

Return of Organization Exempt From Income Tax

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

Department of the Treasury
Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning 07/01, 2009, and ending 06/30, 2010

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization LEGAL MOMENTUM Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 395 HUDSON STREET City or town, state or country, and ZIP + 4 NEW YORK, NY 10014	D Employer identification number 23-7085442
	F Name and address of principal officer: ELIZABETH GRAYER, PRESIDENT 395 HUDSON STREET NEW YORK, NY 10014		E Telephone number (212) 413-7512
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		G Gross receipts \$ 6,206,932.	
J Website: ▶ WWW.LEGALMOMENTUM.ORG		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1970 M State of legal domicile: DC	

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: LEGAL MOMENTUM'S MISSION IS TO ENSURE THE ECONOMIC AND PERSONAL SECURITY OF ALL WOMEN AND GIRLS, WHILE SAFEGUARDING AND EXPANDING WOMEN'S RIGHTS UNDER THE LAW.		
	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	26
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	24
	5	Total number of employees (Part V, line 2a)	5	54
	6	Total number of volunteers (estimate if necessary)	6	3
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	
b	Net unrelated business taxable income from Form 990-T, line 34	7b		
Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	4,534,824.	4,812,937.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-18,558.	64,859.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	208,406.	425,398.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,724,672.	5,303,194.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,911,915.	2,547,883.
	16 a	Professional fundraising fees (Part IX, column (A), line 11e)	87,504.	61,797.
	b	Total fundraising expenses, Part IX, column (D), line 25 ▶ 702,542.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,775,433.	2,427,080.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,774,852.	5,036,760.	
19	Revenue less expenses. Subtract line 18 from line 12	-1,050,180.	266,434.	
Net Assets or Fund Balances			Beginning of Year	End of Year
	20	Total assets (Part X, line 16)	3,800,565.	3,694,280.
	21	Total liabilities (Part X, line 26)	1,447,775.	1,040,992.
22	Net assets or fund balances. Subtract line 21 from line 20	2,352,790.	2,653,288.	

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 _____	
	Type or print name and title _____	

Paid Preparer's Use Only	Preparer's signature ▶ _____	Date _____	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions) P00736879
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ EISNERAMPER LLP 750 THIRD AVENUE NEW YORK, NY 10017-2703	EIN ▶ 13-1639826	Phone no. ▶ 2129498700	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:
LEGAL MOMENTUM'S MISSION IS TO ENSURE THE ECONOMIC AND PERSONAL SECURITY OF ALL WOMEN AND GIRLS, WHILE SAFEGUARDING AND EXPANDING WOMEN'S RIGHTS UNDER THE LAW.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: 541100) (Expenses \$ 1,198,261. including grants of \$) (Revenue \$)
THE IMMIGRANT WOMEN PROGRAM IS THE NATION'S EXPERT ON THE RIGHTS AND SERVICES AVAILABLE TO IMMIGRANT VICTIMS OF DOMESTIC AND OTHER VIOLENCE. IT SHARES THIS EXPERTISE THROUGH COMPREHENSIVE MATERIALS AND TRAININGS FOR LAWYERS AND ADVOCATES NATIONWIDE, AND LEADS EFFORTS TO ADVOCATE FOR LEGAL PROTECTIONS, SUPPORTIVE PROGRAMS, AND GENDER-NEUTRAL IMMIGRATION POLICIES AND PRACTICES RELATED TO IMMIGRANT WOMEN.

4b (Code: 541100) (Expenses \$ 907,922. including grants of \$) (Revenue \$)
COMMUNICATIONS: EDUCATES THE PUBLIC IN SUPPORT OF PROGRAMMATIC GOALS; PLACES OP-EDS, ARTICLES AND LETTERS TO THE EDITOR IN MAJOR PUBLICATIONS. PLACES KEY STAFF IN RADIO AND TELEVISION INTERVIEWS, PREPARES SPEECHES AND PRESENTATIONS. PRODUCES AN ANNUAL REPORT AND OTHER PUBLICATIONS IN SUPPORT OF PROGRAM OBJECTIVES AND LEGAL MOMENTUM'S CORPORATE MISSION.

4c (Code: 541100) (Expenses \$ 634,196. including grants of \$) (Revenue \$)
ATTACHMENT 2

4d Other program services. (Describe in Schedule O.)
(Expenses \$ 1,166,324. including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 3,906,703.

