

# Form 8879-TF

## IRS E-file Signature Authorization for a Tax Exempt Entity

or calendar year 2023, or fiscal year beginning	, 2023, and ending	, 20	

OMB No. 1545-0047

F Do not send to the IRS. Keep for your records. Department of the Treasury Go to www.irs.gov/Form8879TE for the latest information. Internal Revenue Service Name of filer EIN or SSN WNY WOMEN'S FOUNDATION, INC. 27-4154672 SHERI L. SCAVONE Name and title of officer or person subject to tax CEO Type of Return and Return Information Part I Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. b Total revenue, if any (Form 990, Part VIII, column (A), line 12) \_\_\_\_\_\_ 1b \_\_\_\_\_ 699, 491. Form 990 check here ...... 1a **b Total revenue,** if any (Form 990-EZ, line 9) 2a Form 990-EZ check here Form 1120-POL check here b Total tax (Form 1120-POL, line 22) 3a Tax based on investment income (Form 990-PF, Part V, line 5) 4a Form 990-PF check here Form 8868 check here ...... b Balance due (Form 8868, line 3c) 5b 5a Form 990-T check here ..... 6a **b Total tax** (Form 990-T, Part III, line 4) 6b 7a Form 4720 check here ..... b FMV of assets at end of tax year (Form 5227, Item D) 8b 8a Form 5227 check here ..... **b Tax due** (Form 5330, Part II, line 19) Form 5330 check here ..... 9a 10a Form 8038-CP check here **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) **Declaration and Signature Authorization of Officer or Person Subject to Tax** Under penalties of perjury, I declare that X I am an officer of the above entity or I I am a person subject to tax with respect to (name , (EIN) and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only X lauthorize LUMSDEN & MCCORMICK, LLP 32480 to enter my PIN Enter five numbers, but ERO firm name do not enter all zeros as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. **Certification and Authentication** Part III ERO's EFIN/PIN. Enter your six-digit electronic filing identification 16377899111 number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. 10/15/24 LUMSDEN & MCCORMICK, LLP ERO's signature Date

**ERO Must Retain This Form - See Instructions** 

Do Not Submit This Form to the IRS Unless Requested To Do So

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

Form **8879-TE** (2023)

### Form **8868**

(Rev. January 2024)

# Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Taxpayer identification number (TIN) Name of exempt organization, employer, or other filer, see instructions. Type or **Print** 27-4154672 WNY WOMEN'S FOUNDATION, INC. File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 741 MAIN STREET return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. BUFFALO, NY 14203 Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Application Is For Return | Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 12 05 Form 8870 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of SHERI L. SCAVONE 741 MAIN STREET - BUFFALO, NY 14203 Telephone No. 716-217-9056 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN)
 If this is for the whole group, check this . If it is for part of the group, check this box ..... and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15 , 20 24 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 23 or tax year beginning \_\_\_\_\_\_, 20 \_\_\_\_, and ending \_\_\_ If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

# PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 43-09-02 | Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

<u>A r</u>	or the	2023 calendar year, or tax year beginning	anu	enaing					
<b>B</b> c	heck if pplicabl	C Name of organization			D Employer identif	ication number			
X	Addre chang Name	WNY WOMEN'S FOUNDATION	, INC.						
	chang				27-41546	72			
	Initial return	Number and street (or P.O. box if mail is not de	E Telephone number						
	]Final □return	741 MAIN STREET	716-217-	9056 836,130.					
	termin ated		City or town, state or province, country, and ZIP or foreign postal code						
	Ameno return	BUFFALO, NI 14203			H(a) Is this a group r				
	Application	F Name and address of principal officer: DIE	RI L. SCAVONE		for subordinates	s? Yes X No			
	pendir	SAME AS C ABOVE			H(b) Are all subordinates i	ncluded? Yes No			
<u> 1 1</u>	ax-ex	empt status: X 501(c)(3) 501(c)( )	(insert no.) 4947(a)(1)	or 527	If "No," attach a	a list. See instructions			
	Vebsi		N.ORG		H(c) Group exemption	on number			
K F	orm of	organization: X Corporation Trust As	sociation Other	L Year	of formation: 2010	M State of legal domicile: ${f NY}$			
Pa	art I	Summary							
•	1	Briefly describe the organization's mission or most	significant activities: TO S	UPPORT	WOMEN IN W	NY THROUGH			
Activities & Governance		ADVOCACY, LEADERSHIP AND I	ECONOMIC EMPOWER	MENT.					
raa	2	Check this box if the organization disco	ntinued its operations or dispos	sed of more	than 25% of its net as				
ove	3	Number of voting members of the governing body	(Part VI, line 1a)		3				
Ğ	4	Number of independent voting members of the go	verning body (Part VI, line 1b)			27			
8	5	Total number of individuals employed in calendar y	ear 2023 (Part V, line 2a)		5	17			
Ę	6	Total number of volunteers (estimate if necessary)			6	90			
듗	7 a	Total unrelated business revenue from Part VIII, co	lumn (C), line 12		7a				
_	b	Net unrelated business taxable income from Form	990-T, Part I, line 11		7b	0.			
					Prior Year	Current Year			
Ð	8	Contributions and grants (Part VIII, line 1h)			656,895.	750,691.			
Ž	9	Program service revenue (Part VIII, line 2g)			0.	0.			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4	and 7d)		1,819.	13,881.			
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c	, 9c, 10c, and 11e)		6,163.	-65,081.			
	12	Total revenue - add lines 8 through 11 (must equal	Part VIII, column (A), line 12)		664,877.	699,491.			
	13	Grants and similar amounts paid (Part IX, column (	A), lines 1-3)		63,045.	39,635.			
	14	Benefits paid to or for members (Part IX, column (A	), line 4)		0.	0.			
ģ	15	Salaries, other compensation, employee benefits (I	Part IX, column (A), lines 5-10)		394,893.	497,737.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), I	ne 11e)		0.	0.			
<u>g</u>	b	Total fundraising expenses (Part IX, column (D), lin	e 25)160,4	63.					
ш	17	Other expenses (Part IX, column (A), lines 11a-11d	11f-24e)		115,678.				
	18	Total expenses. Add lines 13-17 (must equal Part I	X, column (A), line 25)		573,616.				
	19	Revenue less expenses. Subtract line 18 from line	12		91,261.	24,954.			
Net Assets or				В	eginning of Current Year	End of Year			
sets	20	Total assets (Part X, line 16)			3,568,659.	3,942,958.			
t As	21	Total liabilities (Part X, line 26)			48,731.	166,539.			
<u>E</u>	22	Net assets or fund balances. Subtract line 21 from	line 20		3,519,928.	3,776,419.			
	art II	Signature Block							
		lties of perjury, I declare that I have examined this return,			•	y knowledge and belief, it is			
true,	correc	t, and complete. Declaration of preparer (other than office	r) is based on all information of wh	nich preparei	has any knowledge.				
Sig	n	Signature of officer			Date				
Her	е	SHERI L. SCAVONE, CEO							
		Type or print name and title							
		Print/Type preparer's name	Preparer's signature		Date Check [	PTIN			
Paid		SARAH M. HOPKINS	SARAH M. HOPKINS	5 1	10/15/24 self-emplo				
Prep	arer	Firm's name LUMSDEN & MCCORMI			Firm's EIN 1	.6-0765486			
Use	Only	Firm's address 369 FRANKLIN STRE	ET						
		BUFFALO, NY 14202			Phone no. (7	16)856-3300			
May	the IF	RS discuss this return with the preparer shown abo	ve? See instructions	<del></del>		X Yes No			

