Form **990**

Return of Organization Exempt From Income Tax

2009

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

4	For th	e 2009	calen	idar year, or tax year beginning 07/01, 2009, and en	ding	06,	/30,20 10
3	Check if ap	plicable:	Please	C Name of organization LEGAL MOMENTUM		D Employer identific	ation number
	Addre		use IRS label or	Doing Business As		23-7085442	
		change	print or	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Initial	return	type. See	395 HUDSON STREET		(212) 413-7	512
	Termi		Specific	City or town, state or country, and ZIP + 4		(=== / === :	
-	Amen		Instruc- tions.	NEW YORK, NY 10014		G Gross receipts \$	6,206,932.
	return Applio			,		H(a) Is this a group return	
L	pendi	ng		ame and address of principal officer: ELIZABETH GRAYER, PRESID	ENT.	affiliates?	
			395	HUDSON STREET NEW YORK, NY 10014		H(b) Are all affiliates inclu	
	Tax-ex	cempt st	atus:	X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527		If "No," attach a list.	(see instructions)
J	Websi	te: 🕨	. \ensuremath{WWW}	LEGALMOMENTUM.ORG		H(c) Group exemption nur	mber
<u> </u>	Form o	of organ	ization:	X Corporation Trust Association Other ▶ L Yo	ear of formati	ion: 1970 M State	of legal domicile: DC
P	art I	Sui	nmary			'	
	1			pe the organization's mission or most significant activities: DMENTUM'S MISSION IS TO ENSURE THE ECONOMIC AND	DEDCO	 NT 7\ T	
ė	1						
au				OF ALL WOMEN AND GIRLS, WHILE SAFEGUARDING AN	ID EXPA	NDING	
Governance		WOME	EN'S	RIGHTS UNDER THE LAW.			
Š	2	Check	this bo	ox 🕨 🔛 if the organization discontinued its operations or disposed of more the	han 25% of	its net assets.	
∞		Numb	er of vo	ting members of the governing body (Part VI, line 1a)			26
		Numb	er of ind			4	24
Ě	5	Total r	number	of employees (Part V, line 2a)			54
Activities	6			of all dears (affects if accessed)		6	3
⋖	· I _						
	7 a	•	•	nrelated business revenue from Part VIII, column (C), line 12		7a	
	b	Net ur	related	business taxable income from Form 990-T, line 34	<u> </u>		
						Prior Year	Current Year
Ф	8	Contri	butions	and grants (Part VIII, line 1h)	🖵	4,534,824.	4,812,937.
Revenue	9	Progra	am serv	ice revenue (Part VIII, line 2g)		0.	0.
eve	10			come (Part VIII, column (A), lines 3, 4, and 7d)		-18,558.	64,859.
œ	11			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		208,406.	425,398.
	12			e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,724,672.	5,303,194.
	_						3,303,194.
	13			milar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14			to or for members (Part IX, column (A), line 4)		0.	0.
S	15			er compensation, employee benefits (Part IX, column (A), lines 5-10)		2,911,915.	2,547,883.
Expenses	16 a	Profes	sional f	fundraising fees (Part IX, column (A), line 11e)		87,504.	61,797.
ά	b	Total f	undrais	sing expenses, Part IX, column (D), line 25) 702,542.			
ш	17			es (Part IX, column (A), lines 11a-11d, 11f-24f)		2,775,433.	2,427,080.
	18		•			5,774,852.	5,036,760.
	19		•	es. Add lines 13-17 (must equal Part IX, column (A), line 25) expenses. Subtract line 18 from line 12	• • •	-1,050,180.	266,434.
_ 0		Revei	iue iess	expenses. Subtract line to nont line 12		, ,	
Net Assets or	1					Beginning of Year	End of Year
See	20			Part X, line 16)		3,800,565.	3,694,280.
Ž۶	21			s (Part X, line 26)		1,447,775.	1,040,992.
2 <u>.</u>	22	Net as	sets or	fund balances. Subtract line 21 from line 20		2,352,790.	2,653,288.
P	art II	Sig	gnatur	e Block			
		Under	nenalti	es of perjury, I declare that I have examined this return, including accompanying so	chedules and	l statements, and to th	e hest of my knowledge
		and b	elief, it	is true, correct, and complete. Declaration of preparer (other than officer) is based	on all info	rmation of which prepared	arer has any knowledge.
•	Sign						
	lere		Signatur	re of officer		l Date	
٠	iere	'	Olgridia	C Of Officer		Date	
			ı ype or	print name and title	Tot :::		
۰,	4		arer's	Date	Check if self-	(see instruc	identifying number
ai		signa	ture		employed	▶	00736879
	parer's	Firm's	name (or yours EISNERAMPER LLP	•		3-1639826
JSE	Only			od), ZIP+4 750 THIRD AVENUE NEW YORK, NY 10017-2703			129498700
Иα	y the IF			s return with the preparer shown above? (see instructions)			X Yes No