Part IV Checklist of Required Schedules

Table with 3 main columns: Question, Yes, No. Rows 1-20 contain various questions about organizational activities and reporting requirements. Row 12A includes a sub-table with Yes/No columns.

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		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>	X	
24 a 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 question 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a 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>		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>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		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>		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>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	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>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		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>		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>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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>		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>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Table with columns for question number, description, and Yes/No columns. Includes rows for 1a, 1b, 1c, 2a, 2b, 3a, 3b, 4a, 4b, 5a, 5b, 5c, 6a, 6b, 7a-7h, 8, 9a, 9b, 10a, 10b, 11a, 11b, 12a, 12b.

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.

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body (26), 1b Enter the number of voting members that are independent (24), 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X), 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (X), 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? (X), 5 Did the organization become aware during the year of a material diversion of the organization's assets? (X), 6 Does the organization have members or stockholders? (X), 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? (X), 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? (X), 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X), b Each committee with authority to act on behalf of the governing body? (X), 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates? (X), 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?, 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? (X), 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990., 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 (X), 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X), 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done (X), 13 Does the organization have a written whistleblower policy? (X), 14 Does the organization have a written document retention and destruction policy? (X), 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X), b Other officers or key employees of the organization (X), 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X), 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 3
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. [X] Own website [] Another's website [X] Upon request
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ELIZABETH GRAYER, PRESIDENT 395 HUDSON STREET NEW YORK, NY 10014 212 413-7524

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- 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. 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 the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ELENA J. ADOLPHUS DIRECTOR	2.00	X					0.	0.	0.	
ELIZABETH J. CABRASER EXECUTIVE COMM AT LARGE	2.00	X					0.	0.	0.	
INA R. DREW TREASURER	2.00	X		X			0.	0.	0.	
REBECCA L. EISENBERG DIRECTOR	2.00	X					0.	0.	0.	
KIM GANDY DIRECTOR	2.00	X					0.	0.	0.	
IRASEMA GARZA PRESIDENT	35.00	X		X			198,674.	0.	8,571.	
STEPHANIE GEORGE DIRECTOR	2.00	X					0.	0.	0.	
JENNIFER CHOE GROVES DIRECTOR	2.00	X					0.	0.	0.	
ROBERT M KAUFMAN DIRECTOR	2.00	X					0.	0.	0.	
RALPH I. KNOWLES, JR. FIRST VICE CHAIR	2.00	X		X			0.	0.	0.	
SUSAN J. KOHLMANN SECRETARY	2.00	X		X			0.	0.	0.	
LILLIAN E. KRAEMER DIRECTOR	2.00	X					0.	0.	0.	
SUSAN B. LINDENAUER DIRECTOR	2.00	X					0.	0.	0.	
MICHELE COLEMAN MAYES DIRECTOR	2.00	X					0.	0.	0.	
LORRAINE S. MCGOWEN DIRECTOR	2.00	X					0.	0.	0.	
STACY D. PHILLIPS DIRECTOR	2.00	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	(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			
HARRIET S. POSNER DIRECTOR	2.00	X						0.	0.	0.
DEBORAH L. RHODE VICE CHAIR	2.00	X		X				0.	0.	0.
LYNDA SPENCE VICE CHAIR	2.00	X		X				0.	0.	0.
SUJATHA A. SRINIVASAN DIRECTOR	2.00	X						0.	0.	0.
BRANDE STELLINGS DIRECTOR	2.00	X						0.	0.	0.
ELSA NORRIS VARE DIRECTOR	2.00	X						0.	0.	0.
JAY W. WAKS GENERAL COUNSEL	2.00	X		X				0.	0.	0.
MARISSA C. WESLEY DIRECTOR	2.00	X						0.	0.	0.
LINDA A. WILLETT CHAIR	2.00	X		X				0.	0.	0.
G. ELAINE WOOD DIRECTOR	2.00	X						0.	0.	0.
RACHAEL PINE EEC VP & LEGAL DIRECTOR	35.00			X				143,670.	0.	16,066.
LESLYE E ORLOFF ASSOC. VP, IWP	35.00			X				108,065.	0.	9,536.
CLEVELETTE AUSTIN VP FOR FINANCE & ADMIN	35.00			X				82,242.	0.	9,287.
1b Total CONTINUED AT SCHEDULE J-2								959,256.	0.	84,235.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **5**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		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.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