Pa	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	WNY WOMEN'S FOUNDATION (WNYWF) TRANSFORMS SYSTEMS, CULTURE, AND POLICY
	TO CREATE OPPORTUNITIES FOR EACH WOMAN TO THRIVE
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 416,734. including grants of \$ 39,635. ) (Revenue \$)
	IN 2022, WNYWF REBRANDED ITS SUCCESSFUL MOMS: FROM EDUCATION TO
	EMPLOYMENT (R) INITIATIVE, INFORMED BY PARTICIPANTS, TO MPOWER. WNYWF'S
	MOMS: FROM EDUCATION TO EMPLOYMENT (R) EVOLVED IN 2020 FROM COMMUNITY
	COLLEGE LEVELEDUCATION TO INCLUDE WORKFORCE CERTIFICATION PROGRAMS.
	THESE PROGRAMS ARE SHORTER DURATION, HIGH SUPPORT EMPLOYMENT ENTRY
	CERTIFICATIONS. THE CURRENT WORKFORCE CERTIFICATION FOCUS SUPPORTS
	WNYWF'SHEALTHCARE HUB - PART OF THE 2022 LAUNCHED WOMEN'S ECONOMIC
	EMPOWERMENTPATHWAY (WEMP). THE WEMP IS A PERSON-CENTERED, TRAUMA
	FOCUSED AND DATA INFORMED COMPREHENSIVE, COLLABORATIVE EFFORT TO HELP
	WOMEN BE THE SUCCESS THEY ARE MOST DESERVING OF BEING. WE TARGET THE
	CITY OF BUFFALO'S 53.5% OF FAMILIES WITH CHILDREN WHO ARE LIVING BELOW
	THE POVERTY LEVEL WHICH ARE HEADED BY WOMEN WELL AHEAD OF NATIONAL,
4b	(Code:) (Expenses \$) (Expenses \$) (Revenue \$)
	ALL IN COLLABORATES WITH OUR COMMUNITY TO INVEST IN PURPOSEFUL EFFORTS
	TO EMPOWER WOMEN IN THE WORKPLACE AND ILLUMINATE THE PATHWAYS FOR WOMEN
	TO LEAD. A DATA-DRIVEN, DEIB INITIATIVE, ALL IN TAKES AN INTERSECTIONAL
	APPROACH TO ADVANCING INTERSECTIONAL GENDER EQUITY IN WESTERN NEW YORK.
	ALL IN CONSISTS OF THREE MAIN COMPONENTS: EMPLOYER PATHWAY: ENGAGE
	EMPLOYERS TO TAKE PURPOSEFUL STEPS TO MOVE WOMEN AND GENDER MINORITIES
	INTO LEADERSHIP POSITIONS AND IMPROVE COMPANY CULTURE USING AN
	INTERSECTIONAL GENDER-BASED LENS. ASPIRING LEADER PATHWAY: READY, SET,
	LEAD! CULTIVATE ASPIRING LEADERS THROUGH MENTORSHIP AND EDUCATIONAL
	SESSIONS, BUILDING A STRONG NETWORK OF LEADERS IN A BROAD CROSS-SECTION
	OF THE COMMUNITY. ENTREPRENEUR PATHWAY: ELEVATE FEMALE ENTREPRENEURSHIP
	BY PROMOTING, ENDORSING, AND COLLABORATING WITH WOMEN-OWNED BUSINESSES.
4c	
	WNYWF AMPLIFIES WOMEN'S VOICES TO ADVANCE GENDER EQUITY THROUGH
	DATA-DRIVEN SOLUTIONS. AS A CREDIBLE SOURCE OF DATA AND INFORMATION,
	WE CENTER WOMEN'S VOICES THROUGH AN INTERSECTIONAL GENDER LENS. RELYING ON DEEP, TRUSTED CONNECTIONS, OUR ORGANIZATION RAISES AWARENESS OF THE
	· · · · · · · · · · · · · · · · · · ·
	TRUE NEEDS OF OUR COMMUNITY THROUGH DATA THAT TELLS A STORY AND
	ELEVATES WOMEN'S EXPERIENCES. WNYWF IS THE GO-TO SOURCE FOR DATA AND
	INFORMATION WHEN IT COMES TO ISSUES IMPACTING WOMEN, INCLUDING GENDER
	EQUITY, ECONOMIC MOBILITY, AND CHILD CARE AS AN ESSENTIAL WORKFORCE
	SUPPORT. THIS DATA INFLUENCES KEY DECISION MAKERS AT THE LOCAL, STATE
	AND NATIONAL LEVELS. IN ADDITION, THE WNYWF IS FREQUENTLY SOUGHT BY THE
	MEDIA. THIS INVALUABLE EXPOSURE HAS HELPED CHANGE HEARTS AND MINDS, AS
	WE LIFTED OUR VOICE TO DRIVE SOLUTIONS TO THE CHALLENGES BARRING WOMEN
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 136 • including grants of \$ ) (Revenue \$ )
<u>4e</u>	Total program service expenses 417,372.
	Form <b>990</b> (2023)

# Form 990 (2023) WNY WOMEN'S FOUNDATION, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	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, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
•	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,	Ť		<del></del>
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	<b>-</b>		1
8	, ,			x
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			3,7
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u> X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZU		
D	, .	12b		x
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13	Did the appropriation projection of the control of the United Otelson			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<del>  ^</del>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	44.		x
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			3,7
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> X</u>
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	X	<u> </u>
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
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

Pai	t IV Checklist of Required Schedules (continued)		ı	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			,,
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		,,
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	l		,
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	<b> </b>		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	051		x
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	00		x
<b>-</b> -	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			x
00	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Α.
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?   If			
а		28a		Х
h	"Yes," complete Schedule L, Part IV	28b		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		- 22
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		x
29	"Yes," complete Schedule L, Part IV	28c 29	Х	<del>  ^</del> `
30	·	29	- 22	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		х
31	contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			X
31 32	Did the organization riquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<del>  ^</del>

-	bla the organization own regulations along allorogal and accordance from the organization and or negalations		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		
	Part V, line 1	34	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		
	If "Yes," complete Schedule R, Part V, line 2	36	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		

Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance

	Officer if Schedule O contains a response of flote to any line in this fact v							
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	16					
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0					
С	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?							

