

Return of Organization Exempt From Income Tax

2004

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

A For the 2004 calendar year, or tax year beginning **JUL 1, 2004** and ending **JUN 30, 2005**

B Check if applicable: <input 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 CENTER FOR WOMEN & ENTERPRISE, INC.	D Employer identification number 04-3256236
	Number and street (or P O box if mail is not delivered to street address) Room/suite 24 SCHOOL STREET 700	E Telephone number 617-536-0700	
	City or town, state or country, and ZIP + 4 BOSTON, MA 02108	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶	

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

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? N/A Yes No (If "No," attach a list)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: ▶ **WWW.CWEONLINE.ORG**

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

K Check here 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 Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **2271259.**

I Group Exemption Number ▶

M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

SCANNED DEC 09 2005

1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a	899880.		
b	Indirect public support	1b			
c	Government contributions (grants)	1c	983002.		
d	Total (add lines 1a through 1c) (cash \$ 1880883. noncash \$ 1999.)	1d		1882882.	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		213004.	
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4		2835.	
5	Dividends and interest from securities	5			
6a	Gross rents	6a			
b	Less rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe)	7			
8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
b	Less cost or other basis and sales expenses	8a			
c	Gain or (loss) (attach schedule)	8b			
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			
8d		8d			
9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ 0. of contributions reported on line 1a)	9a	169542.		
b	Less direct expenses other than fundraising expenses	9b	66613.		
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	See Statement 1	102929.	
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11		2996.	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		2204646.	
13	Program services (from line 44, column (B))	13		1596722.	
14	Management and general (from line 44, column (C))	14		359649.	
15	Fundraising (from line 44, column (D))	15		329341.	
16	Payments to affiliates (attach schedule)	16			
17	Total expenses (add lines 16 and 44, column (A))	17		2285712.	
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		-81066.	
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		1287124.	
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, 19, and 20)	21		1206058.	

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NOV 18 2005
CADDEN, UT

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	230000.	129481.	75422.	25097.
26	Other salaries and wages	992749.	737401.	113133.	142215.
27	Pension plan contributions				
28	Other employee benefits	86825.	64836.	6923.	15066.
29	Payroll taxes	111207.	83963.	12125.	15119.
30	Professional fundraising fees				
31	Accounting fees	18880.		18880.	
32	Legal fees				
33	Supplies	22038.	11390.	9391.	1257.
34	Telephone	34186.	24842.	5616.	3728.
35	Postage and shipping	19643.	9642.	4952.	5049.
36	Occupancy	249583.	174594.	37890.	37099.
37	Equipment rental and maintenance	36678.	16355.	5661.	14662.
38	Printing and publications	22647.	6429.	478.	15740.
39	Travel	33386.	17017.	13452.	2917.
40	Conferences, conventions, and meetings				
41	Interest				
42	Depreciation, depletion, etc (attach schedule)	64741.	43086.	10536.	11119.
43	Other expenses not covered above (itemize)				
a	_____				
b	_____				
c	_____				
d	_____				
e	See Statement 2	363149.	277686.	45190.	40273.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13-15	2285712.	1596722.	359649.	329341.

Joint Costs Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? _____

Education and Services to Entrepreneurs

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others)

a	See Statement 3				
e	Other program services (attach schedule)				
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)				1596722.

Part IV Balance Sheets

Note Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	126856.	45	98394.
	46 Savings and temporary cash investments	524845.	46	746999.
	47 a Accounts receivable	47a 33428.		
	b Less allowance for doubtful accounts	47b	18892.	47c 33428.
	48 a Pledges receivable	48a 21480.		
	b Less allowance for doubtful accounts	48b	229692.	48c 21480.
	49 Grants receivable		436709.	49 284452.
	50 Receivables from officers, directors, trustees, and key employees			50
	51 a Other notes and loans receivable	51a		
	b Less allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use			52
	53 Prepaid expenses and deferred charges		18048.	53 67805.
	54 Investments - securities	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54
	55 a Investments - land, buildings, and equipment basis	55a		
	b Less accumulated depreciation	55b		55c
56 Investments - other	See Statement 4	42931.	56 43811.	
57 a Land, buildings, and equipment basis	57a 343634.			
b Less accumulated depreciation	57b 221961.	114418.	57c 121673.	
58 Other assets (describe ▶)			58	
59 Total assets (add lines 45 through 58) (must equal line 74)		1512391.	59 1418042.	
Liabilities	60 Accounts payable and accrued expenses	209625.	60	211409.
	61 Grants payable		61	
	62 Deferred revenue		62	575.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe ▶ ADVANCE ON GRANT FUNDING)		15642.	65 0.
66 Total liabilities (add lines 60 through 65)		225267.	66 211984.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	1101017.	67	1113801.
	68 Temporarily restricted	167100.	68	73250.
	69 Permanently restricted	19007.	69	19007.
	Organizations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		1287124.	73 1206058.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)		1512391.	74 1418042.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity
77 Were any changes made in the organizing or governing documents but not reported to the IRS?
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
78 b If "Yes," has it filed a tax return on Form 990-T for this year?
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year?
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?
80 b If "Yes," enter the name of the organization Renaissance Community Fund Corporation
81 a Enter direct or indirect political expenditures See line 81 instructions
81 b Did the organization file Form 1120-POL for this year?
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?
82 b If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?
83 b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84 a Did the organization solicit any contributions or gifts that were not tax deductible?
84 b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85 b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85 c Dues, assessments, and similar amounts from members
85 d Section 162(e) lobbying and political expenditures
85 e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85 f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85 g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85 h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 12
86 b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) organizations Enter a Gross income from members or shareholders
87 b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911
89 b 501(c)(3) and 501(c)(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?
90 a List the states with which a copy of this return is filed Massachusetts
90 b Number of employees employed in the pay period that includes March 12, 2004
91 The books are in care of Sheila Murphy, Chief Operating Offi Telephone no 617-536-0700