Part VIII Statement of Revenue

23-7085442

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c	1,301,456.					
	d Related organizations	1d						
	e Government grants (contributions)	1e	2,321,688.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,189,793.					
	g Noncash contributions included in lines 1a-1f: \$		41,338.					
	h Total. Add lines 1a-1f			4,812,937.				
Program Service Revenue	2a _____	Business Code						
	b _____							
	c _____							
	d _____							
	e _____							
	f All other program service revenue							
	g Total. Add lines 2a-2f			0.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			52,654.			52,654.	
	4 Income from investment of tax-exempt bond proceeds			0.				
	5 Royalties			0.				
	6a Gross Rents	(i) Real	214,353.					
		(ii) Personal						
		b Less: rental expenses						
		c Rental income or (loss)	214,353.					
	d Net rental income or (loss)			214,353.			214,353.	
	7a Gross amount from sales of assets other than inventory	(i) Securities	802,198.					
		(ii) Other						
		b Less: cost or other basis and sales expenses	789,993.					
		c Gain or (loss)	12,205.					
	d Net gain or (loss)			12,205.			12,205.	
	8a Gross income from fundraising events (not including \$ <u>1,301,456.</u> of contributions reported on line 1c). See Part IV, line 18	a	113,745.					
	b Less: direct expenses	b	113,745.					
c Net income or (loss) from fundraising events			0.					
9a Gross income from gaming activities. See Part IV, line 19	a							
b Less: direct expenses	b							
c Net income or (loss) from gaming activities			0.					
10a Gross sales of inventory, less returns and allowances	a							
b Less: cost of goods sold	b							
c Net income or (loss) from sales of inventory			0.					
Miscellaneous Revenue		Business Code						
11a <u>MISC. INCOME</u>		541100	211,045.			211,045.		
b _____								
c _____								
d All other revenue								
e Total. Add lines 11a-11d			211,045.					
12 Total Revenue. See instructions			5,303,194.			490,257.		

Part IX Statement of Functional Expenses

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	0.			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	419,791.	340,031.	33,583.	46,177.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	0.			
7 Other salaries and wages	1,596,975.	1,169,216.	120,157.	307,602.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . .	136,756.	101,641.	14,566.	20,549.
9 Other employee benefits	173,658.	137,916.	16,612.	19,130.
10 Payroll taxes	220,703.	143,557.	41,707.	35,439.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	1,330.		1,330.	
c Accounting	45,000.		45,000.	
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17	61,797.			61,797.
f Investment management fees	0.			
g Other	439,190.	407,886.	31,304.	
12 Advertising and promotion	0.			
13 Office expenses	215,249.	133,995.	11,977.	69,277.
14 Information technology	0.			
15 Royalties	0.			
16 Occupancy	757,158.	564,961.	86,435.	105,762.
17 Travel	69,025.	55,168.	3,054.	10,803.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	3,072.	3,072.		
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization . . .	86,445.	58,523.	12,557.	15,365.
23 Insurance	18,108.	10,905.	3,239.	3,964.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>LOSS ON OBSOLETE INVENTORY</u>	677,189.	677,189.		
b <u>EQUIPMENT RENTAL AND REPAIRS</u>	39,038.	27,514.	5,183.	6,341.
c <u>SPECIAL EVENT EXPENSE</u>	60,168.	60,168.		
d <u>LIBRARY BOOKS AND SUBSCRIPTI</u>	10,454.	9,531.	752.	171.
e <u>MEMBERSHIPS</u>	5,654.	5,430.	59.	165.
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	5,036,760.	3,906,703.	427,515.	702,542.
26 Joint Costs. Check here <input checked="" type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	1,014,300.	868,999.		145,301.

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	122,923.	1	516,391.
	2 Savings and temporary cash investments	459,881.	2	143,122.
	3 Pledges and grants receivable, net	1,089,219.	3	1,919,052.
	4 Accounts receivable, net	95,802.	4	2,476.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	677,189.	8	0.
	9 Prepaid expenses and deferred charges	28,607.	9	84,486.
	10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,753,733.		
	b Less: accumulated depreciation	10b 1,444,352.	395,826.	10c 309,381.
	11 Investments - publicly traded securities	904,609.	11	692,863.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	26,509.	15	26,509.
16 Total assets. Add lines 1 through 15 (must equal line 34)	3,800,565.	16	3,694,280.	
Liabilities	17 Accounts payable and accrued expenses	472,670.	17	494,494.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	556,605.	23	177,759.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	418,500.	25	368,739.
	26 Total liabilities. Add lines 17 through 25	1,447,775.	26	1,040,992.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,205,063.	27	600,115.
	28 Temporarily restricted net assets	947,727.	28	1,853,173.
	29 Permanently restricted net assets	200,000.	29	200,000.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	2,352,790.	33	2,653,288.	
34 Total liabilities and net assets/fund balances	3,800,565.	34	3,694,280.	