## 023) WNY WOMEN'S FOUNDATION, INC. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

2a 17 b If a least one is reported on line 2a, did the organization at least one is reported on line 2a, did the organization stem and it required federal employment tax returns?  b If a least one is reported on line 2a, did the organization file all required federal employment tax returns?  b If Yes, 1 has it filed a form 980-7 for this year? If Ye'r to line 3b, provide an explanation of Schoolde 0  5a 2a 3a X  b If Yes, 1 has it filed a form 980-7 for this year? If Ye'r to line 3b, provide an explanation of Schoolde 0  5b 1 Yes, 1 has it filed a form 980-7 for this year? If Ye'r to line 3b, provide an explanation of Schoolde 0  5c 1 Yes, 1 has it filed a form 980-7 for this year? If Ye'r to line 3b, provide an explanation of Schoolde 0  5c 1 Yes, 1 has it filed a form 980-7 for this year? If Ye'r to line 3b, provide an explanation of Schoolde 0  5c 1 Yes, 1 has it filed a foreign country  5c 1 Yes, 1 has been part year to provide a substance of the reparation of the region country  5c 1 Yes, 1 has been part year to provide that it was or is a perty to a prohibited tax sheller transaction of Schoolde 0  6c 1 Yes 1 to line 5a of 5b, dd the organization file Form 886-7?  5c 2 Yes 1 Yes, 1 did not explanation file Form 886-7?  5c 3b Yes, 1 Yes, 1 did not enganization and provide that are normally greater than \$100,000, and did the organization solicit any contributions and party for posts and services provided to the payor?  7c 3rain that may receive deductible as charitable contributions?  8d Yes, 1 Yes, 1 did not enganization solicit on an explanation self-yes at the organization received a contribution on under section \$70(c).  8d Yes, 1 Yes, 1 did not enganization include with every solicitation an explanation self-yes and yes yes, pay premiums, directly to pay premiums on a personal benefit contract?  7c 2 X  7d D Id the organization received a contribution of under the year?  9d Did the sepanization received a contribution of qualified intellectual property, did the organization file Form 889-8 required?  1					Yes	No					
b If a least one is reported on line 2a, did the arganization file all required federal employment tax returns?  2b X  3c Did the organization have unrelated business gross income of \$1,000 or more during the year?  3c Did the organization have unrelated business gross income of \$1,000 or more during the year?  3c Did the organization have unrelated business gross income of \$1,000 or more during the year?  3c Did I*Ves,* "Institute of a Form 990 Tri or this year?" I*Ves* To line 3b, provide an explanation on Schedule 0  3c Did I*Ves,* "Institute of a Form 990 Tri or this year?" I*Ves* To line 3b, provide an explanation on Schedule 0  3c Did I*Ves,* "Institute the name of the foreign country Sees instructions for filing requirements for FinCPS Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  3c Did any scale party notify the organization that was or is a party to a prohibited tax scheler transaction?  3c Did any scale party notify the organization file Form 8888 7?  3c Did any scale party notify the organization file Form 8888 7?  3c Did the organization invalue and gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  3c Did the organization new prime in excess of \$5's nade party as contribution and party for goods and services provided to the payer?  3c Did the organization new prime in excess of \$5's nade party as contribution and party for goods and services provided to the payer?  3c Did the organization sele, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8882?  3c Did the organization sele, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8882?  3c Did the organization or seleve sharper, or otherwise dispose of tangible personal property for which it was required to file form 8890 as majorized?  3d Did the organization on surface that selection of qualified intellectual propert	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
3a   X   X   1   1   1   1   1   1   1   1		filed for the calendar year ending with or within the year covered by this return	2a 17								
b If Yes, 'Inset if leed a Form 990-T for this year? If 'No' 1' fine 2b, provide an explanation on Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountry?  b If 'Yes,' enter the name of the foreign country (such as a bank account, securities account, or other financial accountry?  5a Was the organization a party to a prohibitor tax shelter transaction at any time during the tax year?  5b IDI and y taxabile party notify the organization file Form 88861?  5c If 'Yes' to line 5a or 5b, did the organization file Form 88861?  6a Does the organization have arounal gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitatis contributions?  6b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7b Organizations that may receive deductible contributions under section 170(c).  8b If If 'Yes,' did the organization include with every solicitation are express statement that such contributions or gifts were not tax deductible?  7c Organization receive any sprinted in excess of \$73 made party as a contribution and party for godds and services provided 7  7c Organization floating a payment in excess of \$73 made party as a contribution and party for godds and services provided to the payer?  7c ID off the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c IX  9 If the organization exceeded a contribution of case dispose of tample personal property for which it was required to file Form 88822 filed during the year  9 If ID organization exceeded a contribution of case of the foreign of the organization file Form 8899 as required?  1 If the organization exceeded a contribution of case of the foreign of the	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns		2b	Х						
4 A any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (auch as a bank account, securities account, or other financial accounts (FBAR).  5 Was the organization and the foreign country.  5 Was the organization aparty to a prohibited tax with the financial accounts (FBAR).  5 Was the organization profit or prohibited tax better transaction at any time during the tax year?  5 A X  5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5 B X  5 C If "Yes" to line Sa or 5b, did the organization the Foreign 88817;  6 D B Yes, "did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles charhable contributions?  5 D If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charhable contributions?  6 D If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charhable contributions and partly for goods and services provided to the payor?  7 D If Yes," did the organization incide with every solicitation an express statement that such contributions or gifts were not tax deductible and partly as a contribution and partly for goods and services provided to the payor?  7 D If Yes," include the number of Forms 8822 filed during the year.  8 D If "Yes," includate the number of Forms 8822 filed during the year.  9 D If the organization received a contribution of qualified intellectual property, did the organization free the payor and pay	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X					
francial account in a foreign country (such as a bank account, securities account, or other financial account)?  b if Yes, instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any stackle party notify the organization file Form 88861?  6c If Yes' to line Sa or 5b, did the organization file Form 88861?  6d Does the organization annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If Yes, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 If Yes, 'did the organization notify the donor of the value of the goods or services provided?  7 Organizations that may receive deductible contributions under section 170(c).  8 If Yes, 'did the organization notify the donor of the value of the goods or services provided?  7 Organization services applied to the payor?  7 If X X  10 If the services are all the services are all the services provided to the payor?  8 If Yes, 'did the organization notify the donor of the value of the goods or services provided?  9 If If Yes, 'did the organization notify the donor of the value of the goods or services provided?  7 If X X  10 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 If Yes, 'did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 If If the organization received a contribution of cars, boats, sirplanes, or other vehicles, did the organization file a Form 1086-07  15 Sponsoring organization have excess business holding as lary time during the year?  16 If the erganization received a contribution of a don	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b							
b if Yes, "inter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shefter transaction at any time during the tax year?  5b Id any taxable party notify the organization that it was or is a party to a prohibited tax shefter transaction?  5c If Yes 1 to line 5a or 5b, did the organization from 686677  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that we en totax deductibles can charitable contributions?  6a X  5b If Yes, "did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles can charitable contributions and party for goods and services provided to the payor?  7b Organizations that may receive deductible contributions under section 170(c).  8b If Yes, "did the organization notify the donor of the value of the goods or services provided?  7c Organizations that may receive deductible contributions under section 170(c).  8b If Yes, "did the organization notify the donor of the value of the goods or services provided?  7c If If Yes, "indicate the number of Forms 8222 filed during the year  8b If Yes, "indicate the number of Forms 8222 filed during the year  9b Id the organization received a contribution of up or indirectly, to pay premiums on a personal benefit contract?  7c X  7d If the organization received an contribution of up organization file a Form 1088 C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations make any taxabiling at large funding the year?  9 Sponsoring organizations make any taxabiling at large funding the year?  9 If the organization received a contribution of a donor, donor advised fund maintained by the sponsoring organizations make any taxabiling at large funding the year?  9 If Yes, "see the ma	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other autients	nority over, a								
see instructions for filing requirements for FinCBH Form 114, Report of Foreign Bank and Financial Accounts (FBAR),  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5		financial account in a foreign country (such as a bank account, securities account, or other financial acc	ount)?	4a		X					
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "Yes" to line 5a or 5b, did the organization file Form 888-617.  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax eductibles as charitable contributions.  6a X  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gitts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 bill the organization include with every solicitation an express statement that such contributions or gitts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 bill the organization sell, exchange, or otherwise dispose of tanglitle personal property for which it was required to the form 888-61.  9 bill the organization sell, exchange, or otherwise dispose of tanglitle personal property for which it was required to the form 888-82.  9 bill the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 c X  7 d L  9 bill the organization organization exceived any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 d L  9 bill the organization received any funds, directly or indirectly, on a personal benefit contract?  7 d L  9 bill the organization exceived an contribution of qualified intellectual property, did the organization file a Form 1098-0?  8 Sponsoring organizations exceived an contribution of care, boats, basis, and provided funds.  9 bill the sponsoring organization make a distribution is under section 4966?  9 bill the sponsoring organization make a distribution is under section 4968.  9 bill the sponsoring organization make a distribution to a dono	b	If "Yes," enter the name of the foreign country									
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6 If "Yes" to line Sa or 5b, did the organization file Form 8886.T?  8 Obes the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  9 Organizations that may receive deductible contributions under section 170(c).  a Did the organization series a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  10 If "Yes," did the organization sell, acxhange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  10 If "Yes," did the organization sell, acxhange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Billed during the year  10 If the organization sell, acxhange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  11 If the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  12 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-0?  13 Sponsoring organization have excess business holdings at any time during the year?  14 Sponsoring organization have excess business holdings at any time during the year?  15 Sponsoring organization make and sidributions under section 4966?  16 Ords receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  15 Ords receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  16 Ords receipts, included on form 990, Part VIII, line 12, for public use of club facilities  17 If Yes, "enter the amount of tex-exempt interest received or a		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial According to the control of	ounts (FBAR).								
to if "Yes" to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles?  b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles?  7 Organizations that may receive deductible contributions under section 170(c).  b lif due organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7 If "Yes," did the organization notify the donor of the value of the goods or services provided?  7 If "Yes," did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8882?  7 If "Yes," indicate the number of Forms 88282 filed during the year  8 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8898 as required?  9 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  7 If X  5 If the organization received a contribution of cushled funds, but year, pay premiums, directly or indirectly, on a personal benefit contract?  7 If X  7 If X  7 If X  7 If X  7 If Yes," indicate the number of Forms 88282 filed during the year  9 Sponsoring organization reserved a contribution of qualified intellectual property, did the organization file Form 8999 as required?  7 If If Wes, indicate the number of Forms 88282 filed during the year?  9 If the organization received a contribution of qualified intellectual property, did the organization file Form 8909 as required?  7 If X  9 Sponsoring organization sense has been solicited forms to the property organization file Form 1098-07  8 Sponsoring organization make any taxable distributions under section 4988?  9 Sponsoring organization self-partition file forms 1000 forms	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?									
6a   X   b   if "Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6a   X   b   if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7   Organizations that may receive deductible contributions under section 170(c).  8   Did the organization selve a payment in excess of \$75 made partly as a contribution on dy partly for goods and services provided to the payor?  8   If "Yes," did the organization notify the donor of the value of the goods or services provided?  9   Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  10   If "Yes," did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7   Z   X    10   Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7   If   Did the organization received a contribution of qualified intelectual property, did the organization file a Form 1098-07  11   If the organization received a contribution of qualified intelectual property, did the organization file a Form 1098-07  12   Separation organization maintaining donor advised funds.  13   Someoring organization maintaining donor advised funds.  14   Did the sponsoring organization make any taxable distributions under section 4968?  15   Section 501(c)(27) organizations. Enter:  16   If the sponsoring organization make any taxable distributions under section 4968?  16   Did the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4968.  17   Section 501(c)(27) organizations. Enter:  18   Section 501(c)(27) organizations.  19   Section 4947(a)(1) non-exempt interest received or accrued	b			5b		X					
any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 o X  10 Id the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 o X  7 if Id the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  8 if the organization received a contribution of cars, boats, simplenes, or other vehicles, did the organization file Form 899 as required?  9 Sponsoring organization make a received funds.  a Did the sponsoring organization make are excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organizations maintaining donor advised funds.  a Did the organization self promises the advised funds.  a Did the organization self promises the advised funds.  b Gross recome from members or shareholders  b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 501(c)(2) organizations. Did				5с							
b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made pathy as a contribution and partly tor goods and services provided to the payor?  b if "Yes," did the organization notify the chorn of the value or the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d if "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 o X  g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h if the organization received a contribution of qualified intellectual property, did the organization file a Form 1998-C?  Sponsoring organization mass maintaining domor advised funds. Did a chorn advised fund maintained by the sponsoring organization make excess business holdings at any time during the year?  Sponsoring organization make any taxable distributions under section 4986?  b Did the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4986?  9a b Costs income from members or shareholders  a finitiation fees and capital contributions included on Part VIII, line 12  b Gross received from them.)  11a	6a		-			7.7					
were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  To X  To X  b if "Yes," did the organization notify the donor of the value of the goods or services provided?  to file Form 8282?  of Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? filed during the year  of Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required  to file Form 8282?  of I'Yes," indicate the number of Forms 8282 filed during the year  of Did the organization, during the year, pay premiums, directly, to pay premiums on a personal benefit contract?  f Did the organization neceived a contribution of qualified intellectual property, did the organization file Form 1098 C?  Sponsoring organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098 C?  Sponsoring organization make avoised funds.  Did the sponsoring organization make avoised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities  Did the sponsoring organization make a distribution to a doors, donor advisor, or related person?  Section 501(c)(2)(2) qualified nonprofit health plans in more than one state?  Note: See the instructions for additional information the organization filing Form 990 in lieu of Form 1041?  12a Section 4947(a)(1) one-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  13b Section 501(c)(2)(2) qualified nonprofit health plans in more than one state?  Note: See the instructio				6a		X					
7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tanglible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 To X  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds.  D Appropriate organization and any taxable distributions under section 4966?  Sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?  B Did the sponsoring organization make any taxable distributions under section 4966?  B Did the sponsoring organization make any taxable distribution to a donor, donor advised funds.  I Section 501(c)(1/2) organizations. Enter:  a Gross income from other sources. (Do not net amounts due or paid to other sources against amounts of local form them).  I If "Yes," inter the amount of tax exempt interest received or accrued during the year  1 If "Yes," ester the amount of tax exempt interest received or accrued during the year  2 Is the organization is licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organizat	b		-								
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b if "Yes," did the organization notify the donor of the value of the goods or services provided?  to file Form 8282?  d if "Yes," included the number of Forms 8282 filed during the year  e) Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7	_			6b							
b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year		•		_	v						
to file Form 8282?  to file Form 8282?  7c	_										
to file Form 8282?  d if "Yes," indicate the number of Forms 8282 filed during the year		, , , , , , , , , , , , , , , , , , , ,		ď	Δ						
d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7	С		•	7.		v					
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file of Form 8899 as required?  h If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098 C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  9a 9a  littlation fees and capital contributions included on Part VIII, line 12  organs receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  12c Section 601(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  11b  12a Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization iscensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves on hand  13c Inter the amount of reserves on hand  2b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  14b If "Yes," see the instructions and file Form 4720, Schedule N.  15 Is the organization an educational institution subject to the section 4968 excise tax on net investment i	4			76		21					
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If "Yes," complete Form 4720, Schedule O.  17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?  17	16		come?	16		Х					
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?  17											
that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		ties								
				17							

