

**Exempt Organization Declaration and Signature for
Electronic Filing**

OMB No. 1545-1879

For calendar year 2013, or tax year beginning _____, 2013, and ending _____, 20____

2013Department of the Treasury
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

Name of exempt organization

WOMEN'S SPORTS FOUNDATIONEmployer identification number
23-7380557**Part I Type of Return and Return Information** (Whole Dollars Only)

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	2,880,815.
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Part II Declaration of Officer

- 6 ☐ I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- ☐ If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign
Here

Signature of officer

Date

CEO
Title**Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer** (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-file (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature	Date	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code	MARKS PANETH LLP 685 THIRD AVENUE NEW YORK, NY 10017			P00227274
					EIN 11-3518842 Phone no. 212-503-8800

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

**Paid
Preparer
Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name	Firm's EIN			
Firm's address	Phone no.			

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2013Open to Public
Inspection

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990**A** For the 2013 calendar year, or tax year beginning

and ending

B Check if applicable:

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

C Name of organization**WOMEN'S SPORTS FOUNDATION**

Doing Business As

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

Room/suite

EISENHOWER PARK, 1899 HEMPSTEAD TURNPIKE 400

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

EAST MEADOW, NY 11554**F** Name and address of principal officer: **DEBORAH SLANER LARKIN**
SAME AS C ABOVE**D** Employer identification number**23-7380557****E** Telephone number**516-542-4700****G** Gross receipts \$**3,748,070.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

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

H(c) Group exemption number**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **WWW.WOMENSSPORTSFOUNDATION.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: **1974** **M** State of legal domicile: **DE****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: CREATING LEADERS BY PROVIDING ALL GIRLS ACCESS TO SPORTS, FITNESS AND BETTER HEALTH.		
	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		
	4	Number of independent voting members of the governing body (Part VI, line 1b) 4		
	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5		
	6	Total number of volunteers (estimate if necessary) 6		
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 7a	0.	
7b	Net unrelated business taxable income from Form 990-T, line 34 7b	0.		
Revenue	8	Contributions and grants (Part VIII, line 1h) 3,220,761.	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g) 0.	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 17,107.	17,107.	-12,406.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 40,027.	40,027.	75,215.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,277,895.	3,277,895.	2,880,815.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3) 305,936.	305,936.	467,066.
	14	Benefits paid to or for members (Part IX, column (A), line 4) 0.	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,086,181.	2,086,181.	1,146,572.
	16a	Professional fundraising fees (Part IX, column (A), line 11e) 0.	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) 390,480.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,515,865.	1,515,865.	1,215,505.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 3,907,982.	3,907,982.	2,829,143.
19	Revenue less expenses. Subtract line 18 from line 12 -630,087.	-630,087.	51,672.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16) 3,464,888.	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26) 237,707.	237,707.	139,279.
	22	Net assets or fund balances. Subtract line 21 from line 20 3,227,181.	3,227,181.	2,838,278.

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			
	DEBORAH SLANER LARKIN, CEO				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	ROBERT R. LYONS	<i>Robert R. Lyons</i>	11-14-2014	<input type="checkbox"/>	P00227274
	Firm's name MARKS PANETH LLP	Firm's EIN 11-3518842			
	Firm's address 685 THIRD AVENUE				
	NEW YORK, NY 10017	Phone no. 212-503-8800			

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

☒ Yes ☐ No

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X****1** Briefly describe the organization's mission:**WE CREATE LEADERS BY ENSURING GIRLS ACCESS TO SPORTS.****2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ **No**

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

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

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ **749,419.** including grants of \$ **325,596.**) (Revenue \$)
PARTICIPATION:

OVER THE LAST 39 YEARS, THE MAJORITY OF THE MORE THAN \$50 MILLION THE WOMEN'S SPORTS FOUNDATION HAS DISTRIBUTED IN CASH GRANTS AND MATERIALS HAS HELPED SOCIO-ECONOMICALLY DISADVANTAGED GIRLS PLAY SPORTS OR BECOME PHYSICALLY ACTIVE. GRANTS HAVE ALSO BEEN MADE TO UP-AND-COMING ACCOMPLISHED ATHLETES LIKE CHANDA RUBIN, PICABO STREET, KERRI STRUG AND KRISTI YAMAGUCHI, WHOSE TRAVEL & TRAINING FUND GRANTS FROM THE FOUNDATION ENABLED THEM TO COMPETE AT THE EARLY STAGES OF THEIR CAREERS BEFORE THEY BECAME WORLD CHAMPIONS. IN THE 2004 AND 2006 OLYMPIC AND PARALYMPIC GAMES, 33 OF THE WOMEN COMPETING HAD RECEIVED TRAVEL & TRAINING GRANTS FROM THE FOUNDATION, AND FIVE OF THOSE GRANTEEES EARNED MEDALS. IN OCTOBER AND NOVEMBER 2011, SIX TRAVEL & TRAINING FUND GRANT

4b (Code:) (Expenses \$ **604,117.** including grants of \$ **141,470.**) (Revenue \$)
EDUCATIONAL PROGRAMS:

THE WOMEN'S SPORTS FOUNDATION ANNUALLY RESPONDS TO THOUSANDS OF REQUESTS FOR INFORMATION FROM FEMALE ATHLETES, PARENTS, COACHES, THE MEDIA AND THE GENERAL PUBLIC, AND DISTRIBUTES THOUSANDS OF PIECES OF EDUCATIONAL INFORMATION EACH YEAR. SINCE 2001 OVER ONE MILLION GIRLS HAVE EXPERIENCED THE GOGIRLGO! EDUCATIONAL CURRICULUM THAT PROVIDES THE TOOLS TO RESIST HEALTH-RISK BEHAVIORS AND GET PHYSICALLY ACTIVE. EDUCATIONAL OUTREACH THROUGH THE FOUNDATION'S WEB SITE, WWW.WOMENSSPORTSFOUNDATION.ORG, WITH THOUSANDS OF PAGES OF INFORMATION, SEARCHABLE DATABASES, AND A NATIONAL TOLL-FREE INFOLINE (800.227.3988), PROVIDES ANSWERS TO QUESTIONS RANGING FROM "WHAT SHOULD I DO IF MY GOLF CLUB DOESN'T ALLOW FEMALE MEMBERS?" TO "HOW CAN I GET FUNDING FOR

4c (Code:) (Expenses \$ **429,249.** including grants of \$) (Revenue \$)
ADVOCACY

THE WOMEN'S SPORTS FOUNDATION IS SEEKING TO MAKE CHANGE ON MANY FRONTS AS IT RELATES TO THE RIGHTS AND REPRESENTATION OF GIRLS AND WOMEN IN SPORT. EVERY DAY THE FOUNDATION EDUCATES PEOPLE TO ENSURE THAT THE TITLE IX DEFINITION OF "EQUAL OPPORTUNITY" IN ATHLETICS REMAINS UNCHANGED AND THAT REGULATIONS ARE ENFORCED. THE FOUNDATION'S WEB SITE PROVIDES EDUCATIONAL RESOURCES TO INFORM PARENTS, COACHES, ADMINISTRATORS AND ATHLETES OF THEIR RIGHTS IN SPORT. STAFF WORKS INDEPENDENTLY AND IN COLLABORATION WITH NUMEROUS NATIONAL ORGANIZATIONS TO ADDRESS INEQUITIES SUCH AS THE FOLLOWING:

***GIRLS RECEIVE 1.3 MILLION FEWER OPPORTUNITIES TO PLAY AT THE HIGH**

4d Other program services (Describe in Schedule O.)(Expenses \$ **477,866.** including grants of \$) (Revenue \$)**4e** Total program service expenses **2,260,651.**

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 <i>Schedule B, Schedule of Contributors</i> ?	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	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <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, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, 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 and XII</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 and XII 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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <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 other assistance to or for any foreign organization? <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 other assistance to or for foreign individuals? <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 hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <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 25a</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 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	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, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	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 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38 X	

Form 990 (2013)

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	61	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	18	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		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 as charitable contributions?		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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI ☒**Section A. Governing Body and Management**

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	27		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b Enter the number of voting members included in line 1a, above, who are independent	26		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		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?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	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?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **NY, CA, CT, GA, IL, ME, MA, NH, NJ, TX, PA, VA**

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

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **DEBORAH S. LARKIN, CEO - 516-542-4700**
EISENHOWER PARK, 1899 HEMPSTEAD TURNPIKE, SUITE 400, EAST MEADOW, NY 1

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

- List all of the organization's **former** officers, key employees, 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 (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BILLIE JEAN KING FOUNDER & HONORARY CHAIR	10.00	X						0.	0.	0.
(2) BENITA FITZGERALD MOSLEY TRUSTEE	5.00	X						0.	0.	0.
(3) ANGELA RUGGIERO PRESIDENT	10.00	X		X				36,000.	0.	0.
(4) SANDRA VIVAS CHAIR OF THE BOARD	10.00	X		X				0.	0.	0.
(5) LISA CREGAN TRUSTEE	5.00	X						0.	0.	0.
(6) SHARON LOVE TRUSTEE	5.00	X						0.	0.	0.
(7) ERIC KAUFMAN TRUSTEE	5.00	X						0.	0.	0.
(8) ILANA KLOSS TRUSTEE	5.00	X						0.	0.	0.
(9) YVONNE MIDDLETON TRUSTEE	5.00	X						0.	0.	0.
(10) JEAN PICKER FIRSTENBERG TRUSTEE	5.00	X						0.	0.	0.
(11) DANE ANDREEFF TRUSTEE	5.00	X						0.	0.	0.
(12) TERRI AUSTIN TRUSTEE	5.00	X						0.	0.	0.
(13) CHRISTINE DRIESSEN TRUSTEE	5.00	X						0.	0.	0.
(14) LARRY SCOTT TRUSTEE	10.00	X						0.	0.	0.
(15) SUSAN S. HASSAN TRUSTEE	5.00	X						0.	0.	0.
(16) SUSAN MORRISON TRUSTEE	5.00	X						0.	0.	0.
(17) AIMEE MULLINS TRUSTEE	5.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) STEPHANIE TOLLESON TRUSTEE	5.00	X						0.	0.	0.
(19) JESSICA MENDOZA TRUSTEE	5.00	X						0.	0.	0.
(20) KENNETH SHROPSHIRE TRUSTEE	5.00	X						0.	0.	0.
(21) BECKY MORGAN TRUSTEE	5.00	X						0.	0.	0.
(22) STEPHEN WHISNANT TREASURER	5.00	X		X				0.	0.	0.
(23) SARAH ROBB O'HAGAN TRUSTEE	10.00	X						0.	0.	0.
(24) TAMIKA CATCHINGS TRUSTEE	5.00	X						0.	0.	0.
(25) SHAWN JOHNSON TRUSTEE	5.00	X						0.	0.	0.
(26) JEAN AFTERMAN TRUSTEE	5.00	X						0.	0.	0.
1b Sub-total								36,000.	0.	0.
c Total from continuation sheets to Part VII, Section A								454,910.	0.	53,766.
d Total (add lines 1b and 1c)								490,910.	0.	53,766.

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

	Yes	No
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		X
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	X	
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		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	0	

SEE PART VII, SECTION A CONTINUATION SHEETS

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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(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			
(27) LAILA ALI TRUSTEE	5.00	X						0.	0.	0.
(28) KATHRYN OLSON CEO	50.00			X				317,758.	0.	26,308.
(29) BARRY GIAQUINTO CFOO	50.00			X				137,152.	0.	27,458.
Total to Part VII, Section A, line 1c								454,910.		53,766.

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	1,059,985.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,758,021.				
	g Noncash contributions included in lines 1a-1f: \$		12,432.				
	h Total. Add lines 1a-1f				2,818,006.		
Program Service Revenue	Business Code						
	2 a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			17,452.			17,452.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	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	379,352.					
	c Gain or (loss)	391,983.	17,227.				
	d Net gain or (loss)	-12,631.	-17,227.				
	8 a Gross income from fundraising events (not including \$ 1,059,985. of contributions reported on line 1c). See Part IV, line 18						
	b Less: direct expenses						
	c Net income or (loss) from fundraising events			0.			
	9 a Gross income from gaming activities. See Part IV, line 19						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances						
	b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11 a MISCELLANEOUS	900099		75,215.			75,215.	
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			75,215.				
12 Total revenue. See instructions.				2,880,815.	0.	0.	62,809.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	359,646.	359,646.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	107,420.	107,420.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	462,922.	274,485.	75,074.	113,363.
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	452,615.	385,617.		66,998.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	53,766.	26,768.	16,360.	10,638.
9 Other employee benefits	114,474.	92,519.		21,955.
10 Payroll taxes	62,795.	47,289.	2,585.	12,921.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	20,000.		20,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses	5,614.	4,048.	460.	1,106.
14 Information technology				
15 Royalties				
16 Occupancy	135,657.	97,808.	11,124.	26,725.
17 Travel	112,205.	80,900.	9,201.	22,104.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	11,020.	7,945.	904.	2,171.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	97,673.	65,952.	9,107.	22,614.
23 Insurance	27,161.	19,583.	2,227.	5,351.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROFESSIONAL SERVICES	339,241.	315,427.	10,371.	13,443.
b PRODUCTION AND PRINTING	193,028.	182,402.	172.	10,454.
c MISCELLANEOUS	134,524.	93,292.	9,473.	31,759.
d TELEPHONE	62,744.	45,238.	5,145.	12,361.
e All other expenses	76,638.	54,312.	5,809.	16,517.
25 Total functional expenses. Add lines 1 through 24e	2,829,143.	2,260,651.	178,012.	390,480.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☒ if following SOP 98-2 (ASC 958-720)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	563,804.	2	485,411.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	1,591,259.	4	1,342,949.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	90,004.	9	87,675.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,028,848.		
	b Less: accumulated depreciation	10b 954,638.		
	11 Investments - publicly traded securities	189,110.	10c	74,210.
	12 Investments - other securities. See Part IV, line 11	689,820.	11	721,256.
	13 Investments - program-related. See Part IV, line 11	300,578.	12	219,767.
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	40,313.	14	46,289.
16 Total assets. Add lines 1 through 15 (must equal line 34)	3,464,888.	15	2,977,557.	
Liabilities	17 Accounts payable and accrued expenses	122,394.	16	2,977,557.
	18 Grants payable		17	92,990.
	19 Deferred revenue	75,000.	18	
	20 Tax-exempt bond liabilities		19	0.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21	
	23 Secured mortgages and notes payable to unrelated third parties		22	
	24 Unsecured notes and loans payable to unrelated third parties		23	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	40,313.	24	
	26 Total liabilities. Add lines 17 through 25	237,707.	25	46,289.
	27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		26	139,279.
27 Unrestricted net assets	695,529.	27	418,943.	
28 Temporarily restricted net assets	1,838,240.	28	1,725,923.	
29 Permanently restricted net assets	693,412.	29	693,412.	
30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
31 Capital stock or trust principal, or current funds		30		
32 Paid-in or capital surplus, or land, building, or equipment fund		31		
33 Retained earnings, endowment, accumulated income, or other funds		32		
34 Total net assets or fund balances	3,227,181.	33	2,838,278.	
35 Total liabilities and net assets/fund balances	3,464,888.	34	2,977,557.	