Part XI Financial Statements and Reporting

		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?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	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	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
3b	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.	X	

Form **990** (2009)

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.)

Section A. Public Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc.; 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 94.80%; 15 Public support percentage from 2008 Schedule A, Part II, line 14 95.84%; 16a 33 1/3 % support test - 2009. 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 [X]; 16b 33 1/3 % support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization; 17a 10%-facts-and-circumstances test - 2009. 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; 17b 10%-facts-and-circumstances test - 2008. 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; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income; 13 Total support; 14 First five years.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, 2009, 2008. Row 15: Public support percentage for 2009; Row 16: Public support percentage from 2008 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, 2009, 2008. Row 17: Investment income percentage for 2009; Row 18: Investment income percentage from 2008 Schedule A, Part III, line 17.

19 a 33 1/3 % support tests - 2009. 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 - 2008. 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.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule of Contributors

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

2009

Name of the organization
 LEGAL MOMENTUM

Employer identification number
 23-7085442

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, aggregate 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 aggregate 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 line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization LEGAL MOMENTUM

Employer identification number

23-7085442

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	<u>THE FORD FOUNDATION</u> <u>C/O LEGAL MOMENTUM 395 HUDSON ST.</u> <u>NEW YORK, NY 10014</u>	\$ <u>310,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	<u>DEPARTMENT OF JUSTICE</u> <u>C/O LEGAL MOMENTUM 395 HUDSON ST.</u> <u>NEW YORK, NY 10014</u>	\$ <u>2,321,688.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	<u>MARY O'NEILL ESTATE</u> <u>C/O LEGAL MOMENTUM 395 HUDSON ST.</u> <u>NEW YORK, NY 10014</u>	\$ <u>166,667.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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), then

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

Name of organization LEGAL MOMENTUM	Employer identification number 23-7085442
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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 payments were made. 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-.

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	1,347.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	34,187.													
c	Total lobbying expenditures (add lines 1a and 1b)	35,534.													
d	Other exempt purpose expenditures	5,001,226.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	5,036,760.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	401,838.													
<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)	100,460.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2 a Lobbying non-taxable amount	515,956.	445,445.	438,743.	401,838.	1,801,982.
b Lobbying ceiling amount (150% of line 2a, column (e))					2,702,973.
c Total lobbying expenditures	182,170.	42,974.	47,068.	35,534.	307,746.
d Grassroots nontaxable amount	128,989.	111,361.	109,686.	100,460.	450,496.
e Grassroots ceiling amount (150% of line 2d, column (e))					675,744.
f Grassroots lobbying expenditures	24,137.	22,576.	15,647.	1,347.	63,707.

Schedule C (Form 990 or 990-EZ) 2009

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)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d 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).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carryover lobbying and political expenditures from the prior year?.

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

Table with 2 columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); 2a Current year; 2b Carryover from last year; 2c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 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?; 5 Taxable amount of lobbying and political expenditures (see instructions).

Part IV Supplemental Information

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

Series of horizontal dashed lines for providing supplemental information.

**SCHEDULE D
(Form 990)**

Supplemental Financial Statements

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

LEGAL MOMENTUM

Employer identification number

23-7085442

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

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

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<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 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	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 170(h)(4)(B)(ii)? Yes No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, 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 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- b Assets included in Form 990, Part X ▶ \$ _____

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XI V 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 XI V.

Part V Endowment Funds. Complete if 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	200,000.	200,000.			
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	200,000.	200,000.			

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment ▶ _____ %
 - b Permanent endowment ▶ 100.0000 %
 - c Term endowment ▶ _____ %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------------------------|-------------------------------------|
| (i) unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | <input type="checkbox"/> | <input type="checkbox"/> |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		994,054.	713,445.	280,609.
d Equipment		473,674.	456,069.	17,605.
e Other		286,005.	274,838.	11,167.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				309,381.