332005 12-21-23

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 on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management										
	<u> </u>				Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	27								
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent	1b	27								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other								
	officer, director, trustee, or key employee?			2		Х					
3	Did the organization delegate control over management duties customarily performed by or under th										
	of officers, directors, trustees, or key employees to a management company or other person?			3		Х					
4											
5											
6											
7a	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?			7a		Х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockho	lders, or								
	persons other than the governing body?			7b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:								
а	The governing body?			8a	Х						
b	Each committee with authority to act on behalf of the governing body?			8b	Х						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched a	it the								
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)								
					Yes	No					
	Did the organization have local chapters, branches, or affiliates?			10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	napters	s, affiliates,								
				10b	77						
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	ly befo	re filing the form?	11a	Х						
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				37						
12a	, ,, ge to			12a	X						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	,		1.0	v						
40	on Schedule O how this was done			12c	X						
13	Did the organization have a written whistleblower policy?			13	X						
14	Did the organization have a written document retention and destruction policy?			14	Λ						
15	Did the process for determining compensation of the following persons include a review and approve	ai by in	aepenaent								
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			450	v						
	The organization's CEO, Executive Director, or top management official			15a 15b	X						
D	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			130	-22						
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment w	vith a								
104	taxable entity during the year?			16a		х					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua			104							
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	-	· ·								
	exempt status with respect to such arrangements?			16b							
Sec	tion C. Disclosure				•						
17	List the states with which a copy of this Form 990 is required to be filed NY										
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	nd 990	0-T (section 501(c)(3)s	only)	availal	ole					
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X Upon request Other (explain	n on S	chedule O)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		•	finan	cial						
	statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's boundaries. SCAVONE - 716-217-9056	oks an	d records								
	741 MAIN STREET BUFFALO NY 14203										

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- 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. See the instructions for the order in which to list the persons above.

(A)  Name and title	(B) Average hours per week	(do box	not c	Pos heck i ss per	ition	) than s boti	one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutio nal tru ste e	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) SHERI L. SCAVONE	70.00			3,7				120 762	0	14 520
CEO	F 00			Х			_	138,763.	0.	14,538.
(2) TERESA BAIR, ESQ. CHAIR	5.00	Х		х				0.	0.	0
	3.00	^		Λ			<u> </u>	0.	0.	0.
(3) HELEN CAPPUCCINO, MD VICE CHAIR	3.00	Х		х				0.	0.	0.
(4) HON. LENORA FOOTE-BEAVERS, ESQ.	3.00	<u> </u>							0.1	
CHAIR ELECT		Х		х				0.	0.	0.
(5) NATALIE FISCHER	6.00									
TREASURER		Х		х				0.	0.	0.
(6) CATHERINE EARLE	4.00									
SECRETARY		Х		Х				0.	0.	0.
(7) TIFFANY ADAMS	1.00									
DIRECTOR		Х						0.	0.	0.
(8) JESSICA BAKER	2.00									
DIRECTOR		Х						0.	0.	0.
(9) JAMIE BATT	3.00									
DIRECTOR		Х						0.	0.	0.
(10) ODIE BRANT PORTER	2.00									
DIRECTOR		Х						0.	0.	0.
(11) DR. ALLISON BRASHEAR, MD MBA	2.00									
DIRECTOR		Х						0.	0.	0.
(12) JODY BRIANDI	2.00	1								_
DIRECTOR		Х						0.	0.	0.
(13) SHONDA BROCK	2.00	ļ								
DIRECTOR		Х						0.	0.	0.
(14) EMILY BURNS PERRYMAN	2.00	ļ								
DIRECTOR	0.00	Х					_	0.	0.	0.
(15) BETSY CONSTANTINE	2.00	3,7							_	0
DIRECTOR (16) NAMEY COV	2 00	Х				-	<u> </u>	0.	0.	0.
(16) NANCY COX	2.00								_	^
DIRECTOR  (17) PREAINA CRIMDIER	4.00	Х					-	0.	0.	0.
(17) BREAUNA CRUMPLER DIRECTOR	4.00	Х						0.	0.	0.
332007 12-21-23	I.	Λ		l		<u> </u>	<u> </u>	1 0.	U •	Form <b>990</b> (2023)

332007 12-21-23

Form 990 (2023) WNY WOME:	N'S FOUN	IDA	ΙΤ	ON	<u>,                                     </u>	IN	С.		27-4154	672 Page <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	Position (do not check more than one					nne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son i	s both	n an	compensation	compensation	amount of
	week		Lei an	uau	recid	i / ii us	lee)	from	from related	other 
	(list any hours for	irecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	eord	stee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ndividual trustee or director	n stit utio nal tru stee		yee	Highest compensated employee		1099-NEC)	1000 (120)	and related
	below	idual	ution	ъ	Key employee	est co oyee	er	,		organizations
	line)	Indiv	Instit	Officer	Key e	Highe	Former			-
(18) JACKIE SANCHEZ CULLITON	2.00									
DIRECTOR		Х						0.	0.	0.
(19) PATRICIA FARRELL	2.00									
DIRECTOR		Х						0.	0.	0.
(20) NICKOLE GARRISON	2.00									
DIRECTOR		Х						0.	0.	0.
(21) CAROLYN HUMAN	2.00									
DIRECTOR		Х						0.	0.	0.
(22) ALICE JACOBS, ESQ.	2.00									
DIRECTOR		Х						0.	0.	0.
(23) ANNE E. JOYNT, ESQ.	3.00									
DIRECTOR		Х						0.	0.	0.
(24) LINDA ANGERT KAHN	2.00									
DIRECTOR		Х						0.	0.	0.
(25) CRYSTAL RODRIQUEZ-DABNEY, ESQ.	2.00									
DIRECTOR		Х						0.	0.	0.
(26) SUSANNA SCHENK	2.00									
DIRECTOR		Х						0.	0.	0.
1b Subtotal								138,763.	0.	14,538.
c Total from continuation sheets to Part V	II, Section A							0.	0.	0.
d Total (add lines 1b and 1c)								138,763.	0.	14,538.
2 Total number of individuals (including but r	not limited to th	ose	liste	d ab	ove	) wh	o re	ceived more than \$100,	000 of reportable	
compensation from the organization										1
										Vaa Na

