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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

2010Open to Public
Inspection**A For the 2010 calendar year, or tax year beginning** OCT 1, 2010 **and ending** SEP 30, 2011**B** Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organizationINTERNATIONAL CENTER FOR RESEARCH ON
WOMEN**Doing Business As**

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

1120 20TH STREET N.W.

Room/suite
500 N

City or town, state or country, and ZIP + 4

WASHINGTON, DC 20036

F Name and address of principal officer SARAH DEGNAN KAMBOU

SAME AS C ABOVE

D Employer identification number

52-1081455

E Telephone number

202-797-0007

G Gross receipts \$ 12,668,817.**H(a) Is this a group return for affiliates?** ☐ Yes ☒ No**H(b) Are all affiliates included?** ☐ Yes ☐ No
If "No," attach a list (see instructions)**H(c) Group exemption number** ▶**I Tax-exempt status** ☒ 501(c)(3) ☐ 501(c)() (insert no.) ☐ 4947(a)(1) or ☐ 527**J Website:** WWW.ICRW.ORG**K Form of organization:** ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L Year of formation:** 1977**M State of legal domicile:** DC**Part I Summary**

Activities & Governance		Revenue		Expenses		Net Assets or Fund Balances	
1	Briefly describe the organization's mission or most significant activities	SEE PART III, LINE 1.					
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets						
3	Number of voting members of the governing body (Part VI, line 1a)	3	20				
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	20				
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	104				
6	Total number of volunteers (estimate if necessary)	6	18				
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.				
7b	Net unrelated business taxable income from Form 990-E, line 34	7b	0.				
8	Contributions and grants (Part VIII, line 1h)						
9	Program service revenue (Part VIII, line 2g)						
10	Investment 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)						
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)						
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)						
14	Benefits paid to or for members (Part IX, column (A), line 4)						
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)						
16a	Professional fundraising fees (Part IX, column (A), line 11e)						
16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 352,230.						
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)						
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)						
19	Revenue less expenses Subtract line 18 from line 12						
20	Total assets (Part X, line 16)						
21	Total liabilities (Part X, line 26)						
22	Net assets or fund balances Subtract line 21 from line 20						

Part II Signature Block

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

Sign Here

Signature of officer

Date

PATRICIA DAUNAS, INTERIM CHIEF ADMIN. OFFICER
Type or print name and title**Paid Preparer Use Only**

Print/Type preparer's name

DAVID F. GRALING CPA

Preparer's signature

David F. Graling CPA

Date

6-11-12

Check if self-employed ☐

PTIN

Firm's name ▶ GELMAN, ROSENBERG & FREEDMAN

Firm's EIN ▶

Firm's address ▶ 4550 MONTGOMERY AVE SUITE 650N
BETHESDA, MD 20814-2930

Phone no. (301) 951-9090

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

☒ Yes ☐ No

SCANNED JUL 10 2012

RECEIVED
JUN 21 2012
IRS-OSC
OGDEN, UT

21/12

Part III Statement of Program Service Accomplishments

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

☒ **X****1** Briefly describe the organization's mission

ICRW'S MISSION IS TO EMPOWER WOMEN, ADVANCE GENDER EQUALITY AND FIGHT
POVERTY IN THE DEVELOPING WORLD. TO ACCOMPLISH THIS, ICRW WORKS WITH
PARTNERS TO CONDUCT EMPIRICAL RESEARCH, BUILD CAPACITY AND ADVOCATE
FOR EVIDENCE-BASED, PRACTICAL WAYS TO CHANGE POLICIES AND PROGRAMS.

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported**4a** (Code:) (Expenses \$ 5,378,778. including grants of \$ 363,572.) (Revenue \$)**RESEARCH AND PROGRAMS:**

RESEARCH AND PROGRAMS FOCUSES ON RESEARCH, TECHNICAL ADVISORY SERVICES
AND ADVOCACY IN THE FOLLOWING PROGRAMMATIC AREAS - GENDER AND HIV,
ECONOMIC DEVELOPMENT, GENDER VIOLENCE AND RIGHTS, AND STIGMA AND
DISCRIMINATION. THE GENDER AND HIV PORTFOLIO WORKS TO REDUCE THE SPREAD
OF HIV AND MITIGATE THE EPIDEMIC'S IMPACT AMONG WOMEN AND GIRLS IN LOW
AND MIDDLE INCOME COUNTRIES. THE ECONOMIC DEVELOPMENT PROGRAM WORKS TO
PROMOTE DEVELOPMENT AND ADVANCE WOMEN'S ECONOMIC EMPOWERMENT IN
SELECTED LOW AND MIDDLE INCOME COUNTRIES. THE AGENDA OF PREVENTING AND
ENDING VIOLENCE AGAINST WOMEN AND GIRLS AS PROVIDING LEADERSHIP IN THE
FIELD OF ENGAGING MEN AND BOYS, THE STIGMA, DISCRIMINATION AND GENDER
PROGRAM AIMS TO REDUCE STIGMA AND DISCRIMINATION THAT NEGATIVELY

4b (Code) (Expenses \$ 2,361,380. including grants of \$ 116,058.) (Revenue \$)**ASIA REGIONAL OFFICE:**

ICRW'S ASIA REGIONAL OFFICE (ARO) WORKS WITH IN-COUNTRY PARTNERS TO
GENERATE RESEARCH EVIDENCE, INTEGRATE GENDER INTO INTERVENTION PROGRAMS
AND MONITOR AND EVALUATE PROGRAM IMPACT ON ISSUES SUCH AS: HIV/AIDS;
ADOLESCENT REPRODUCTIVE HEALTH; GENDER-BASED VIOLENCE.

