	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Ex	kpenditures		57069.32
(b) SUBTOTAL of Unitemized Independent	Expenditures		
(c) TOTAL Independent Expenditures (carry total from last page forward			····· <b>&gt;</b>

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HEDULE 5-E Mized independent expenditui	RES			FOR LINE 7 OF FORM 5
ME OF FILER (In Full) DEPENDENT WOMEN'S VOICE				
Full Name (Last, First, Middle Initial) of Payee Victory Media Group	n =	:s v	- MIN /	Distribution/Dissemination
Mailing Address 2516 Waukegan Rd, #115		2 - 31 - 12 - 34 - 34 - 34 - 34 - 34 - 34 - 34 - 3	10 Amount	31 2014
City	State	Zip Code		32166.80
Glenview Purpose of Expenditure Live Phone Bank	IL .	Category/ 004	Office Sought:	ID : F57.4482    House   State: N
Name of Federal Candidate Supported or Op	posed by Expend	Type 004	×	Senate District: 00 President
Calendar Year-To-Date Per Election			Disbursement For: [	Support Oppose  Primary General
for Office Sought	A 18 /00 H	32166.80	Other (spe	ecify) >
Full Name (Last, First, Middle Initial) of Payer Victory Media Group	9 - 9 -		M R M I	Distribution/Dissemination
Mailing Address 2516 Waukegan Rd, #115		*	Amount	03 2014
City	State	Zip Code		17143.96
Glenview Purpose of Expenditure Automated Phone calls	IL	60025  Category/ 004 Type 004	Office Sought:	ID: F57.4490  House State: K
Name of Federal Candidate Supported or Op PAT ROBERTS	posed by Expend		Check One:	Senate District: 0 President Support Oppose
Calendar Year-To-Date Per Election for Office Sought	<b>a</b> a a a	29009.65	Disbursement For: 2014 Other (sp	Primary Genera
Full Name (Last, First, Middle Initial) of Paye Victory Media Group	9	wynigew ywg g llwy		C Distribution/Dissemination
Mailing Address 2516 Waukegan Rd, #115			Amount	03 2014
City Glenview	State IL	Zip Code 60025	Transaction	1485.12 ID:,F57,4491
Purpose of Expenditure Phone Banks		Category/ Type 004	Office Sought:	
Name of Federal Candidate Supported or Op DANIEL J BENISHEK	pposed by Expen	diture:	Check One:	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought		3845.12	Disbursement For: 2014 Other (sp	Primary General
(a) SUBTOTAL of Itemized Independent Expe	enditures		·····	50795.88
(b) SUBTOTAL of Unitemized Independent E	xpenditures			
(c) TOTAL Independent Expenditures(carry total from last page forward to	 Line 7)			

PAGE 13 OF 15 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) NDEPENDENT WOMEN'S VOICE		
Full Name (Last, First, Middle Initial) of Paye	90	Date of Public Distribution/Dissemination
Victory Media Group		11 03 2014
Mailing Address 2516 Waukegan Rd, #115		handen landen londenten beer
		Amount
City Glenview	State Zip Code IL 60025	1396.82 Transaction ID : F57.4492
Purpose of Expenditure Phone Banks	Category/ Type	Office Sought: House State: MI Senate District: 06
Name of Federal Candidate Supported or O FREDERICK STEPHEN UPTON	pposed by Expenditure:	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	1396	Disbursement For: Primary General 2014 Other (specify)
Full Name (Last, First, Middle Initial) of Pay-	ee	Date of Public Distribution/Dissemination
Victory Media Group		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2516 Waukegan Rd, #115		11 03 2014 Amount
City	State Zip Code	hardwardsondered control control control
Glenview	IL 60025	2053.97 Transaction ID : F57.4494
Purpose of Expenditure Phone Banks	Category/ Type	Office Sought: House State; NC Senate District: 02
Name of Federal Candidate Supported or C RENEE JACISIN ELLMERS	opposed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	205	Disbursement For: Primary General 2014 Other (specify)
Full Name (Last, First, Middle Initial) of Pay	ee	Date of Public Distribution/Dissemination
Victory Media Group		11 03 / Y * Y * Y * Y
Mailing Address 2516 Waukegan Rd, #115	5	Amount
City	State Zip Code	56990.50
Glenview	IL 60025	Transaction ID : F57.4504
Purpose of Expenditure Targeted Direct Mail 11/03 - 'GOTV'	Category/ Type	Office Sought: House State: NH Senate District: 00
Name of Federal Candidate Supported or C SCOTT BROWN	Opposed by Expenditure:	President District:  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	8915	7.30 Disbursement For: Primary General 2014 Other (specify)
(a) SUBTOTAL of Itemized Independent Exp	penditures	60441.29
(b) SUBTOTAL of Unitermized Independent I	Expenditures	-
(c) TOTAL Independent Expenditures(carry total from last page forward		

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CHEDULE 5-E FEMIZED INDEPENDENT EXPENDIT	URES			PAGE 14 FOR LINE 7	OF 15 OF FORM 5
IAME OF FILER (In Full)		¥( <u>.</u>			
INDEPENDENT WOMEN'S VOICE			2 5		
			2		
Full Name (Last, First, Middle Initial) of Pay	VPD		Data (	of Public Distribution/l	Dissemination
Victory Media Group	yee		Date	PROPERTY AND PROPERTY.	PYTYTYTY
				11 03	2014
Mailing Address 2516 Waukegan Rd, #115	5	ν' Δ	Ben	milannol brossiteseed	Resource Consumer Con
, 4 - 0 -		3	Arnou	NT	
City	State	Zip Code			81618.68
Glenview	IL	60025	Trans	saction ID: F57.4505	
Purpose of Expenditure		Category/ 004	Office Soug	ht: House	State: IA
Targeted Direct Mail 11/03 - 'GOTV'		Type 004	V 2	X Senate	District:00
Name of Federal Candidate Supported or	Opposed by Expendi	ture:		President	
JONI K ERNST			Check One:	Support	Oppose
O. I. I. W. T. O.I. D. Florida			Disburseme	nt For: Primary	General
Calendar Year-To-Date Per Election for Office Sought		92964.44	4	2014 Land	
	Document Committee of School Committee	Angel Street and an August Street and			
Full Name (Last, First, Middle Initial) of Pa	yee		Date	of Public Distribution/	Dissemination
Victory Media Group			*   * g   T	11 03	2014
Mailing Address 2516 Waukegan Rd, #11	5		L	استنسا استنسا	
			Amou	nt are all the second	
City	State	Zip Code		And in the same	67301.42
Glenview	IL	60025	Trans	saction ID : F57.4506	K 9 (5) 9 9
Purpose of Expenditure		Category/	Office Soug		State: KS
Targeted Direct Mail 11/03 - 'GOTV'		Type 004		X Senate	00
Name of Federal Candidate Supported or	Opposed by Expend	iture:		President	District:
PAT ROBERTS	,,,	-	Check One	: X Support	Oppose
			Disburseme	nt For: Primary	General
Calendar Year-To-Date Per Election	R R W B	96311.07		2014	X dericial
for Office Sought	Laured and State of S			ther (specify)	
Full Name (Last, First, Middle Initial) of Pa	iyee	*	Date	of Public Distribution/	Dissemination
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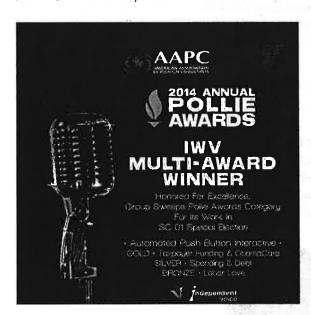
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IWV MULTI-POLLIE AWARD WINNER: **SWEEPS POLLIE AWARDS** CATEGORY WITH SCRIPTS ON OBAMACARE REPEAL PLEDGE, TAX AND SPENDING, AND UNIONS.





#### **IWV Multi-Pollie Award Winner**

Honored For Excellence, Group Sweeps Pollie Awards Category

For Its Work In SC-01 Special Election

(WASHINGTON D.C.) - On Friday, Victory Media Group and Antietam Communications -consultants to Independent Women's Voice who collaborated with IWV's message team to execute an Independent Expenditure in the South Carolina First Congressional District special election last year - were awarded multiple coveted Pollie Awards, the most sought-after awards in the political campaign,

#### **FEATURED VIDEO**



### B2B Health Care Minute with Hadley **Heath Manning**



### **Broken Obamacare Promises**

**IWV ON TWITTER** 

8/28/16. 12:04 PM

communications and public affairs industry, at the 2014 Pollie Awards Gala dinner hosted by the Americans Association of Political Consultants (AAPC) in San Diego, California.

"This is no small feat, and I am so proud our team's authentic messaging work was recognized with 2014 Pollie Awards," said IVW CEO and President Heather R. Higgins. "IVW takes pride in working to create factual messages, using non-traditional delivery methods, and winning races that others believe are hopeless. Through innovative, non-advocacy interactive calls, we made voters aware of relevant facts on issues they care about, like ObamaCare repeal, and why turning out to vote is so important."

The Pollie Awards are a bipartisan showcase of the best in the business who have demonstrated superior work in the political sphere. This year over 1,600 entries were received and considered by a blind jury of over 250 peers across all disciplines and party lines.

Overall winners in the category for "Automated Push Button Interactive," IWV picked up gold for a call about the ObamaCare Repeal Pledge

(http://www.therepealpledge.com/) and silver and bronze for scripts on tax and spending, and unions in the SC-01 special election, in which – despite predictions of former Governor Mark Sanford's collapse – IWV's fact-based Independent Expenditure helped propel Sanford to victory over Elizabeth Colbert Busch.







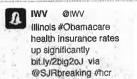
Jeff Davis of Victory Media Group [left] and Bill Pascoe [right]
of Antietam Communications
accept gold, silver and bronze Pollie Awards at the 2014
AAPC Pollie Awards Gala

### Tweets by @IWV



State approves insur... Tennessee insurance r... tennessean.com

44<u>m</u>



Embed

View on Twitter

IWV was the only independent expenditure of a significant size on the wining side of the ledger in SC-01. This wasn't a race that IWV originally intended to become involved in; but message testing made it clear that IWV was a credible third-party messenger that could deliver the necessary message and inform SC-01 voters about the troubling aspects of Colbert Busch's positions on key issues.

"Taxpayer Funding and ObamaCare," "Spending and Debt," and "Labor Love," along with strategic broadcast and cable television and print advertising, helped turn things around for Sanford in the final week of the race toward a 54-45 percent victory over Colbert Busch.