			Yes	No
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes." complete Schedule J for such person	5		Х

#### **Section B. Independent Contractors**

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

(A) Name and business address NONE	(B) Description of services	(C) Compensation

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

Form 990 WNY WOMEN	1'S FOUN	IDA	ΙΤ	ON	ſ, <u> </u>	IN	c.		27-415	4672
Part VII Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, aı	nd H	ligh	est (	Compensated Employe	ees (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all ·	that	app	ly)	compensation	compensation	amount of
	per week (list any hours for related organizations below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	line)	프	SE .	₹	. A	'≝	굔			
(27) SIOBHAN SMITH	4.00								_	•
DIRECTOR	2 00	Х						0.	0.	0.
(28) CARMEN SNELL	2.00	37							0	0
DIRECTOR		Х						0.	0.	0.
		1								
						$\vdash$				
		1								
		•								
		ŀ								
		ł								
		]		<u> </u>		<u> </u>	<u> </u>			
Tabalda Dada VIII. Oandina A. II										
Total to Part VII, Section A, line 1c								l		

orm 990 (202	3) <b>WNY</b>	WOMEN'S	FOUNDATION,	INC.	27-4154672
Part VIII	Statement of Rev	enue			
	01 1:60 1 11 0			5	

			Check if Schedule O contai	ns a response o	or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
S	1	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts									
ij g			Membership dues		212,788.				
ts, Ar			Fundraising events		212,700.				
ig ig			Related organizations		105,376.				
ns, Sim			Government grants (contribution		105,576.				
utio er (		t	All other contributions, gifts, grants		420 E07				
현된			similar amounts not included above		432,527.				
ont od (		_	Noncash contributions included in lines 1a	-1f <b>1g</b> \$	160,435.	750 601			
<u>0 g</u>		h	Total. Add lines 1a-1f			750,691.			
					Business Code				
e	2	а							
Program Service Revenue		b							
S		С							
am eve		d							
og B		е							
Ā		f	All other program service revenue	ue					
			Total. Add lines 2a-2f						
	3		Investment income (including di						
					· ·	13,881.			13,881.
	4		Income from investment of tax-e			·			•
	5		Royalties						
	·		Thoyanas Thomas	(i) Real	(ii) Personal				
	6	•	Gross rents 6a	()	( )				
			· · · · · · · · · · · · · · · · · · ·						
			Rental income or (loss) 6c						
			Net rental income or (loss)	(i) Securities	(ii) Other				
	′	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory 7a						
-		b	Less: cost or other basis						
Jue			and sales expenses						
Ş.		С	Gain or (loss)7c						
Be			Net gain or (loss)						
Other Revenue	8	а	Gross income from fundraising ever including \$ 212,78						
			contributions reported on line 1						
			Part IV, line 18	<i>'</i>	71,558.				
		<b>L</b>			136,639.				
			Less: direct expenses			-65,081.			-65,081.
			Net income or (loss) from fundra			03,001.			03,001.
	9	d	Gross income from gaming acti	I .					
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gamin	_					
	10	а	Gross sales of inventory, less re						
			and allowances						
			Less: cost of goods sold						
		С	Net income or (loss) from sales	of inventory					
တ					Business Code				
o a	11	а							
Miscellaneous Revenue		b							
Sell		С							
Ais. B		d	All other revenue						
_		е	Total. Add lines 11a-11d						
	12		Total revenue. See instructions .			699,491.	0.	0.	-51,200.

332009 12-21-23

Section 501(c)(3) and 501(c)(4) organizations must complete all column	s. All other organizations must complete column (A).
	" ' H' D IN

Da	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	39,635.	39,635.		
2	Grants and other assistance to domestic	3373331	33,73331		
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	166 615	100 400	15 546	40.640
	trustees, and key employees	166,615.	108,427.	15,546.	42,642
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and	270 220	101 104	25 060	71 226
_	persons described in section 4958(c)(3)(B)	278,328.	181,124.	25,968.	71,236
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
9	section 401(k) and 403(b) employer contributions) Other employee benefits	11,975.	7,793.	1,117.	3 065
9	Payroll taxes	40,819.	26,564.	3,809.	3,065 10,446
1	Fees for services (nonemployees):	10,010.	20,304.	3,003.	10,410
a	Management				
b	Legal				
c	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	57,227.	23,654.	25,892.	7,681
12	Advertising and promotion				
13	Office expenses	13,685.	2,242.	5,195.	6,248
14	Information technology				
15	Royalties				
16	Occupancy	21,121.	13,745.	1,971.	5,405
17	Travel	2,640.	1,971.	74.	595
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	F 021	0.50	4 004	100
19	Conferences, conventions, and meetings	5,831.	852.	4,804.	175
20	Interest				
21	Payments to affiliates	7 012	4,564.	654.	1,795
22	Depreciation, depletion, and amortization	7,013.	4,304.	2,577.	1,195
23	Other expenses. Itemize expenses not covered	4,311.		4,311.	
24	other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а					
b					
С					
d		05 051			
е	All other expenses	27,071.	6,801.	9,095.	11,175
25	Total functional expenses. Add lines 1 through 24e	674,537.	417,372.	96,702.	160,463
26	<b>Joint costs.</b> Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (202

Pdl	ιλ	Balance Sneet					
		Check if Schedule O contains a response or r	ote to an	y line in this Part X I			(P)
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	1,057,398.	1	827,779.		
	2	Savings and temporary cash investments			513,487.	2	787,367.
	3	Pledges and grants receivable, net	114,696.	3	55,496.		
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of the	nese pers	ons		5	
	6	Loans and other receivables from other disqu	alified per	sons (as defined			
		under section 4958(f)(1)), and persons describ		6			
ß	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
ğ	9	Prepaid expenses and deferred charges			1,233.	9	9,016.
	10a	Land, buildings, and equipment: cost or other	.				
		basis. Complete Part VI of Schedule D		86,705.			
	b	Less: accumulated depreciation	10b	23,296.	12,910.	10c	63,409.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, lin			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			1,868,935.	15	2,199,891.
	16	Total assets. Add lines 1 through 15 (must ed			3,568,659.	16	3,942,958.
	17	Accounts payable and accrued expenses			48,731.	17	68,635.
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complet				21	
es	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, sub					
jab		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unr				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	ies 17-24)	. Complete Part X	0		97,904.
		of Schedule D			<u>0.</u> 48,731.		166,539.
	26	Total liabilities. Add lines 17 through 25			40,731.	26	100,339.
S		Organizations that follow FASB ASC 958, c	neck ner				
nce	27	and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions			3,009,835.	27	3,376,676.
ala	28	Net assets with donor restrictions			510,093.	28	399,743.
ē	20	Organizations that do not follow FASB ASC			310,033.	20	333,743.
필		and complete lines 29 through 33.					
<u></u>	20	Capital stock or trust principal, or current fund	10			29	
Net Assets or Fund Balances	29 30	Paid-in or capital surplus, or land, building, or				30	
\ss(	31	Retained earnings, endowment, accumulated				31	
et /	32	Total net assets or fund balances			3,519,928.	32	3,776,419.
Ž	33	Total liabilities and net assets/fund balances			3,568,659.	33	3,942,958.
	JJ	Total habilities and het assets/fullu balances			5,500,055.	33	5,542,550

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form	1990 (2023) WINY WOMEN S FOUNDATION, INC.	21-4	11340/2	Pag	ge IZ
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	699	4, 6	91.
2	Total expenses (must equal Part IX, column (A), line 25)	2	674	1,5	37.
3	Revenue less expenses. Subtract line 2 from line 1	3	24	1,9	54.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,519	9,9	28.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	233	L,5	37.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	3,770	5,4	19.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			X
				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 on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				

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#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

WNY WOMEN'S FOUNDATION, 27-4154672 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	818,890.	603,112.	737,518.	656,895.	762,691.	3579106.
2	Tax revenues levied for the organ-						
	ization'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	818,890.	603,112.	737,518.	656,895.	762,691.	3579106.
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)						417,582.
6	Public support. Subtract line 5 from line 4.						3161524.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	818,890.	603,112.	737,518.	656,895.	762,691.	3579106.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	9,547.	5,494.	1,871.	1,819.	13,885.	32,616.
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 VI.)						
11	<b>Total support.</b> Add lines 7 through 10						3611722.
12	Gross receipts from related activities,	etc. (see instruction	ns)			12	
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publi						
14	Public support percentage for 2023 (I	ine 6, column (f), d	vided by line 11, c	olumn (f))		14	87.54 <u>%</u>
15	Public support percentage from 2022	Schedule A, Part	I, line 14			15	86.90 <u>%</u>
16a	33 1/3% support test - 2023. If the	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this box	k and
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2022. If the						
	and stop here. The organization qual	ifies as a publicly s	upported organiza	ition			
17a	10% -facts-and-circumstances test	- 2023. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported or	rganization		
b	10% -facts-and-circumstances test	- 2022. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	stances test, ched	ck this box and st	t <b>op here.</b> Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s
	<u> </u>	<u> </u>					(Form 990) 2023

