

Form **990-EZ**

Short Form

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 ▶ For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year
 ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

2002

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2002 calendar year, or tax year beginning 2002, and ending 2002

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions.	C Name of organization <u>Women in Film and Video - New England Chapter</u>	D Employer identification number <u>042: 791 260</u>
		Number and street (or P.O. box if mail is not delivered to street address), Room/suite <u>50 Hunt Street</u>	E Telephone number <u>(617) 612-0091</u>
		City or town, state or country, and ZIP + 4 <u>Watertown, MA 02472</u>	F Enter 4-digit (GEN) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

G Accounting method Cash Accrual
Other (specify) ▶

I Web site: ▶ www.wifvne.org

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

J Organization type (check only one) - 501(c) (3) (insert no) 4947(a)(1) or 527

K Check if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 36 of the instructions)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	22,625
	2	Program service revenue including government fees and contracts	2	4,055
	3	Membership dues and assessments	3	0
	4	Investment income	4	0
	5a	Gross amount from sale of assets other than inventory	5a	0
	5b	Less cost or other basis and sales expenses	5b	0
	5c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)	5c	0
	6	Special events and activities (attach schedule)		
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
6b	Less direct expenses other than fundraising expenses	6b		
6c	Net income or (loss) from special events and activities (line 6a less line 6b)	6c	0	
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7c	0	
8	Other revenue (describe ▶ _____)	8	0	
9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	26,680	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	0
	11	Benefits paid to or for members	11	0
	12	Salaries, other compensation, and employee benefits	12	14,756
	13	Professional fees and other payments to independent contractors	13	110
	14	Occupancy, utilities, and maintenance	14	4,942
	15	Printing, publications, postage, and shipping	15	968
	16	Other expenses (describe ▶ _____)	16	7,299
17	Total expenses (add lines 10 through 16)	17	28,075	
Net Assets	18	Excess or (deficit) for the year (line 9 less line 17)	18	21,395
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	7,585
	20	Other changes in net assets or fund balances (attach explanation)	20	0
	21	Net assets or fund balances at end of year (combine lines 18 through 20)	21	6,190

Part II Balance Sheets - If total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ

(See page 39 of the instructions)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	5,485	22 3,690
23 Land and buildings	0	23 0
24 Other assets (describe ▶ <u>office furniture, computers</u>)	2,100	24 2,500
25 Total assets	7,585	25 6,190
26 Total liabilities (describe ▶ _____)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	7,585	27 6,190

FILMED APR 15 2003

RECEIVED
APR 15 2003

Part III Statement of Program Service Accomplishments (See page 39 of the instructions)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)	
What is the organization's primary exempt purpose?			
Describe what was achieved in carrying out the organization's exempt purposes in a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title			
28	Rewind/Fast Forward: A 6-day film festival featuring the work of women filmmakers in New England over the past 20 years. Est. 1,000 attendees. (Grants \$ 7,000)	28a	5,338
29	Screenplay contest: An opportunity for the winning screenwriter to have her work performed + critiqued. Approx. 40 attendees (Grants \$ 0)	28a	211
30	Kickoff party: An opportunity for new and old members to network. Approx. 50 attendees. (Grants \$ 0)	30a	147
31	Other program services (attach schedule) . See a Attached . (Grants \$ 0)	31a	90
32	Total program service expenses (add lines 28a through 31a)	32	5,786

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 40 of the instructions)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Valerie Spain 02471 152 Winsor Ave, Watertown MA	President, 10 hrs	0	0	none-reimbursed for approved, necessary expenses.
Erin Trahan 02430 31 Burroughs St.#3 Jamaica Plain MA	Vice Pres, 10 hrs	0	0	
Jill Reurs P.O. Box 692, Watertown MA 02471	Secretary, 10 hrs	0	0	

Part V Other Information (Note the attachment requirement in General Instruction V, page 14)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		<input checked="" type="checkbox"/>
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		<input checked="" type="checkbox"/>
35	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		<input checked="" type="checkbox"/>
b	If "Yes," has it filed a tax return on Form 990-T for this year?		<input checked="" type="checkbox"/>
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement)		<input checked="" type="checkbox"/>
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b	Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved 38b	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
39	501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 9 39a	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b	Gross receipts, included on line 9, for public use of club facilities 39b	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
40a	501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under section 4911 ▶ 0, section 4912 ▶ 0, section 4955 ▶ 0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b	501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation		<input checked="" type="checkbox"/>
c	Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958 ▶ 0		<input checked="" type="checkbox"/>
d	Enter Amount of tax on line 40c, above, reimbursed by the organization ▶ 0		<input checked="" type="checkbox"/>
41	List the states with which a copy of this return is filed ▶ Massachusetts		<input checked="" type="checkbox"/>
42	The books are in care of ▶ Nancy Fliester, Treasurer Telephone no ▶ (781) 641-1495 Located at ▶ 19 Lewis Ave, Arlington, MA ZIP + 4 ▶ 02474-3205		<input checked="" type="checkbox"/>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		<input checked="" type="checkbox"/>

Including accompanying schedules and statements and to the best of my knowledge (other than officer) is based on all information of which preparer has any knowledge

Date 1 April 1, 2003

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2002

Supplementary Information—(See separate instructions.)