#### Other IWV Awards:

- The Reed Awards, Campaign & Elections (http://www.campaignsandelections.com/events
   /427522/the-2014-reed-awards.thtml) - Best Automated Phone Call: Statewide or Special Election Campaign - "Spending and Debt"
- The Reed Awards, Campaign & Elections (http://www.campaignsandelections.com/events /427522/the-2014-reed-awards.thtml) - Best Automated Phone Call: Independent Expenditure, Public Affairs Advocacy, or Ballot Initiative - "Taxpayer Funding and ObamaCare"
- Campaign & Elections Most Influential People (http://iwvoices.com/detail.php?c=2792585) – Heather R. Higgins, IWV CEO and President

Read more about <a href="http://www.iwvoice.org/search/?q=sanford&x=0&y=0">http://www.iwvoice.org/search/?q=sanford&x=0&y=0</a>).

#### ####

Independent Women's Voice is a 501(c)(4) nonpartisan, nonprofit organization for mainstream women, men and families dedicated to promoting limited government, free markets, and personal responsibility. IWV is an affiliate organization of the Independent Women's Forum.

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### GET INVOLVED

Learn more about issues and talk to your family and friends about your concerns about the recently passed law and why you believe that there are better ways to improve our health care system.

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**NEWS** 

http://www.victorym.com/news.asp



**04***APR* 

### **Victory Media Group Receives Highest Industry Honor**

Jeff Davis 312.446.8310 jeff@victorym.com

For Immediate Release - DATE April 4, 2014

American Association of Political Consultants (AAPC) recognizes Victory Media Group for exceptional work during its annual conference

Glenview, IL - Victory Media Group is proud to announce that it has been awarded a coveted Pollie Award from the AAPC, the industry's highest honor bestowed upon political consultants at the national and international level. Victory Media Group was recognized in the category of Interactive Automated Phones for its exemplary work during the 2013 political season.

"This year's Pollie Awards were especially competitive for an off cycle with over 1,600 entries. We were pleased to see innovative voter contact and persuasion strategies applied in all segments, especially in our Internet and social media categories, which saw a significant increase in number over last year," said AAPC President Art Hackney.

The AAPC announced this year's winners at the 2014 Annual Pollie Awards & Conference on April 4 in San Diego, CA. The Pollie Awards (Pollies) are bipartisan honors awarded annually by the AAPC to members of the political advertising and communications industry who have demonstrated superior work on behalf of their candidates and causes. A blind jury of their peers selects AAPC award winners. Esquire magazine has dubbed the Pollies as "...the Oscars of political advertising."

The annual Pollie Awards & Conference brings the leading political professionals in the world together to network and hear from top technology innovators, pollsters, pundits and service providers as the 2014 political cycle begins to heat up.

#### About the 2014 AAPC Pollie Awards & Conference

As the leading industry event heading into the midterm elections, the 2014 AAPC Pollie Awards & Conference featured cutting-edge programming on key industry trends, including the Hispanic influence on American politics, changing media landscape, the science of voter behavior, and the role of political professionals in promoting civil discourse. Widely recognized as the must-attend event for political consultants, media buyers, public affairs specialists, suppliers, industry leaders and journalists, the 2014

AAPC Pollie Awards & Conference took place in San Diego, CA April 2-4, 2014. More than 400 political professionals took advantage of the Conference's programming, designed to empower attendees to leverage the latest techniques in campaign strategy and management. For details, visit <a href="https://www.theaapc.org">www.theaapc.org</a>.

#### **About AAPC**

Founded in 1969, the AAPC is a multi-partisan organization of political and public affairs professionals dedicated to improving democracy. The AAPC has over 1,250 members hailing from all corners of the globe. It is the largest association of political and public affairs professionals in the world. For more information, see <a href="https://www.theaapc.org">www.theaapc.org</a>.

# Campaigns &Elections

### Victory Media Group Wins Two Reed Awards

Jeff Davis 312.446.8310 jeff@victorym.com

#### For Immediate Release

(Washington, D.C.) - Victory Media Group and Antietam Communications, working on behalf of Independent Women's Voice, took home Campaigns and Elections' 2014 Reed Awards for their outstanding work in not just one but two categories: Best Automated Phone Call Statewide or Special Election Campaign and Best Automated Phone Call Independent Expenditure, Public Affairs Advocacy, or Ballot Initiative.

Campaign and Elections' Annual Reed Awards highlighted exellence in campaign management, political consulting, and political design.

IWV CEO and President Heather R. Higgins said, "It is an honor for our team to be recognized for our messaging work. Through innovative, non-advocacy, factual, interactive calls, we made voters aware of relevant facts on issues they care about, like ObamaCare repeal, and why turning out to vote is so important. Victory Media Group and Antietam Communications are top notch and help take IVW messages into the field to move the needle to win races. We are thrilled they are being recognized with Reed Awards."

## IWV'S "BOYFRIEND" SERIES PART OF LARGEST SINGLE ALL-DIGITAL ADVOCACY AD BUY



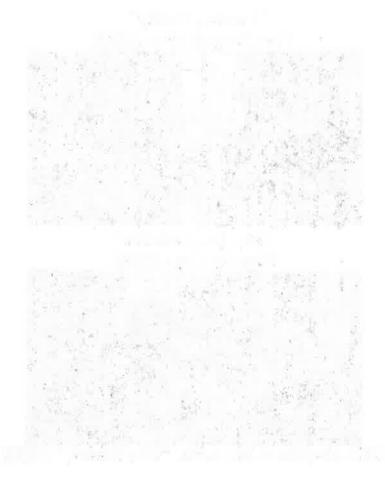
Today, Independent Women's Voice (IWV) releases two new ads in their <u>"Boyfriend"</u> series — <u>"Feeling Guilty"</u> and <u>"Mr. Dependable"</u> — as part of an unprecedented, multi-state, multi-million dollar online-targeted advertising buy to educate women about public officials and policies.

IWV is one of several partners in the broad issue education campaign. At \$7.4 million, it is the largest single all-digital advocacy online video buy in history, led by Let Freedom Ring (LFR). The campaign, which began this spring, was validated as highly effective by various focus groups, polls and online tests during the summer and therefore was slated for this massive online distribution effort.

Geo-targeting to registered voting independents, the ad buy will run through Election Day in five battleground states: Florida, Ohio, Pennsylvania, Virginia and Wisconsin.

The ads tell a tale familiar to millions of American women. Women, who four years ago were overwhelmingly supportive of Obama, have come to feel disconnected from and let down by the President. His promises for new policies and a better direction have not matched the reality. It has now gotten to the point where women don't feel obliged to defend his policies.

In turn, women are chalking up their relationship with the President as an experience to learn from and a mistake they will not repeat. Women voters are ready to move on to someone who is more dependable.



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### MAKING A REAL DIFFERENCE: AN 86% CAMPAIGN SUCCESS RATE



IWV OUTREACH AND EDUCATION INITIATIVES HAD AN ENORMOUS IMPACT in races where free market conservative candidates were experiencing difficulties in communicating the benefits of free markets and personal liberty. IWV made sure that voters had the information they needed on the issues that matter most so that they could make smart choices about nation's leadership and the direction of our country.

In the last six years, of the 22 races where IWV launched major educational initiatives, the candidate or ballot initiative associated with giving individuals choices and opportunity succeeded in 19 races. Of course we can't take all the credit and wouldn't want to. But still, that's an 86% success rate in helping our fellow citizens make informed decisions that are right for them, which makes us rather proud!

Here are some highlights:

### 2015:

KY Governor – The Republican Governor's Association pulled out two weeks before the race. We looked and saw that Kentucky citizens deserved to know about how Obamacare was hurting families in their state. IWV shared information with Kentucky citizens about this harmful law over the last week of the campaign. Despite polls showing Jack Conway with a five-point lead, Matt Bevin, who had signed our pledge to repeal and replace ObamaCare, started doing better. The RGA came back in, and Bevin won the election 53 percent to 44 percent, with a commanding 85,000 vote margin.

CA SD-07 Special Election — IWV likes to help candidates who fight for their constituents for better government and would be more likely to advance sensible policies that advance the interests of the citizens rather than self-serving union bosses, so we supported Democrat Steve Glazer, helping him to prevall in a special election for a vacant East Bay Senate seat in California. Of course the unions immediately went to their playbook and falsely asserted once again that we're funded by the Koch's (yes, it gets old) in order to crank up their own donations. But despite that, Bay area voters still got the candidate who represented their interests, and we were happy to help.

2014:

Senate Races - IWV devoted its major expenditures to 8 key states by providing residents with fact-based insights and information about how free market solutions and greater personal liberty can help families like theirs. These better informed citizens elected 7 out of 8 conservative candidates who they felt would best represent and support them and their interests.

#### 2013:



VA Governor – Virginians deserved to know about how health care in their state would be affected by the election of a new Governor. IWV focused on educating the public about the problems with ObamaCare, and Ken Cuccinelli—the candidate who supports repealing and replacing ObamaCare—closed the gap to just over 2 points.

SC-01 House Special Election – Every other group thought this race couldn't be won by the conservative candidate Mark Sanford, who had signed our Repeal Pledge on the Affordable Care Act. IVVV educated district residents about the importance of the issues at stake in this race for people like them—with its implications on national health care, economic and regulatory policy, and jobs. The result was the election of another supporter of better policies and a brighter future for Americans.

#### 2012:

2012 WI Governor Recall – There was so much misinformation about the policies being promoted by Governor Scott Walker that IWV stepped in to inform Wisconsin residents about the facts about public sector union compensation. Research showed that these facts and IWV's educational messages had a power impact, moving Independents +31 points. We deployed the results and contributed to a Scott Walker win and the continuation of positive, needed changes for the inhabitants of Wisconsin.

IN GOP Senate Primary – Indiana citizens deserved to know which candidate was truly committed to creating a better health care system by repealing and replacing ObamaCare. IWV knew that Challenger Richard Mourdock had signed the Repeal Pledge, while Richard Lugar refused. IWV informed the people of this difference, contributing to a victory for Mourdock as a champion of improving our nation's health care system.

NE GOP Senate Primary -- Nebraskans needed information about which candidate would create a better health care system by repealing and replacing ObamaCare. Deb Fischer signed IWV's Repeal Pledge, and IWV made sure that Nebraskans knew that she would be a champion for needed health care reforms. We were gratified to discover in after-action surveys that her having signed IWV's Obamacare Repeal Pledge, which we'd promoted in our independent expenditure during the closing week of the campaign, was the single biggest reason for her upset win.