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Pa	art III	Statement of Program Service Accomplishments	- 5 -
1	Briefly	describe the organization's mission:	
		L MOMENTUM'S MISSION IS TO ENSURE THE ECONOMIC AND PERSONAL	
		RITY OF ALL WOMEN AND GIRLS, WHILE SAFEGUARDING AND EXPANDING	
	WOMEN	N'S RIGHTS UNDER THE LAW.	
2		e organization undertake any significant program services during the year which were not listed on	
	the pric	or Form 990 or 990-EZ? X Yes (X) Yes (No
3		e organization cease conducting, or make significant changes in how it conducts, any program	
Ŭ	service		X No
	If "Yes.	," describe these changes on Schedule O.	
4	Describ	be the exempt purpose achievements for each of the organization's three largest program services by expenses.	
		n 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
	allocati	ions to others, the total expenses, and revenue, if any, for each program service reported.	
4a		(Sevenue \$) (Expenses \$, including grants of \$) (Revenue \$)	
		IMMIGRANT WOMEN PROGRAM IS THE NATION'S EXPERT ON THE RIGHTS	
		SERVICES AVAILABLE TO IMMIGRANT VICTIMS OF DOMESTIC AND OTHER ENCE. IT SHARES THIS EXPERTISE THROUGH COMPREHENSIVE MATERIALS	
		FRAININGS FOR LAWYERS AND ADVOCATES NATIONWIDE, AND LEADS	
		RTS TO ADVOCATE FOR LEGAL PROTECTIONS, SUPPORTIVE PROGRAMS,	
		GENDER-NEUTRAL IMMIGRATION POLICIES AND PRACTICES RELATED TO	
	IMMI	GRANT WOMEN.	
41.	(01	E41100 \(\sigma_1 \sigma_2 \sigma_1 \sigma_2 \sigma_2 \sigma_2 \sigma_1 \sigma_2 \si	
4D		541100)(Expenses\$	
		S; PLACES OP-EDS, ARTICLES AND LETTERS TO THE EDITOR IN MAJOR	
		ICATIONS. PLACES KEY STAFF IN RADIO AND TELEVISION INTERVIEWS,	
	PREPA	ARES SPEECHES AND PRESENTATIONS. PRODUCES AN ANNUAL REPORT AND	
	OTHER	R PUBLICATIONS IN SUPPORT OF PROGRAM OBJECTIVES AND LEGAL	
	MOMEN	NTUM'S CORPORATE MISSION.	
4c	(Code:	541100) (Expenses \$ 634,196. including grants of \$) (Revenue \$	
		PACHMENT 2	
4d	Other p	program services. (Describe in Schedule O.)	
	(Expen	·	
4e	Total p	program service expenses ► 3,906,703.	

Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4	Х	
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Χ
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		Χ
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If" Yes,"complete Schedule D, Part V	10	Х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI.			
•	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>			
	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes,"</i>			
12	complete Schedule D. Parts XI, XII, and XIII.	12	Х	
12 A	Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No	12	Λ	
12 A	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	42		X
	Did the organization maintain an office, employees, or agents outside of the United States?	13		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	14a		Λ
D	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	446		v
45		14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4-		37
16	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46		V
47	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	_	3.7	
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part 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? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Χ

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Part IV Checklist of Required Schedules (continued) Did the organization report more than \$5,000 of grants and other assistance to governments and organizations Χ 21 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II. 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the Χ 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 Χ 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to question 25 24a Χ b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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 Χ with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 25b 990-EZ? If "Yes," complete Schedule L. Part I Χ 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or Χ disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II, Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor, or a grant selection committee member, or to a person related to such an individual? Χ 27 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): Χ a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV...... b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ 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? If "Yes," complete Schedule L, 28c X Χ Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Χ conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Χ Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Χ 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 Χ III, IV, and V, line 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Χ 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Χ 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Χ Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 38

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 54			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
_	and Financial Accounts.			3.7
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Λ
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5c		
6.0	Prohibited Tax Shelter Transaction?	3C		
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Χ
h	organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or	ua		21
D		6b		
7	gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	0.0		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a	Х	
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Х
f		7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40 -	amounts due or received from them.)	12-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes." enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
D	n real enterine amount of tax-exempt intelest feceived of accided duffid the Veal			

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.

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		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	Χ	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Χ	
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	9a		X
	ion B. Policies (This Section B requests information about policies not required by the Internal			
Reve	enue Code.)			
			Yes	No
10 a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	401		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	44	Х	
	form?	11	Δ	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	Χ	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	21	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	12b	Х	
_	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
С	describe in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Χ	
b	Other officers or key employees of the organization	15b	Χ	
-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a				
	with a taxable entity during the year?	16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► <u>ATTACHMENT 3</u>			
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 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			

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	(C) Position (check all that apply)					lv)	(D) Reportable	(E) Reportable	(F) Estimated	
Name and Flue	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
ELENA J. ADOLPHUS											
DIRECTOR	2.00	Х						0.	0 .	0.	
ELIZABETH J. CABRASER EXECUTIVE COMM AT LARGE	2.00	X						0.	0.	. 0.	
INA R. DREW											
TREASURER	2.00	Х		Х				0.	0.	0.	
REBECCA L. EISENBERG											
DIRECTOR	2.00	Х						0.	0.	0.	
KIM GANDY											
DIRECTOR	2.00	Х						0.	0.	. 0	
IRASEMA GARZA											
PRESIDENT	35.00	Х		Х				198,674.	0.	8,571.	
STEPHANIE GEORGE											
DIRECTOR	2.00	Х						0.	0.	0	
JENNIFER CHOE GROVES											
DIRECTOR	2.00	X						0.	0 .	. 0	
ROBERT M KAUFMAN											
DIRECTOR	2.00	Х						0.	0 .	. 0	
RALPH I. KNOWLES, JR.											
FIRST VICE CHAIR	2.00	Х		Х				0.	0 .	. 0	
SUSAN J. KOHLMANN											
SECRETARY	2.00	Х		Χ				0.	0 .	. 0	
LILLIAN E. KRAEMER											
DIRECTOR	2.00	Х						0.	0 .	. 0	
SUSAN B. LINDENAUER											
DIRECTOR	2.00	Х						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 (2000)	

Form **990** (2009)

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23-7085442

Part VII Section A. Officers, Directors, Tr	ustees. K	ev Er	nplo	ove	es.	and	Hic	thest Compensa	ted Employees	continued)
(A) (B) (C)									(E)	(F)
Name and title	Average hours per week	Individual trustee or director	io Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
HARRIET S. POSNER DIRECTOR	2.00	Х						0.	0.	0
DEBORAH L. RHODE VICE CHAIR	2.00	Х		Х				0.	0.	0
LYNDA SPENCE VICE CHAIR	2.00	Х		Х				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	Х		Х				0.	0.	0
MARISSA C. WESLEY DIRECTOR	2.00	Х						0.	0.	0
LINDA A. WILLETT CHAIR	2.00	Х		Х				0.	0.	0
G. ELAINE WOOD DIRECTOR	2.00	Х						0.	0.	0
RACHAEL PINE EEC VP & LEGAL DIRECTOR	35.00			Х				143,670.	0.	16,066.
LESLYE E ORLOFF ASSOC. VP, IWP	35.00			Х				108,065.	0.	9,536.
CLEVELETTE AUSTIN VP FOR FINANCE & ADMIN	35.00			Х				82,242.	0.	9,287.
1b Total CONTINUED AT SCHEDULE J-2							▶	959,256.	0.	84,235.
Total number of individuals (including but not ling reportable compensation from the organization)				bov	e) w	vho re	ceiv	red more than \$100),000 in	