Located at 24 School Street, Boston, MA ZIP + 4 02108

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions)

Note Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a COURSE FEES/TUITION NET					
b OF SUBSIDIES					213004.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	2835.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			01	102929.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a MISCELLANEOUS					2996.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		105764.	216000.
105 Total (add line 104, columns (B), (D), and (E))					321764.

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	See Statement 6

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note. If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Under penalties of perjury, I declare that I have prepared this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I am not aware of any information of which preparer has any knowledge.

Date: [REDACTED] Type or print name and title: [REDACTED]

Date: *1/1/10* Check if self-prepared: Preparer's SSN or PTIN: **P00052643**

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2004

Name of the organization

CENTER FOR WOMEN & ENTERPRISE, INC.

Employer identification number

04 3256236

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
CAROL MALYSZ	DIRECTOR			
	40	78000.	3260.	
JENNIFER WILLIAMS	DIRECTOR			
	40	68000.	1027.	
SHARON DELESKEY	CONTROLLER			
	40	58000.	5095.	
MEREDITH HUNTER	DEV. ASSOC.			
	40	51700.	8878.	
Total number of other employees paid over \$50,000	▶ 0			

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
ELIZABETH THORNTON	CLASSROOM INSTRUCTOR	52000.
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 i 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		X
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?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)		X
b Do you have a section 403(b) annuity plan for your employees?	X	
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	2127750.	2113812.	2044160.	1673332.	7959054.
16 Membership fees received					
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	230618.	173547.	160552.	109010.	673727.
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	3092.	2187.	382.	10987.	16648.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
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					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	2361460.	2289546.	2205094.	1793329.	8649429.
24 Line 23 minus line 17	2130842.	2115999.	2044542.	1684319.	7975702.
25 Enter 1% of line 23	23615.	22895.	22051.	17933.	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	▶ 26a	159514.
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 2000 through 2003 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts	▶ 26b	0.
c Total support for section 509(a)(1) test Enter line 24, column (e)	▶ 26c	7975702.
d Add Amounts from column (e) for lines 18 <u>16648.</u> 19 _____ 22 _____ 26b _____	▶ 26d	16648.
e Public support (line 26c minus line 26d total)	▶ 26e	7959054.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	▶ 26f	99.7913%

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 N/A	(2003)	(2002)	(2001)	(2000)
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 N/A	(2003)	(2002)	(2001)	(2000)
c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____	▶ 27c	N/A		
d Add Line 27a total _____ and line 27b total _____	▶ 27d	N/A		
e Public support (line 27c total minus line 27d total)	▶ 27e	N/A		
f Total support for section 509(a)(2) test Enter amount on line 23, column (e) ▶ 27f N/A	▶ 27f	N/A		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	▶ 27g	N/A %		
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	▶ 27h	N/A %		

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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

Part V Private School Questionnaire (See page 7 of the instructions)

N/A

(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?		
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?		
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)		
<hr/>			
<hr/>			
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	32d	
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33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	33h	
<hr/>			
<hr/>			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
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	34b	
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	35	

Schedule A (Form 990 or 990-EZ) 2004

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

N/A

(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 (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
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		
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				N/A
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

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)

N/A

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)			0.

Form 990 Special Events and Activities Statement 1

Description of Event	Gross Receipts	Contribut. Included	Gross Revenue	Direct Expenses	Net Income
ANNUAL DINNER AND AUCTION EVENT	169542.		169542.	66613.	102929.
To Fm 990, Part I, line 9	169542.		169542.	66613.	102929.