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	etion A. Public Support	siow, picase comp	oloto i dit ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	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 organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
		(a) 2013	(6) 2020	(6) 2021	(d) ZOZZ	(6) 2020	(i) rotai
	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						
	Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is						
12	regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organizatio	on,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2023 (li	ne 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2022					16	%
Sec	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20	23 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2	<b>2022</b> Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	organization qual	ifies as a publicly s	supported organiza	ation	
b	<b>33 1/3% support tests - 2022.</b> If the line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

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Schedule A (Form 990) 2023

### Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Va-	N-
		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4-		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
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332024 12-21-23 Schedule A (Form 990) 2023

Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has tl	he organization accepted a gift or contribution from any of the following persons?			
а	A per	son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c b	pelow, the governing body of a supported organization?	11a		
b	A fam	nily member of a person described on line 11a above?	11b		
С	A 35%	% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail	in Part VI.	11c		
Sect	ion I	B. Type I Supporting Organizations			
				Yes	No
		ne governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, tors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
		tively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
		orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
		ne organization operate for the benefit of any supported organization other than the supported			
	organ	nization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
Soot	super	vised, or controlled the supporting organization.	2		
Seci	.1011	C. Type II Supporting Organizations		1	
				Yes	No
		a majority of the organization's directors or trustees during the tax year also a majority of the directors			
		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		anagement of the supporting organization was vested in the same persons that controlled or managed	4		
Sect	ion I	upported organization(s). D. All Type III Supporting Organizations	1		
		Divin Typo in Supporting SiguinEditions		Yes	No
4	Did #h	ne organization provide to each of its supported organizations, by the last day of the fifth month of the		162	NO
		nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	-	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
		nization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in <b>Part VI</b> how			
		rganization maintained a close and continuous working relationship with the supported organization(s).	2		
		ason of the relationship described on line 2, above, did the organization's supported organizations have a			
	-	icant voice in the organization's investment policies and in directing the use of the organization's			
	-	ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		· · · · · · · · · · · · · · · · · · ·	3		
Sect	ion I	orted organizations played in this regard. E. Type III Functionally Integrated Supporting Organizations			
1	Checi	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а		The organization satisfied the Activities Test. Complete line 2 below.			
b	Ш	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	truction	s).	
2	Activi	ities Test. <b>Answer lines 2a and 2b below.</b>		Yes	No
		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
		upported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those	e supported organizations and explain how these activities directly furthered their exempt purposes,			
		the organization was responsive to those supported organizations, and how the organization determined			
		hese activities constituted substantially all of its activities.	2a		
		ne activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
		or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		the reasons for the organization's position that its supported organization(s) would have engaged in	CI.		
		activities but for the organization's involvement.	2b		
		nt of Supported Organizations. <b>Answer lines 3a and 3b below.</b>			
		ne organization have the power to regularly appoint or elect a majority of the officers, directors, or	20		
		ees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b> ne organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
	u u	to organization occided a depotential adgree of another ever the policies, programs, and activities of Cacil			

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 ( explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	Type III supporting orga	nization (see
	instructions).	. •		•

Schedule A (Form 990) 2023

Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations <sub>(continu</sub>	ued)	· ·
Sect	on D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	<b>;</b>	3	
4	Amounts paid to acquire exempt-use assets		4		
_5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)				
_6	Other distributions (describe in Part VI). See instructions.			6	
_7_	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6		9		
10	Line 8 amount divided by line 9 amount			10	
Section E - Distribution Allocations (see instructions)  (i)  (ii)  Underdistribution  Pre-2023					(iii) Distributable Amount for 2023
			110 2020		741104111101 2020
_1_	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
_3_	Excess distributions carryover, if any, to 2023				
	From 2018				
	From 2019				
	From 2020				
	From 2021				
	From 2022				
	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
_ <u>i</u> _	Carryover from 2018 not applied (see instructions)				
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
_8_	Breakdown of line 7:				
	Excess from 2019				
<u>b</u>	Excess from 2020				
<u>c</u>	Excess from 2021				
<u>d</u>	Excess from 2022				
<u>e</u>	Excess from 2023				

Schedule A (Form 990) 2023

### SCHEDULE C (Form 990)

# Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

- 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" on 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.

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

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" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

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

Name of org	ganization	lons. Complete Part III.		En	nployer identification number
	WNY WOM	EN'S FOUNDATION,	INC.		27-4154672
Part I-A	Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527	organization.
2 Politica	al campaign activity expendit eer hours for political campai	ation's direct and indirect politic ures gn activities			
Part I-B	<u> </u>	anization is exempt und		<u>-</u>	
1 Enter t	he amount of any excise tax	incurred by the organization und	der section 4955		\$
2 Enter t	he amount of any excise tax	incurred by organization manag	ers under section 4955		\$
		n 4955 tax, did it file Form 4720			
					Yes No
	," describe in Part IV.	anization is exempt und	lor poetion F01/a	execut eastion FO1	(0)(3)
Part I-C	<u> </u>				
		by the filing organization for se			\$
		ization's funds contributed to of	•		•
		. Add lines 1 and 2. Enter here a			\$
			•		<b>¢</b>
		1120-POL for this year?			
		mployer identification number (E			
		tion listed, enter the amount pai			
	,	omptly and directly delivered to			•
politica	al action committee (PAC). If	additional space is needed, prov	vide information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fror filing organization's funds. If none, enter-	contributions received and

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

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023	WNY WOMEN'S	FOUNDATION	, INC.	<u> 27-4</u>	154672 Page 2
Part II-A Complete if the org	anization is exem	npt under section	501(c)(3) and file	d Form 5768 (ele	ction under
section 501(h)).					
A Check if the filing organiza	tion belongs to an affil	iated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and share	re of excess lobbying e	xpenditures).			
B Check if the filing organiza	tion checked box A an	d "limited control" pro	visions apply.		
Limi	ts on Lobbying Exper	ditures		(a) Filing organization's	(b) Affiliated group totals
(The term "expend	ditures" means amou	nts paid or incurred.)		totals	iotais
1a Total lobbying expenditures to influ	uence public opinion (g	rassroots lobbying)			
<b>b</b> Total lobbying expenditures to influ	uence a legislative bod	y (direct lobbying)		1,048.	
c Total lobbying expenditures (add li	nes 1a and 1b)			1,048.	
d Other exempt purpose expenditure	es			685,489.	
e Total exempt purpose expenditure	s (add lines 1c and 1d)			686,537.	
f Lobbying nontaxable amount. Ente	er the amount from the	following table in both	n columns.	127,981.	
If the amount on line 1e, column (a) o	or (b) is: The lobi	bying nontaxable am	ount is:		
not over \$500,000,	20% of t	he amount on line 1e.			
over \$500,000 but not over \$1,000	),000, \$100,00	0 plus 15% of the exce	ess over \$500,000.		
over \$1,000,000 but not over \$1,5	00,000, \$175,00	0 plus 10% of the exce	ess over \$1,000,000.		
over \$1,500,000 but not over \$17,		0 plus 5% of the exces	ss over \$1,500,000.		
over \$17,000,000,	\$1,000,0	000.		24 225	
g Grassroots nontaxable amount (en				31,995.	
h Subtract line 1g from line 1a. If zer				0.	
i Subtract line 1f from line 1c. If zero	,			0.	
j If there is an amount other than ze		ine 1i, did the organiza	tion file Form 4720	Г	¬.,
reporting section 4911 tax for this	•				Yes No
(Some organizations t		raging Period Under	• •	f the five columns he	low
(Some organizations to		ate instructions for lin	•	i the live columns be	iow.
		ditures During 4-Yea			
Calendar year	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) Total
(or fiscal year beginning in)	(a) 2020	(b) 2021	(6) 2022	(u) 2020	(e) Total
	121 205	101 152	111 042	127 001	A71 E71
2a Lobbying nontaxable amount	131,395.	101,153.	111,042.	127,981.	471,571.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					707,357.
(130% of life 2a, coldifice))					101,331.
c Total lobbying expenditures	1,277.	1,656.	1,528.	1,048.	5,509.
	22 040	25,288.	27 761	21 005	117 002
d Grassroots nontaxable amount	32,849.	45,400.	27,761.	31,995.	117,893.
e Grassroots ceiling amount (150% of line 2d, column (e))					176,840.
(15070 of life 2d, coldifilit (e))					1/0,040.