			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	3		Χ
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	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for			
	services rendered to the organization? If "Yes," complete Schedule J for such person	5		Χ

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

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

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

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art	t VIII	Statement of Revenue			23-7085442		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512, 513, or 514
t2	1a	Federated campaigns 1a					
Ĭ,	b	Membership dues 1b					
am'	С	Fundraising events 1c	1,301,456.				
and other similar amounts	d	Related organizations					
si L	е	Government grants (contributions) 1e	2,321,688.				
her	f	All other contributions, gifts, grants,					
ğ		and similar amounts not included above . 1f	1,189,793.				
ä	g h	Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f		4,812,937.			
e e		Total: 7 dd iiries 1d 11 TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT	Business Code	4,012,337.			
Program Service Revenue	2a						
&	b						
<u> </u>	С						
Ser	d						
ä	е						
g	f	All other program service revenue					
<u>~</u>	g	Total. Add lines 2a-2f		0.			
	3	Investment income (including dividends, interest					
		other similar amounts)		52,654.			52,65
	4	Income from investment of tax-exempt bond pro		0.			
	5	Royalties	(ii) Personal	0.			
	6a	Gross Rents					
	ba b	Less: rental expenses					
	c	Rental income or (loss) 214,353.					
	d	Net rental income or (loss)		214,353.			214,35
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 802,198.					
	b	Less: cost or other basis					
		and sales expenses 789,993.					
		Gain or (loss)					
_		Net gain or (loss)		12,205.			12,20
ا ا	8a	Gross income from fundraising					
ĕ		events (not including \$1,301,456.					
8		of contributions reported on line 1c). See Part IV, line 18	113,745.				
<u>ē</u>	b	Less: direct expenses b	113,745.				
Other Revenue	c	Net income or (loss) from fundraising events		0.			
_	9a	Gross income from gaming activities.					
		See Part IV, line 19					
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming activities	<u></u>	0.			
	10a	Gross sales of inventory, less returns and allowances					
	b	Less: cost of goods sold b					
-	С	Net income or (loss) from sales of inventory Miscellaneous Revenue	Business Code	0.			
-							
		MISC. INCOME	541100	211,045.			211,04
	b						
	C	All other revenue					
	d	All other revenue	.	211,045.			
	е 12	Total Revenue. See instructions		5,303,194.			490,25

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).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to 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):				
а	Management	0.			
b	Legal	1,330.		1,330.	
С	Accounting	45,000.		45,000.	
d	Lobbying	0.			
е	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.)				
а	LOSS ON OBSOLETE INVENTORY	677,189.	677,189.		
	EQUIPMENT RENTAL AND REPAIRS	39,038.	27,514.	5,183.	6,341.
С	SPECIAL EVENT EXPENSE	60,168.	60,168.		
	LIBRARY BOOKS AND SUBSCRIPTI	10,454.	9,531.	752.	171
	MEMBERSHIPS	5,654.	5,430.	59.	165.
	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 ► X 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.
JSA				<u> </u>	Form 990 (2009)

Part X Balance Sheet

Гα	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	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			
w		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use	677,189.	_	0.
	9	Prepaid expenses and deferred charges	28,607.	9	84,486.
	10 a	Land, buildings, and equipment: cost or 10a 1,753,733.			
		other basis. Complete Part VI of Schedule D			
		Less: accumulated depreciation	395,826.		309,381.
	11	Investments - publicly traded securities	904,609.		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	26 500	14	26 500
	15	Other assets. See Part IV, line 11	26,509.		26,509.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,800,565.		3,694,280.
	17	Accounts payable and accrued expenses	472,670.		494,494.
	18	Grants payable		18	
	19 20	Deferred revenue		19 20	
	21	Tax-exempt bond liabilities Exercise or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Escrow or custodial account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key		21	
ΙЩ	22	employees, highest compensated employees, and disqualified			
Lia		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	556,605.		177,759.
	24	Unsecured notes and loans payable to unrelated third parties	330,333.	24	111,7100.
	25	Other liabilities. Complete Part X of Schedule D	418,500.	_	368,739.
	26	Total liabilities. Add lines 17 through 25	1,447,775.		1,040,992.
		Organizations that follow SFAS 117, check here			
S		complete lines 27 through 29, and lines 33 and 34.			
ŭ	27	Unrestricted net assets	1,205,063.	27	600,115.
sala	28	Temporarily restricted net assets	947,727.	28	1,853,173.
В	29	Permanently restricted net assets	200,000.	29	200,000.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here and complete lines 30 through 34.			
ts c	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
î Aş	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne	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.

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Pa	irt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	Х	
		Form	990	(2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2009