NC, VA, OH Presidential – IVW wanted Americans to make informed decisions about the best public policies for our country. IVW highlighted important facts about our economy,

taxes, and health care system. And, though the race was ultimately a loss, our research showed that an additional 21 percentage points of Independents who recalled the IWV educational messaging voted for Mitt Romney.

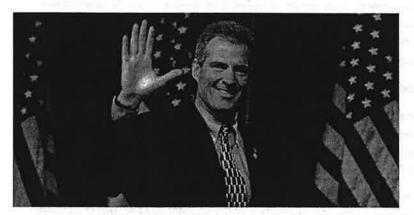
#### 2011:

WI Supreme Court - IWV recognized that Independents and many women were simply being ignored during this special election in this battle that was going have major impact on the public policy direction of Wisconsin. IWV made 700,000 calls to these neglected, important citizens about the policy choices at hand, and helped get a better outcome in a race that was decided by only 7,000 votes.

NY-09 — After Rep. Anthony Weiner resigned in disgrace, voters in this heavily Democratic New York district not only wanted a candidate who didn't abuse his cell phone, but wanted to send a message about issues facing the country. IWV took this opportunity to start a conversation with these voters and helped them be heard through the election of Bob Turner.

OH Health Care Freedom Amendment -Ohioans had the opportunity to voice their desire for a better health care system. IVW made sure that Ohio citizens were aware of the issue and the stakes of this contest. While Gov. Kasich's union referendum lost 2 to 1, our messaging effort took this ballot initiative from tossup or worse to a 2 to 1 win with the same electorate.

#### 2010:



MA Senate Special Election - IVVV changed the framework of the race by making it a fight for the 41st vote against the Affordable Care Act. Our efforts helped move women +21 points for a Scott Brown win.

HI-01 Special Election - IWV's effort, the only independent expenditure in this race, moved Independent women +18 points and resulted in a win for Charles Djou.

### 90% MESSAGING SUCCESS RATE



### CASE STUDIES:

#### Case Study: "No Washington Exemption"

America is supposed to be a nation of laws that everyone, even elected officials, have to follow. Citizens deserve to know when their elected representatives are breaking the rules, or creating a different system just to benefit elites like them. That's why IWV created the "No Washington Exemption" project to inform anyone who cared as much as we did that our representatives – Republicans and Democrats alike - were not following the Patient Protection & Affordable Care Act as it was written and had created a loophole so they didn't have to live under Obamacare like the rest of us. Studies show that Democrats and Republicans alike reject the Washington Exemption in ObamaCare and when they are told about this unfairness and which candidate defended the system, it resulted in dramatic changes in level of support for candidates by as much as 29%. No wonder they did it in an off-year.

### Case Study: Economic Education in Colorado

IVVV wants to help Americans make informed decisions. We know that the more people understand about how the economy works, the more likely they are to see that most of the time free market policy solutions, which may not be intuitive at first glance, actually create the most opportunity and best solutions to the challenges we face. That's why, in September of 2012 in Colorado, IVVF conducted a one-week educational campaign among 20,000 women designed to increase knowledge of ten key economic facts. Ten days later, we conducted a follow up study comparing those who had seen our education materials vs. those who had not. Among those we reached, correct responses moved +8 points while the those who did not remained flat. Similarly, though no candidate had been mentioned in the education materials, preference moved +6 points for Romney—presumably now seen as the route to achieving more freedom and choice-based policy solutions—over those who did not.

### Case Study: "Health Reform Questions"

Americans want a health care system that puts power in the hands of patients and doctors – not the government. IWV knows that when people learn the facts about how our health care system works, and the problems that ObamaCare is causing, they will want better choices to create a better health care system.

In 2012, IWV used interactive calls, online advertising, and mail to ask "Health Reform Questions" to help raise awareness in North Carolinians about the facts of our health care predicament and to disabuse some false assumptions that had been used to sell the Patient Protection and Affordable Care Act. Realizing the law was hurting many people caused support for the law to fall. And even though neither candidate's name was mentioned, interestingly support for Mitt Romney, who had signed our pledge to repeal the law, moved +14 points among those who received IWV's educational information in North Carolina.

### Case Study: Public Unions in Wisconsin

Americans want a system that treats workers fairly, whether they are working for the government or the private sector. IVVV recognized that many Independents who opposed Gov. Walker's reforms mistakenly believed that public employees are underpaid and are making a sacrifice to hold those jobs, rather than the reality, which is the reverse: Unionized public employees are overcompensated relative to the private sector. When people learned the facts, their beliefs changed radically, one measure of which was that even though Governor Walker, his reforms, and the recall weren't even mentioned, support for Gov. Scott Walker increased by +31 points among 7,500 likely

voters who received the IWV information versus those who had not.

### GET INVOLVED

Learn more about issues and talk to your family and friends about your concerns about the recently passed law and why you believe that there are better ways to improve our health care system.

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• Share

### Scott Brown's Victory in Massachusetts

IWV is so proud of the role we were able to play in the Massachusetts special election.

When IWV couldn't persuade the political professionals that Martha Coakley was anything but a shoo-in and Scott Brown's race was worth spending money on, IWV launched its own independent expenditure of approximately \$250,000. Unlike some of the other efforts in Massachusetts, IWV believed that to come close to winning, two things needed to happen: shrink the 30-point gender gap and elevate healthcare to being indisputably the primary issue in the campaign (so that any success could not be dismissed as just the economy or jobs angst). Too many people weren't getting the message that this election was really a referendum on health care. We helped change that debate.

To that end, IWV used extremely successful recorded calls recorded by a female physician, radio ads, and live calls. Our radio ads saturated Massachusetts up until election day and the calls carefully educated targeted voters about the stakes in this race -- the future of their health care freedom -- and encouraged them to get out and vote against big government by voting for Scott Brown. We helped cut a 30 point gender gap to 9 points, and reinforced the fact that health care and the 41st vote in the Senate were the dominant issues.

It may not have been glamorous stuff, but since we're about results, it was the most effective way to bring the health care issue to the forefront, shrink the gender gap and motivate numout.

Following the election, to help educate the public —and elected officials—about the importance of the health care issue to voters, IWV commissioned a poll to assess what influenced Massachusetts voters during the special Senate election.

The election in Massachusetts showed us that anything is possible, both in the health care fight and the upcoming elections!

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### ASSESSING THE AIR WAR • POLITICAL DIARY

Assessing the Air War

The faster pace of campaigns really is changing politics. As the New Year dawned, almost no one in either party thought the Massachusetts Senate race would be hot. It reached the boiling point at cyberspeed; an astonishing \$23 million was spent on the race by the time voters went to the polls.

Scott Brown raised an astounding \$13 million between January 1 and his victory on January 19. The money came in so fast he couldn't spend it all and wound up with a \$4 million surplus. While Mr. Brown did outspend Democrat Martha Coakley by \$8.7 million to \$5.1 million in the homestretch, the discrepancy was reduced by various Democratic groups who spent \$6.1 million on ads and get-out-the-vote efforts. By contrast, seven GOP and conservative groups chipped in \$2.7 million on behalf of Mr. Brown. Overall, the campaign's final days saw spending between the two camps turn out roughly equal.

But the quality of the messages clearly mattered. Panicked liberals put out so many negative ads against Mr. Brown that several backfired. A direct mail piece from the state Democratic Party announced that "1,736 Women Were Raped in Massachusetts in 2008; Scott Brown Wants Hospitals To Turn Them All Away." Michael Scherer of Time Magazine said the move was a "roll towards [the] gutter," though the ad was echoed by the Coakley campaign itself, which ran an ad saying Mr. Brown would "deny rape victims care."

There were tough Republican ads too, including one that refused to credit Ms. Coakley's explanation that her comment in the debate that "we have to get taxes up" referred to growing revenues from an improving economy rather than higher taxes. In general, however, the anti-Coakley ads were hard-hitting but concentrated on the issues.

Surprisingly, few of the ads that sought to help Mr. Brown focused on health care, which about half of voters told pollsters was their No. 1 issue. Instead, most ads focused on overall economic themes. An exception was funded by Independent Women's Voice, which ran a radio ad and placed thousands of live and recorded phone calls to voters in order to critique the Obama health care plan. Two Massachusetts physicians, Lorraine Schratz and Barbara Rockett, detailed specific concerns with ObamaCare in messages aimed at independent and GOP women. Mr. Brown wound up winning 47% of

#### **FEATURED VIDEO**



### B2B Health Care Minute with Hadley Heath Manning



Broken Obamacare Promises

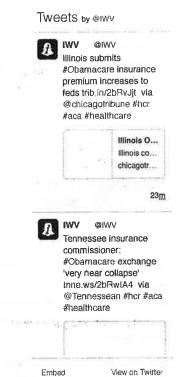
**IWV ON TWITTER** 

women voters in the state, equal to the number of women who indicated they opposed the health care bill before Congress.

- John Fund

Read more via Wall Street Journal's Political Diary ()

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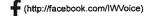
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Heather R. Higgins, President and CEO

Heather leads the IVVV team, where she uses her passion for education and helping people make informed decisions to create a vision and overall strategy for IVVV's efforts.

Heather has been involved in numerous organizations that share the mission of improving people's lives by creating a better, fairer, more innovative and prosperous country. Heather serves as chairman of the Independent Women's Forum (IVW's sister organization) and she is also on the board of the Hoover Institution at Stanford University and The Philanthropy Roundtable. In addition, she is on the NY board of UBS's mutual funds, and a member of the Council on Foreign Relations. She was named as one of the "50 Most Influential People" by Campaigns & Elections magazine for her issue advocacy and being a thought leader.

Some of the campaigns Heather has designed include

- creating an IWF "helping hands" program for the families of 9/11 that had or were about to have newborns,
- stopping crippling legislation that would have shut down many small and worthy charities that didn't have the overhead for masses of lawyers and accountants, and
- · creating IWW's Repeal Pledge on the Affordable Care Act, as a first step putting healthcare back in the hands of women, and men, and their doctors, where it belongs.

Heather previously worked in finance and as an editorial writer for the Wall Street Journal and assistant editor at the Public Interest magazine. When not working, Heather loves to cook, hike, and make friends laugh. She continues to write opinion editorials and appears on a variety of radio and television programs. Heather lives in New York City with her husband, three teenagers, a dignified cat, and one squirrel-obsessed dog.

More about Heather HiggIns >>> (http://iwvoice.org/heather-higgins.php)



Sabrina L. Schaeffer, Executive Director

Sabrina is the executive director of both IWV and the Independent Women's Forum, IWV's 501(c)3 sister organization.

Sabrina's passion is persuasion.