Schedule C (Form 990) 2023

f Grassroots lobbying expenditures

# 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)).

1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?  b If "Yes," enter the amount of any tax incurred under section 4912  c If "Yes," enter the amount of any tax incurred by organization managers under section 4912  d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1(c)(5), or se	r section Yes 1	mount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to not be 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 filling organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	1 2	Yes	
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501(c)(6).  1 Were substantially all (90% or more) dues received nondeductible by members?	1 2	Yes	
Were substantially all (90% or more) dues received nondeductible by members?	2	1	
	2		T N
	2		+-
			+
B Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	r vear?   3	3	+
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5),			
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) answered "Yes."  1 Dues, assessments and similar amounts from members			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political			
expenses for which the section 527(f) tax was paid).			
a Current year			
<i>f</i>	2a	<b>2</b> a	
	<u>2b</u>	2b	
b Carryover from last year c Total	2b 2c	2b 2c	
b Carryover from last year c Total	2b 2c 3	2b 2c	
b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	2b 2c 3	2b 2c	
<ul> <li>b Carryover from last year</li> <li>c Total</li> <li>3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?</li> </ul>	2b 2c 3	2b 2c 3	
<ul> <li>b Carryover from last year</li> <li>c Total</li> <li>3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?</li> <li>5 Taxable amount of lobbying and political expenditures. See instructions</li> </ul>	2b 2c 3	2b 2c 3 4	
<ul> <li>b Carryover from last year</li> <li>c Total</li> <li>3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?</li> </ul>	2b 2c 3	2b 2c 3 4	

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

WNY WOMEN'S FOUNDATION, INC.

**Employer identification number** 27-4154672

Par			or Accounts.	Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	(a) Donor advised funds	(h) Funds ar	nd other accounts
4	Total number at and of year	(a) Bonor advised funds	(b) i dilas ai	TO OTHER ACCOUNTS
1 2	Total number at end of year			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor adv	L	
J	are the organization's property, subject to the organization's	_		Yes No
6	Did the organization inform all grantees, donors, and donor a			163 140
Ū	for charitable purposes and not for the benefit of the donor o			
			•	Yes No
Par				
1	Purpose(s) of conservation easements held by the organization		•	
	Preservation of land for public use (for example, recrea		of a historically impo	ortant land area
	Protection of natural habitat	· —	of a certified historic	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the forr	of a conservation e	easement on the last
	day of the tax year.		Held	l at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic stru	ucture included on line 2a	2c	
d	Number of conservation easements included on line 2c acqu	ired after July 25, 2006, and not		
	on a historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	e organization durin	ig the tax
	year			
4	Number of states where property subject to conservation eas	sement is located	•	
5	Does the organization have a written policy regarding the per	- · · · · · · · · · · · · · · · · · · ·		
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing co	servation easement	ts during the year
7	Amount of avances incorred in manitoring inspecting has	lling of violations, and outeroing concern	ation occoments du	ring the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ding of violations, and emorcing conserv	ation easements du	ring the year
8	Does each conservation easement reported on line 2d above	seatisfy the requirements of section 170	a)(4)(B)(i)	
Ū				Yes No
9	In Part XIII, describe how the organization reports conservation			100 110
	balance sheet, and include, if applicable, the text of the footr	•		s the
	organization's accounting for conservation easements.			
Par	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or C	ther Similar As	sets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement	and balance sheet v	works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in	urtherance of public	
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these ite	ns.	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and	balance sheet work	s of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in fu	herance of public s	ervice,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1		\$	
2	If the organization received or held works of art, historical tre-	asures, or other similar assets for financ		
	the following amounts required to be reported under FASB A	SC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1		\$	
<u>b</u>	Assets included in Form 990, Part X		\$	
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Sche	edule D (Form 990) 2023

332051 09-28-23

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

b

С

Complete if the organization answered Tes on Form 990, Part IV, line Tra. See Form 990, Part X, line To.					
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	
1a Land					
<b>b</b> Buildings					
c Leasehold improvements					
d Equipment		86,705.	23,296.	63,409.	
<b>e</b> Other					
Total. Add lines 1a through 1e. (Column (d) must equa	63,409.				

Schedule D (Form 990) 2023

	FOUNDATION,	INC.	27-4154672 Page 3
Part VII Investments - Other Securities			
Complete if the organization answered "Yes"	on Form 990, Part IV, lir	ne 11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost o	r end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost o	r end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"		ne 11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1) ASSETS HELD IN TRUST			2,101,987.
(2) RIGHT OF USE ASSET			97,904.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, co.  Part X Other Liabilities	l. (B))		2,199,891.
Complete if the organization answered "Yes"	on Form 990 Part IV lin	ne 11e or 11f See Form 990 Part X lin	e 25
(1) D (1) (1) (1)	0111 01111 000, 1 411 14, 111	10 110 01 111. 000 1 0111 000, 1 are x, 1111	(b) Book value
			(b) Book value
(1) Federal income taxes (2) LEASE LIABILITY			97,904.
			31,304.
(3)			
<u>(5)</u>			
<u>(6)</u>			
<u>(7)</u>			
(8)			

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

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

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023

### **SCHEDULE G** (Form 990)

Department of the Treasury

Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Schedule G (Form 990) 2023

Name of the organization	<u> </u>					Employer ide	ntification number
WNY WOM	<u>EN'S FOUNDATION, I</u>	NC.				27-4154	672
Part I Fundraising Activities. required to complete this par	Complete if the organization answet.	red "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
Indicate whether the organization rais	e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) pursua	tion of tion of fundra (includantes)	non-g gover aising of ding of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	ntrol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total		•					
List all states in which the organization or licensing.			utions	or has been notified	it is e	exempt from re	gistration

332081 09-13-23

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

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

		of fundraising event contributions and gro		-EZ, lines 1 and 6b. List e		s greater than \$5,000.
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events
			WHAT SHE'S	FALL IN		(add col. (a) through
			MADE OF	FASHION	1	
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Jue						
Revenue	1	Gross receipts	172,991.	69,942.	41,413.	284,346.
_	2	Less: Contributions	147,691.	35,283.	29,814.	212,788.
	3	Gross income (line 1 minus line 2)	25,300.	34,659.	11,599.	71,558.
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	22,858.	21,812.	1,155.	45,825.
irect E	7	Food and beverages	62,946.		2,811.	65,757.
		Entortainment		900.		900.
	۵	Entertainment Other direct expenses	6,509.		4,480.	24,157.
	10		2	· · · · · · · · · · · · · · · · · · ·	,	136,639.
		Net income summary. Subtract line 10 from li				-65,081.
Pa	rt I					
		\$15,000 on Form 990-EZ, line 6a.			•	
			(a) Pingo	(b) Pull tabs/instant	(a) Other geming	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
eve						
	1	Gross revenue				
Ø	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	_	Other direct expenses				
	3	Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No		
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	_	Not coming income automate. Outstand the 7	from line 1 lines (-1)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (a)			
9	Ent	ter the state(s) in which the organization condu	icts gaming activities:			
_		the organization licensed to conduct gaming a				Yes No
		No," explain:				res No
		но, охрішін.				
	_					
		ere any of the organization's gaming licenses re	· · · · · · · · · · · · · · · · · · ·			Yes No
C	, 11	Yes," explain:				
	_					