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Name	of th	ne organizatio	า						Employe	r identificat	ion num	ber	
LEGA	L.	MOMENTUM								23-70	85442		
Part		Reason fo	or Public Chari	ty Status (All organi	zations m	ust compl	ete this p	oart.) Se	e instruc	tions.			
The o	rgaı	nization is no	t a private founda	tion because it is: (For	lines 1 thro	ough 11, ch	eck only c	ne box.)					
1 _		A church, co	envention of churc	ches, or association of	churches d	escribed in	sectio	n 170(b)(1)(A)(i).				
2		A school des	scribed in sectio	n 170(b)(1)(A)(ii). (Att	tach Sched	ule E.)							
3 _		A hospital or	r a cooperative ho	ospital service organiza	ation descril	bed in se	ction 170	(b)(1)(A)(iii).				
4		A medical	research organiz	ation operated in co	njunction v	with a hos	pital des	cribed in	section	170(b)(1)((A)(iii).	Enter	the
_		hospital's na	ame, city, and sta	ite:									
5		•	ition operated for (b)(1)(A)(iv). (Co	or the benefit of a col	lege or un	iversity ow	ned or o	perated	by a gove	ernmental	unit de	scribe	d in
6			. , . , . ,	rnment or government	al unit desc	rihed in	section 17	70/b)/1)/ <i>[</i>	\\(\v)				
—	X		_	ly receives a substant						or from t	he dene	eral nu	ıhlic
' _	21	_		1)(A)(vi). (Complete F	-	по заррого	i iioiii a ş	governine	intal unit	or morn t	ne gene	nai pu	DIIC
8				in section 170(b)(1)(mnlete Par	t II)						
9				ly receives: (1) more				m contrib	uitione n	namharshii	n fees	and a	rnee
J		-		ted to its exempt fun							-	_	
		-		nent income and un		-		-					
			-	after June 30, 1975.				-		στι ιακ)		donioc	,000
10			•	d operated exclusively					,				
11		_	-	and operated exclusi	-		-			ns of or	to carr	v out	the
٠. ـ		_	_	ublicly supported orga	-		-					-	
				at describes the type of					-	-			
		a Typ				e III - Func					pe III - (Other	
е			_	rtify that the organiz			-	-	irectly by		•		fied
		-		on managers and oth				-				-	
			section 509(a)(2				,						
f		()()	` ' ' '	a written determinat	ion from t	he IRS tha	at it is a	Type I.	Type II. o	r Type III	support	ina	
		_	, check this box					. , ,	.,,,,,			J	
g		Since Augus	st 17, 2006, has t	he organization accept	ed any gift	or contribut	ion from a	any of the					
		following pe						_				- T	
			=	or indirectly controls		_	etner wit	n persor	is describ	bed in (ii)	44.0	Yes	No
			_	rning body of the supp	_	inization?					11g(i)		
		` '	•	rson described in (i) at							11g(ii)	-	
			=	of a person described in							11g(iii)	
<u>h</u>				tion about the supporte		. ,	() 5: 1				n		
	ame of supported organization		(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col. (i) lis governing	sted in your	the organ	ou notify nization in of your port?	organizat (i) organiz	s the ion in col. zed in the S.?		nount c oport	ÞŤ
				(see ilistractions))	Yes	No	Yes	No	Yes	No			
								-					
													_
Total													

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 23-7085442 Page **2**

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.)

Sec	tion A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5,562,935.	5,253,227.	5,288,577.	4,534,824.	4,812,937.	25,452,500.
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	5,562,935.	5,253,227.	5,288,577.	4,534,824.	4,812,937.	25,452,500.
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)						
6	Public support. Subtract line 5 from line 4.						25,452,500.
	tion B. Total Support					l I	
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	5,562,935.	5,253,227.	5,288,577.	4,534,824.	4,812,937.	25,452,500.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	134,464.	132,478.	60,448.	39,011.	52,654.	419,055.
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.)	121,417.	101,933.	120,426.	208,406.	425,398.	977,580.
11	Total support. Add lines 7 through 10						26,849,135.
12	Gross receipts from related activities, etc. (see	ee instructions) .				12	
13	First five years. If the Form 990 is for organization, check this box and stop here			d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
	tion C. Computation of Public Sup						04.00.00
14	Public support percentage for 2009 (line		•	column (f))		14	94.80 % 95.84 %
15	Public support percentage from 2008 So					15	
16a	33 1/3 % support test - 2009. If the o	-					
	this box and stop here . The organization						
b	33 1/3 % support test - 2008. If the c	•					
	check this box and stop here . The orga						
17a	10%-facts-and-circumstances test - 2						
or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Expla						•	
	Part IV how the organization meets t			•	•		upported
_	organization						▶ □
b	10%-facts-and-circumstances test - 2	_					
	15 is 10% or more, and if the orga						-
	Explain in Part IV how the organzation				=	-	publicly
18	supported organization	n did not chec	k a box on line	: 13, 16a, 16b,	, 17a, or 17b,	check this box	
	instructions						▶ ∟

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 23-7085442 Page **3**

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.)

Sec	tion A. Public Support						
Ca	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
	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						
	\$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.)						
Sec	tion B. Total Support						
Ca	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10 a	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						
С	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.)	1					
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	the organization	n's first, second,	third, fourth, or	fifth tax year a	s a section 501	(c)(3)
	organization, check this box and stop here	<u></u>					▶
Sec	tion C. Computation of Public Sup	port Percenta	age				
15	Public support percentage for 2009 (line 8, co		•			15	%_
16	Public support percentage from 2008 Schedu					16	<u></u>
	tion D. Computation of Investmen						
17	Investment income percentage for 2009 (lin	, ,	-	, column (f))		17	<u>%</u>
18	Investment income percentage from 2008					18	%
19 a	33 1/3 % support tests - 2009. If the o						
	17 is not more than 33 1/3 %, check the			-			
b	33 1/3 % support tests - 2008. If the org						. \square
	line 18 is not more than 331/3 %, check			-			
20	Private foundation. If the organization	ala not check	a box on line	14, 19a, or 19b	, check this bo	x and see instr	uctions 🟲 🔃