Since her mother sent her Wendy Shalit's A Return to Modesty while in college, she's been borderline obsessed with persuading other women that a culture of liberty and responsibility is good for everyone, women in particular.

Sabrina has extensive experience in strategic communications, from behind the scenes to in front of the camera. She was a speech writer in the U.S. Senate. Sabrina's written work has appeared in Forbes, The Weekly Standard, The Washington Times, Foxnews.com (http://foxnews.com/), National Review Online, Policy Review, and American Enterprise Online. She's also a regular on TV news programs - you can catch Sabrina every Saturday at 11am on Forbes on Fox, and every week on Fox Business' After the Bell. She also has conducted extensive applied research to gain insight into the factors that shape public opinion.

Sabrina received an M.A. in Politics as well as an M.A. in American History from the University of Virginia, where she focused on the early Republic and media effects and political behavior. She got her start in the policy world as a young assistant to Ambassador Jeane Kirkpatrick while at the *American Enterprise Institute*.

In her free time you can find Sabrina driving her kids around. And when she's not in the taxi business, she enjoys playing the piano, making flower arrangements, or suffering through a Barre class. She spent time at Children's Hospital in Los Angeles as a child and today it remains her favorite charity – you'll see her running the Children's National Race for Every Child every fall in DC. Today, she lives in Virginia with her husband and three energetic children.



Carrie L. Lukas, Vice President of Policy and Economics

Carrie L. Lukas is the vice president for policy and economics at the Independent Women's Voice and managing director of the Independent Women's Forum. Lukas is the co-author of *Liberty Is No War on Women*, and the author of *The Politically Incorrect Guide to Women*, Sex, and Feminism, which was published by Regnery Publishing in May 2006. She is also a contributor to Forbes.com.

Lukas's commentaries have appeared in numerous newspapers such as *The Wall Street Journal, The Washington Post, USA Today, and The New York Post.* Carrie has testified before the House Ways and Means Subcommittee on Social Security. Before joining IWF, she worked on Capitol Hill as the senior domestic policy analyst for the House Republican Policy Committee. She is a graduate of Princeton University and Harvard's Kennedy School of Government. She currently lives with her husband and four children in Berlin, Germany.

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Victoria R. Coley, Communications Director

Victoria Coley is the director of communications at the Independent Women's Voice and Independent Women's Forum. Coley has secured experts spotlights in national news powerhouses such as Fox News Channel, CNBC, C-SPAN, Fox Business Network, CNN, MSNBC, Joy Behar: Say Anything and has placed commentary in publications around the country including Wall Street Journal, USA Today, Forbes, NY Daily News, Los Angeles Times, Denver Post, Politico, Roll Call, The Hill, U.S. News & World Report, Real Clear Politics, Tampa Tribune and more. Her deep understanding of, connection with, and passion for the media add to her success of interjecting leading experts into the news cycle.

Prior to joining IVVV, Victoria served as deputy communications director at Public Notice where she directed broadcast efforts for three educational campaigns and worked extensively on developing and implementing strategic communication plans.

As a regional manager at Chesapeake Bay Magazine, Victoria produced online-steaming advertising and promotional videos. Additionally, she organized company marketing events.

Victoria began her career at Fox News Channel as a producer and later also served as coordinator of the network's Washington booking unit. She landed numerous interviews with political heavyweights and newsmakers and coordinated breaking news coverage both in the bureau and in the field.

Cum Laude from Clemson University, Victoria received her bachelor's degree in Communication Studies with an emphasis in Media and a minor in Journalism. During her tenure as a student, Victoria served in multiple roles for the campus television network and was named a two-time All-American club lacrosse player.

Heather N. Madden, Director of Advocacy Projects

Heather Madden is the Director of Advocacy Projects at Independent Women's Voice where she helps develop, organize and implement IWV's advocacy projects.

Prior to joining IWV, Heather worked in political consulting where she helped shape messages and lead congressional, gubernatorial, and senatorial clients to victory nationwide, including some of the most competitive races in the country. Heather also worked for the U.S. House of Representatives where she assisted with constituent services and managed the schedule for a member of Congress.

Heather graduated Magna Cum Laude from the University of Georgia's School of Public and International Affairs with a B.A. in







Political Science and a minor in American History. She also holds an M.A. degree from the University of Georgia where she studied American Politics with a concentration in Campaigns and Elections.

Heather is a Georgia native who resides in Colorado Springs, Colorado with her husband.

Hadley Heath Manning, Senior Policy Analyst

Hadley Heath Manning is a senior policy analyst at IWV specializing in health care, entitlements, economics and fiscal policy.

Hadley appears frequently in radio and TV outlets across the country, including Fox Business' Cavuto on Business, Stossel Show, Fox News' Hannity, Your World with Neil Cavuto, and PBS's To the Contrary among others. Her work has been featured in publications including the Wall Street Journal, Forbes, POLITICO, Roll Call, Real Clear Policy, the Tampa Tribune, National Review Online, Daily Caller and Townhall.com.

Hadley was a 2012-2013 National Review Institute Washington Fellow and was named to Red Alert Politics "30 Under 30" list in 2013. Hadley graduated with distinction from the University of North Carolina at Chapel Hill as a Morehead-Cain Scholar with a bachelor's degree in economics and journalism. She lives with her husband in Denver, Colorado.



### Charlotte Hays, Senior Policy Analyst

IWF Senior Fellow Charlotte Hays is the editor of In Character magazine, which is published by the John Templeton Foundation and the former editor of The Women's Quarterly, which was published by the Independent Women's Forum. She has been a feature writer for the Washington Times and was the Washington bureau chief for the National Catholic Register. While at the Register, she reported from on the ground in Beirut in 1985 and won a first place from the Catholic Press Association for an interview with the novelist Walker Percy. She has written for National Review, Town & Country, New York magazine, the Wall Street Journal, and the Weekly Standard. A recovering gossip columnist, Charlotte is also coauthor of three books, Being Dead Is No Excuse: The Official Southern Ladies Guide to Hosting the perfect Funeral; Somebody Is Going to Die if Lilly Beth Doesn't Catch that Bouquet: The Official Southern Ladies Guide to Hosting the Perfect Wedding; and Some Day You'll Thank Me for This: The Southern Ladies' Guide to Being a "Perfect" Mother. Charlotte is also the author of Fortune Hunters, about dazzling marriages. A native of Greenville, Mississippi, Charlotte has a B.A. from Rhodes College in Memphis, Tenn.



Julie Gunlock is a senior policy analyst at Independent Women's

Voice. She is the author of the book From Cupcakes to Chemicals: How the Culture of Alarmism Makes Us Afraid of Everything and How to Fight Back.

Before joining IWV, Gunlock served as a Professional Staff Member on the Senate Homeland Security and Governmental Affairs Committee and on the House Homeland Security Committee, and on the staffs of Ohio Senators Mike DeWine, George Voinovich, and Tom Coburn. Gunlock has written about food and culture for the New York Post, the Washington Post, New York Daily News, the Los Angeles Times, USA Today, Forbes, U.S. News & World Report, The Washington Times, National Review Magazine, National Interest Magazine, the Tampa Tribune, and Townhall.com and is a regular contributor to National Review Online, BlogHer and Huffington Post. She has offered political commentary on Fox News, TheBlaze TV and other networks and is a regular guest on local, regional and national radio programs.

She lives in Virginia with her husband and three young, active, and perpetually hungry boys.



Prior to joining IWVoice, Amber worked for The Heritage Foundation in various capacities, including voter outreach and education during the 2012 election cycle. She also served as Director of Donor Relations at the Maryland Public Policy Institute and as an Adjunct Fellow at the Lexington Institute focusing on energy studies.

She is also a lifestyle photographer in her spare time and enjoys photographing many of IWF's events. Amber currently lives in Alexandria, Virginia, with her husband Tyler and their two young children.





Ashley B. Carter, Grassroots Director

Ashley B. Carter is the Grassroots Director for the Independent Women's Voice where she manages the state and local chapters of the Independent Women's Network.

Prior to joining IWN, Ashley worked in political consulting and was involved with campaigns at the national and state level. She also worked with state party counsels and leaders across the country. A native Marylander, Ashley cut her teeth in politics with a longtime Maryland Congressman and at the Maryland General Assembly.

Ashley received her B.A in Government & Politics from the

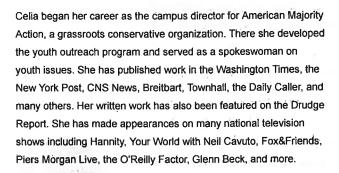


University of Maryland, College Park and holds a J.D. from the University of Baltimore School of Law. She also spent time studying at the Catholic University of America Columbus School of Law.

Ashley is actively involved in the DC community. She volunteers with the Junior League of Washington and promotes literacy development by working with several area nonprofits. An avid Nationals fan, Ashley loves to show her Natitude.

#### Celia Meyer, Communications Associate

Prior to joining IWV, Celia was a publicist at Regnery Publishing where she worked with many New York Times best-selling authors, including Mark Steyn, Phyllis Schlafly, Betsy McCaughey, and more.



Celia received her bachelor's degree in Economics from Hillsdale College where she graduated Cum Laude. During her tenure as a student, Celia wrote freelance for her student newspaper and was the founder of the Young American's for Freedom chapter on campus. She resides in northern Virginia with her husband.

### Natalie Le, Development Associate

Natalie assists IWF's and IWV's Development Department with research and administrative projects and oversees data migration. Prior to joining IVVV, Natalie was a legal intake officer at the ACLU of South Carolina.

She is involved in activism projects with pro-liberty non-profits, such as Students for Liberty and Young Americans for Liberty.

Natalie has a B.A. in Philosophy with a concentration in Politics, Philosophy & Law from College of Charleston and is currently studying public administration at the University of Charleston, South Carolina.

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### VICTORY IN HAWAI'I

Hard work does pay off. In Hawai'i's first congressional district, not only did Charles Djou win, Ed Case came in third.

Below is the executive summary of the survey IWV commissioned in Hawai'i.

You can also visit www.thecaseisclosed.com

(http://www.thecaseisclosed.com) to see the TV ad IWV ran in Hawai'i
(http://www.youtube.com/watch?v=D8Uh0EALdM0&
feature=player\_embedded).