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Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,880,815.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,829,143.
3	Revenue less expenses. Subtract line 2 from line 1	3	51,672.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,227,181.
5	Net unrealized gains (losses) on investments	5	-31,052.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-409,523.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,838,278.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
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.	X	
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? _____		X
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 _____		

Form 990 (2013)

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.

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

WOMEN'S SPORTS FOUNDATION

Employer identification number

23-7380557

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 - Non-functionally integrated
- 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? 11g(i) | | |
| (ii) A family member of a person described in (i) above? 11g(ii) | | |
| (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) | | |
- 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 monetary 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) 2013

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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3914438.	4501158.	2774597.	3220761.	2818006.	17228960.
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	3914438.	4501158.	2774597.	3220761.	2818006.	17228960.
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)						2493638.
6 Public support. Subtract line 5 from line 4.						14735322.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	3914438.	4501158.	2774597.	3220761.	2818006.	17228960.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	96,300.	92,314.	99,246.	15,949.	17,452.	321,261.
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.)						
11 Total support. Add lines 7 through 10						17550221.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	83.96 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	88.50 %
16a 33 1/3% support test - 2013. 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 - 2012. 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 - 2013. 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 - 2012. 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) 2013

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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. 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 - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

☐

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

☐

Part IV

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

2013

*** Not Open to Public Inspection ***

Total Excess Contributions to Schedule A, Part II, Line 5	2,493,638.
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Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Name of the organization

Employer identification number

WOMEN ' S SPORTS FOUNDATION

23-7380557

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☒ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization WOMEN'S SPORTS FOUNDATION	Employer identification number 23-7380557
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<u>PABLO SALAME</u> <u>66 LEONARD STREET, APT 9C</u> <u>NEW YORK, NY 10013</u>	\$ <u>150,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	<u>JAMES & REBECCA MORGAN CHARITABLE FOUNDATION</u> <u>12728 LA CRESTA DRIVE</u> <u>LOS ALTOS HILLS, CA 94022-2513</u>	\$ <u>115,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	<u>WELLS FARGO FOUNDATION</u> <u>74199 EL PASEO SUITE 104</u> <u>PALM DESERT, CA 92260</u>	\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	<u>GATORADE</u> <u>555 W. MONROE STREET</u> <u>CHICAGO, IL 60661</u>	\$ <u>900,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	<u>NOVO NORDISK INC.</u> <u>100 COLLEGE ROAD WEST</u> <u>PRINCETON, NJ 08540</u>	\$ <u>75,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	<u>DOBKIN FAMILY FOUNDATION</u> <u>51 LOCUST AVENUE, SUITE 201</u> <u>NEW CANAAN, CT 06840</u>	\$ <u>77,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

23-7380557

Part II

[illegible]

Employer identification number

23-7380557

Use duplicate copies of Part III if additional space is needed.

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

- ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2013

Open to Public Inspection

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

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

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

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

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

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

Name of organization WOMEN ' S SPORTS FOUNDATION	Employer identification number 23-7380557
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ \$

3 Volunteer hours ▶

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

Schedule C (Form 990 or 990-EZ) 2013

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 (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		3,482.													
c Total lobbying expenditures (add lines 1a and 1b)		3,482.													
d Other exempt purpose expenditures		2,825,661.													
e Total exempt purpose expenditures (add lines 1c and 1d)		2,829,143.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		291,457.													
<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)		72,864.													
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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount		400,042.	345,399.	291,457.	1,036,898.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,555,347.
c Total lobbying expenditures		7,005.	7,892.	3,482.	18,379.
d Grassroots nontaxable amount		100,011.	86,350.	72,864.	259,225.
e Grassroots ceiling amount (150% of line 2d, column (e))					388,838.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2013

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

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

WOMEN'S SPORTS FOUNDATION

Employer identification number

23-7380557

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	
2 Aggregate contributions to (during year)	235,467.	
3 Aggregate grants from (during year)	286,825.	
4 Aggregate value at end of year	302,795.	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☒ Yes ☐ No

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

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

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

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

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

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

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

(i) 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

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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

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

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	719,520.	842,292.	1,010,746.	1,049,830.	4,565,247.
b Contributions			80,000.	1,000.	95,800.
c Net investment earnings, gains, and losses	-18,210.	22,846.	38,837.	34,224.	14,402.
d Grants or scholarships					
e Other expenditures for facilities and programs			287,291.	74,308.	3,625,619.
f Administrative expenses		145,618.			
g End of year balance	701,310.	719,520.	842,292.	1,010,746.	1,049,830.

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

a Board designated or quasi-endowment ☐ _____ %

b Permanent endowment ☒ 98.90 %

c Temporarily restricted endowment ☒ 1.10 %

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

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

(i) unrelated organizations

(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 XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		338,463.	338,463.	0.
d Equipment		580,144.	521,965.	58,179.
e Other		110,241.	94,210.	16,031.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				74,210.

Schedule D (Form 990) 2013

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. 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) ALTERNATIVE INVESTMENT	219,767.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	219,767.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) DEFERRED COMP - 457 PLAN	46,289.	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	46,289.	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements	1	2,963,815.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	83,000.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	83,000.
3	Subtract line 2e from line 1	3	2,880,815.
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 XIII.)	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	2,880,815.

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

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

1	Total expenses and losses per audited financial statements	1	3,352,718.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	83,000.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	440,575.
e	Add lines 2a through 2d	2e	523,575.
3	Subtract line 2e from line 1	3	2,829,143.
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 XIII.)	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	2,829,143.

Part XIII Supplemental Information.

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

PART X, LINE 2:**EXPLANATION:**

THE FOUNDATION HAS NO UNCERTAIN TAX POSITIONS AS OF DECEMBER 31, 2013 AND 2012 IN ACCORDANCE WITH ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC 740, WHICH PROVIDES STANDARDS FOR ESTABLISHING AND CLASSIFYING ANY TAX PROVISIONS FOR UNCERTAIN TAX POSITIONS. THE ORGANIZATION IS NO LONGER SUBJECT TO FEDERAL OR STATE AND LOCAL INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS ENDED BEFORE DECEMBER 31, 2010.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

LOSS ON WRITE OFF OF UNCOLLECTIBLE CONTRIBUTIONS 409,523.