23-7085442

Schedule A (Form 990 or 990-EZ) 2009

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 B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization		Employer identification number
LEGAL MOMENTUM		22.7005442
Organization type (check one	e):	23-7085442
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	e foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foun	dation
	501(c)(3) taxable private foundation	
	covered by the General Rule or a Special Rule .), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule. See
_	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II.	or more (in money or
Special Rules		
sections 509(a)(1) a)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % supportant 170(b)(1)(A)(vi), and received from any one contributor, during the year 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ,	-
the year, aggregate)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from contributions of more than \$1,000 for use exclusively for religious, chaes, or the prevention of cruelty to children or animals. Complete Parts I, II,	ritable, scientific, literary, or
the year, contribution aggregate to more to year for an exclusive applies to this organ)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from one for use <i>exclusively</i> for religious, charitable, etc., purposes, but these of than \$1,000. If this box is checked, enter here the total contributions that welly religious, charitable, etc., purpose. Do not complete any of the parts un nization because it received nonexclusively religious, charitable, etc., contributions that we have the contributions that we have the contributions are contributed in the contributions of the parts of the contributions are contributed in the contributions of the contributions of the contributions of the contributions are contributed in the contributions of the c	contributions did not were received during the nless the General Rule ributions of \$5,000 or more
990-EZ, or 990-PF), but it mu	is not covered by the General Rule and/or the Special Rules does not file ust answer "No" on Part IV, line 2 of its Form 990, or check the box on line F, to certify that it does not meet the filing requirements of Schedule B (Form 1990).	H of its Form 990-EZ,
For Privacy Act and Panerwork Red	Juction Act Notice see the Instructions Scho	edule B (Form 990, 990-FZ, or 990-PF) (2009)

for Form 990, 990-EZ, or 990-PF.

age____ of ____ of Part I

Name of organization LEG

LEGAL MOMENTUM

Employer identification number 23-7085442

Part I Contributors (see instructions)

(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
1_	THE FORD FOUNDATION C/O LEGAL MOMENTUM 395 HUDSON ST. NEW YORK, NY 10014	\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
2	DEPARTMENT OF JUSTICE C/O LEGAL MOMENTUM 395 HUDSON ST. NEW YORK, NY 10014	\$ 2,321,688.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
3	MARY O'NEILL ESTATE C/O LEGAL MOMENTUM 395 HUDSON ST. NEW YORK, NY 10014	\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
			Person Payroll Noncash (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

Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ.

► See separate instructions

OMB No. 1545-0047

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Na	Name of organization Employer identification number								
	GAL MOMENTUM	23-70							
Pai	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 po	olitical campaign activ	vities in Part IV.					
2	Political expenditures			▶ \$					
3									
Pai	art I-B Complete if the organization is exempt under section 501(c)(3).								
1		cise tax incurred by the organization		▶\$					
2		cise tax incurred by organization ma	_	n 4955 ▶ \$					
3	=	a section 4955 tax, did it file Form 4	720 for this year?		Yes No				
4a	Was a correction made?				Yes No				
b	If "Yes," describe in Part IV.								
	-	organization is exempt under							
1		expended by the filing organization		'					
_	activities			⊳ \$					
2		ng organization's funds contributed	•						
•		ties		· · · · · · · · · · · · · · · · · · ·					
3		penditures. Add lines 1 and 2. En							
	line 1/b			· · · · · · · · · · · · · · · · · · ·					
4		e Form 1120-POL for this year?							
5		s and employer identification numb anization listed, enter the amount							
		eived that were promptly and direc							
		cal action committee (PAC). If addit							
			·						
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and				
				funds. If none, enter -0	promptly and directly				
					delivered to a separate political organization. If				
					none, enter -0				
		[

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

Schedule C (Form 990 or 990-EZ) 2009

JSA 9E1264 2.000 <u>Schedule C (Form 990 or 990-EZ) 2009</u> 23-7085442 Page **2**

Pa	rt II-A Complete if the organization under section 501(h)).	n is exempt under section 501(c)(3) and fi	led Form 5768 (election	on
		belongs to an affiliated group. checked box A and "limited control" provisio	ns apply.	
		ying Expenditures ans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a	Total lobbying expenditures to influence p	ublic opinion (grass roots lobbying)	1,347.	
b	Total lobbying expenditures to influence a	legislative body (direct lobbying)	34,187.	
С		and 1b)	35,534.	
d			5,001,226.	
е		lines 1c and 1d)	5,036,760.	
f	Lobbying nontaxable amount. Enter the a	F		
	columns.	•	401,838.	
	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 les	s, enter -0-		
i	Subtract line 1f from line 1c. If zero or less	s, enter -0-		
j	If these is an amount other than zero on e	either line 1h or line 1i, did the organization file For	m 4720 reporting	
	section 4911 tax for this year?			Yes No
		4-Year Averaging Period Under Section 501(h)		

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

Schedule C (Form 990 or 990-EZ) 2009 23-7085442 Page **3**

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)).

		(a	1)	(b)		
		Yes	No	Α	mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total. Add lines 1c through 1i					
2 a	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?	\		4.		
Pal	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	;)(5),	or se	ction		
	501(c)(6).				Vac	Na
1	Were substantially all (90% or more) dues received nondeductible by members?			<u> </u>	Yes 1	No
2	Did the organization make only in bound labbying expanditures of \$2,000, or less?				2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?				3	+
_	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)				<u> </u>	
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, I "Yes."					
1	Dues, assessments and similar amounts from members			1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	oolitic	al			
	expenses for which the section 527(f) tax was paid).					
а	Current year			2a		
b	Carryover from last year		• • •	2b		
С	Total			2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	es		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo	bbyin	g			
	and political expenditure next year?			4		
5	Taxable amount of lobbying and political expenditures (see instructions)			5		
Pai	t IV Supplemental Information					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, complete this part for any additional information.	, line (5; and	d Part II-E	3, line 1i	

Schedule C (Fo	rm 990 or 990-EZ) 2009	23-7085442	Page 4
Part IV	Supplemental Information (continued)		<u> </u>

SCHEDULE D (Form 990)

Supplemental Financial Statements

20

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

► 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.