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,303,194.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,036,760.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	266,434.
4	Net unrealized gains (losses) on investments	4	34,064.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	34,064.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	300,498.

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

1	Total revenue, gains, and other support per audited financial statements	1	6,600,808.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	34,064.
b	Donated services and use of facilities	2b	1,263,550.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	1,297,614.
3	Subtract line 2e from line 1	3	5,303,194.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	5,303,194.

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

1	Total expenses and losses per audited financial statements	1	6,300,310.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,263,550.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	1,263,550.
3	Subtract line 2e from line 1	3	5,036,760.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	5,036,760.

Part XIV Supplemental Information

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

SEE PAGE 5

Part XIV Supplemental Information (continued)

FIN 48 FOOTNOTE

SCHEDULE D PART X ITEM 2

IN FISCAL YEAR 2009, THE ORGANIZATION ADOPTED THE PROVISIONS OF ACCOUNTING STANDARDS CODIFICATION ("ASC") 740-10-05 RELATING TO ACCOUNTING AND REPORTING FOR UNCERTAINTY IN INCOME TAXES. BECAUSE OF THE ORGANIZATION'S GENERAL TAX-EXEMPT STATUS, THE ADOPTION OF ASC 740-10-05 HAS NOT HAD, AND IS NOT EXPECTED TO HAVE, A MATERIAL IMPACT ON THE ORGANIZATION'S FINANCIAL STATEMENTS.

USE OF ENDOWMENT FUNDS

PART V, LN 4

THE FOUNDATION'S ENDOWMENT CONSISTS OF AN INDIVIDUAL FUND WHERE THE INVESTMENT EARNINGS ARE USED FOR THE PURPOSE OF ADVANCING THE RIGHTS OF WOMEN AND GIRLS.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total events		
		LUNCHEON (event type)	DINNER (event type)	1 (total number)	(add col. (a) through col. (c))		
Revenue	1	Gross receipts	802,351.	482,855.	129,995.	1,415,201.	
	2	Less: Charitable contributions	744,211.	448,415.	108,830.	1,301,456.	
	3	Gross income (line 1 minus line 2)	58,140.	34,440.	21,165.	113,745.	
Direct Expenses	4	Cash prizes					
	5	Noncash prizes					
	6	Rent/facility costs					
	7	Food and beverages					
	8	Entertainment					
	9	Other direct expenses	58,140.	34,440.	21,165.	113,745.	
	10	Direct expense summary. Add lines 4 through 9 in column (d)					(113,745.)
	11	Net income summary. Combine line 3, column (d), and line 10					

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

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

	Yes	No
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? _____	9a	
b If "No," explain: _____		
10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? _____	10a	
b If "Yes," explain: _____		
11 Does the organization operate gaming activities with nonmembers? _____	11	
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? _____	12	

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 ▶ -----

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

15a

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?

17a

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 ▶ \$

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

LEGAL MOMENTUM

Employer identification number

23-7085442

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 is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

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

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input 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? **4a** Yes No
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b** Yes No
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c** Yes No
- 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? **5a** Yes No
- b** Any related organization? **5b** Yes No
- If "Yes" to line 5a or 5b, describe in Part III.

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

- a** The organization? **6a** Yes No
- b** Any related organization? **6b** Yes No
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

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 Regs. 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
1a		
1b		
2		
3		
4a		<input checked="" type="checkbox"/>
4b		<input checked="" type="checkbox"/>
4c		<input checked="" type="checkbox"/>
5a		<input checked="" type="checkbox"/>
5b		<input checked="" type="checkbox"/>
6a		<input checked="" type="checkbox"/>
6b		<input checked="" type="checkbox"/>
7		<input checked="" type="checkbox"/>
8		<input checked="" type="checkbox"/>
9		

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

Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Use Schedule J-1 if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
IRASEMA GARZA	(i)	198,674.	0.	0.	2,333.	6,238.	207,245.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
RACHAEL PINE	(i)	143,670.	0.	0.	0.	16,066.	159,736.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
LYNN SCHAFRAN	(i)	135,593.	0.	0.	4,797.	12,714.	153,104.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