4c (Code) (Expenses \$ 2,227,292. including grants of \$ 299.) (Revenue \$ 18,222.)**GENERAL ACTIVITIES:**

GENERAL ACTIVITIES REFER TO A VARIETY OF OTHER PROGRAMS AND SERVICES
THAT SUPPORT AND FURTHER THE MISSION OF ICRW. THESE ACTIVITIES INCLUDE
STRENGTHENING PROGRAMMATIC AREAS WITH NEW TECHNICAL STAFF; DEVELOPING
STRATEGIC PARTNERSHIPS WITH KEY ON-THE-GROUND PARTNERS AS WELL AS
PRIVATE AND PUBLIC SECTOR, MULTILATERAL AND OTHER NGO PLAYERS; AND
DEVELOPING CRITICAL MONITORING AND EVALUATION TECHNIQUES. ACTIVITIES
ALSO INVOLVE PUBLISHING AND DESSEMINATING OUR WORK IN HIGH-LEVEL POLICY
FORUMS AND PEER-REVIEWED JOURNALS; CREATING A STRONGER REGIONAL
PRESENCE IN AFRICA AND ASIA; AND DEVELOPING NEW PROGRAM MANAGEMENT
TOOLS.

4d Other program services (Describe in Schedule O)

(Expenses \$ 2,009,902. including grants of \$ 44,105.) (Revenue \$)

4e Total program service expenses **11,977,352.**

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)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4 X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5 N/A	
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? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
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? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
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? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

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Part IV Checklist of Required Schedules (continued)

	Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 x	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	x
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 x	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a	x
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? <i>If "Yes," complete Schedule L, Part I</i>	25a	x
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	x
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? <i>If "Yes," complete Schedule L, Part II</i>	26	x
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? <i>If "Yes," complete Schedule L, Part III</i>	27	x
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	x
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	x
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	x
29 Did the organization receive more than \$25,000 in non cash contributions? <i>If "Yes," complete Schedule M</i>	29 x	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	x
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	x
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	x
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	x
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	x
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	x
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	x
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	x
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38 x	

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Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

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

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

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	20	
b Enter the number of voting members included in line 1a, above, who are independent	20	
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?		x
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?		x
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		x
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		x
6 Does the organization have members or stockholders?		x
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		x
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		x
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	x	
b Each committee with authority to act on behalf of the governing body?	x	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		x

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		x
b 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?		
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	x	
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	x	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	x	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	x	
13 Does the organization have a written whistleblower policy?	x	
14 Does the organization have a written document retention and destruction policy?	x	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	x	
b Other officers or key employees of the organization		x
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?		x
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?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► SEE SCHEDULE O

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►
 PATRICIA DAUNAS - 202-742-1261
 1120 20TH STREET N.W., NO. 500 N, WASHINGTON, DC 20036

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

☐ 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 (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JEANNE L. WARNER CHAIR	1.50	X		X				0.	0.	0.
CAROLINE ATKINSON VICE-CHAIR	0.50	X		X				0.	0.	0.
PETER BELL BOARD MEMBER	4.80	X						0.	0.	0.
JOANNA BREYER BOARD MEMBER	0.80	X						0.	0.	0.
WINNIE BYANYIMA BOARD MEMBER	0.50	X						0.	0.	0.
JOHN DELANEY BOARD MEMBER	0.50	X						0.	0.	0.
PHILLIP J. DEUTCH BOARD MEMBER	0.50	X						0.	0.	0.
CAROLE DICKERT-SCHERR BOARD MEMBER	0.50	X						0.	0.	0.
ELIZABETH GRIFFITH BOARD MEMBER	1.00	X						0.	0.	0.
JULIE T. KATZMAN BOARD MEMBER	0.50	X						0.	0.	0.
A.K. SHIVA KUMAR BOARD MEMBER	1.50	X						0.	0.	0.
OLIVIA M. LELAND BOARD MEMBER	0.50	X						0.	0.	0.
MATHEW J. MALLOW BOARD MEMBER	1.00	X						0.	0.	0.
MARK ORDAN BOARD MEMBER	0.50	X						0.	0.	0.
CHARLES W. QUATT BOARD MEMBER	0.50	X						0.	0.	0.
NAFIS SADIK BOARD MEMBER	0.50	X						0.	0.	0.
VICKI SANT BOARD MEMBER	0.50	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LEE C. SMITH BOARD MEMBER	0.50	X						0.	0.	0.
GAYLE TZEMACH-LEMMON BOARD MEMBER (BEGINNING 10/10)	0.50	X						0.	0.	0.
WANJIKU KABIRA BOARD MEMBER (BEGINNING 10/10)	0.50	X						0.	0.	0.
KIMBERLY BROOKS SECRETARY	37.50			X				111,636.	0.	20,819.
GEETA RAO GUPTA PRESIDENT (THROUGH 04/09/10)	37.50			X				257,193.	0.	157,272.
SARAH DEGNAN KAMBOU CHIEF OPERATING OFFICER /PRESIDENT	37.50			X				243,073.	0.	20,447.
LUIS GUARDIA CFO / BOARD TREASURER	37.50			X				177,335.	0.	24,795.
ANJU MALHOTRA VICE PRESIDENT, RI2	37.50				X			179,922.	0.	19,978.
MARY ELLSBERG VP, RESEARCH AND PROGRAMS	37.50				X			165,068.	0.	22,794.
1b Sub-total								1,134,227.	0.	266,105.
c Total from continuation sheets to Part VII, Section A								569,026.	0.	60,952.
d Total (add lines 1b and 1c)								1,703,253.	0.	327,057.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **20**

- 3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 0		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2010)

INTERNATIONAL CENTER FOR RESEARCH ON

Form 990 (2010)

WOMEN

52-1081455

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JEAN MARIE BUNTON VP, EXTERNAL RELATIONS	37.50					X		175,522.	0.	20,504.
REKHA MEHRA DIRECTOR, ECONOMIC DEV.	37.50					X		137,647.	0.	11,792.
KIRIN GILL DIRECTOR, IMPACT AND LEARNING	37.50					X		123,425.	0.	10,654.
GRETCHEN HUTULA DIRECTOR, PROGRAM DEVELOPMENT	37.50					X		132,432.	0.	18,002.
Total to Part VII, Section A, line 1c								569,026.		60,952.