Employer identification number

LEG	GAL MOMENTUM	23-7085442
Pai	Organizations Maintaining Donor Advised Funds or Other Similar Funds or the organization answered "Yes" to Form 990, Part IV, line 6.	AccountsComplete if
	(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 a	dvised
•		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds car	
•	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any o	
	purpose conferring impermissible private benefit?	
Pai	Conservation Easements. Complete if the organization answered "Yes" to Form	n 990 Part IV line 7
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
•		an historically important land area
		a certified historic structure
	Preservation of open space	d certified filstoffe structure
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the fo	orm of a conservation
	easement on the last day of the tax year.	or a conscivation
	, , , , , , , , , , , , , , , , , , , ,	Held at the End of the Year
а	Total number of conservation easements	2a
b		2b
c		2c
d	(4, 1111)	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by	v 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	
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easement	
	>	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements du	ring 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 exp	ense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial state	tements that describes
	the organization's accounting for conservation easements.	
Pai	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 state art, historical treasures, or other similar assets held for public exhibition, education, or research.	tement and balance sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research provide, in Part XIV, the text of the footnote to its financial statements that describes these item	irch in furtherance of public service,
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement	
-	historical treasures, or other similar assets held for public exhibition, education, or resear	
	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 as	sets for financial gain, provide the
	following amounts required to be reported under SFAS116 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1	▶ \$
b	Assets included in Form 990, Part X	 ▶ \$

23-7085442 Schedule D (Form 990) 2009 Page 2

Par	t III Organizations Maintainir	ng Collections	of Art, H	istorica	Treasure	s, or	Other Similar	Assets(c	ontinued	<u>')</u>
3	Using the organization's acquisition,		other reco	rds, chec	k any of the	follov	ving that are a sig	nificant us	se of its	
	collection items (check all that apply)):	_							
а	Public exhibition		d			chang	e programs			
b	Scholarly research		е		Other					
C	Preservation for future gene				· · · C · · · 4] · · 4]		! !			
4	Provide a description of the organiza	tion's collections	and expi	ain now t	ney turtner t	ne or	ganization's exem	pt purpose	e in	
_	Part XIV.	aaliai tarraaaiya	donation	a of ort b	intorioal trac	201120	a ar athar aimilar			
5	During the year, did the organization assets to be sold to raise funds rathe									N
Dor				-					Yes	No
rai	t IV Escrow and Custodial A IV, line 9, or reported an a					ansv	vereu res lo r	-01111 990	, Part	
	TV, IIIO O, OI TOPOITOU UIT C	amount on rom	1000,10	21070, 11110	<i>,</i> <u> </u>					
1a	Is the organization an agent, trustee,	custo dian or oth	er interm	ediary for	contribution	ns or d	other assets not			
	included on Form 990, Part X?			-				Г	Yes	No
b	If "Yes," explain the arrangement in F							·		
							A	mount		
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amou	unt on Form 990	, Part X, I	ine 21?					Yes	No
b	If "Yes," explain the arrangement in I	Part XI V.								
Par	t V Endowment Funds. Com	plete if organiza	ation ans	wered "	Yes" to For	rm 99	90, Part IV, line	10.		
		(a) Current Year	(b) Pr	ior year	(c) Two ye	ars bac	ck (d) Three yea	ars back	(e) Four ye	ears back
1a	Beginning of year balance	200,000.		200,000.						
b	Contributions									
С	Net investment earnings, gains,									
_	and losses									
d	Grants or scholarships									
е	Other expenditures for facilities .									
	and programs									
g	End of year balance	200,000.		200,000.						
2	Provide the estimated percentage of	-		as:						
a	Board designated or quasi-endowne		%							
D	Permanent endowment ► 100.0	<u>000</u> %								
	Term endowment ▶9 Are there endowment funds not in th	-	the organ	nization th	at are hold	and a	dministered for th	•		
ou	organization by:	e pos session or	ille Orgai	iizalioii li	iat are rieiu i	anu a	diffilistered for th	C	Ye	es No
	(i) unrelated organizations								3a(i)	X
	(ii) related organizations								3a(ii)	X
b	If "Yes" to 3a(ii), are the related orga								3b	- 21
4	Describe in Part XIV the intended us		•							
Par						t X I	ine 10			
	Description of investment		or other bas		Cost or other		(c) Accumulated	(ų) Book value	• • • • • • • • • • • • • • • • • • •
			estment)	,,,	basis (other)		depreciation	(, 2001. 14.40	
1a	Land									
b	Buildings									
С	Leasehold improvements				994,05	54.	713,445.		280	,609.
d	Equipment				473,67	74.	456,069.		17	,605.
е	Other				286,00)5.	274,838.		11	,167.
Tota	II. Add lines 1a through 1e. (Column	(d) must equal Fo	rm 990, F	art X, col	umn (B), line	e 10(c	;).) ▶		309	,381.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 23-7085442 Page **3**

Part VII Inves	tments - Other Securities. See Fo	orm 990, Part X, line	e 12.	
(a) Desc (inc	ription of security or category cluding name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year mark	
Financial derivatives	s			
Closely-held equity	interests			
Total. (Column (b) must e	equal Form 990, Part X, col. (B) line 12.)			
Part VIII Inves	tments - Program Related. See F	orm 990, Part X, line	e 13.	
	scription of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year mark	on: et value
Total. (Column (b) must e	equal Form 990, Part X, col. (B) line 13.)			
	Assets. See Form 990, Part X, lir	ne 15.		
		Description		(b) Book value
	/5 000 B ()((B) // (5)			
	equal Form 990, Part X, col. (B) line 15.) Liabilities. See Form 990, Part X	lino 25		
	Description of liability	(b) Amount		
Federal income taxe	•	(b) Amount		
DEFERRED RENT		368,739.		
DDI DIKKED KUNI	-	300/133.		
Total. (Column (b) must e	equal Form 990, Part X, col. (B) line 25.)	368,739.		