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2009

Open To Public Inspection

Name of the organization

LEGAL MOMENTUM

Employer identification number

23-7085442

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$ _____

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
INNA DREW	SEE SCHEDULE O	630,134.	CASH HELD AT BANK		X
INNA DREW	SEE SCHEDULE O	177,759.	NOTE PAYABLE		X

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

Schedule L (Form 990 or 990-EZ) 2009

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2009

Open To Public Inspection

Name of the organization

LEGAL MOMENTUM

Employer identification number

23-7085442

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
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	6	41,338.	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**

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

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

Schedule M (Form 990) 2009

JSA

9E1298 2.000

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

LEGAL MOMENTUM

Supplemental Information to Form 990

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

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Employer identification number

23-7085442

ATTACHMENT 1

STATEMENT OF PROGRAM SERVICES ACCOMPLISHMENTS

OTHER PROGRAM SERVICES PART III 4D

1.VIOLENCE AGAINST WOMEN:

LEGAL MOMENTUM HAS LONG ADVOCATED, LITIGATED, AND EDUCATED TO EXPAND AND ENFORCE THE RIGHTS OF VICTIMS OF GENDER-BASED VIOLENCE. OUR VIOLENCE-RELATED PROGRAMS COMBINE PUBLIC POLICY ADVOCACY, EDUCATION, AND PRECEDENT-SETTING LITIGATION TO EXPAND AND ENFORCE THE LAW. WE EDUCATE POLICYMAKERS, ADVOCATES, ATTORNEYS, JUDGES, AND OTHERS TO ENSURE THAT LAWS AND POLICIES MEET WOMEN'S NEEDS AND ARE IMPLEMENTED BROADLY, FAIRLY, AND EFFECTIVELY. FEEDBACK FROM THESE STAKEHOLDERS AND THOSE WORKING "ON THE GROUND" HELPS US IDENTIFY POLICIES AND LAWS THAT FALL SHORT FOR WOMEN AND INFORMS OUR DEVELOPMENT OF NEW POLICIES AND LAWS TO ENSURE WOMEN'S ECONOMIC AND PERSONAL SECURITY. WORKING CLOSELY WITH THEN-SENATOR, NOW-VICE PRESIDENT JOE BIDEN AND THE SENATE JUDICIARY COMMITTEE, LEGAL MOMENTUM LED THE EFFORT TO DRAFT AND PASS THE LANDMARK VIOLENCE AGAINST WOMEN ACT (VAWA) IN 1994 AND REAUTHORIZE IT IN 2000 AND 2005. WE ARE NOW SPEARHEADING THE MOVEMENT TO AGAIN REAUTHORIZE THIS MAJOR LEGISLATION IN 2011.

2.GENDER FAIRNESS IN THE COURTS:

LEGAL MOMENTUM HAS EXPERTISE AND RESOURCES ACROSS A WIDE RANGE OF AREAS RELATED TO DISCRIMINATION, GENDER EQUITY, AND GENDER BIAS. RANGING FROM SEXUAL AND REPRODUCTIVE RIGHTS AND TEEN DATING VIOLENCE TO GENDER BIAS IN THE COURTS, LEGAL MOMENTUM CONTINUES TO CHAMPION THE RIGHTS OF WOMEN AND GIRLS AND TO WORK TO ERADICATE HARMFUL STEREOTYPES AND POLICIES SHAPED BY

Name of the organization LEGAL MOMENTUM	Employer identification number 23-7085442
--	--

ATTACHMENT 1 (CONT'D)

BIAS WHILE PROMOTING POLICIES AND PRACTICES THAT REFLECT THE REALITIES OF WOMEN'S LIVES, AND ADVANCING THEIR RIGHTS UNDER THE LAW. WE EDUCATE POLICYMAKERS, ADVOCATES, ATTORNEYS, JUDGES, AND OTHERS TO ENSURE THAT LAWS AND POLICIES ARE IMPLEMENTED BROADLY, FAIRLY, AND EFFECTIVELY.

3. PUBLIC INFORMATION AND EDUCATION:

LEGAL MOMENTUM ACTIVELY ENGAGES IN NATIONAL IN-PERSON AND ONLINE EDUCATIONAL PROGRAMS THROUGH BOTH ITS NATIONAL JUDICIAL EDUCATION PROGRAM (NJEP) AND IMMIGRANT WOMEN PROGRAM (IWP).