Part VIII 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
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	183,293.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	954,750.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,697,159.				
	g Noncash contributions included in lines 1a-1f \$		31,192.				
	h Total. Add lines 1a-1f			7,835,202.			
Program Service Revenue	2 a CONTRACT FEES	Business Code	900099	14,518.	14,518.		
	b HONORARIUM		900099	3,704.	3,704.		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			18,222.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			75,310.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties				129.			129.
6 a Gross Rents		(i) Real	(ii) Personal				
b Less rental expenses							
c Rental income or (loss)							
d Net rental income or (loss)							
7 a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
b Less cost or other basis and sales expenses							
c Gain or (loss)							
d Net gain or (loss)				1,818.			1,818.
8 a Gross income from fundraising events (not including \$ 183,293. of contributions reported on line 1c) See Part IV, line 18		a		17,122.			
b Less direct expenses		b		121,468.			
c Net income or (loss) from fundraising events				-104,346.			-104,346.
9 a Gross income from gaming activities See Part IV, line 19		a					
b Less direct expenses		b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances		a					
b Less cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a MISCELLANEOUS		900099	3,084.			3,084.	
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			3,084.				
12 Total revenue See instructions.			7,829,419.	18,222.	0.	-24,005.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	48,247.	48,247.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	475,787.	475,787.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	971,737.	288,301.	683,436.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,559,953.	3,352,706.	1,077,383.	129,864.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	357,299.	261,593.	85,024.	10,682.
9 Other employee benefits	1,498,059.	998,506.	461,132.	38,421.
10 Payroll taxes	441,435.	291,633.	138,749.	11,053.
11 Fees for services (non-employees)				
a Management				
b Legal	32,214.	13,154.	11,035.	8,025.
c Accounting	59,410.		59,410.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	1,295,394.	1,099,998.	194,413.	983.
12 Advertising and promotion	27,415.	6,418.	17,664.	3,333.
13 Office expenses	321,593.	131,061.	178,648.	11,884.
14 Information technology				
15 Royalties				
16 Occupancy	1,049,943.	16,907.	1,033,036.	
17 Travel	693,046.	672,238.	19,587.	1,221.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	216,653.	197,267.	18,885.	501.
20 Interest	10,235.		10,235.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	100,419.		100,419.	
23 Insurance	40,470.	18,082.	22,388.	
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.)				
a FACILITIES	-5,350.	1,037,821.	-1,087,525.	44,354.
b G & A ALLOCATION	-31,411.	2,996,706.	-3,119,118.	91,001.
c EQUIPMENT	84,433.	23,741.	60,432.	260.
d DONATED GOODS	31,192.		31,192.	
e MISCELLANEOUS	25,720.	22,999.	2,334.	387.
f All other expenses	60,690.	24,187.	36,242.	261.
25 Total functional expenses Add lines 1 through 24f	12,364,583.	11,977,352.	35,001.	352,230.
26 Joint costs. Check here <input type="checkbox"/> 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				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	400.
	2 Savings and temporary cash investments	8,948,995.	2	4,657,341.
	3 Pledges and grants receivable, net	3,593,838.	3	3,147,902.
	4 Accounts receivable, net	40,950.	4	119,504.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	34,569.	9	129,389.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a 1,140,956.		
	b Less: accumulated depreciation	10b 582,464.	630,534.	10c 558,492.
	11 Investments - publicly traded securities	2,365,523.	11	2,376,764.
	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.	132,107.	15	136,071.
16 Total assets. Add lines 1 through 15 (must equal line 34).	15,746,516.	16	11,125,863.	
Liabilities	17 Accounts payable and accrued expenses	949,700.	17	879,442.
	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 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.		22	
	23 Secured mortgages and notes payable to unrelated third parties	346,124.	23	141,337.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D.	434,072.	25	612,387.
	26 Total liabilities. Add lines 17 through 25.	1,729,896.	26	1,633,166.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	5,030,648.	27	4,483,584.
	28 Temporarily restricted net assets	8,985,972.	28	5,009,113.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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.	14,016,620.	33	9,492,697.
34 Total liabilities and net assets/fund balances.	15,746,516.	34	11,125,863.	

Form **990** (2010)

Part XI Reconciliation of Net Assets

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

☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,829,419.
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,364,583.
3	Revenue less expenses Subtract line 2 from line 1	3	-4,535,164.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	14,016,620.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	11,241.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	9,492,697.

Part XII Financial Statements and Reporting

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

☐**1** Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?**b** Were the organization's financial statements audited by an independent accountant?**c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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 separate basis**3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?**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

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form **990** (2010)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization **INTERNATIONAL CENTER FOR RESEARCH ON WOMEN** Employer identification number **52-1081455**

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

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

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a ☐ Type I
 - b ☐ Type II
 - c ☐ Type III - Functionally integrated
 - d ☐ Type III - Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		
(ii) A family member of a person described in (i) above?		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?		
- h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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

Schedule A (Form 990 or 990-EZ) 2010

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	7,947,522.	19,201,675.	13,631,156.	7,108,792.	7,835,202.	55,724,347.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	7,947,522.	19,201,675.	13,631,156.	7,108,792.	7,835,202.	55,724,347.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						16,562,958.
6 Public support. Subtract line 5 from line 4						39,161,389.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	7,947,522.	19,201,675.	13,631,156.	7,108,792.	7,835,202.	55,724,347.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	513,657.	640,496.	186,633.	83,541.	75,439.	1,499,766.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	3,989.	29,303.	46,650.	573.	3,084.	83,599.
11 Total support. Add lines 7 through 10						57,307,712.
12 Gross receipts from related activities, etc. (see instructions)					12	974,182.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	68.34 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	63.80 %
16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2010

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

2010

Open to Public
Inspection

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

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of organization INTERNATIONAL CENTER FOR RESEARCH ON

Employer identification number

WOMEN

52-1081455

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$
- 3 Volunteer hours

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
☐ Yes ☐ No
- 4a Was a correction made?
☐ Yes ☐ No
- b If "Yes," describe in Part IV

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
☐ Yes ☐ No
- 4 Did the filing organization file Form 1120-POL for this year?
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

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

Schedule C (Form 990 or 990-EZ) 2010

LHA

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

- A Check ☐ if the filing organization belongs to an affiliated group.
- B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
 (The term "expenditures" means amounts paid or incurred.)