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

23-7085442 Schedule D (Form 990) 2009 Page 4

Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statemen	nto	1 age 4
	Total manager (Farm 000 Part) (III as home (A) line 40)	_	E 202 104
1	· · · · · · · · · · · · · · · · · · ·	1	5,303,194.
2	· · · · · · · · · · · · · · · · · · ·	2	5,036,760.
3		3	266,434.
4		4	34,064.
5		5	
6		6	
7		7	
8	/	8	
9		9	34,064.
10		0	300,498.
Part :	XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Retui	rn	
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:		
а	Net unrealized gains on investments 2a 34,064.		
b	Donated services and use of facilities 2b 1,263,550.		
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIV.)		
e	Add lines 2a through 2d	20	e 1,297,614.
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
·	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV.)	-	
C		4	
5	Add lines 4a and 4b Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	. —	
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Ref		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	, <u> </u>	0,300,310.
	Departed continue and use of facilities		
a		-	
b	Prior year adjustments 2b	-	
С.	Other losses 2c	-	
d	Other (Describe in Part XIV.) Add Frage Continuous Con	+_	1 060 550
е	Add lines 2a through 2d	. 20	
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:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4	
b	Other (Describe in Part XIV.)	_	
С	Add lines 4a and 4b	. 4	
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		
and 2b	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, p; 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 count to provide any additional information.		
Po	na to provide any additional information.		
CEE	PAGE 5		
	rage J		

Schedule D (Form 990) 2009 23-7085442 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.

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding

OMB No. 1545-0047 **Open To Public**

Department of the Treasury Internal Revenue Service Name of the organization

Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

See separate instructions.

Inspection Employer identification number

LEGAL MOMENTUM					23-7085442	
Part I Fundraising Activities.Com Form 990-EZ filers are not r	nplete if the organ	nization a	nswered '	"Yes" to Form 99	00, Part IV, line 1	7.
 Indicate whether the organization raise X Mail solicitations X Internet and email solicitations X Phone solicitations In-person solicitations Did the organization have a written or or key employees listed in Form 990, F If "Yes," list the ten highest paid individed to be compensated at least \$5,000 by 	ed funds through an e f g oral agreement with Part VII) or entity in	y of the following y of the following y Solic X Solic X Spectary any individual connection	lowing acti itation of n itation of g ial fundrais dual (incluent with profe	on-government grants covernment grants sing events ding officers, directessional fundraising	tors, trustees	X Yes No
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fund custody or contrib		(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		(/	
PROJECT PLUS, INC	EVENTS ORG	X			61,797.	
Total			▶		61,797.	
3 List all states in which the organizati registration or licensing. AL, AK, AZ, AR, CA, CT, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NH OK, OR, PA, RI, SC, TN, UT, VA, WA, WV	,NJ,NM,NY,NC,				peen notified it is	

Pa	ırt	Fundraising Events.Comple more than \$15,000 on Form	te if the organization a	answered "Yes" to Forevents with gross rece	rm 990, Part IV, line ipts greater than \$5	18, or re 5,000.	ported	t
			(a) Event #1 LUNCHEON (event type)	(b) Event #2 DINNER (event type)	(c) Other Events	(add col.	tal event (a) thro	
Revenue	1		802,351.	482,855.	129,995.	1	,415,	,201
ď		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
	4	Cash prizes						
	5	Noncash prizes						
suses	6	Rent/facility costs						
Direct Expenses	7	Food and beverages						
Direc	8	B Entertainment						
	9	Other direct expenses	58,140.	34,440.	21,165.		113,	, 745
	10 11	, , , , , , , , , , , , , , , , , , ,	• , ,			(113,	745.
Pa	ırt	Gaming. Complete if the orgathan \$15,000 on Form 990-E	anization answered "Y Z, line 6a.	es" to Form 990, Par	t IV, line 19, or repo	rted more	;	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total (col. (a) thre		
Rev	1	1 Gross revenue						
ses	2	2 Cash prizes						
Expenses	3	3 Noncash prizes						
Direct	4	4 Rent/facility costs						
	5	5 Other direct expenses						
	6	6 Volunteer labor	Yes% No	Yes% No	Yes% No			
	7	7 Direct expense summary. Add lines 2 to	through 5 in column (d)			(
_	8	Net gaming income summary. Combin	e line 1, column d, and li	ne 7				
9		Enter the state(s) in which the organization					Yes	No
I		s the organization licensed to operate ga f "No," explain:	ming activities in each of	these states?		9a		
		Nere any of the organization's gaming lic f "Yes," explain:	enses revoked, suspend	ed or terminated during t	the tax year?	10a	1	
11	-		tivities with nonmembers	 ;?	 	11		
12	I	s the organization a grantor, beneficiary			or other entity	42		

			Yes	No
13	Indicate the percentage of gaming activity operated in:			
а	The organization's facility			
b	An outside facility			
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	45.		
L	revenue?	15a		
b	If "Yes," enter the amount of gaming revenue received by the organization amount of gaming revenue retained by the third party.			
С	amount of gaming revenue retained by the third party If "Yes," enter name and address of the third party:			
·	in Tes, enter hame and address of the tillid party.			
	Name ▶			
	Address ►			
16	Gaming manager information:			
	Name •			
	Gaming manager compensation ▶\$			
	Description of services provided ▶			
	Director/officer Employee Independent contractor			
17	Mandatany distributions:			
	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to			
а		17a		
b	retain the state gaming license? 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.	1/4		

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE J (Form 990)

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 **Open to Public** Inspection

Name of the organization LEGAL MOMENTUM

Questions Regarding Compensation

Department of the Treasury

Internal Revenue Service

Employer identification number

23-7085442

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes 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	41-		
•	explain	1b		
2	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?			
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply.			
	Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	X Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	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:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	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:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
_	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
_	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Х
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	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	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.