- >> Click here for the HI-01 Survey Report (PDF)
  (http://iwvoices.com/pdf/100522-HI-01-FINAL.pdf)
- >> Click here for the H1-01 Special Election results (PDF) (http://iwvoices.com/pdf/HI-01-special-election-2010-results.pdf)
- >> Click here for the highlights of the poll (http://iwvoice.org /2010/05/23/independent-women%E2%80%99s-voice-celebrates-victory-in-hawaii-01-special-election/)

### **Executive Summary:**

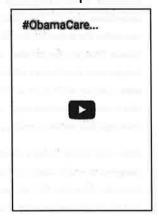
Independent Women's Voice (IWV) commissioned a survey in April 2010 to determine whether or not it would be worthwhile to engage in some form of electioneering activity in the special election in Hawaii's First Congressional District. The survey showed that Democrat Ed Case was leading a three-way election. Republican Charles Djou trailed him, and Democrat Colleen Hanabusa trailed the two of them. Moreover, the survey revealed — not surprisingly — that the second choice of Hanabusa voters was Case (he was perceived as more liberal than Djou), and the second choice of Djou voters was Case (he was perceived as more conservative than Hanabusa). And the second choice of Case voters? When asked for whom they would vote if they couldn't vote for Case, Case's supporters split almost down the middle - 40 percent went left, to Hanabusa, while 39 percent went right, to Djou.

The Democratic Congressional Campaign Committee (DCCC) faced a conundrum: Its leadership and top strategists believed that Case was the more electable of the two

### **FEATURED VIDEO**



The Women's Vote: Has Trump's Apology Been Accepted?



#ObamaCareHurts
IWV ON TWITTER

Democrats in the race; but the Committee could not simply declare itself in favor of Case, given Hanabusa's strong support from Senators Inouye and Akaka and many key Hawaii labor unions. So instead of choosing between Case and Hanabusa, the DCCC decided to spend heavily on the air with negative ads designed to drive voters away from Djou. The survey revealed that the DCCC strategy was working — and likely would have continued to work, had it been allowed to play out without any other outside input. Because the second choice for Djou voters was Case, DCCC advertising designed to raise Djou's negatives worked to drive Djou voters to their second choice — Case.

So even as the DCCC was publicly remaining "neutral" in the race, not choosing between Case and Hanabusa, in practice, their advertising campaign was bene?ting Case by driving voters his way. IWV determined to engage with an Electioneering Communication designed to inform voters of three key data points: First, that Case had voted 72 times for higher taxes IWV Report on Hawaii 1 Special Election GEB International Inc. during his four-year tenure representing Hawaii's Second Congressional District; second, that Case had received three "F" ratings from the nonpartisan National Taxpayers Union; and, third, that Case had recently hired indicted former Illinois Governor Rod Blagjojevich's political consultant, better known to the FBI as "Advisor B" on their surveillance tapes of Blagojevich — and that this advisor had counseled the disgraced former governor to try to swap Barack Obama's Senate seat. Unlike many third-party Independent Expenditure efforts, this ad was not a video press release with a fake or a minimal time buy behind it; it was a serious communication, produced by BrabenderCox, a well-regarded media consulting ?rm.

With 2,000 Gross Ratings Points behind it, the ad was designed to inform voters of Case's voting record and political behavior. When the IWV ad went on the air, Case was leading and the DCCC was pushing more and more voters every day away from Djou and toward Case. But within 24 hours of the launch of the IWV advertising campaign, according to press reports, the DCCC was publicly backtracking on its commitment to the special election; a few days later, DCCC Chairman Chris Van Hollen announced the DCCC's withdrawal from the race. Just as importantly, once Djou saw the IWV ad go on the air, he revised his own advertising campaign. His campaign pulled down the contrast ad it was running, and replaced it with a positive ad featuring Djou's wife making a direct appeal to the camera. So beginning in early May, the only ad on the air informing voters of Ed Case's ?aws as a candidate was the IWV ad. Data collected in rolling tracking surveys since the launch of the IWV advertising campaign makes clear that the IWV ad campaign did its job:



Case's image — which had been ?rmly set in the minds of Hawaii voters — began to change perceptibly. His negatives began to rise among key targeted groups, and his share of the vote began to fall back. By the end of IWV's ad campaign, Case's numbers had moved signi?cantly, and Djou had overtaken him on the ballot. What follows is a detailed case study of the IWV ad campaign in Hawaii's First Congressional District.

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Efficacy of the Efforts by Independent Women's Voice

Hawaii 1st Congressional District - Special Election

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### **Executive Summary**

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The survey showed that Democrat Ed Case was leading a three-way election. Republican Charles Djou trailed him, and Democrat Colleen Hanabusa trailed the two of them. Moreover, the survey revealed -- not surprisingly -- that the second choice of Hanabusa voters was Case (he was perceived as more liberal than Djou), and the second choice of Djou voters was Case (he was perceived as more conservative than Hanabusa). And the second choice of Case voters? When asked for whom they would vote if they couldn't vote for Case, Case's supporters split almost down the middle -- 40 percent went left, to Hanabusa, while 39 percent went right, to Djou.

The Democratic Congressional Campaign Committee (DCCC) faced a conundrum: Its leadership and top strategists believed that Case was the more electable of the two Democrats in the race; but the Committee could not simply declare itself in favor of Case, given Hanabusa's strong support from Senators Inouye and Akaka and many key Hawaii labor unions.

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What follows is a detailed case study of the IWV ad campaign in Hawaii's First Congressional District.

### Overview

On April 20, 2010, GEB International Inc. presented the findings of a benchmark survey conducted on behalf of Independent Women's Voice. The main purpose of this survey was to "determine the nature of the current political environment and to check to see the chances of IWV being able to exert its influence on the outcome of the election."

IWV believed that while much of the country was focused on special elections such as the one in Pennsylvania's 12th Congressional District, the special election in Hawaii's 1st Congressional district had the potential to be extremely symbolic -- perhaps even as symbolic as Scott Brown's winning the Senate seat previously held by Edward Kennedy. And since none of the national groups seemed to be focused on HI-01, IWV felt it important to at least check the potential for increasing the likelihood of a Republican victory.

At the time of the initial benchmark survey (April 18-20), GEB International Inc. looked at the three main candidates in the race: Colleen Hanabusa and Ed Case, the Democrats, and Charles Djou the sole Republican running. The race at that time was very close. Ed Case was getting 32 percent of the likely voters surveyed, while Charles Djou was getting 31 percent and Colleen Hanabusa was receiving 18 percent.

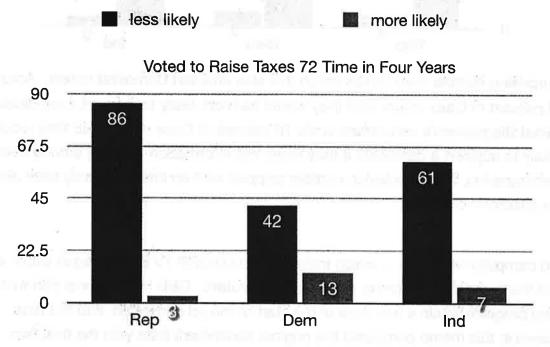
In terms of the candidates' overall favorable ratings, Ed Case had a 61/16 Favorable to unfavorable ratio, Charles Djou had a 51/31 and Colleen Hanabusa had a 37/44. What is important to note here is that all of the candidates had very defined images in the eyes of the voters, with an average of about 80 percent having either a favorable or unfavorable opinion of each. This meant that to be successful in changing the course of the election, the effort put forth by IWV would have the challenge of not *creating* a negative opinion of Ed Case, but rather *changing* the public's opinion of Ed Case – not an easy task, given the limited timeframe and budget.

It should be noted that given how tight the race actually was at the time of the benchmark survey, GEB International Inc. suggested through the analysis of the survey data that in order to be successful in affecting the outcome of the election, IWV's

messaging would need to be precisely targeted in order to sway the vote just 2-3 points away from Ed Case and 2-3 point towards Charles Djou.

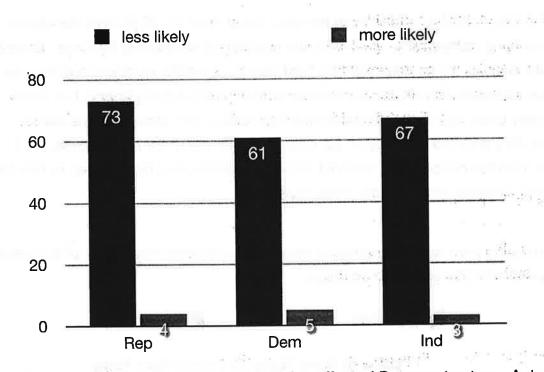
With the information provided from the data set of April 20, 2010, IWV decided to fund an advertising campaign in HI-01 with the purpose of weakening Ed Case. Based on the data analysis it was clear that the best way to move the numbers quickly was not to focus on healthcare, President Obama or the Democrats in general, but rather use some very good opposition research that had tested very strongly in the survey. Namely, IWV decided to focus on Ed Case's voting record for higher taxes, his Fratings from the nonpartisan National Taxpayers Union, and his decision to hire former Governor Blagojevich's political consultant.

I am including here two of the original data sets to illustrate the power of the messages IWV decided to use in its ad campaign:



As can be seen above, the votes to raise taxes cut against Case by tremendous margins among Republicans and Independents. Even among Democrats it cut against him by a 3:1 ratio. And among people who said they were already voting for Case, 49 percent compared to 9 percent said they were less likely to support a candidate who voted to raise taxes 72 times in four years.

Even stronger than the tax votes was the issue of Case hiring Rod Blagojevich's political consultant. The numbers on this issue were through the roof:

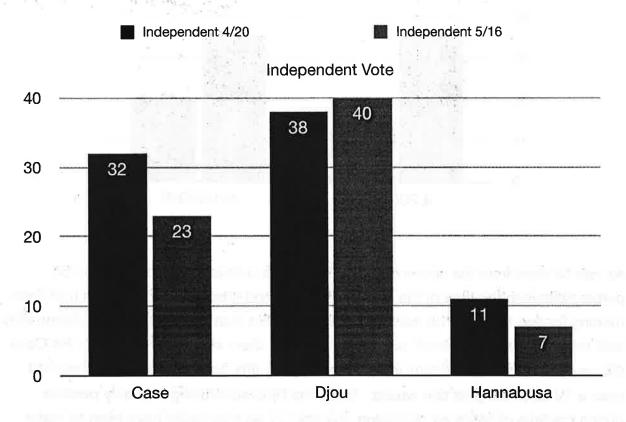


The surprising number here is how much this also affected Democrat voters. Actually, only 3 percent of Case voters said they would be more likely to support a candidate who hired Blagojevich's consultant, while 70 percent of Case voters said they would be less likely to support a candidate if they knew this information. In fact, among every key demographic, the Blagojevich number popped with an intensity rarely seen across such a spectrum of voters.