UNREALIZED LOSS ON INVESTMENTS 31,052.

TOTAL TO SCHEDULE D, PART XII, LINE 2D

440,575.

PART V, LINE 4:

TO SUPPORT VARIOUS RESTRICTED GRANTS AND UNRESTRICTED ACTIVITIES

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2013

Open To Public Inspection

Name of the organization

WOMEN'S SPORTS FOUNDATION

Employer identification number	23-7380557
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Part I

Fundraising Activities.

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

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

- a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

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

☐ Yes☐ No

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						

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

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		NYAD (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts	1,518,030.			1,518,030.
	2 Less: Contributions	1,059,985.			1,059,985.
	3 Gross income (line 1 minus line 2)	458,045.			458,045.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	458,045.			458,045.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				458,045.
	11 Net income summary. Subtract line 10 from line 3, column (d)				0.

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. Subtract line 7 from line 1, column (d)				

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.** 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.

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

WOMEN ' S SPORTS FOUNDATION

Employer identification number
23-7380557

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. 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
STARFINDER FOUNDATION 4015 MAIN STREET PHILADELPHIA, PA 19127	04-3649918	501(C)(3)	6,000.	0.			TO CREATE TOMORROWS LEADERS
UNITED STATES SYNCHRONIZED SWIMMING 132 E WASHINGTON ST STE 820 INDIANAPOLIS, IN 46204	31-0994560	501(C)(3)	6,000.	0.			TO CREATE TOMORROWS LEADERS
USA VOLLEYBALL 4065 SINTON RD, STE 200 COLORADO SPRGS, CO 80907	80-0551967	501(C)(3)	6,000.	0.			TO CREATE TOMORROWS LEADERS
NEW HOPE ACADEMY CHARTER SCHOOL 600 NO HARTLEY ST STE 170 YORK, PA 17404	20-8908462	501(C)(3)	6,000.	0.			TO CREATE TOMORROWS LEADERS
FAIRMONT PARK CONSERVANCY C.OPHILA FREE PO BOX 268 GWYNEDD, PA 19436	23-2977645	501(C)(3)	15,000.	0.			TO CREATE TOMORROWS LEADERS
WILSON SPORTING GOODS CO. 8750 W BRYN MAWR AVE CHICAGO, IL 60631	22-2379300	501(C)(3)	52,896.	0.			TO CREATE TOMORROWS LEADERS

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 10.
- 3** Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2013)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NY JUNIOR TENNIS LEAGUE 58-12 QUEENS BLVD WOODSIDE, NY 10271	23-7442256	501(C)(3)	50,000.	0.			TO CREATE TOMORROWS LEADERS
PHILADELPHIA FREEDOM C/O B PERRY PO BOX 268 GWENEDD, PA 19436		501(C)(3)	35,000.	0.			TO CREATE TOMORROWS LEADERS
ORANGE COUNTY BREAKERS 2549 EASTBLUFF DR #800 NEWPORT BEACH, CA 92660	71-0926622	501(C)(3)	100,000.	0.			TO CREATE TOMORROWS LEADERS
UNITED NEIGHBORHOOD CENTERS OF NORTHEASTERN PENNSYLVANIA - 425 ALDER STREET - SCRANTON, PA 18505	24-0795389	501(C)(3)	6,000.	0.			TO CREATE TOMORROWS LEADERS

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.
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
GRANTS AWARDED TO ENABLE FEMALE ATHLETES TO TRAIN AND DEVELOP AT ADVANCED LEVELS	41	107,420.	0.		

Part IV

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

PART I, LINE 2:

EXPLANATION: IN 2013, WOMENS SPORTS FOUNDATION GAVE OUT \$467,066 IN GRANTS
TO ORGANIZATIONS AND INDIVIDUALS.

ONCE THE GRANTS ARE AWARDED, THE GRANTEEES HAVE 12 MONTHS TO USE THEM AND
NEED TO REPORT BACK TO OUR ORGANIZATION, AFTER 6 MONTHS AND AFTER 12
MONTHS, REGARDING THE USE AND BENEFITS OF THE GRANTS. AT YEAR END, OUR
ORGANIZATION PREPARES A FINAL REPORT ON THE GRANT PROGRAM.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

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

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

WOMEN'S SPORTS FOUNDATION

Employer identification number

23-7380557

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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 directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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?

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

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

Schedule J (Form 990) 2013

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

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2013

Open to Public
Inspection

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

Name of the organization

WOMEN'S SPORTS FOUNDATION

Employer identification number

23-7380557

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	8	12,432.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (.....				
26 Other ▶ (.....				
27 Other ▶ (.....				
28 Other ▶ (.....				

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

29

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?

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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

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.

Yes No

30a		X
31		X
32a		X

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

Schedule M (Form 990) (2013)

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

WOMEN'S SPORTS FOUNDATION

Employer identification number
23-7380557

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

RECIPIENTS -- FOUR INDIVIDUALS AND TWO U.S. WOMEN'S TEAMS (SOFTBALL AND WATER POLO) -- STOOD ON THE PODIUM REPRESENTING THE UNITED STATES TO RECEIVE MEDALS AT THE 2011 PAN AMERICAN AND PARAPAN AMERICAN GAMES IN GUADALAJARA, MEXICO. OVER 30 RECIPIENTS COMPETED IN THE 2012 GAMES IN LONDON AND OVER 10 IN THE OLYMPIC AND PARALYMPIC GAMES IN SOCHI, RUSSIA IN 2014.

THE FOUNDATION'S GOGIRLGO. GRANTS HAVE HELPED MORE THAN 170,000 GIRLS OF EVERY SKILL LEVEL TO PLAY SPORTS BY FUNDING SPORTS PARTICIPATION OPPORTUNITIES, INCLUDING THE COSTS OF EQUIPMENT AND APPAREL, IN GIRLS' SCHOOL, CLUB AND COMMUNITY PROGRAMS. IN ADDITION, THE FOUNDATION HAS PROVIDED LEADERSHIP DEVELOPMENT OPPORTUNITIES, VOLUNTEER OPPORTUNITIES, AND RESEARCH GRANTS.

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

GIRLS' SPORTS PROGRAMS IN MY COMMUNITY?" IN THE PAST YEAR, OUR OUTREACH HAS ALSO GROWN THROUGH INCREASINGLY POPULAR SOCIAL MEDIA OUTLETS, ENABLING US TO SHARE HIGHLIGHTS OF OUR WORK AND IMPORTANT ISSUES THROUGH INTERACTIVE MESSAGES ON FACEBOOK (25,000+ FANS), AND TWITTER (19,000+ FOLLOWERS).