(a) Filing organization's totals	(b) Affiliated group totals
----------------------------------	-----------------------------

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	0.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	7,625.													
c Total lobbying expenditures (add lines 1a and 1b)	7,625.													
d Other exempt purpose expenditures	12,356,958.													
e Total exempt purpose expenditures (add lines 1c and 1d)	12,364,583.													
f Lobbying nontaxable amount Enter the amount from the following table in both columns	768,229.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>			If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000													
Over \$17,000,000	\$1,000,000													
g Grassroots nontaxable amount (enter 25% of line 1f)	192,057.													
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount	798,725.	759,318.	852,917.	768,229.	3,179,189.
b Lobbying ceiling amount (150% of line 2a, column(e))					4,768,784.
c Total lobbying expenditures	21,172.	23,756.	17,943.	7,625.	70,496.
d Grassroots nontaxable amount	199,681.	189,830.	213,229.	192,057.	794,797.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,192,196.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization **INTERNATIONAL CENTER FOR RESEARCH ON**

WOMEN

Employer identification number

52-1081455

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

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

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

(i) Revenues included in Form 990, Part VIII, line 1	► \$ _____
(ii) Assets included in Form 990, Part X	► \$ _____

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

a Revenues included in Form 990, Part VIII, line 1	► \$ _____
b Assets included in Form 990, Part X	► \$ _____

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

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

- a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes☐ No**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes☐ No

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

- c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes☐ No

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,923,849.	2,699,777.	2,815,407.		
b Contributions					
c Net investment earnings, gains, and losses	87,356.	224,072.	115,630.		
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	3,011,205.	2,923,849.	2,699,777.		

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ► 100.00 %
b Permanent endowment ► .00 %
c Term endowment ► .00 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
(ii) related organizations

	Yes	No
3a(i)		x
3a(ii)		x
3b		

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

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

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		609,549.	295,117.	314,432.
d Equipment				
e Other		531,407.	287,347.	244,060.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				558,492.

Schedule D (Form 990) 2010

Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) REFUNDABLE ADVANCES	271,615.
(3) DEFERRED RENT	327,778.
(4) SUBLEASE DEPOSIT	12,994.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	
612,387.	

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

2. FIN 48 (ASC 740)

032053
12-20-10

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,829,419.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,364,583.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-4,535,164.
4	Net unrealized gains (losses) on investments	4	11,241.
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 through 8	9	11,241.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	-4,523,923.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	7,962,128.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	11,241.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	121,468.
e	Add lines 2a through 2d	2e	132,709.
3	Subtract line 2e from line 1	3	7,829,419.
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	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	7,829,419.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	12,486,051.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	121,468.
e	Add lines 2a through 2d	2e	121,468.
3	Subtract line 2e from line 1	3	12,364,583.
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	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	12,364,583.

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 X, line 2, 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.

PART V, LINE 4: THE BOARD OF DIRECTORS DESIGNATED NET ASSETS FOR

ESTABLISH A OPERATING RESERVE.

PART X, LINE 2: IN JUNE 2006, THE FINANCIAL ACCOUNTING STANDARDS BOARD

(FASB) RELEASED FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR

REPORTING UNCERTAINTY IN INCOME TAXES, FOR THE YEARS ENDED SEPTEMBER 30,

2011 AND 2010, ICRW HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10

AND DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER

Part XIV Supplemental Information (continued)

RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE FEDERAL FORM

990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS SUBJECT TO

EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR THREE YEARS

AFTER IT IS FILED.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES SHOWN AS AN EXPENSE ON THE FINANCIAL

STATEMENTS AND NETTED AGAINST REVENUE ON FORM 990.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES SHOWN AS AN EXPENSE ON THE FINANCIAL

STATEMENTS AND NETTED AGAINST REVENUE ON FORM 990.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

INTERNATIONAL CENTER FOR RESEARCH ON

WOMEN

Employer identification number

52-1081455

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

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
SOUTH ASIA	3	34	PROGRAM SERVICES	ICRW'S ASIA REGIONAL OFFICE (ARO) WORKS WITH IN-COUNTRY PARTNERS TO GENERATE RESEARCH	1,685,341.
SUB-SAHARAN AFRICA	1	4	PROGRAM SERVICES	ICRW'S EAST AFRICA OFFICE (EARO) AIMS TO BUILD LOCAL CAPACITY TO CONDUCT RIGOROUS	144,162.
SUB-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		359,729.
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		102,640.
EAST ASIA AND THE PACIFIC	1	3	GRANTS TO RECIPIENTS LOCATED IN REGION		13,418.
3 a Sub-total	5	41			2,305,290.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	5	41			2,305,290.