The ad campaign activities -- which included a 2000 GRP TV buy -- began within a few days of the mail-in ballots being sent out to the voters. GEB International conducted a tracking program within a few days of the start of the ad campaign, and the data discussed in this memo compared the original benchmark data with the final two samples of the tracking data.

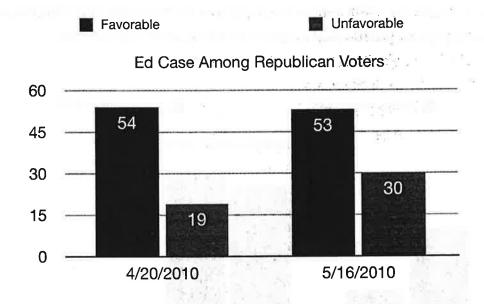
What follows is a brief series of graphs that show the race on April 20, 2010 and then again on May 16, 2010.

This first graph shows the movement of the race among Independents. Ed Case had very good numbers among most Independents when the race started -- he had been branded as a moderate. This is how he and much of the media branded his positions. IWV's ad campaign exposed Case's record as being anything but that.



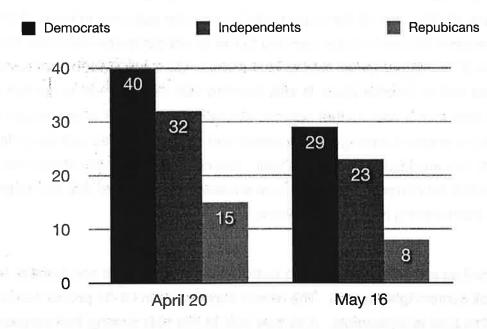
One of the several challenges faced by IWV was to break off some of the vote Ed Case was getting from Republicans. In the data of April 20, Ed Case was receiving 15 percent of the Republican vote. Clearly, Djou would have difficulty winning if Case continued to pull one out of every six Republican votes; stripping these votes from Case and moving them to Djou became an essential element of the ad campaign.

Below is a graph showing the movement of Case's favorable to unfavorable rating among Republicans:



As can be seen from the above data set, Ed Case's unfavorable increased by 50 percent between the time of the benchmark data and after the ad campaign had been running for two weeks. The data from May 16 shows that among the Republicans who said they "saw, read or heard" something to make them less likely to vote for Ed Case (26 percent of the Republicans interviewed), nearly fifty percent (48.5) said they had seen a TV ad in the past two weeks. Since the Djou advertising was only positive during the time of IWV's ad campaign, the only TV ad they could have seen to make them less likely to support case was IWV ad.

The net result of how the vote breaks down for Ed Case in terms of party affiliations is as follows



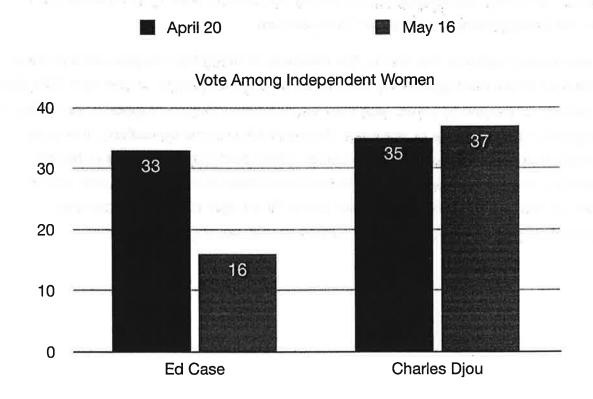
The above data set is of critical importance. As stated earlier, Case's vote among Independent voters fell from 32 to 23 percent. Now it is also evident that among Republican voters, his support fell by almost 50 percent, from 15 to 8 percent, and it even fell among Democrats from 40 to 29 percent.

As was stated earlier in this memo, the message of hiring Rod Blagojevich's political consultant broke hard against Ed Case even among Democrats. In the April 20th data, 61 percent of Democrat voters said they would be less likely to support a candidate for Congress if they knew he or she hired Blagojevich's political consultant. It is quite possible that since 19 percent of Democrat voters said they "saw, read or heard" something in past few days that made them less likely to vote for Ed Case, and of these 19 percent, 67 percent said they saw a TV ad, that the IWV Independent Expenditure had an important effect on Democratic voters as well.

## Conclusions

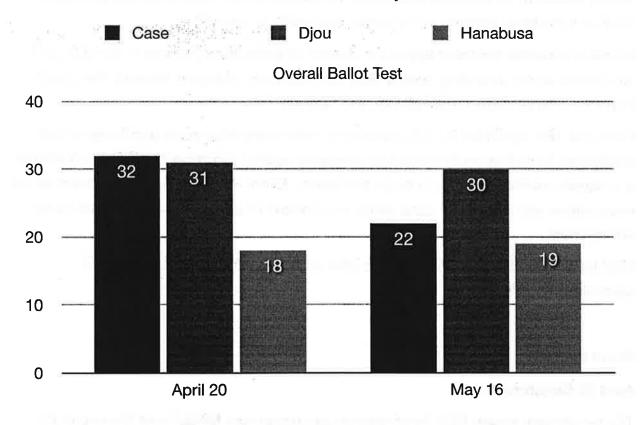
Upon learning of the closeness of the race in Hawaii's special election for the 1st Congressional district, and of the opportunity to alter the outcome in favor of Charles Djou, Independent Women's Voice decided to run an ad campaign exposing Ed Case. The purpose of the ad campaign was to shift Independent and Republican votes away from Ed Case and to Charles Djou. It was decided that the best way to do this was to target the voters with a very limited number, but very effective set of messages that would erode his support among Independents and Republicans as well as quite possibly hurt him among Democrats as well. The data above clearly shows that over the time the IWV ad campaign ran, Ed Case weakened among the two key target groups and even among his Democrat base.

IWV sees itself as a vehicle for targeting both independents (male and female) and women (of all center-right flavors). The recent experience in HI-01 proves beyond a doubt that this goal is achievable. A simple look at the vote among Independent Women tells the whole story:



As can be seen by the previous chart, Case fell by 17 points (a 50 percent drop) among Independent Women, and Djou went up by 2 percent for a 19 point swing.

And the final data shows the race as follows, as of May 16:



### About GEB International Inc.

For well over a decade, GEB International Inc. has been electing leaders around the world. Founded on the principle of providing the best quality turnkey solution for survey research, polling, and strategic communication services, GEB has distinguished itself as a leader in the area of campaign and political consulting

All our experience has been applied to dozens of political campaigns in the U.S. and around the world, including Austria, Bulgaria, Romania, Hungary, Albania, the Czech Republic, The Ukraine, Israel, Serbia, and Kosovo.

Given the new dynamics in U.S. campaigns, with many third-party and independent challenges as well as multi-candidate primaries against incumbents, GEB International is uniquely qualified to analyze these situations. Every President and Prime Minister we have helped elect has been done within the context of a multi-candidate/multi-party environment.

GEB International is well positioned to offer strategic advice is this new era of campaign environments.

### About the Data

## **April 20 Benchmark**

The benchmark survey GEB International conducted was fielded over the two night period of April 19th and April 20th. 800 respondents were interviewed from a list of voters who had voted in at least two of the past three national/federal elections and who were screened in the initial questions to ensure they were "likely voters". Thus, the sample of 800 represents a universe of likely voters intending to vote in the special election.

Since voters do not register by party in Hawaii, it was difficult to determine the actual breakdown by voter registration in the district. However, thanks to previous research and information gathered from various sources in Hawaii, the approximate breakdown in the 1st Congressional district is as follows: 20% Republican, 35% Independent and 40% Democrat.

Our random sampling methods resulted in a universe that was 53% female to 47% male. The universe was also made up of 28% McCain voters and 62% Obamas voter. In addition, the party self-identification resulted in a universe of 18% Republican, 38%

Independent and 41% Democrat. Given the proximity to the actual numbers with all three of these demographics there was no need for weighting the sample and the overall accuracy of the survey was +/- 3.46%.

## **Tracking**

The tracking survey began on May 4th with baseline sample of 300. Starting on May 6th, GEB International performed a tracking survey of 200 interviews with subsequent interviews of 200 interviews on May 10th and May 12th. This meant that on May 6th we had a combined sample of 500 interviews (May 4th plus May 6th), on May 10th 400 interviews (May 6th plus May 10th) and on May 12th 400 interviews (May 10th plus May 12th). On May 16th we interviewed 300 respondents so that we would finish with another combined 500 person sample (May 12th plus May 16th).

Interviews were conducted from the same list of voters as the benchmark (voters who had voted in at least two of the past three national/federal elections and who were screened in the initial questions to ensure they were "likely voters").

The margin of error for the combined 500 samples was  $\pm$  4.4 and for the combined 400 samples it was  $\pm$  4.9.

## Exhibit 33

## IWV'S UNIQUE AND CRITICAL ROLE IN MARK SANFORD'S VICTORY

You may have heard that Mark Sanford had a dramatic win in the May 7th special Congressional election in South Carolina's 1st District, winning by roughly 54% to Elizabeth Colbert Busch's 45%.

What you may not know is that Independent Women's Voice was the only independent expenditure of a significant size on the winning side of the ledger.

Two weeks ago, after the National Republican Congressional Committee had decided to drop out, none of the big groups had come in to help, and PPP polling showed Sanford dramatically down by 9 points., we decided to test if it would be possible to move the needle enough to matter in a race that all thought all but over. We may be small, but we didn't see how we couldn't at least try.

After 4 days of testing to 10,000 likely voting Republican and Independent households, we discovered that the biggest swing issue was ObamaCare repeal. The contrast between the two candidates on this issue was clear, as Mark Sanford had signed the ObamaCare Repeal Pledge and his opponent had not.

You can click here to view the results of our message testing. (http://iwvoices.com/130430\_IWVSC-

#### 01 post test messaging survey results.pdf)

After the message testing was completed, this is what we knew for sure: Without outside help, Sanford would not win. We knew our messaging worked. We knew this wasn't about Sanford but about whether a free market conservative or a liberal would hold the seat both short term and for potentially a long time. And we believed that our messaging could stop the free fall, help Sanford rally, and even turn the tables.

Accordingly, IVVV spent about \$250,000 in the last week of the campaign. Of that, \$160,000 went to broadcast and cable television and print advertising, and live GOTV calls.