1. PUBLIC EDUCATION

NATIONAL AWARDS PROGRAMS INCLUDING THE INTERNATIONAL WOMEN'S SPORTS HALL OF FAME AND SPORTSWOMAN OF THE YEAR EDUCATE THE PUBLIC ABOUT THE ACHIEVEMENTS OF FEMALE ATHLETES ON AND OFF THE FIELD. OVER THE PAST 34

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YEARS, MORE THAN 400 HONOREES HAVE BEEN CELEBRATED. WITH WOMEN RECEIVING ONLY 8% OF PRINT AND ELECTRONIC SPORTS MEDIA COVERAGE, THE FOUNDATION USES ITS HIGH-VISIBILITY AWARDS EVENTS AND CELEBRITY AND CHAMPION ATHLETE SPOKESPEOPLE TO CREATE MORE MEDIA COVERAGE, AND REINFORCE THE IDEA OF HAVING POSITIVE FEMALE ATHLETES AS ROLE MODELS PORTRAYED IN THE MEDIA.

2. GOGIRLGO!

IN MAY 2001, THE WOMEN'S SPORTS FOUNDATION LAUNCHED GOGIRLGO! - AN INITIATIVE TO GET ONE MILLION INACTIVE GIRLS PHYSICALLY ACTIVE. GOGIRLGO! GRANT AND EDUCATION PROGRAMS HAVE BEEN DELIVERED THROUGH HUNDREDS OF PARTNER YOUTH-SERVING SCHOOLS AND ORGANIZATIONS AND ENABLE GIRLS TO COPE WITH THE PHYSICAL AND MENTAL HEALTH AND SOCIAL CHALLENGES THEY ARE FACING, FROM OBESITY AND SMOKING TO DEPRESSION AND UNHAPPINESS WITH THEIR BODIES. WOMEN'S SPORTS FOUNDATION AND OTHER RESEARCH POINT TO PHYSICAL ACTIVITY AS A FUNDAMENTAL SOLUTION TO THE SERIOUS AND UNIQUE HEALTH AND SOCIAL PROBLEMS FACED BY GIRLS TODAY. THE FOUNDATIONS COMPREHENSIVE GOGIRLGO! PROGRAM INITIATIVES INCLUDE GRANT PROGRAMS, TECHNICAL ASSISTANCE TO GIRL-SERVING AGENCIES TO ENABLE THEM TO BETTER SERVE INACTIVE GIRLS AND COMPREHENSIVE PUBLIC EDUCATION INITIATIVES.

KEY TO THE FOUNDATION'S PUBLIC EDUCATION EFFORTS INCLUDE THE DELIVERY OF RESEARCH-BASED FACTS AND MESSAGES ABOUT THE BENEFITS OF GIRLS PLAYING SPORTS AND BEING ACTIVE AND THE HIGHER HEALTH RISKS THEY ENCOUNTER WHEN THEY DO NOT. OUR WEBSITE, WWW.WOMENSSPORTSFOUNDATION.ORG/GOGIRLGO, PROVIDES SUMMARY DATA THAT INCLUDES THE FOLLOWING STATISTICS THAT CAN BE ADDRESSED BY INCREASED PHYSICAL ACTIVITY:

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*APPROXIMATELY 25 MILLION CHILDREN UNDER 17 ARE EITHER OVERWEIGHT OR OBESE.

*A GIRL'S PARTICIPATION IN SPORTS OR PHYSICAL ACTIVITY DECLINES SIGNIFICANTLY AS SHE GETS OLDER. BY THE TIME SHE IS 16 OR 17, ONLY 1 IN 7 ATTENDS P.E. CLASS DAILY, AND 15-30 PERCENT REPORT NO REGULAR PHYSICAL ACTIVITY AT ALL.

*INACTIVITY IS MUCH MORE COMMON AMONG FEMALES THAN MALES, AND AMONG BLACK FEMALES THAN WHITE FEMALES.

*THIRTY-EIGHT PERCENT OF 12TH GRADE GIRLS AND 18 PERCENT OF EIGHTH-GRADE GIRLS HAVE USED AN ILLICIT DRUG.

*THE UNITED STATES HAS THE HIGHEST TEEN PREGNANCY AND BIRTH RATES IN THE INDUSTRIALIZED WORLD.

*BY AGE 15, GIRLS ARE TWICE AS LIKELY AS BOYS TO HAVE EXPERIENCED A MAJOR DEPRESSIVE EPISODE.

*OVER 90 PERCENT OF VICTIMS OF EATING DISORDERS ARE FEMALE, AND 86 PERCENT REPORT ONSET BY AGE 20.

3. INTERNATIONAL WOMEN'S SPORTS HALL OF FAME

THE WOMEN'S SPORTS FOUNDATION OWNS THE INTERNATIONAL WOMEN'S SPORTS HALL OF FAME AND A COMPREHENSIVE WOMEN'S SPORTS LIBRARY OF MORE THAN 2,000 VOLUMES, A SIGNIFICANT WOMEN'S SPORTS FILM AND VIDEO COLLECTION, ATHLETE AND EVENT MEMORABILIA REPRESENTING MORE THAN 40 SPORTS, AND TRAVELING MUSEUM EXHIBITS.

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

SCHOOL LEVEL AND NEARLY 63,000 FEWER CHANCES TO PARTICIPATE AT THE NCAA LEVEL.

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*WOMEN RECEIVE \$183 MILLION LESS IN COLLEGE SCHOLARSHIP DOLLARS EACH YEAR THAN THEIR MALE COUNTERPARTS.

*WOMEN OF COLOR COMPRISE APPROXIMATELY 23% OF NCAA FEMALE STUDENT ATHLETES.

*WOMEN HOLD LESS THAN 43% OF THE HEAD COACHING POSITIONS IN WOMEN'S SPORTS, LESS THAN 3% OF THE HEAD COACHING POSITIONS IN MEN'S SPORTS AND 8.2% OF DIVISION I, 16.1% OF DIVISION II, AND 29.1% OF DIVISION III COLLEGE ATHLETIC DIRECTOR JOBS.

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

RESEARCH

THE WOMEN'S SPORTS FOUNDATION HAS PUBLISHED OVER 30 RESEARCH STUDIES, INCLUDING HER LIFE DEPENDS ON IT I & II: SPORT, PHYSICAL ACTIVITY AND THE HEALTH AND WELL-BEING OF AMERICAN GIRLS (2005 & 2009); THE GROUND-BREAKING GO OUT AND PLAY: YOUTH SPORTS IN AMERICA (2008) AND WHO'S PLAYING COLLEGE SPORTS? (2008); AND WOMEN IN THE 2010 OLYMPIC AND PARALYMPIC WINTER GAMES: AN ANALYSIS OF PARTICIPATION, LEADERSHIP, AND MEDIA OPPORTUNITIES (2010). THESE AND OTHER WSF ORIGINAL RESEARCH REPORTS ARE QUOTED DAILY IN MEDIA, ACADEMIC AND PUBLIC HEALTH SETTINGS. FOLLOWING ARE BRIEF SYNOPSES OF RECENTLY COMPLETED PROJECTS:

1.GO OUT AND PLAY: YOUTH SPORTS IN AMERICA

A NATIONAL RESEARCH TEAM HEADED BY DR. DON SABO, DIRECTOR, CENTER FOR RESEARCH ON PHYSICAL ACTIVITY, SPORTS, AND HEALTH, D'YOUVILLE COLLEGE, STUDIED THE SPORTS AND FITNESS PARTICIPATION OF BOYS AND GIRLS 8-18 (TO ALLOW COMPARISONS) AND THE FACTORS THAT IMPACT THEIR PARTICIPATION. VARIABLES ADDRESSED INCLUDE RACE, ETHNICITY, AGE, SOCIO-ECONOMIC STATUS, FAMILY SUPPORT AND ROLE MODELING, CULTURAL BARRIERS AND

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ENVIRONMENTAL BARRIERS IN A NATIONALLY REPRESENTATIVE SAMPLE AND IN 10-20 COMMUNITIES THAT RANK LOW ON THE HEALTH AND WELL-BEING OF GIRLS, OVER-SAMPLING THESE GROUPS AND OTHER RACE, ETHNIC AND ECONOMIC DEMOGRAPHICS TO INCREASE THE POWER OF THE STUDY. THE WSF HAS AN EXEMPLARY TRACK RECORD OF PERFORMING PUBLIC SERVICE RESEARCH. THIS RESEARCH REPORT IS THE FIRST OF ITS KIND TO MEASURE A NATIONAL REPRESENTATIVE SAMPLE OF GIRLS AND BOYS AND THEIR PHYSICAL ACTIVITY BEHAVIORS. THE STUDY WILL BE REPEATED EVERY TWO YEARS TO TRACK PROGRESS.

2.EXPANDING THE BOUNDARIES OF SPORT MEDIA RESEARCH: AN EXPLORATION OF CONSUMER RESPONSES TO REPRESENTATIONS OF WOMEN'S SPORTS

OVER THE PAST THREE DECADES, SPORT MEDIA SCHOLARS HAVE CONSISTENTLY UNCOVERED TWO PATTERNS OF REPRESENTATION THROUGHOUT MAINSTREAM MEDIA:

1) FEMALE ATHLETES, COMPARED TO THEIR MALE COUNTERPARTS, ARE SIGNIFICANTLY UNDERREPRESENTED WITH RESPECT TO AMOUNT OF COVERAGE (FINK & KENSICKI, 2002; KANE & BUYSSE, 2005); AND 2) SPORTSWOMEN ARE ROUTINELY PRESENTED IN WAYS THAT EMPHASIZE THEIR FEMININITY AND HETEROSEXUALITY VERSUS THEIR ATHLETIC COMPETENCE (KANE, 1998; PARKER, 2002). THESE TRENDS HAVE BEEN REMARKABLY RESILIENT: THEY HAVE BEEN DISCOVERED IN PRINT AND BROADCAST JOURNALISM, AT DIFFERENT LEVELS OF ATHLETIC INVOLVEMENT (E.G., OLYMPIC, COLLEGE AND PROFESSIONAL SPORTS) AND REGARDLESS OF TIME PERIOD WITH RESPECT TO TITLE IX. REGARDING THIS LATTER POINT, DUNCAN AND MESSNER (2005) FOUND THAT SPORTSWOMEN CONTINUE TO BE LARGELY INVISIBLE THROUGHOUT THE VAST MEDIA LANDSCAPE, WHERE THEY TYPICALLY RECEIVE ONLY 6-8% OF ALL SPORT COVERAGE. THIS IGNORES THE REALITY OF WOMEN'S OVERALL LEVEL OF INVOLVEMENT IN THAT THEY REPRESENT APPROXIMATELY 40% OF ALL SPORT PARTICIPANTS NATIONWIDE. IT ALSO IGNORES

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ANOTHER REALITY

SPORTSWOMEN COMPRISE APPROXIMATELY HALF OF ALL THOSE INVOLVED IN INTERCOLLEGIATE ATHLETICS (ACOSTA & CARPENTER, 2006).

3. TITLE IX RESEARCH SERIES

THE WOMEN'S SPORTS FOUNDATION HAS ASSEMBLED A TITLE IX RESEARCH TEAM LED BY DR. JOHN J. CHESLOCK, OF PENN STATE UNIVERSITY (FORMERLY OF THE UNIVERSITY OF ARIZONA) TO PRODUCE A SERIES OF THREE REPORTS ON TITLE IX WHICH WILL ESSENTIALLY ANSWER THREE RELATIVELY STRAIGHTFORWARD QUESTIONS:

1. HOW HAS MALE AND FEMALE ATHLETIC PARTICIPATION CHANGED OVER TIME?

2. WHAT FACTORS HAVE CONTRIBUTED TO THESE CHANGES IN ATHLETIC PARTICIPATION?

WHILE THESE THREE QUESTIONS ARE SIMPLE, THE REPORTS WILL BE OF SUBSTANTIAL DEPTH. TO FULLY ANSWER THE RELATIVELY BROAD QUESTIONS LISTED ABOVE, ONE NEEDS TO ANSWER A VARIETY OF UNDERLYING SPECIFIC QUESTIONS. FURTHERMORE, THE ANSWERS TO EACH QUESTION CAN DIFFER SUBSTANTIALLY BY THE TYPE OF INSTITUTION EXAMINED. NCAA DIVISION I-A INSTITUTIONS, NCAA DIVISION III INSTITUTIONS, AND NJCAA INSTITUTIONS ARE UNLIKELY TO ACT IN A SIMILAR FASHION. EACH OF THESE REPORTS WILL SUBSTANTIALLY INFLUENCE THE DEBATE OVER TITLE IX WITH THE WOMEN'S SPORTS FOUNDATION LEADING A MEDIA EFFORT TO DISSEMINATE THIS WORK BROADLY.

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4. WOMEN IN THE 2010 OLYMPIC AND PARALYMPIC WINTER GAMES

THE 2010 STUDY REPLICATES THE FOUNDATION'S "WOMEN IN THE 2006 OLYMPIC AND PARALYMPIC WINTER GAMES: AN ANALYSIS OF PARTICIPATION, LEADERSHIP AND MEDIA COVERAGE" REPORT, A COMPREHENSIVE STUDY GRADING THE PARITY OF WOMEN'S PARTICIPATION AND LEADERSHIP FOR THE OLYMPIC AND PARALYMPIC WINTER GAMES. THE FOUNDATION HAS ALSO CONDUCTED STUDIES ON THE SUMMER OLYMPIC GAMES OF 2008. OF NOTE, THE 2012 OLYMPIC REPORT IS NOW ISSUED.