NJEP STAFF FREQUENTLY PRESENTS ON THE TOPICS OF SEXUAL ASSAULT AND THE INTERSECTION FOR SEXUAL ASSAULT AND DOMESTIC VIOLENCE AT NATIONAL CONFERENCES AND TRAININGS. IN 2009, NJEP DEVELOPED AND LAUNCHED A WEB-BASED DISTANCE-LEARNING CURRICULUM TITLED INTIMATE PARTNER SEXUAL ABUSE: ADJUDICATING THIS HIDDEN DIMENSION OF DOMESTIC VIOLENCE CASES WHICH HAS RECEIVED 10,125 REGISTERED USERS TO DATE.

IWP STAFF CONDUCT MULTIPLE ANNUAL TRAININGS AND SEMINARS FOR JUSTICE SYSTEM/LAW ENFORCEMENT PROFESSIONALS ON ISSUES PERTAINING TO DOCUMENTED AND UNDOCUMENTED IMMIGRANT VICTIMS OF VIOLENCE.

4. PROGRAM PLANNING AND ORGANIZATION DEVELOPMENT:

LEGAL MOMENTUM ENVISIONS A SOCIETY IN WHICH ALL WOMEN AND GIRLS ARE ECONOMICALLY SECURE, EMPOWERED TO MAKE THEIR OWN CHOICES, AND CAN LIVE AND WORK FREE OF DISCRIMINATION AND VIOLENCE. IN THIS SOCIETY, ALL WOMEN ENJOY THE CONDITIONS, OPPORTUNITIES, AND SUPPORT THAT ENABLE THEM TO REALIZE THEIR HUMAN RIGHTS AND FREEDOMS.

Name of the organization LEGAL MOMENTUM	Employer identification number 23-7085442
<u>ATTACHMENT 1 (CONT'D)</u>	

GOVERNANCE, MANAGEMENT AND DISCLOSURE

PART VI SECTION A 3 AND 4

DELEGATION OF MANAGEMENT DUTIES:

THE ORGANIZATION DELEGATED ALL OF ITS ACCOUNTING DUTIES TO AN OUTSIDE ACCOUNTING FIRM.

REVISION OF THE ORGANIZATION BY-LAWS:

IN 1970, FOUNDERS OF THE NATIONAL ORGANIZATION FOR WOMEN (NOW) ESTABLISHED NOW LEGAL DEFENSE AND EDUCATION FUND (NOW LDEF) AS A SEPARATE CHARITABLE ORGANIZATION, FUNCTIONING AUTONOMOUSLY WITH SEPARATE PRESIDENTS, BOARD AND FUNDING. HOWEVER, NOW'S GOVERNANCE OF NOW LDEF WAS ESTABLISHED IN ITS ORIGINAL BYLAWS. ADMINISTRATIVE FACTORS PROVED CUMBERSOME OVER THE YEARS AS NOW LDEF OPERATED SEPARATELY FROM NOW. AFTER NOW LDEF CHANGED ITS NAME TO LEGAL MOMENTUM IN MARCH 2004, THE BOARD OF DIRECTORS DETERMINED THAT FULL SELF-GOVERNANCE WOULD BE IN ORDER. AT THE JUNE 16, 2009 BOARD OF DIRECTORS MEETING, PROPOSED AMENDMENTS TO THE BYLAWS WERE PROVISIONALLY APPROVED BY UNANIMOUS VOTE (CHANGING THE BYLAWS WOULD REQUIRE A UNANIMOUS VOTE OF LEGAL MOMENTUM'S MEMBERSHIP, WHICH INCLUDED BOTH LEGAL MOMENTUM'S AND NOW'S BOARD OF DIRECTORS). AT LEGAL MOMENTUM'S OCTOBER 10, 2009 MEMBERSHIP MEETING, THE PROPOSED BYLAWS AMENDMENTS WERE APPROVED BY UNANIMOUS VOTE OF THE MEMBERSHIP. LEGAL MOMENTUM IS NOW WHOLLY SEPARATE FROM THE NATIONAL ORGANIZATION FOR WOMEN IN GOVERNANCE. LEGAL MOMENTUM'S VOTING MEMBERSHIP NOW ONLY CONSISTS OF CURRENT MEMBERS OF THE LEGAL MOMENTUM BOARD OF DIRECTORS.