Additionally – taking special care with South Carolina's rather restrictive laws on auto-dialed phone calls – we supplemented

#### **FEATURED VIDEO**



## The Women's Vote: Has Trump's Apology Been Accepted?



#ObamaCareHurts
IWV ON TWITTER

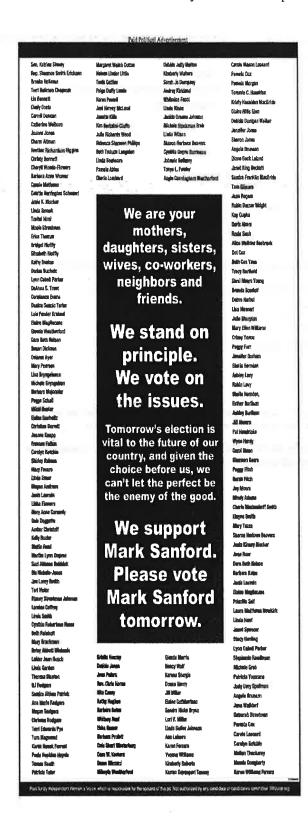
that with innovative, non-advocacy, factual, interactive quiz calls. These were not push polls. Instead they used the same documented information conveyed in our ads.

There was no red meat. We believe voters, at least our voters, are pretty smart and that people didn't need us to tell them what to think, they just needed to be made aware of relevant facts on issues they care about, like ObamaCare repeal, and why turning out to vote is so important.

As our last ad – done with local grassroots, published in The Post & Courier, and signed by over 200 resident women, and displayed below – said: "We are your mothers, daughters, sisters, wives, co-workers, neighbors and friends. We stand on principle. We vote on the issues. Tomorrow's election is vital to the future of our country, and given the choice before us, we can't let the perfect be the enemy of the good. We support Mark Sanford. Please vote Mark Sanford tomorrow."

On May 7th, they did.





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(HTTP://PARACOM.PARAMOUNTCOMMUNICATION.COM/PHASE2/SURVEY1/SURVEY.HTM?CID=WLWLOV&130572938)



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Sign up for Newsletter (http://paracom.paramountcommunication.com/phase2/survey1

/survey.htm?cid=wlwlov&130572938)





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Independent Women's Voice is a 501(c)(4) nonpartisan, nonprofit organization for mainstream women, men and families. IWV is the sister organization of the Independent Women's Forum.

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## Exhibit 34

# HEATHER HIGGINS: MOVING THE NEEDLE

Conservative warrior reveals the secrets to tipping the scales in the Right's favor at the Freedom Center's Restoration Weekend.

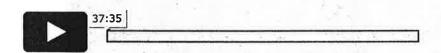
November 30, 2015 Frontpagemag.com



Below are the video and transcript of Heather Higgins' speech which took place at the David Horowitz Freedom Center's 2015 Restoration Weekend. The event was held November 5-8th at the Belmond Charleston Place Hotel in Charleston, South Carolina.

10/17/16, 4:01 PM





Heather Higgins (https://vimeo.com/145972410) from DHFC (https://vimeo.com/user15333690) on Vimeo (https://vimeo.com).

Heather Higgins: If you think about it, what percentage of the voting population at this point are Independents; whether they are formally Independents in the Independent party or they simply think of themselves that way? What percentage of the electorate – any guesses?

Next Speaker: (inaudible).

Heather Higgins: Correct. So it's actually larger than Republicans. And now to be fair a lot of these people are more conservative than Republicans or more liberal than Democrats.

Next Speaker: What was the number?

Heather Higgins: It's about 40, 45 percent, and it's because they don't self-describe that way, but that's a ballpark number. It used to be about a third. It's now grown because of the disenchantment with both parties.

All right, women. Women are now – would anyone like to guess what percentage of the electorate women are?

Next Speaker: (inaudible)

Higgins: I heard 54, but it's 55. Thank you. You've made my case even better. Women also vote at a higher rate than men do; so for the men in the audience who think that the

last thing they want to do is support a women's group, understand that if you have any interest in winning elections you have to think of this as a market segmentation issue and you can't leave out that part of the market if you want to win. So if you want to win these constituents, you would think that we would be good at going after them, but in fact the Republican Party has had a pretty terrible track record at going after exactly these people.

And so my theory was, well, if you want to get a different result maybe you ought to do something different. And so for the last 5 years I have been working to provide the margin that matters in races that are toss-ups or worse. We have had a string of wins because when we look at these things we try to think, how do you play chess rather than playing checkers? And we approach it much as the way the NRA does. When the NRA decides that they want a particular candidate to be elected because he's good on their issue, sometimes they run ads on guns, but very often they run ads on something entirely different and never even mention guns because their goal is to win the race, not to make themselves feel good about the ads that they've run.

Similarly we try to think about what is it that we need to say to have impact with these people. It's been remarkably successful. In the back of the room there's a two-sided handout for those who are interested. We now have effectively a 90 percent win rate on races that were dubbed toss-up or worse as well as some messaging campaigns, just to see how much we could move the needle. And you would think that this would be a good thing, but in fact Pat Cadell is not the only one who feels like he is racking up people who don't like him. I have been racking up a number of cohorts that basically wish I would go away, and that's political consultants and campaign consultants. And they dislike me because I'm different. I do different things and the comparisons get awkward and it's particularly awkward for them when they get a lot of donors who keep urging them to be more like me or to do what we're doing.

Just some areas of difference – in deployment, they tend to support their friends and we tend to go do what the data tells us to do. Their driver for what they do tends to be commissions, sadly. Money goes where the commissions are greatest, as opposed to what will actually win, and their metric of success (as you can really tell in 2012, but elsewhere as well) is how much they spend, and ours is whether we actually win and the data and the results that we get for where we were able to move the needle.

I'm not complaining. It's good to be wanted to be gotten away with for the right reasons. And there are lots of people who, as a corollary to that, actually like us, including long-shot candidates that others had given up on, donors who want a high return on their investment for their political dollars and Americans who may not be large donors themselves but they want to see things that are strategic that win and that start getting the country back on track.

So here's what I've learned and that I want to encourage you to steal and incorporate. I'm going to break it into three categories. The first is talking about the messenger, the second is about messaging and the third is about the message vehicle. All three components work together if you're going to be persuasive with audiences that normally don't tend to like to hear from Republicans and conservatives.

Let me talk first about the messenger. Branding matters. If you get a piece of mail, or you see an ad, or you get a phone call, and it's from some group that you think you don't like, you never pay attention to what they have to say. You've hung up on it or tuned it out before you ever get a chance to penetrate. So we have worked hard to create a branded organization that does not carry partisan baggage. It's called Independent Women's Voice. Being branded as neutral, but actually having the people who know know that you're actually conservative puts us in a unique position. Either groups are conservative or they tend to be genuinely mushy middle, in which case you have no idea where they're going to come out on a particular policy issue. Our value here (and what is needed in the Republican conservative arsenal) is a group that can talk to those cohorts that wouldn't otherwise listen but can do it in a way that is taking a conservative message and packaging it in a way that will be acceptable and will get a hearing.

And measures of how this plays are indicated by the fact that we've used it in places as diverse as Massachusetts. Our first effort at this strategy was the Scott Brown race in 2010 – redefining that as being about healthcare in the 41st vote when everybody else was talking about the economy and national security issues that had polled well that September, but by January were not the ones that were going to close his 20-point gap.

On the other side of the ledger we went into this Mark Sanford race after the NRCC had pulled out. In that case we needed to be able to talk to evangelicals to get them to frankly hold their nose and vote for Mark in order to be able to hold onto that seat and not have the liberal win it and hold onto it as has happened in other states when liberals pretend to be moderates. Or, most recently in Kentucky where we went into the race right before the end. Everybody was sure that Bevin was going to lose the governorship and we looked at it and said, "This is really close. We think we could make a difference here. It's worth trying." I think only 15,000 of the people we spoke to were Republicans and all the rest were Democrats and liberals and Independents. So, by having this branding you can go places that perhaps if you're the Republican National Committee or the RGA – which play incredibly important roles, but they can't get access the way that we can.

On the message there are four different areas that I want to focus on if you want to be effective with these cohorts.

The first is tone. We've all heard the phrase, "don't ask, don't tell." My variant on that

http://www.frontpagemag.com/fpm/260909/heather-higgins-movin...

is don't bash and don't yell. If you want to get a hearing with these audiences you need to be much more polite, much more giving, much more generous, much softer, much more empathetic. You want to lead with concern for people; not things, not money – even though for male Independents economic arguments matter, but you need to frame it in a way that shows that you care.

And that leads us to our second point, which is the style. Humor and facts are incredibly important – facts from trusted sources. One of the examples of humor working well – floating around this conference somewhere is Richard Miniter, who runs a new group called American Media Institute, which I would encourage you all to find out about it. It's a non-profit that is also very important in the facts department because he is getting news stories published as news stories in mainstream media rather than just as opinion pieces. So they've got tremendous weight, resonance, and we can then use them in a way that you can't use an opinion piece to have credibility with these cohorts.

But I was working in 2012 on trying to move women who were soft Obama approvers into being Obama-disapproving and I wanted to make an ad that they would like and that they would think was speaking to them from somebody who understood them and that they would then share with their friends. And we in fact – I was talking about this with Rich and he said, "Oh, you mean the women that I'm dating. I've dated tons of women like that." Obviously, this means that all of us ought to go find Rich better dates. But he in about 15 minutes wrote the script for me of all the things that these women complain about in their other boyfriends. And then we pivoted at the very end where you have two women on a couch, talking about this relationship that had not worked for the last 4 years. It had started with such promise but he'd been so disappointing in so many possible ways and at the very end you zoom in on a hope and change poster and Obama winks or smiles. It's incredibly funny and when we showed it we were able to move disapproval 9 points in the right direction and diminish approval by 6 points. And, so, we did a series of these ads and they worked really well.

We found out later that a bunch of people had said to the RNC, "You need to give Heather money to get this more broadly on the air," and instead what happened was the RNC came out with its own version of that ad – same concept of a woman talking about her breakup with her boyfriend who at the end turns out, in their version, to be a cut-out of Obama sitting on the other side of the table. But they took out everything that made it empathetic and funny to these women and turned them into the butt of the joke so that Republican donors would think it was funny, but no swing-voting women would ever think it was funny, and if anything you would kind of harden them in their defensiveness about this position.

So, using humor to get a viewing, using it the right way with the right tone is important. Using facts (which I'll talk about in a little bit) and often as doing it in the form of questions where you assume that the listeners can make up their own mind rather than

being a hammer on an anvil and telling them what to think.