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

Schedule F (Form 990) 2010

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐

Part II can be duplicated if additional space is needed

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	WOMEN'S PROPERTY RIGHTS: GENDER AND LAND SURVEYS IN SUB-SAHARAN AFRICA	52,754.WIRE	WIRE	0.		
		SUB-SAHARAN AFRICA	STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH CAPACITY IN EAST AND SOUTHERN AFRICA	34,543.WIRE	WIRE	0.		
		SOUTH ASIA	TAKING PROGRAMS H/YAARI-DOSTI AND M/SAKHI SAHALI TO SCALE: ENGAGING BOYS WOMENS PROPERTY RIGHTS: GENDER AND LAND SURVEY'S IN SUB-SAHARAN AFRICA	30,503.WIRE	WIRE	0.		
		SUB-SAHARAN AFRICA	STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH CAPACITY IN EAST AND SOUTHERN AFRICA	30,000.WIRE	WIRE	0.		
		SUB-SAHARAN AFRICA	COMMUNITY-BASED PARALEGAL AID INTERVENTION ON WOMEN'S PROPERTY	22,200.WIRE	WIRE	0.		
		SUB-SAHARAN AFRICA	THE PREVENTION OF HIV/STIS AMONG MARRIED WOMEN IN INDIA	21,500.WIRE	WIRE	0.		
		SOUTH ASIA	COMMUNITY PARALEGAL CAPACITY-BUILDING & SCALE-UP	20,053.WIRE	WIRE	0.		
		SUB-SAHARAN AFRICA	SCALE-UP	20,000.WIRE	WIRE	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 26

3 Enter total number of other organizations or entities 0

Schedule F (Form 990) 2010

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH CAPACITY IN EAST AND SOUTHERN	16,812.	WIRE	0.		
			COACHING BOYS INTO MEN: AN INTERNATIONAL SOCIAL NORMS					
		SOUTH ASIA	PROGRAMME TO PREVENT	14,618.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	MEN'S ATTITUDE TO SON PREFERENCE AND SEX SELECTION IN NEPAL	13,418.	WIRE	0.		
			STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH CAPACITY IN EAST AND SOUTHERN	12,756.	WIRE	0.		
			MEN'S ATTITUDE TO SON PREFERENCE AND SEX SELECTION IN NEPAL	12,682.	WIRE	0.		
		SOUTH ASIA	EVENT MANAGEMENT FOR STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH CAPACITY	12,500.	WIRE	0.		
			EVENT MANAGEMENT FOR STRATEGIC CONSULTATION ON DEVELOPING A	12,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	THE WORLD BANK RBI PROJECT LIBERIA	9,862.	WIRE	0.		
			STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH CAPACITY IN EAST AND SOUTHERN	9,130.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	THE PREVENTION OF HIV/STIS AMONG MARRIED WOMEN IN INDIA	7,495.WIRE		0.		
		SUB-SAHARAN AFRICA	THE WORLD BANK RBI PROJECT KENYA	7,103.WIRE		0.		
		SUB-SAHARAN AFRICA	STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH CAPACITY IN EAST AND SOUTHERN	7,013.WIRE		0.		
		SOUTH ASIA	STIGMA REDUCTION FOR PREVENTION OF MOTHER TO CHILD TRANSMISSION OF HIV WITHIN HEALTH	7,000.WIRE		0.		
		SUB-SAHARAN AFRICA	STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH CAPACITY IN EAST AND SOUTHERN	6,788.WIRE		0.		
		SUB-SAHARAN AFRICA	WOMEN'S PROPERTY RIGHTS: GENDER AND LAND SURVEYS IN SUB-SAHARAN AFRICA	6,011.WIRE		0.		
		SOUTH ASIA	COACHING BOYS INTO MEN: AN INTERNATIONAL SOCIAL NORMS PROGRAMME TO PREVENT	5,541.WIRE		0.		
		SUB-SAHARAN AFRICA	RESPONDING TO THE NEEDS OF OLDER GIRLS IN AIDS-AFFECTED AREAS IN TANZANIA	67,457.WIRE		0.		
		SUB-SAHARAN AFRICA	STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH CAPACITY IN EAST AND SOUTHERN	5,100.WIRE		0.		

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

Part III can be duplicated if additional space is needed

[illegible]

Schedule F (Form 990) 2010

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* ☐ Yes ☒ No

Schedule F (Form 990) 2010

Part V Supplemental Information

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

SCHEDULE F, PART I, LINE 2: ICRW ISSUES SUBAGREEMENTS TO LEGALLY

REGISTERED ENTITIES AFTER REVIEW AND ACCEPTANCE OF VARIOUS DOCUMENTS

PERTAINING TO THE SELECTION PROCESS, THE ENTITY'S FINANCIAL

ACCOUNTABILITY AND STATUS, AND ADHERENCE TO ANY DONOR REQUIREMENTS. ICRW

DEFINES THE REPORTING AND PAYMENT SCHEDULES FOR EACH SUBAGREEMENT BASED

ON THE ASSOCIATED RISKS, BUDGET AMOUNT, AND TIMELINE, PER THE

STIPULATIONS OF THE PAYMENT SCHEDULE. DISBURSEMENTS ARE MADE UPON REVIEW

AND APPROVAL OF FINANCIAL REPORTS SHOWING SUFFICIENT FUNDS SPENT AND

PROJECTED FUTURE SPENDING IF REQUIRED. SUBRECIPIENTS ARE MONITORED

THROUGHOUT THE DURATION OF THE AWARD ACTIVITY VIA FINANCIAL REPORTS AND

NARRATIVE REPORTS. PROGRAM STAFF REMAIN IN CONTACT WITH SUBGRANTEES

DURING IMPLEMENTATION.

PART I, LINE 3, COLUMN (E):

REGION: SOUTH ASIA

(E) SPECIFIC TYPES OF SERVICES IN REGION: ICRW'S ASIA REGIONAL OFFICE

(ARO) WORKS WITH IN-COUNTRY PARTNERS TO GENERATE RESEARCH EVIDENCE,

INTEGRATE GENDER INTO INTERVENTION PROGRAMS AND MONITOR AND EVALUATE

PROGRAM IMPACT ON ISSUES SUCH AS: HIV/AIDS; ADOLESCENT REPRODUCTIVE

HEALTH; GENDER-BASED VIOLENCE.

REGION: SUB-SAHARAN AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: ICRW'S EAST AFRICA OFFICE

(EARO) AIMS TO BUILD LOCAL CAPACITY TO CONDUCT RIGOROUS RESEARCH,

DISSEMINATE STATE OF THE ART RESOURCE MATERIALS, AND PROMOTE EVIDENCE

BASED ADVOCACY.