Name of the organization LEGAL MOMENTUM	Employer identification number 23-7085442
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ATTACHMENT 1 (CONT'D)

REVIEW OF FORM 990

PART VI SECTION B #11

THE ORGANIZATION'S FORM 990 IS REVIEWED BY THE PRESIDENT AND THE FINANCE STAFF AND THEN PRESENTED TO THE FINANCE AND AUDIT COMMITTEE AND THE FULL BOARD BEFORE FILING.

MONITORING OF CONFLICT OF INTEREST POLICY

PART VI SECTION B #12

ALL BOARD MEMBERS ARE ASKED TO COMPLETE A FORMAL CONFLICT OF INTEREST FORM/QUESTIONNAIRE ANNUALLY. THE REVIEW OF THE FORMS ARE CONDUCTED BY A BOARD MEMBER AND NOTED IN THE APPROPRIATE MINUTES.

REVIEW OF OFFICER COMPENSATION

PART VI SECTION B #15

THE EXECUTIVE COMMITTEE ESTABLISHES THE COMPENSATION FOR THE PRESIDENT WHICH IS APPROVED BY THE ENTIRE BOARD. THE BOARD CONSULTS WITH THE PRESIDENT ON COMPENSATION FOR OTHER OFFICERS. COMPENSATION WAS DETERMINED USING COMPARABLE DATA FROM CERTAIN OUTSIDE ORGANIZATIONS.

AVAILABILITY OF ORGANIZATION DOCUMENTS

PART VI SECTION C #19

FORM 990 IS AVAILABLE AT THE OFFICE OF THE ORGANIZATION AND ON THE ORGANIZATION'S WEBSITE. FINANCIAL STATEMENTS AND OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST AT THE ORGANIZATION'S OFFICE.

SCHEDULE L PART IV

TRANSACTION WITH INTERESTED PERSONS

RELATIONSHIP BETWEEN INTERESTED PERSON AND THE ORGANIZATION

Name of the organization LEGAL MOMENTUM	Employer identification number 23-7085442
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ATTACHMENT 1 (CONT'D)

A DIRECTOR OF THE ORGANIZATION IS AN EMPLOYEE OF JP MORGAN CHASE BANK, A FINANCIAL INSTITUTION WHERE THE ORGANIZATION MAINTAINS ACCOUNTS INCLUDING A LOAN ACCOUNT.

FORM 8868

FORM 8868 - APPLICATION FOR EXTENSION OF TIME TO FILE FOR AN EXEMPT ORGANIZATION WAS PAPER FILED.

ATTACHMENT 24C PROGRAM SERVICE

PATHWAYS / PIPELINE: THE PIPELINE PROJECT SEEKS TO DEVELOP AND TEST STRATEGIES AND PRACTICES AIMED AT INCREASING THE NUMBER OF MIDDLE SCHOOL AND HIGH SCHOOL AGED GIRLS IN NON-TRADITIONAL (MALE-DOMINATED) CTE PROGRAMS LEADING TO OCCUPATIONS WITH HIGHER WAGES, BETTER BENEFITS, AND GREATER OPPORTUNITIES FOR PROFESSIONAL GROWTH. OUR ULTIMATE GOAL IS TO CREATE A SUSTAINABLE TECHNICAL ASSISTANCE AND IMPLEMENTATION MODEL BASED ON OUR WORK IN NEW YORK CITY CTE SCHOOLS THAT CAN BE REPLICATED NATIONALLY. IN DOING SO, WE SEEK TO FORGE SYSTEMIC CHANGES IN EDUCATION INSTITUTIONS THAT HELP TO END THE LONG HISTORY OF GENDER SEGREGATION IN THESE SCHOOLS AND CAREER FIELDS, WHILE INCREASING THE EARNINGS POTENTIAL AND FUTURE ECONOMIC SECURITY OF LOW-INCOME WOMEN. OVER THE COURSE OF THE PROJECT, WE CONTINUE TO REFINE, CLARIFY AND ADVANCE OUR WORK BASED ON OUR EXPERIENCES IMPLEMENTING EACH STRATEGY AND FEEDBACK FROM PROGRAM PARTICIPANTS AND OTHER STAKEHOLDERS.

Name of the organization

Employer identification number

LEGAL MOMENTUM

23-7085442

ATTACHMENT 3

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CT,

DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI,

MN, MS, NE, NH, NJ, NM, NC, ND, OH, OK, OR, PA,

RI, SC, TN, UT, VA, WA, WV, WI,