THE WOMEN'S SPORTS FOUNDATION ISSUED A REPORT CARD THAT GRADES THE FOLLOWING:

- *2010 OLYMPIC WINTER GAMES PARTICIPATION
- *2010 PARALYMPIC WINTER GAMES PARTICIPATION
- *2010 IOC MEMBERSHIP
- *2010 INTERNATIONAL PARALYMPIC COMMITTEE (IPC) MEMBERSHIP
- *2010 U.S. OLYMPIC PARTICIPATION OF WOMEN IN LEADERSHIP POSITIONS
- *2010 U.S. PARALYMPIC PARTICIPATION OF WOMEN IN LEADERSHIP POSITIONS
- *2010 U.S. OLYMPIC COMMITTEE (USOC) BOARD OF DIRECTORS
- *2010 U.S. MEDIA COVERAGE
- *2012 OLYMPIC AND PARALYMPIC REPORT

THE WOMEN'S SPORTS FOUNDATION IS THE LEADER IN PROMOTING SPORTS, HEALTH AND EDUCATION FOR GIRLS AND WOMEN. WITH BILLIE JEAN KING AS OUR FOUNDER AND ONGOING VISIONARY, THE WOMEN'S SPORTS FOUNDATION CONTINUES TO HAVE A PROFOUND IMPACT ON FEMALE ATHLETICS, FROM ITS VIGOROUS ADVOCACY OF TITLE IX LEGISLATION TO PROVIDING GRANTS AND SCHOLARSHIPS, GRASSROOTS PROGRAMS FOR UNDERSERVED GIRLS, AND GROUNDBREAKING RESEARCH. AN AGENT FOR CHANGE, THE FOUNDATION HAS RELATIONSHIPS WITH MORE THAN 1,000 OF THE WORLD'S ELITE FEMALE ATHLETES AND IS RECOGNIZED GLOBALLY FOR ITS

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LEADERSHIP, VISION, STRENGTH, EXPERTISE AND INFLUENCE. FOR MORE
INFORMATION, VISIT WWW.WOMENSSPORTSFOUNDATION.ORG.

EXPENSES \$ 477,866. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

EXPLANATION: THE ORGANIZATION MAKES AVAILABLE TO ALL BOARD MEMBERS THE FORM
990 FOR THEIR REVIEW PRIOR TO FILING.

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

EXPLANATION: THE ORGANIZATION HAS A WRITTEN CONFLICT OF INTEREST POLICY.
EVERYONE IN THE ORGANIZATION IS REVIEWED PERIODICALLY TO DETERMINE IF A
CONFLICT OF INTEREST HAS OCCURED.

FORM 990, PART VI, SECTION B, LINE 15:

EXPLANATION: THE ORGANIZATION USES THE FOLLOWING TO ESTABLISH THE
COMPENSATION OF THE ORGANIZATION'S CEO AND TOP MANAGEMENT OFFICIALS: 1)
APPROVAL BY THE BOARDS COMPENSATION COMMITTEE, 2)WRITTEN EMPLOYMENT
CONTRACT (CEO), 3) FORM 990 OF OTHER ORGANIZATIONS, 4) INDUSTRY SPECIFIC
SALARY STUDIES.

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF
INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON
REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

LOSS ON WRITE-OFF OF UNCOLLECTIBLE CONTRIBUTIONS -409,523.

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FORM 990, PART XII LINE 2C

EXPLANATION: THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

FORM 990, PART I, LINE 1

EXPLANATION: THE FOUNDATION WORKS FOR EQUAL OPPORTUNITY FOR ALL WOMEN TO PLAY SPORTS SO THEY CAN DERIVE THE PHYSIOLOGICAL, PSYCHOLOGICAL AND SOCIOLOGICAL BENEFITS OF SPORTS PARTICIPATION.

THE WOMEN'S SPORTS FOUNDATION IS THE TRUSTED VOICE OF WOMEN'S SPORTS AND PHYSICAL ACTIVITY BECAUSE OUR WORK IS ANCHORED ON EVIDENCE-BASED RESEARCH AND 39 YEARS OF EXPERIENCE IN THE DESIGN AND EXECUTION OF AWARD-WINNING EDUCATION AND PUBLIC POLICY PROGRAMS. FOUNDED IN 1974 BY BILLIE JEAN KING, THE WOMEN'S SPORTS FOUNDATION IS A NATIONAL, CHARITABLE, EDUCATIONAL ORGANIZATION DEDICATED TO ADVANCING THE LIVES OF GIRLS AND WOMEN THROUGH PHYSICAL ACTIVITY. WE ARE THE ONLY NATIONAL ORGANIZATION PROMOTING ALL SPORTS AND PHYSICAL ACTIVITIES FOR WOMEN OF ALL AGES AND SKILL LEVELS AND ARE ACKNOWLEDGED BY THE MEDIA AS THE EXPERT RESOURCE ON ALL WOMEN'S SPORTS ISSUES.

AN EDUCATED PUBLIC IS THE STRONGEST FORM OF ADVOCACY, AND RESEARCH IS KEY TO DEMONSTRATING THAT SPORTS AND PHYSICAL ACTIVITY LEAD TO HEALTHIER, HAPPIER AND MORE PRODUCTIVE LIVES. THE WOMEN'S SPORTS FOUNDATION HAS A RICH HISTORY OF CONDUCTING IMPORTANT RESEARCH AND HAS MADE A LONG-TERM COMMITMENT TO A SERIES OF SIGNATURE REPORTS ADDRESSING SUCH TOPICS AS GIRLS' PARTICIPATION IN SPORTS, THE IMPACT OF MEDIA IMAGES OF WOMEN IN SPORTS AND PAY EQUITY.

OUR VISION IS A SOCIETY IN WHICH PARENTS UNDERSTAND THE BENEFITS OF

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SPORTS AND PHYSICAL ACTIVITY PARTICIPATION FOR BOTH THEIR DAUGHTERS AND THEIR SONS AND EQUALLY ENCOURAGE THEM TO BE ACTIVE AND HEALTHY.

TOGETHER WE WANT TO CREATE A SOCIETY IN WHICH GIRLS AND WOMEN OF ALL AGES FULLY EXPERIENCE AND ENJOY SPORTS AND PHYSICAL ACTIVITY WITH NO BARRIERS TO THEIR PARTICIPATION. OUR SUCCESS DEPENDS ON PEOPLE AROUND THE WORLD WHO WORK WITH US TO HELP EVERY GIRL AND WOMAN BELIEVE THAT SHE CAN BE FIT, CONFIDENT AND HEALTHY IN A BODY OF ANY SIZE.

THE WOMEN'S SPORTS FOUNDATION IS A NATIONAL 501(C)(3) CHARITABLE ORGANIZATION WITH A STRONG BOARD WHO ARE ACTIVELY ENGAGED IN STANDING COMMITTEES. THE COMMITTEES MEET ON A REGULAR BASIS, AND THE CHAIR OF THE BOARD, THE PRESIDENT AND THE HEADS OF EACH COMMITTEE FORM THE EXECUTIVE COMMITTEE. COMMITTEE MEMBERS ARE EITHER BOARD MEMBERS AND/OR EXPERTS IN THE SCOPE OF THE COMMITTEE. THE ACTIVE BOARD AND STAFF WORK WITH VOLUNTEERS WHO ENGAGE WITH THE ORGANIZATION IN THE FOLLOWING AREAS: GRANT REVIEW, AWARD NOMINATION PROCESSES, WSF NATIONAL AND GRASSROOTS EVENTS, PROGRAM IMPLEMENTATION, DISTRIBUTION OF EDUCATIONAL MATERIALS, PUBLIC POLICY INITIATIVES AND FUNDRAISING. COLLABORATIONS AND PARTNERSHIPS WITH OTHER ORGANIZATIONS ARE STANDARD ORGANIZATION PRACTICES. STAFF MEMBERS LEAD OR PARTICIPATE IN NATIONAL COLLABORATIONS AROUND GENDER EQUITY AND ACTION, TITLE IX ENFORCEMENT AND STRATEGY EFFORTS, RESEARCH EFFORTS ON WOMEN AND GIRLS, AND WOMEN AND PHILANTHROPY.