Part V Supplemental Information

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

PART II, COLUMN (D):

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH

CAPACITY IN EAST AND SOUTHERN AFRICA

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: TAKING PROGRAMS H/YAARI-DOSTI AND M/SAKHI SAHALI

TO SCALE ENGAGING BOYS, GIRLS AND FATHERS TO EMPOWER GIRLS AND YOUNG

WOMEN

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH

CAPACITY IN EAST AND SOUTHERN AFRICA

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: COMMUNITY-BASED PARALEGAL AID INTERVENTION ON

WOMEN'S PROPERTY RIGHTS IN UGANDA

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH

CAPACITY IN EAST AND SOUTHERN AFRICA

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: COACHING BOYS INTO MEN: AN INTERNATIONAL SOCIAL

NORMS PROGRAMME TO PREVENT GENDER BASED VIOLENCE

REGION: SUB-SAHARAN AFRICA

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable.

Also complete this part to provide any additional information

(D) PURPOSE OF GRANT: STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH

CAPACITY IN EAST AND SOUTHERN AFRICA

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: EVENT MANAGEMENT FOR STRENGTHENING THE VAW

KNOWLEDGE BASE & RESEARCH CAPACITY CONFERENCE PARTICIPATION

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: EVENT MANAGEMENT FOR STRATEGIC CONSULTATION ON

DEVELOPING A PROGRAMMATIC ASSESSMENT TOOL FOR VIOLENCE AGAINST WOMEN

INTERVENTIONS

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH

CAPACITY IN EAST AND SOUTHERN AFRICA

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH

CAPACITY IN EAST AND SOUTHERN AFRICA

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: STIGMA REDUCTION FOR PREVENTION OF MOTHER TO CHILD

TRANSMISSION OF HIV WITHIN HEALTH AND COMMUNITY SETTINGS IN ACCHAM

DISTRICT, NEPAL

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH

Part V Supplemental Information

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

CAPACITY IN EAST AND SOUTHERN AFRICA

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: COACHING BOYS INTO MEN: AN INTERNATIONAL SOCIAL

NORMS PROGRAMME TO PREVENT GENDER BASED VIOLENCE

REGION. SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: STRENGTHENING THE VAW KNOWLEDGE BASE & RESEARCH

CAPACITY IN EAST AND SOUTHERN AFRICA

Department of the Treasury
Internal Revenue Service

**Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

2010

Employer identification number
52-1081455

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

		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col (a) through col (c))
		GALA (event type)	(event type)	(total number)	
Revenue	1 Gross receipts	200,415.			200,415.
	2 Less Charitable contributions	183,293.			183,293.
	3 Gross income (line 1 minus line 2)	17,122.			17,122.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	18,248.			18,248.
	7 Food and beverages	43,673.			43,673.
	8 Entertainment				
	9 Other direct expenses	59,547.			59,547.
	10 Direct expense summary Add lines 4 through 9 in column (d)				(121,468)
	11 Net income summary Combine line 3, column (d), and line 10				-104,346.

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

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue				
1 Gross revenue				
Direct Expenses	2 Cash prizes			
	3 Noncash prizes			
	4 Rent/facility costs			
	5 Other direct expenses			
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7 Direct expense summary Add lines 2 through 5 in column (d)				()
8 Net gaming income summary Combine line 1, column d, and line 7				

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

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

b If "No," explain _____

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

b If "Yes," explain _____

11 Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

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

☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility

13a %

b An outside facility

13b %

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

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.

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

Name ► _____

Address ► _____

16 Gaming manager information

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer☐ Employee☐ Independent contractor

17 Mandatory distributions

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

☐ Yes ☐ No

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

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

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization INTERNATIONAL CENTER FOR RESEARCH ON WOMEN	Employer identification number 52-1081455
-------------------------------------------------------------------------------	-----------------------------------------------------

Part I General Information on Grants and Assistance

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

☒ Yes ☐ No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. ► ☐

1 (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
EMORY UNIVERSITY 1518 CLIFTON RD. ATLANTA, GA 30322	58-0566256	501(C)(3)	24,000.	0.			FERTILITY AND EMPOWERMENT NETWORK
UNIVERSITY OF ILLINOIS AT URBANA CHAMPAGNE - 1901 SOUTH FIRST STREET, - CHAMPAGNE, IL 61820	37-6000511	501(C)(3)	20,105.	0.			FERTILITY AND EMPOWERMENT NETWORK

2 Enter total number of section 501(c)(3) and government organizations	2.
3 Enter total number of other organizations	0.

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

Schedule I (Form 990) (2010)

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

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

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information

Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information
----------------	-------------------------------------------------------------------------------------------------------------------------------------------------

SCHEDULE I PART I LINE 2: ICRW ISSUES SUBAGREEMENTS TO LEGALLY REGISTERED

ENTITIES AFTER REVIEW AND ACCEPTANCE OF VARIOUS DOCUMENTS PERTAINING TO THE

SELECTION PROCESS. THE ENTITY'S FINANCIAL ACCOUNTABILITY AND STATUS. AND

ADHERENCE TO ANY DONOR REQUIREMENTS. ICRW DEFINES THE REPORTING AND PAYMENT

SCHEDULES FOR EACH SUBAGREEMENT BASED ON THE ASSOCIATED RISKS. BUDGET

AMOUNT AND TIMELINE PER THE STIPULATIONS OF THE PAYMENT SCHEDULE.

DISBURSEMENTS ARE MADE UPON REVIEW AND APPROVAL OF FINANCIAL REPORTS

SHOWING SUFFICIENT FUNDS SPENT AND PROJECTED FUTURE SPENDING IF REQUIRED.