Schedule G (Form 990) 2023

332082 09-13-23

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable garning?	Sch	edule G (Form 990) 2023 WNY WOMEN'S FOUNDATION, INC. 27	-4154672	Page 3
12 is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	11	Does the organization conduct gaming activities with nonmembers?	Yes	No
to administer charatable gaming?				
13 Indicate the percentage of gaming activity conducted in: a The organization's facility			Ves	□ No
a 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 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  b If "Yes," enter the amount of gaming revenue received by the organization of gaming revenue retained by the third party c If "Yes," enter name and address of the third party:  Name Address 16 Gaming manager information:  Name Gaming manager compensation  Description of services provided  Description of services provided  Independent contractor  17 Mandatory distributions:  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Define 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  Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (iv); and Part III, lines 9, 9b, 10b, 10b, 10c, 10c, 10c, 10c, 10c, 10c, 10c, 10c	12		103	
b An outside facility			امدا	0.4
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:  Name  Address  15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?				<u>%</u>
Name Address  15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?			[13b	<u>%</u>
Address  15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
Address  15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No.  b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ and the amount of gaming revenue retained by the third party:  Name Address		Name		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No.  b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ and the amount of gaming revenue retained by the third party:  Name Address				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No.  b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ and the amount of gaming revenue retained by the third party:  Name Address		Address		
b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ c If "Yes," enter name and address of the third party:  Name Address		, tudiood		
b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ c If "Yes," enter name and address of the third party:  Name Address	45-		□ Voc	□ No
of gaming revenue retained by the third party \$ c If "Yes," enter name and address of the third party:  Name  Address  16 Gaming manager information:  Name  Gaming manager compensation \$  Description of services provided  Director/officer Employee Independent contractor  17 Mandatory distributions:  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,	ısa	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	L 1es	NO
of gaming revenue retained by the third party \$ c If "Yes," enter name and address of the third party:  Name  Address  16 Gaming manager information:  Name  Gaming manager compensation \$  Description of services provided  Director/officer Employee Independent contractor  17 Mandatory distributions:  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,				
c If "Yes," enter name and address of the third party:  Name  Address  16 Gaming manager information:  Name  Gaming manager compensation \$	b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
Name  Address  16 Gaming manager information:  Name  Gaming manager compensation \$  Description of services provided  Director/officer		of gaming revenue retained by the third party \$		
Address  16 Gaming manager information:  Name  Gaming manager compensation \$  Description of services provided  Director/officer	С	If "Yes," enter name and address of the third party:		
Address  16 Gaming manager information:  Name  Gaming manager compensation \$  Description of services provided  Director/officer				
Address  16 Gaming manager information:  Name  Gaming manager compensation \$  Description of services provided  Director/officer		Name		
Gaming manager information:  Name  Gaming manager compensation \$				
Gaming manager information:  Name  Gaming manager compensation \$		Address		
Saming manager compensation \$  Description of services provided Independent contractor  17 Mandatory distributions:  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No.  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,		Address		
Saming manager compensation \$  Description of services provided Independent contractor  17 Mandatory distributions:  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No.  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,				
Gaming manager compensation \$  Description of services provided	16	Gaming manager information:		
Gaming manager compensation \$  Description of services provided				
Director/officer		Name		
Director/officer				
Director/officer		Gaming manager compensation		
Director/officer		Gaining manager compensation — — — — — — — — — — — — — — — — — — —		
Director/officer		Provide the standard and		
17 Mandatory distributions:  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,		Description of services provided		
17 Mandatory distributions:  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,				
17 Mandatory distributions:  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,				
17 Mandatory distributions:  a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,		Director/officer Employee Independent contractor		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,	17	Mandatory distributions:		
retain the state gaming license?  Description be Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,		·		
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,	а		□ Voc	□ No
organization's own exempt activities during the tax year \$ Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,				
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,	b		1	
	_			
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	Pa		Part III, lines 9,	9b, 10b,
		15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
				_
				_

Schedule G	G (Form 990)	WNY	WOMEN'S	FOUNDATION,	INC.	27-4154672	Page 4
Part IV	G (Form 990)  Supplemental Infor	mation	(continued)				
			(continued)				
-							
r							
-							
i							

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Schedule I (Form 990) 2023

WNY WOMEN	27-4154672						
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records t	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selection	
criteria used to award the grants or assis	No						
2 Describe in Part IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to	-				anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$	T	1	1		(f) Method of	Ī	Т
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
JAMESTOWN COMMUNITY COLLEGE							
525 FALCONER ST							MOMS: FROM EDUCATION TO
JAMESTOWN, NY 14701	16-1191893	GOVT	20,000.	0.			EMPLOYMENT
SUNY ERIE COMMUNITY COLLEGE							
121 ELLICOTT STREET							
BUFFALO, NY 14203	11-3682643	GOVT	8,400.	0.			MPOWER COLLEGE PROGRAM
2 Enter total number of section 501(c)(3) a	nd government ord	uanizations listed in the	e line 1 table		<u> </u>	1	1
3 Enter total number of other organizations	-						

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

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	90, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ad	ditional information.	
PART I, LINE 2:					
GRANTS ARE MONITORED OVER THE TERM	OF THE G	RANT PERIC	DD TO ENSUR	E COMPLIANCE	
WITH THE TERMS OF THE AWARD. GRANT	RECIPIEN	ITS ARE REÇ	QUIRED TO S	UBMIT	
REPORTS AT THE END OF EACH GRANT P	ERIOD.				

#### SCHEDULE M (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

**Employer identification number** 

WNY WOMEN'S FOUNDATION, INC. 27-4154672 Types of Property Part I (a) (b) (c) (d) Number of Noncash contribution Check if Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures 2 Art - Fractional interests 3 Books and publications 4 Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities - Publicly traded 10 Securities - Closely held stock ..... Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 15 Real estate - Residential Real estate - Commercial 16 Real estate - Other 17 18 Collectibles Food inventory 19 Drugs and medical supplies ..... 20 Taxidermy 21 Historical artifacts 22 Scientific specimens 23 24 Archeological artifacts 62,946.FMV (FOOD AND BEVERA) Х 25 Other ( FURNITURE 5 52,981.FMV Х Other 26 Х 1 22,858.FMV ( VENUE 27 Other 3 OTHER X 21,650.FMV Other 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for Х exempt purposes for the entire holding period? 30a **b** If "Yes," describe the arrangement in Part II. Х Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? 32a **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2023

332142 09-11-23

### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

WNY WOMEN'S FOUNDATION, INC.

Employer identification number 27-4154672

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: STATE, AND ERIE COUNTY AVERAGES. THIS INITIATIVE IS ENHANCED BY WNYWF'S ADVOCACY EFFORTS TO SECURE POLICY AND FUNDING, ESPECIALLY AROUND CHILD CARE ACCESS AND AFFORDABILITY. IN 2023, THERE WERE 2 COMMUNITY COLLEGES AND 2 WORKFORCE PARTNERS. OVER 750 WOMEN AND 1200 OF THEIR CHILDREN HAVE BENEFITTED FROM THESE PROGRAMS SINCE 2014. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: THIS INITIATIVE IS ENHANCED BY WNYWF'S ADVOCACY EFFORTS TO SECURE POLICY AND FUNDING, ESPECIALLY AROUND CHILD CARE ACCESS AND AFFORDABILITY, PAY EQUITY AND PAID FAMILY LEAVE PROGRAM SERVICE ACCOMPLISHMENTS: FORM 990, PART III, LINE 4C, FROM ACHIEVING THEIR FULL POTENTIAL. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: WNYWF EDUCATES AND ENGAGES DECISION MAKERS TO ADVANCE POLICIES AND ACCELERATING THE PACE OF CHANGE FOR ISSUES IMPACTING WOMEN. ARE A RESPECTED AND TRUSTED APOLITICAL PARTNER WITH A STRONG TRACK RECORD FOR BUILDING COLLABORATIONS AND DRIVING POLICY AND FUNDING. FACILITATE RELATIONSHIPS BETWEEN FUNDERS AND COMMUNITY PARTNERS THAT ADDRESS THE CHANGING SOCIETAL NEEDS OF OUR MOST MARGINALIZED WOMEN. WNYWF HAS PROVIDED LEADERSHIP TO A COALITION THAT SECURED A RECORD, TRANSFORMATIONAL STATE INVESTMENT THE CHILD CARE WORKFORCE AND BUSINESSES, AND INCREASED ELIGIBILITY FOR FINANCIAL ASSISTANCE TO PARENTS. ADDITIONALLY, OUR THOUGHT KNOWLEDGE For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2023

332211 11-14-23

Schedule O (Form 990) 2023 Page 2

Name of the organization WNY WOMEN'S FOUNDATION, INC.

Employer identification number 27-4154672

AND EXPERIENCE IS OFTEN SOUGHT-OUT FOR GUIDANCE FOR REPORTS,

LEGISLATIVE HEARINGS, ADVOCACY INITIATIVES, TASK FORCE APPOINTMENTS AND

ADVISEMENT TO PARTNERS, DECISION MAKERS AND COALITIONS.

EXPENSES \$ 136. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

THE BOARD HAS DELEGATED REVIEW AND APPROVAL OF THE FORM 990 TO THE
TREASURER AND CEO. ONCE REVIEWED AND APPROVED, THE ENTIRE FORM IS PROVIDED

TO THE BOARD PRIOR TO FILING.

FORM 990, PART V, LINE 2A

THE FOUNDATION CONTRACTS WITH A PROFESSIONAL EMPLOYMENT ORGANIZATION

(PEO) TO PROVIDE ALL PAYROLL AND HUMAN RESOURCE FUNCTIONS. ALL PAYROLL

TAX FILINGS FOR THE FOUNDATION'S EMPLOYEES ARE FILED BY AND INCLUDED AS

PART OF THE PEO'S GROUP FILINGS.

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

POTENTIAL CONFLICTS OF INTEREST ARE DISCLOSED AT LEAST ANNUALLY BY BOARD

TRUSTEES AND OFFICERS. TRUSTEES ABSTAIN FROM VOTING ON MATTERS WHERE A

POTENTIAL CONFLICT OF INTEREST EXISTS.

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

THE BOARD DETERMINES COMPENSATION FOR ITS OFFICERS BASED ON SEVERAL FACTORS
INCLUDING INTERNAL PERFORMANCE EVALUATIONS AND EXTERNAL COMPARABILITY DATA.

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

FORMS ARE MADE AVAILABLE UPON REQUEST.

Schedule O (Form 990) 2023

Name of the organization  WNY WOMEN'S FOUNDATION, INC.	Employer identification number 27-4154672
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
APPRECIATION OF ASSETS HELD IN TRUST	231,537.
FORM 990, PART XII, LINE 2C	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	
	_