MORE THAN 500 YOUNG PROFESSIONALS HAVE DEVELOPED LEADERSHIP SKILLS AND CAREER ADVANCEMENT OPPORTUNITIES THROUGH THE FOUNDATION'S INTERNSHIP PROGRAM WHILE PROVIDING SUPPORT FOR OUR PROGRAMMING EFFORTS.

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	WOMEN'S SPORTS FOUNDATION	23-7380557
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	EISENHOWER PARK, 1899 HEMPSTEAD TURNPIKE, NO. 400	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	EAST MEADOW, NY 11554	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

DEBORAH S. LARKIN, CEO - EISENHOWER PARK, 1899 HEMPSTEAD

• The books are in the care of ☒ **TURNPIKE, SUITE 400 - EAST MEADOW, NY 11554**

Telephone No. ☒ **516-542-4700**

Fax No. ☐

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2014**.

5 For calendar year **2013**, or other tax year beginning , and ending .

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION FOR A COMPLETE AND ACCURATE RETURN.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature

Title

Date

Form **8868** (Rev. 1-2014)

WOMEN'S SPORTS FOUNDATION
EISENHOWER PARK, 1899 HEMPSTEAD TURNPIKE, NO.
EAST MEADOW, NY 11554

NYS OFFICE OF ATTORNEY GENERAL
CHARITIES BUREAU REGISTRATION SECTION
120 BROADWAY
NEW YORK, NY 10271

FORM CHAR500

TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM CHAR500

FOR THE YEAR ENDING

DECEMBER 31, 2013

Prepared for	WOMEN'S SPORTS FOUNDATION EISENHOWER PARK, 1899 HEMPSTEAD TURNPIKE NO. 400 EAST MEADOW, NY 11554
Prepared by	MARKS PANETH LLP 685 THIRD AVENUE NEW YORK, NY 10017
Mail tax return to	NYS OFFICE OF ATTORNEY GENERAL CHARITIES BUREAU REGISTRATION SECTION 120 BROADWAY NEW YORK, NY 10271
Return must be mailed on or before	PLEASE MAIL AS SOON AS POSSIBLE.
Special Instructions	NEW YORK FORM CHAR500 MUST BE SIGNED AND DATED BY BOTH OF THE AUTHORIZED INDIVIDUALS. ALSO BE SURE THAT THE ATTACHED COPY OF FEDERAL FORM 990 HAS BEEN PROPERLY SIGNED AND DATED. ENCLOSE A CHECK FOR \$275 MADE PAYABLE TO NYS DEPARTMENT OF LAW. INCLUDE THE ORGANIZATION'S STATE REGISTRATION NUMBER ON THE REMITTANCE.

CHAR500

NYS Annual Filing for Charitable Organizations
www.CharitiesNYS.com

Send with fee and attachments to:
NYS Office of the Attorney General
Charities Bureau Registration Section
120 Broadway
New York, NY 10271

2013
**Open to Public
Inspection**

1. General Information

For Fiscal Year Beginning (mm/dd/yyyy) 01/01/2013 and Ending (mm/dd/yyyy) 12/31/2013		
Check if Applicable: <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change <input type="checkbox"/> Initial Filing <input type="checkbox"/> Final Filing <input type="checkbox"/> Amended Filing <input type="checkbox"/> Reg ID Pending	Name of Organization: WOMEN'S SPORTS FOUNDATION	Employer Identification Number (EIN): 23-7380557
	Mailing Address: EISENHOWER PARK, 1899 HEMPSTEAD 400	NY Registration Number: 04-68-62
	City / State / ZIP: EAST MEADOW, NY 11554	Telephone: 646 845-0273
	Website: WWW.WOMENSSPORTSFOUNDATION.ORG	Email: KOLSON@WOMENSSPORTS
Check your organization's registration category: <input type="checkbox"/> 7A only <input type="checkbox"/> EPTL only <input checked="" type="checkbox"/> DUAL (7A & EPTL) <input type="checkbox"/> EXEMPT Find your registration category in the Charities Registry at www.CharitiesNYS.com		

2. Certification

See instructions for certification requirements. Improper certification is a violation of law that may be subject to penalties.

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

President or Authorized Officer:	<u>KATHRYN OLSON</u>	<u>CEO</u>	
	Signature	Title	Date
Chief Financial Officer or Treasurer:	<u>BARRY GIAQUINTO</u>	<u>CFOO</u>	
	Signature	Title	Date

3. Annual Reporting Exemption

Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under the category (7A and EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500. No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.

- ☐ 3a. 7A filing exemption: Total contributions from NY State including residents, foundations, government agencies, etc, did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during the fiscal year. Or the organization qualifies for another 7A exemption (see instructions).
- ☐ 3b. EPTL filing exemption: Gross receipts did not exceed \$25,000 and the market value of assets did not exceed \$25,000 at any time during the fiscal year.

4. Schedules and Attachments

See the following page for a checklist of schedules and attachments to complete your filing.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? If yes, complete Schedule 4a.
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4b. Did the organization receive government grants? If yes, complete Schedule 4b.

5. Fee

See the checklist on the next page to calculate your fee(s). Indicate fee(s) you are submitting here:	7A filing fee: \$ <u>25.</u>	EPTL filing fee: \$ <u>250.</u>	Total fee: \$ <u>275.</u>	Make a single-check or money order payable to: "Department of Law"
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CHAR500

Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4:

- ☐ If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
- ☐ If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:

- ☒ IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable
- ☒ All additional IRS Form 990 Schedules including Schedule B (Schedule of Contributors).
- ☐ IRS Form 990-T if applicable

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report:

- ☐ Review Report if you received total revenue and support greater than \$250,000 and up to \$500,000.
- ☒ Audit Report if you received total revenue and support greater than \$500,000
- ☐ No Review Report or Audit Report is required because total revenue and support is less than \$250,000

Note: The Audit and Review requirements are set to change in 2017 and 2021 in accordance with the Non Profit Revitalization Act of 2013.

For more details, visit www.CharitiesNYS.com.**Calculate Your Fee**

For 7A and DUAL filers, calculate the 7A fee:

- ☐ \$0, if you marked the 7A exemption in Part 3a
- ☒ \$25, if you did not mark the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:

- ☐ \$0, if you marked the EPTL exemption in Part 3b
- ☐ \$25, if the NET WORTH is less than \$50,000
- ☐ \$50, if the NET WORTH is \$50,000 or more but less than \$250,000
- ☐ \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000
- ☒ \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000
- ☐ \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000
- ☐ \$1500, if the NET WORTH is \$50,000,000 or more

Is my organization a 7A, EPTL or DUAL filer?

- 7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")
- EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.
- DUAL filers are registered under both 7A and EPTL.

Check your registration category and learn more about NY law at www.CharitiesNYS.comWhere do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General
 Charities Bureau Registration Section
 120 Broadway
 New York, NY 10271