SUBRECIPIENTS ARE MONITORED THROUGHOUT THE DURATION OF THE AWARD ACTIVITY

Part IV Supplemental Information

VIA FINANCIAL REPORTS AND NARRATIVE REPORTS, PROGRAM STAFF REMAIN IN

CONTACT WITH SUBGRANTEES DURING IMPLEMENTATION.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

INTERNATIONAL CENTER FOR RESEARCH ON
WOMEN

Employer identification number

52-1081455

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,
Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

☐ First-class or charter travel

☐ Travel for companions

☐ Tax indemnification and gross-up payments

☐ Discretionary spending account

☐ Housing allowance or residence for personal use

☐ Payments for business use of personal residence

☐ Health or social club dues or initiation fees

☐ Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's
CEO/Executive Director. Check all that apply

☐ Compensation committee

☐ Independent compensation consultant

☐ Form 990 of other organizations

☒ Written employment contract

☒ Compensation survey or study

☒ Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing
organization or a related organization

a Receive a severance payment or change-of-control payment from the organization or a related organization?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation
contingent on the revenues of

a The organization?

b Any related organization?

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?

b Any related organization?

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

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the
initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in
Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

x

x

x

x

x

x

x

x

x

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

Schedule J (Form 990) 2010

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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 GEETA RAO GUPTA	(i) 257,193.	0.	0.	153,829.	3,443.	414,465.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
2 SARAH DEGNAN KAMBOU	(i) 203,073.	40,000.	0.	19,667.	780.	263,520.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
3 LUIS GUARDIA	(i) 157,335.	20,000.	0.	15,173.	9,622.	202,130.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
4 ANJU MALHOTRA	(i) 159,922.	20,000.	0.	14,394.	5,584.	199,900.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
5 MARY ELLSBERG	(i) 145,068.	20,000.	0.	13,403.	9,391.	187,862.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
6 JEAN MARIE BUNTON	(i) 155,522.	20,000.	0.	14,317.	6,187.	196,026.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
7 GRETCHEN HUTULA	(i) 132,432.	0.	0.	10,808.	7,194.	150,434.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
8	(i)						
	(ii)						
9	(i)						
	(ii)						
10	(i)						
	(ii)						
11	(i)						
	(ii)						
12	(i)						
	(ii)						
13	(i)						
	(ii)						
14	(i)						
	(ii)						
15	(i)						
	(ii)						
16	(i)						
	(ii)						

Part III Supplemental Information

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

PART I, LINE 7: RETENTION BONUSES WERE PAID TO VICE PRESIDENTS FOR

CALENDAR YEAR 2010.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2010

**Open to Public
Inspection**

Name of the organization **INTERNATIONAL CENTER FOR RESEARCH ON WOMEN** Employer identification number **52-1081455**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>COMPUTER SERV</u>)	X	2	31,192.	LETTER OF VALUATION
26 Other ► (_____)				
27 Other ► (_____)				
28 Other ► (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **1**

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

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

Schedule M (Form 990) (2010)

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33.
Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B): THE ORGANIZATION RECEIVED A FORM 8283

FROM THE HEWLETT FOUNDATION FOR THEIR CONTRIBUTION.

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.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
INTERNATIONAL CENTER FOR RESEARCH ON
WOMEN

Employer identification number
52-1081455

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

IMPACTS THE LIVES OF WOMEN AND GIRLS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

RESEARCH AND INNOVATION AND IMPACT:

THE RESEARCH, INNOVATION AND IMPACT DIVISION LEADS AND EXAMINES

CROSS-INSTITUTIONAL LEARNING, IMPACT, AND INNOVATION. THE DIVISION

DEVELOPS A COMMON UNDERSTANDING OF ICRW'S APPROACH AND ACCOMPLISHMENTS.

DEMONSTRATES ICRW'S COMPARATIVE ADVANTAGE AND ESTABLISHES

ORGANIZATIONAL INDICATORS TO MEASURE IMPACT. IT ALSO FOSTERS INNOVATIVE

RESEARCH IN AREAS SUCH AS TECHNOLOGY AND WOMEN'S ECONOMIC EMPOWERMENT.

NEW METHODOLOGIES FOR MONITORING AND EVALUATION, SOLUTIONS TO CHILD

MARRIAGE, AND THE ESTABLISHMENT OF NETWORKS WITH ACADEMICS TO DEVELOP

EMPIRICAL RESEARCH IN GENDER, POPULATION, AND DEVELOPMENT. FINALLY, IT

IDENTIFIES AND LEVERAGES NEW AVENUES TO STRENGTHEN INSTITUTIONAL IMPACT

AND SUSTAINABILITY.

EXPENSES \$ 1,815,092. INCLUDING GRANTS OF \$ 44,105. REVENUE \$ 0.

EXTERNAL RELATIONS GROUP:

THE EXTERNAL RELATIONS GROUP WORKS TO INCREASE POSITIVE EXPOSURE OF

ICRW'S WORK AND MISSION IN MULTIPLE VENUES AND ACROSS MULTIPLE MEDIA

(OLD AND NEW) BY FOSTERING RELATIONSHIPS BETWEEN ICRW AND ITS KEY

CONSTITUENTS AND PRODUCING STRATEGIC COMMUNICATIONS MATERIAL.

COMPONENTS OF THE GROUP INCLUDE:

STRATEGIC COMMUNICATIONS

NEW MEDIA AND WEBSITE

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

Schedule O (Form 990 or 990-EZ) (2010)

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MEDIA AND PUBLIC RELATIONS

U.S. ADVOCACY

FUNDRAISING

EXPENSES \$ 194,810. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION'S FORM 990 WAS
PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. THE
AUDIT COMMITTEE, REVIEWED AND THEN, SUBSEQUENTLY, RECEIVED THE FINAL 990
WHICH WAS THEN PRESENTED TO THE FULL BOARD PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: IF ANY MEMBER, OFFICER OR
COMMITTEE MEMBER OF THE BOARD OF DIRECTORS OF ICRW HAS ANY DIRECT OR
INDIRECT INTEREST IN, OR RELATIONSHIP TO, ANY INDIVIDUAL OR ORGANIZATION
WHICH PROPOSES TO OR PROVIDES A GOOD OR SERVICE TO ICRW FOR A FEE, S/HE
PROVIDES PROMPT WRITTEN NOTICE OF SUCH INTEREST OR RELATIONSHIP TO THE
CHAIRPERSON OF THE BOARD OF DIRECTORS, WHO THEN INFORMS THE BOARD OF
DIRECTORS. THE BOARD OF DIRECTORS, EITHER DIRECTLY OR THROUGH THE EXECUTIVE
COMMITTEE, MAKES A DETERMINATION OF WHETHER OR NOT THERE IS A SUBSTANTIAL
CONFLICT OF INTEREST. IF A CONFLICT OF INTEREST IS FOUND, THEN THE PERSON
WITH SUCH CONFLICT RECUSES HIM/HERSELF FROM PARTICIPATING IN ANY DISCUSSION
OR VOTES ON THAT PARTICULAR MATTER; AND ANY ATTEMPTS TO EXERT ANY INFLUENCE
ON THE ORGANIZATION TO AFFECT THE OUTCOME OF THE DECISION MAKING PROCESS.