Men in the audience – how many of you have wives who like you to tell them what to think? Oh, there's a dearth on hands. I wonder why. Okay, and for people who think that they are Independents – how many of them want to be told what to think? By definition, male or female, if you self-describe as an Independent you want to believe that you're making up your own mind. So, part of the subtlety of this is to make sure that even though you are leading people to a conclusion, you don't do it in a way where you say, "This is what you need to think." Because all you'll do is create a backlash.

The third piece of effective messaging is the values component. And by values, I would recommend to all of you that a marvelous book to read is by Jonathan Height. It's called, *The Righteous Mind*, and it explained to me why what I was doing instinctively actually had scientific validity and worked. He wrote this as a liberal Democrat trying to explain to the Democratic Party why they were so tone deaf about issues that mattered to conservatives and obtuse about why we would care about the flag and why we would care about family and why we would care about religious freedom (among other things). In the process of writing the book he had an epiphany that he actually agreed with the conservative understanding of human nature.

If you get to Chapter 11 and 12 (which are the most important chapters in the book for his epiphany, which most reviewers did not get to; so if you cheat and just read the reviews you won't get to that); he has since actually moved even further to the right and he's now self-describing as a conservative because he was trying to have a class at NYU showing films about how people reacted to other statements and one of the lesbians in the class decided that he had triggered her and that that was microaggression. And he then got embroiled in one of these dramas that you've heard so much about in colleges and it has totally finished the move of him along the philosophical trajectory. But it is where – for those of you who are familiar with Arthur Brooks — a lot of what he says at AEI about values – Jon is one of his best friends and that has influenced a lot of that. It is a great book to read.

And the reason that I reference it here is that a lot of the values that conservatives talk to are only held by conservatives; whereas if we talk about fairness and harm, they are held by 100 percent of the country. Now on fairness, the hard left will have a definition of fairness that is redistributive and different than everyone else although the words still will work with them. So you're still talking to 80 percent of the country.

If you talk about money, that works with nobody because it's not a value, except for very few people who sort of internally translate what that is.

So, repackaging your arguments in terms of who they help and who they hurt, and whether or not they are fair is incredibly helpful and I will show that in the next example

when I talk about content, which is the fourth piece of messaging.

I have finally figured out, I think, why this is the case that the right always wants to talk about what moves the base. They don't believe that people's minds can be changed and so, therefore, they use a form of, essentially, consumer brand marketing in which (if you are making Cheerios cereal) you go out and you find out people who love Cheerios cereal and you figure out why they love Cheerios cereal and then you do in your ads those arguments that work for them in the hopes that other people who share those values will also then discover Cheerios cereal.

The left does it very differently, and I discovered that I am an instinctual Democrat. The left says, "Hey, the base are going to vote with us anyway. I don't need to worry about them except in a primary. The reach voters I'm never going to get. That's not a good place to spend my money. What I need to worry about are the people who make that incremental difference about whether or not I win or lose. That's the swing. Those are the people I need to talk to."

And, if you have ever wondered why Obama, and Hillary and all the rest talk about, for example, the middle class – and what they want to do and how the rhetoric is a mile away from their policy – it is because they are talking to the middle.

The model of the right is we talk to the base and then compromise on our policy and give up what we should be going for on our policy. Whereas the left talks to the middle, but then implements their policy, as they understand it to be. And I would argue that the left has a far superior model. We should be talking to the middle and then doing the principled thing in our votes, but explaining it in a way that it is appealing to the average American voter.

The thing that I do that goes one step beyond that is, where possible, I look to try to figure out -- and this is because in my youth I was Bob Bartley's first-ever intern at the Wall Street Journal. And, so, when you're writing editorials there and you're trying to be persuasive, one of the things that I tried to think about is, "Why do people disagree with me? What is it that's stopping them from agreeing with us and is there something that I can say that will change that predicate thought that will change how they vote?"

And I have started to implement this as political practice after Wisconsin. You all remember the legislative walk-out. You were probably glued to your television sets as I was watching what was going on. I was distressed to discover that the longer it went on the more Walker's numbers went south on this union fight. I started Googling up the ads that our friends were running to support the Governor and was very concerned.

Full disclosure – I'm from Manhattan. I know that gives me horns. I'm from New York. It's a curse – Sodom and Gomorrah on the east. But, growing up there as a

conservative means that you have a different ear. And I took one look at these ads and I went, "Oh, my gosh. This certainly will not help and it may very well hurt." So, I raised some money and I went into Wisconsin right after this had happened and did survey work and polling work and came away not only with the conclusion, which the Governor reified, but also it was really clear that our ads had hurt. But, more importantly, I thought I had an insight into why Independents and women had gone upside down on the Governor – which was that the people who were supporting the unions (outside of the hard left, who have their own reasons for being there, for collective everything) were locked in a 1950s understanding of union compensation for public sector workers. And, they believed that they were sacrificing to hold these jobs. That meant that it was already unfair – the situation they were in – and what Walker was proposing would have been even more unfair to these people.

So, I was able, finally, before the Walker recall, to raise some money to do a test and this is where I had my epiphany.

I got a call from my pollster and my political guy telling me that they had done the baseline test because I was going to break the universe of Independents into two cohorts – one that was going to be my control group and the other was going to be my treatment group to see if what I wanted to do actually worked.

And, they said, "We have good news and bad news. The bad news is that there are only two issues that work in Wisconsin. The good news is that they work really well; and so we should do ads on the billion dollars saved and the differences in the teacher outcomes because those are the issues that work. We should put all the money in that." And I said, "Thank you very much, gentlemen, but we're not going to do either." "What do you mean, we're not going to do ---" And, I said, "Well, if you look, if there's reportedly \$10 million that's being spent by the Walker campaign and the outside groups, and it's on exactly those issues...so, that's already being done. We're going to do this other thing of trying to see if we can change people's minds about the predicate thought that is leading them to believe that what he's proposing is unfair."

They spent an hour and a half arguing with me on the phone – that they had had 30 years of campaign experience each and what I was going to do was a total disaster and couldn't possibly work. And I'm perfectly happy to be proven wrong. I have just been itching for over a year to try this. And, so, they finally decided they would humor me and were looking forward to explaining to me how wrong this was.

But, to their shock and amazement when we got done, while the control group was right where the rest of the state was with Walker leading Barrett (this was 2 weeks before the election) by 5 points, the people who had gotten our messaging were now at 36 points for Walker – so, a net 31 point gain.

You're not going to repeat that all the time. The state of Wisconsin was unbelievable fixated on this issue so there was a staggeringly high listen rate to the phone calls that we drove into people's houses with quizzes and so-forth. We had four different calls, two minutes long each. Seventy-five percent of households listened all the way through to all four calls. Ninety-five percent of households listened all the way through at least one call.

But the point was proven, and we have since done that on healthcare and we've done it on economics. And I think there are other opportunities to do that. And it's part of what we did in Kentucky.

The third piece of messaging after the messenger and the message itself is the message vehicle. And, obviously, this can take an awful lot of forms. TV ads are the first things that people think about, but there's also phone and radio and mail. There's grassroots. There's social media. In this I would encourage you all to focus on what is effective, not just what brings in the biggest commissions. And there are wrinkles to this that I think that our team really needs to work on and one of the biggest is in the gray area of grassroots.

Charlie Kirk is sitting in the back. I would encourage all of you to – you're talking the last day, aren't you? So change your planes and stay for the very last panel. Charlie runs Turning Point USA, which is a wonderful new organization which is trying to round up college kids and now high school kids (in fact, he's captivated my son, who's going to start a chapter at Stuyvesant High School in New York) and turn them into basically Moveon.org for the right. And he's doing a wonderful job with it.

And the reason that I want to flag this as particularly important is one of my frustrations with the Republican Party and conservative efforts generally is that so much of our grassroots effort is wasted money. We go in, we parachute – either we have single-issue groups or we have groups that are so top-down that they don't have indigenous buy-in (although some of them are now starting to change that for the good). Or, most often, you will find that political campaigns will parachute into an area, pay top dollar to consultants and staffers to round up people from other groups (and often people – so a lot of your volunteers are not from that area and sometimes not even from that state) and then they go and dismantle what little organization they've created after the election is done and have to go do it all over again.

And part of that is because they believe that the secret to all this is data. But if you look at the left, the left understands human psychology far better than the right does and they know that data is just a tool. And, what really grassroots is about is relationships. That's why Organize for America is in on the ground and stays on the ground. And once they're there, they don't leave. They're there in off years. They're there in on years. It's the same person who's there for 3, 4, 5, 6 years. When you get a call on the left that

you should vote for somebody or turn out for something, it's from somebody that you've met. It's from somebody that you have a relationship with. And yes, the left has great data, but they do it to advance the relationship.

We have dismantled a lot of our infrastructure for relationships on the right and it is tremendously important to build them back. When I was playing in a lot of the closely contested senate races in '14, one of the things I was given money to do was to see if we could – we're trying to build out something called Independent Women's Network, which is a grassroots effort for this genuinely indigenous, for women who are not yet (and men) part of (because it's interesting – men want to go where there are a lot of women – don't blame them) and create these groups that are not for people who are already members of grassroots groups (because why waste the money getting them twice), but to encourage and persuade.

Basically the small evangelical group model for getting people to feel that there's a community that actually agrees with them and they will do what they do because that's what their friends do. We forget how incredibly hard it is if you're, say, a 25-year-old female; you don't even know any Republicans. All of your friends are Democrats. How difficult it is to even say that you might be a conservative on some issue or other? We're talking about identifying with social pariahs. What 25-year-old wants to do that, or even 20-year-old? So, creating communities where people can find others that they like and then slowly absorb their views is important.

On New Hampshire we didn't have time to build that kind of an infrastructure, so I had always wanted to test the efficacy of issues messaging versus standard political messaging. And so we created two groups against the test groups and I will tell you this – with Republicans it really doesn't matter what you send them because they're going to vote anyway. But if you're talking with swing voters and independents, it's incredibly important. We gained an additional 6 points for talking in an issues-only non-partisan way.

But if you look at the data overall, it actually cost Scott Brown 3 to 4 points to have a household be visited by somebody from out of the state and out of the area. It creates a backlash. It's basically not too different from Chicago where if you're going and knocking on doors and you're not from that ward, it matters. It's part of why the effort by Moveon.org to turn Texas blue backfired, because they were importing people to tell people from Texas how to vote.

So, building indigenous infrastructure – the social relations of grassroots – is going to be incredibly important to a successful effort to reach out to these cohorts.

So, I have given you my observations built over the last several years and I ask that you join me in taking back our country, winning races that we are not supposed to win, and

building a majority that will do the hard work that we need to do in order to stop the metastasizing march of the ideas of the left.

Thank you.

10/17/16, 4:01 PM