Department of the Treasury
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Employer identification number

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one if there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000 ▶				

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) if there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities (See page 2 of the instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line l of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		✓
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		✓
a Sale, exchange, or leasing of property?	2a	✓
b Lending of money or other extension of credit?	2b	✓
c Furnishing of goods, services, or facilities?	2c	✓
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	✓
e Transfer of any part of its income or assets?	2e	✓
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)	3	✓
4 Do you have a section 403(b) annuity plan for your employees?	4	✓
Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i).
- 6 A school Section 170(b)(1)(A)(ii). (Also complete Part V)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A)
- 11b A community trust Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A)
- 12 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 charitable, etc., 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). (Also complete the Support Schedule in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety Section 509(a)(4). (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28).	18,375	20,360	14,876	3735	57,346
16 Membership fees received	12,070	11,094	12,092	7,851	43,107
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	14,394	23,100	26,414	7,198	71,106
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	0	0	0	0	0
19 Net income from unrelated business activities not included in line 18	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.	0	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	0	0	0	0	0
23 Total of lines 15 through 22.	44,839	54,554	53,382	18,784	171,559
24 Line 23 minus line 17.	30,445	31,454	26,968	11,586	100,453
25 Enter 1% of line 23	448	546	534	188	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 2009
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 13,955
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 100,453
d Add Amounts from column (e) for lines 18 0 19 0 22 0 26b 13,955					26d 13,955
e Public support (line 26c minus line 26d total)					26e 86,498
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 86%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year					(2001) 10,500 (2000) 0 (1999) 0 (1998) 0
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year					(2001) 0 (2000) 0 (1999) 0 (1998) 0
c Add Amounts from column (e) for lines 15 57,346 16 43,107 17 71,106 20 0 21 0					27c 171,559
d Add Line 27a total 10,500 and line 27b total 0					27d 10,500
e Public support (line 27c total minus line 27d total)					27e 161,059
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)					27f 171,559
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 94%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 0%
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15					

N/A

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (if you need more space, attach a separate statement)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d Copies of all material used by the organization or on its behalf to solicit contributions?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
If you answered "No" to any of the above, please explain (if you need more space, attach a separate statement)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b Admissions policies?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c Employment of faculty or administrative staff?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d Scholarships or other financial assistance?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e Educational policies?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f Use of facilities?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g Athletic programs?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h Other extracurricular activities?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
If you answered "Yes" to any of the above, please explain. (if you need more space, attach a separate statement)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
34a Does the organization receive any financial aid or assistance from a governmental agency?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

N/A

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)
(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check a if the organization belongs to an affiliated group Check b if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table—		
	If the amount on line 40 is—		
	The lobbying nontaxable amount is—		
	Not over \$500,000	20% of the amount on line 40.	} 41
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000	\$1,000,000	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e)).				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (include compensation in expenses reported on lines c through h.)			
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 other means			
i Total lobbying expenditures (Add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

WOMEN IN FILM AND VIDEO – NEW ENGLAND CHAPTER
 50 Hunt Street, Watertown, MA 02472
 EIN# 042-791-260

SCHEDULES FOR FORM 990-EZ

PART I, LINE 16:

Other expenses

Program costs (see page 2)	5787
Dues to parent organization (Women in Film and Television International)	462 →
Supplies	326
Bank/credit card charges	212
Advertising	90
Miscellaneous expense	422
TOTAL	7299

PART III, LINE 31

Other Program Services

Line 31

Documentary screening of "Mai's America" with the director and executive producer. An opportunity for members to meet award-winning filmmakers and have their questions answered about production and distribution. Approximately 30 attendees.
 Expense \$90

Weekly newsletter, the WIFV/NE Wire. Education and information for 300 subscribers.
 Expense 0 (compiled by office staff, sent via email)

PART IV continued

Paid employees

(A)	(B)	(C)	(D)	(E)
Maeve McCaffrey 1339 Federal Ave #4 Los Angeles, CA 90025	Administrative director 20 hrs/week	\$7,800	0	none*
Rachelle Reinhart 478 Beacon Street Boston, MA 02115	Executive director 20 hrs/week	\$6482	0	none*

*reimbursed for necessary approved expenses