Form 990 Other Expenses Statement 2

Description	(A)	(B)	(C)	(D)
	Total	Program Services	Management and General	Fundraising
TRAINING	7089.	3193.	889.	3007.
TEMPORARY SERVICES	33604.	8445.	22511.	2648.
CONSULTANTS/PROFESSIONAL FEES	28976.	18759.	7034.	3183.
PROGRAM EVENTS/MEALS	10416.	6355.		4061.
GENERAL & LIABILITY INSURANCE	13427.	8292.	3126.	2009.
RELOCATION COSTS	1858.	1858.		
LICENSE FEE	50000.	50000.		
INSTRUCTORS FEES/STIPENDS	149194.	149194.		
CONTRIBUTIONS	3364.	409.	348.	2607.
MARKETING & PUBLIC RELATIONS	16581.	7795.	35.	8751.
DUES & PUBLICATIONS	12551.	4167.	5399.	2985.
MISCELLANEOUS	2427.	1489.	494.	444.
UNCOLLECTED FEES & PLEDGES	10439.		439.	10000.
CREDIT CARD & BANK CHARGES	6824.	1331.	4915.	578.
PROGRAM/COURSE MATERIALS	16399.	16399.		
Total to Fm 990, ln 43	363149.	277686.	45190.	40273.

Form 990 Statement of Program Service Accomplishments Statement 3

Description of Program Service One

MULTI-WEEK COURSES, WORKSHOPS, SEMINARS, ONE-ON-ONE COMPREHENSIVE PROGRAMS AND SERVICES TO ENTREPRENEURS IN MASSACHUSETTS AND RHODE ISLAND. THROUGH ITS OFFICES IN BOSTON AND WORCESTER, MA AND PROVIDENCE, RI, CWE OFFERS MULTI-WEEK COURSES, WORKSHOPS, SEMINARS, ONE-ON-ONE CONSULTING AND LOAN PACKAGING.

	Grants	Expenses
To Form 990, Part III, line a		1596722.

Form 990 Other Investments Statement 4

Description	Valuation Method	Amount
PLEDGES RECEIVABLE NON-CURRENT	Cost	6250.
CAPITALIZED SOFTWARE NET OF AMORTIZATION	Cost	0.
DEPOSITS	Cost	37561.
Total to Form 990, Part IV, line 56, Column B		43811.

Form 990

Part V - List of Officers, Directors,
Trustees and Key Employees

Statement 5

Name and Address	Title and Avg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
DONNA MULLEN GOOD 24 SCHOOL STREET BOSTON, MA 02108	CHIEF EXECUTIVE OFFICER 40	125000.	8840.	0.
SHEILA MURHPY 24 SCHOOL STREET BOSTON, MA 02108	CHIEF OPERATING OFFICER 40	105000.	3296.	0.
JILL PREOTLE	BOARD MEMBER 3+	0.	0.	0.
MICHELE COURTON BROWN	BOARD MEMBER 3+	0.	0.	0.
PAULA E. CHAUNCEY	VICE CHAIRPERSON 3+	0.	0.	0.
ROSLYN G. DAUM	CHAIRPERSON 3+	0.	0.	0.
TONI G. WOLFMAN	CLERK 3+	0.	0.	0.
WILLIAM SCHAWBEL	BOARD MEMBER 3+	0.	0.	0.
CARRIE JOHNSON	BOARD MEMBER 3+	0.	0.	0.
DEWITT JONES	TREASURER 3+	0.	0.	0.
ELIZABETH AMES	BOARD MEMBER 3+	0.	0.	0.

PAMELA F. LENEHAN	BOARD MEMBER 3+	0.	0.	0.
SUSAN HUNT STEVENS	BOARD MEMBER 3+	0.	0.	0.
SUSAN PENTA	BOARD MEMBER 3+	0.	0.	0.
CHARLEEN HEARD	BOARD MEMBER 3+	0.	0.	0.
NANCY CONNOLLY	BOARD MEMBER 3+	0.	0.	0.
LORRAYNE CHU	BOARD MEMBER 3+	0.	0.	0.
TERI CAVANAGH	BOARD MEMBER 3+	0.	0.	0.
KATHY WALSH	BOARD MEMBER 3+	0.	0.	0.
TRAVIS MCCREADY	BOARD MEMBER 3+	0.	0.	0.
KAREN COPENHAVER	BOARD MEMBER 3+	0.	0.	0.
ELLEN HOFFMAN	BOARD MEMBER 3+	0.	0.	0.
Totals Included on Form 990, Part V		<u>230000.</u>	<u>12136.</u>	<u>0.</u>

Center for Women & Enterprise, Inc.
Attachment for Form 990
04-3256236
Property and Equipment

	<u>Cost</u>
Capitalized Computer Software	31,500
Fixed Assets - Fed Grants	59,318
Donated Furniture & Fixtures	73,411
Office Equipment Cost	204,091
Improvements - Cost	<u>6,814</u>
	375,134
	<u>Accumulated Depreciation</u>
Accum SW Amortization	31,500
Accum Dep -Fed Grants	14,415
Accum Dep - Donated F&F	42,663
Accum Dep - Office Equipment	163,358
Accum Dep - Improvements	<u>1,525</u>
	253,461
	<u>Net Book Value</u>
Software	0
Federal Grants FA	44,903
Donated F&F	30,748
Office Equipment	40,733
Improvements	<u>5,289</u>
	<u>121,673</u>