CA) Name CO Compensation Com			(B) Breakdown	of W-2 and/or 1099-MISC	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
IRASEMA GARZA 00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(A) Name			(ii) Bonus & incentive compensation	reportable	other deferred	benefits	(B)(i)-(D)	reported in prior Form 990 or
RACHAEL PINE (0) 0. 0. 0. 0. 0. 16,066. 159,736. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		(i)	198,674.	0.	0.	2,333.	6,238.	207,245.	0.
RACHAEL PINE 00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	IRASEMA GARZA		0.	0.	0.	0.	0.	0.	0.
RACHAEL PINE (II) 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		(i)	143,670.	0.	0.	0.	16,066.	159,736.	0.
LYNN SCHAFRAN (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	RACHAEL PINE			0.	0.	0.		l	0.
LYNN SCHAFRAN (1) 0 0 0 0 0 0 0 0 0		(i)	135,593.	0.	0.	4,797.	12,714.	153,104.	0.
	LYNN SCHAFRAN		0.	0.	0.	0.	0.	0.	0.
		(i)							
		(i)							
		(i)							
		(i)							
		(i)							
(ii) (ii) (iii) (i									
(ii) (ii) (iii) (i		(i)							
(ii) (ii) (iii)									
(ii) (ii) (iii)		(i)							
(ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii									
(ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii		(i)							
(i) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii									
(i) (i) (ii) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiiii) (iiiiiiii									
(i) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii									
(ii) (i) (ii) (ii) (ii) (iii)									
(i) (ii) (ii) (ii) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiiii) (iiiiiiii									
(ii) (ii) (ii) (ii) (iii)									
(i) (ii) (ii) (iii) (iii) (iii) (iiii) (iiiiiii) (iiiiiiii									
(ii) (i) (i)									
(i)									
		(ii)							

Part III	Supp	iement	ai intori	mation																							
Complete for any	te this addition	part to al infor	provide mation.	the in	ormatio	n, exp	olanat	ion, o	r desc	ription	s requ	uired f	or Pa	rt I, lir	nes 1a	a, 1b	, 4c,	5a,	5b, 6	a, 6	b, 7	and	8. Als	so co	omplete	this p	art
																											_

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

➤ See the Instructions for Form 990.

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

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Part I **Employees** (B) (C) (F) (E) (A) Estimated Name and title Average hours Position (check all that apply) Reportable Reportable per week compensation compensation amount of Former Individual trustee Institutional trustee Key employee employee Highest compensated other from from related director the organizations compensation (W-2/1099-MSC) from the organization (W-2/1099-MISC) organization and related organizations JACK BODE VP DEVELOPMENT 35.00 Χ 92,824. 0 604. LISALYN JACOBS VP GOVT RELATIONS 35.00 Χ 96,916. 0. 13,874. LYNN SCHAFRAN NJEP VP & DIRECTOR 35.00 Χ 135,593. 0. 17,511. LEVAT ALTAGRACIA VP COMMUNICATIONS Χ 101,272. 0. 8,786. 35.00

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

Schedule J-2 (Form 990) 2009

SCHEDULE L (Form 990 or 990-EZ)

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.

Open To Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection **Employer identification number**

LEGAL MOMENTUM							23.	-708	5442			
Part I Excess Benefit Transacations Complete if the organization answe							Z, Pa	ırt V, li	ine 40)b.		
· · · · ·			,		·						(c) Cor	rected?
1 (a) Name of disqualified person				(b) Description	of transaction	1				Yes	No
2 Enter the amount of tax imposed on the under section 4958									\$ _			
3 Enter the amount of tax, if any, on line	2, abov	ve, reimb	oursed by the	organizati	on			🕨	> \$ _			
Part II Loans to and/or From Intere Complete if the organization answ				rt IV. line 2	26. or Form	990-F <i>7</i> . Pai	t V. li	ne 38a				
						· · · · · · · · · · · · · · · · · · ·					(~\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	/_:44 ·
(a) Name of interested person and purpose (b) Loan to o the organiza			(c) Orig principal a		(a) Baia	nce due	(e) In (default?	by boa	ard or	(g) W agree	ritten ment?
	То	From					Yes	No	Yes	No	Yes	No
	1.0	1.10									100	
Total				▶\$	•							
Part III Grants or Assistance Benefic Complete if the organization answ	tting l	nterest	ed Persons	5.	27.							
(a) Name of interested person	(b) Re	elationshi	p between inte organizat		on and the	(c) A	mount	and ty	pe of a	assista	nce	
	<u> </u>											
Part IV Business Transactions Invo Complete if the organization answ					28a, 28b, or	28c.						
(a) Name of interested person	(b) R intere	Relationsh ested pers organiz	nip between son and the cation		nount of saction	(d) Desc	ription	of trar	sactio	n	(e) Sha organiz rever	•
											Yes	No
INNA DREW	SEE SC	CHEDULE (0		630,134.	CASH HELD	AT BAN	IK				Х
INNA DREW	SEE SC	CHEDULE	0		177,759.	NOTE PAYAB	LE					Х

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)

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 **Open To Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

LEG	AL MOMENTUM				23-70	35442		
Par	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported of Form 990, Part VIII, line		(d) ethod of deterr 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	41,33	38. 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								
29	Other ►() Number of Forms 8283 received by	he organiza	tion during the tay year for c	ontributions for				
29	which the organization completed Fo	•	,		29			
	which the organization completed is	71111 OZOO, 1 E	it IV, Donee Acknowledgen	icit IIIII			Yes	No
30 a	During the year, did the organizat	ion receive	by contribution any prope	erty reported in Part	I line 1-28	that		
oo u	it must hold for at least three yea			•				
	used for exempt purposes for the el				-	I		Х
h	If "Yes," describe the arrangement in	_	penou:					
31	Does the organization have a		ance policy that require	s the review of a	ny non-etar	ndard		
J 1	contributions?							Х
32 a	Does the organization hire or use						\vdash	
JZ d	contributions?	-		•		I		Х
h	If "Yes," describe in Part II.					02a		
33	If the organization did not report re	venues in a	folumn (c) for a type of pro-	nerty for which colum	n (a) is che	cked		
55	describe in Part II.	venues in C	oranin (c) for a type of pro	porty for writeri coluir	(a) is cite	JNGU,		

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

Schedule M (Form 990) 2009

23-7085442 Schedule M (Form 990) 2009 Page 2 **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information. Part II

Schedule M (Form 990) 2009

SCHEDULE O (Form 990)

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

Department of the Treasury Internal Revenue Service

Name of the organization

LEGAL MOMENTUM

► Attach to Form 990. Inspection

Employer identification number

ATTACHMENT 1

23-7085442

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 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

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

23-7085442

ATTACHMENT 1 (CONT'D)

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

23-7085442

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/QUESTIONAIRE 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

23-7085442

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 2

4C 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,