IN THE EVENT THAT A NON-DISCLOSED CONFLICT OF INTEREST IS DETERMINED, ICRW
WILL TAKE APPROPRIATE ACTION FOR THE VIOLATION OF THIS POLICY WITH THE
INTENTION OF ELIMINATING ANY AND ALL REAL, APPARENT, OR PERCEIVED CONFLICTS
OF INTEREST.

Name of the organization INTERNATIONAL CENTER FOR RESEARCH ON
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EACH EMPLOYEE SIGNS AND ACKNOWLEDGES RECEIPT OF AND COMPLIANCE WITH THE
ICRW CONFLICT OF INTEREST POLICY. WHEN THERE IS AN INFRACTION, ICRW HAS A
FORMAL PROGRESSIVE DISCIPLINE POLICY FOR ALL UNACCEPTABLE CONDUCT THAT
REQUIRES WARNINGS OR COUNSELING SESSIONS. MOST CASES ARE CONSIDERED BASED
ON THEIR OWN FACTS. IN THE CASE OF MISCONDUCT OR VIOLATION OF POLICY, AND
EMPLOYEE MAY BE IMMEDIATELY TERMINATED.

FORM 990, PART VI, SECTION B, LINE 15A: THE BOARD RECOMMENDS THE
COMPENSATION LEVEL OF THE CEO, AND IT IS APPROVED BY THE FULL BOARD. THE
COMMITTEE REVIEWS EXTERNAL MARKET DATA FROM A VARIETY OF INDEPENDENT DATA
SOURCES PROVIDED BY LEADING NATIONAL NON-PROFIT EXECUTIVE COMPENSATION
EXPERTS. DECISIONS ABOUT COMPENSATION ARE MADE CONSISTENT WITH MARKET DATA
AND ARE BASED BOTH IN THE DATA AND THE PERFORMANCE OF THE EXECUTIVE WHICH
IS VETTED BY THE BOARD. THE CEO PARTICIPATES IN ICRW'S FORMAL ANNUAL
PERFORMANCE APPRAISAL SYSTEM AND THE APPRAISAL IS DULY RECORDED. THE
APPRAISAL INCLUDES A WRITTEN ANALYSIS OF ACCOMPLISHMENTS RATED AGAINST
PRE-SET GOALS FOR THE YEAR, WHICH THE COMMITTEE REVIEWS WITH THE CEO. THE
LAST COMPENSATION REVIEW TOOK PLACE IN DURING 2010.

DISQUALIFIED PERSONS ARE EXCLUDED FROM THE COMPENSATION DECISION AND THE
COMMITTEE PROVIDES THE RECOMMENDATION TO THE FULL BOARD. FINAL DECISIONS
REACHED BY THE BOARD ARE COMMUNICATED TO HUMAN RESOURCES STAFF BY THE BOARD
CHAIR. THE COMMITTEE AND ICRW MAINTAIN ALL RECORDS ON THE DETERMINATION OF
THE CEO'S COMPENSATION.

PAY FOR ALL ICRW EMPLOYEES, INCLUDING KEY EMPLOYEES, IS DETERMINED
PRINCIPALLY BY ASSIGNING EMPLOYEES TO THEIR RESPECTIVE SALARY BANDS.

SALARY BANDS ARE GROUPED BY LEVEL OF WORK AND DIVISION. THEY ARE REVIEWED

032212
01-24-11

Name of the organization INTERNATIONAL CENTER FOR RESEARCH ON
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BIANNUALLY WITH A DETAILED ANALYSIS OF INTERNAL JOB DESCRIPTIONS AND
RESPONSIBILITIES, AND THEN MAPPING THEM TO CORRESPONDING DATA SETS IN
PUBLISHED SALARY SURVEYS FOR NON-PROFIT ORGANIZATIONS IN THE DC METRO AREA
WITH SIMILAR OPERATING BUDGETS, AS PART OF THE ANNUAL BUDGET PROCESS, ICRW
GATHERS CURRENT INFLATION RATES AND COST OF LIVING INDICES DETERMINED BY
THE BUREAU OF LABOR STATISTICS, AND FORECASTS THE ORGANIZATION'S ECONOMIC
OUTLOOK TO ESTABLISH A MERIT POOL WHICH IS APPROVED BY THE BOARD OF
DIRECTORS. EMPLOYEE PERFORMANCE IS REVIEWED ANNUALLY AND VIA THE ANNUAL
MERIT REVIEW PROCESS, A MERIT INCREASE BUDGET AND MATRIX WHICH THE CEO AND
COO USE TO DETERMINE PAY FOR THESE AFOREMENTIONED EMPLOYEES. ALL
DISQUALIFIED PERSONS ARE EXCLUDED FROM THE FINAL DETERMINATION OF SALARY
LEVELS AND ICRW MAINTAINS RECORDS ON ALL DECISIONS REGARDING EMPLOYEE PAY
LEVELS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AK, AL, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NY
OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE
AVAILABLE TO THE PUBLIC UPON REQUEST OR VIA THE WEB.

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

NET UNREALIZED GAINS ON INVESTMENTS: 11,241.