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Form 990

## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black

OMB No\_1545-0047 2008

Open to Public

lung benefit trust or private foundation) Department of the Treasury

Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For the 2008 calendar year, or tax year beginning JULY = 0.1, 2008, and ending JUNE 30 2009 Check if applicable Please use IRS label or D Employer identification number C Name of organization Center for Civic Action 02-0779812 Address change Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/ print or E Telephone number Name change type. Box 27616 505)842-5539 Initial return See City or town, state or country, and ZIP + 4 Termination G Gross Amended return Albuquerque NM 87125 receipts \$ 122,103 Application pending Name and address of principal officer H(a) Is this a group return for affiliates? Yes See attachment #1 □No H(b) Are all affiliates included? Yes Tax-exempt status X 501(c)(4 ) **◄** (insert no ) 4947(a)(1) or If No " attach a list (see instructions) Website: ▶ N/A H(c) Group exemption number K Type of organization X Corporation Trust Association 2006 M State of legal domicile L Year of formation MN Part I Summary Briefly describe the organization's mission or most significant activities See attachment #3 GOVERN Check this box ▶ I if the organization discontinued its operations or disposed of more than 25% of its assets Number of voting members of the governing body (Part VI, line 1a) ANC Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of employees (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) 7a b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** REVENUE Contributions and grants (Part VIII, line 1h) 148,859 122,000 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 282 103 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,449 12 Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12) 152,590 122,103 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 38,284 95,500 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 797 21,418 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 45,353 49,958 Total expenses Add lines 13-17 (must equal Part IX, column (A) 1 ne 25) 84,434 166,876 Revenue less expenses Subtract line 18 from line 12 68,156 -44,773 **Beginning of Year End of Year** FEB 1 6 2010 Total assets (Part X, line 16) 20 68,264 13,877 21 Total liabilities (Part X, line 26) 108 22 Net assets or fund balances Subtract line 21 from line 20 (2) 68,156 13,877 Part II Signature Block Under penalties of p I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and d complete. Declaration of a eparer (other than officer) is based on all information of which preparer has any knowledge Sian Here Type or print name and title Preparer's Check if Preparer's identifying number (see instr.) signature employed ightharpoonupPaid Garly L Benn CPA EIN Firm's name (or yours Preparer's Carlisle NE if self-employed) **Use Only** address, and ZIP + 4 Phone no ▶ (505) 889-4501 Albuquerque, NM 87110-May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

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

Form **990** (2008)

	990 (2008) Center for Civic Action 02-0779812		Page 2
Par			
1	Briefly describe the organization's mission		
•	See attachment #4		
2	Did the organization undertake any significant program services during the year which were not listed on	<del></del>	
	the prior Form 990 or 990-EZ?	Yes	⊠ No
	If Yes," describe these new services on Schedule O	Ш	<u> </u>
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 exempt purpose achievements for each of the organization's three largest program services by expens Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grain and allocations to others, the total expenses, and revenue, if any, for each program service reported	es nts	
4a	(Code) (Expenses \$ including grants of \$ ) (Revenue \$	121,000	)
	See attachment #5		
	<del></del>	<del></del>	
		<del></del>	
4b	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$		<u>,</u>
		<del></del>	′
		•	
	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$		· · · · ·
	/ (Copended) (Copended) (Notended)		′
4d	Other program services (Describe in Schedule O )		
	(Expenses \$ including grants of \$ ) (Revenue \$  Total program service expenses ▶ \$ (Must equal Part IX. Line 25, column (B) )	)	
40	rotal program service expenses ≥ 3 (MUSI equal Part IX, Line 25, Column (B) )		

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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?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	_3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
_	Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.Is the organization subject to the section 6033(e) notice			
	and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If Yes," complete	١.		١.,
7	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	١.		
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	8		X
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If Yes,"			
	complete Schedule D. Part IV	9		<sub>v</sub>
10	Did the organization hold assets in term, permanent, or quasi-endowments? If `Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, VIII, IX, or X as applicable	11		Х
12	Did the organization receive an audited financial statement for the year for which it is completing this return	├──		
	that was prepared in accordance with GAAP? If 'Yes," complete Schedule D, Parts XI, XII, and XIII	12		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If `Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 12 if "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 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, questions 3, 4, or 5? If "Yes," complete			
	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 questions 24b-24d and complete			١,,
<b>.</b>	Schedule K. If "No," go to question 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u>^</u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	245		,
A	to defease any tax-exempt bonds?	24c		X
	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a	24d		
_Ja	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If ``Yes," complete Schedule L, Part I	25a		Х
h	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified	230		
,	person from a prior year? If 'Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	100		<u> </u>
	disqualified person outstanding as of the end of the organization's tax year? If ``Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	<del>-</del>		<u> </u>
	substantial contributor, or to a person related to such an individual? If Yes," complete Schedule L, Part III	27		Х
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Part IV

	•		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		Х
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		Х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a		-	
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If ``Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If `Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If `Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-39 If `Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If ``Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		Х
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		Χ
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Statements Regarding Other IRS Filings and Tax Compliance

	•			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns Enter -0- if not applicable	<b>1a</b> 0	_	ļ	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	<b>1b</b> 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendo	ors and reportable		1	
	gaming (gambling) winnings to prize winners?		1c	ļ	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1			
_	Statements, filed for the calendar year ending with or within the year covered by this return	<del></del>	1		1
b	If at least one is reported on line 2a, did the organization file all required federal employment		2b		<u> </u>
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this re	,			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the years and the particle 2.	ear covered by		1	,,
<b>.</b>	this return?  If Yes," has it filed a Form 990-T for this year? If `No," provide an explanation in Schedule	. 0	3a		X
b 4a	At any time during the calendar year, did the organization have an interest in, or a signature		3b		
44	over, a financial account in a foreign country (such as a bank account, securities account, o			}	
	account)?	o other illiancial	4a		X
b	If `Yes," enter the name of the foreign country		40	├─	<del>  ^</del>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report o	f Foreign Bank and			
	Financial Accounts	Troreign bank and	ŀ		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the ta	ıx vear?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelt	•	5b		X
С	If Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exe			<del>                                     </del>	1
	Prohibited Tax Shelter Transaction?	N/A	5c		ł
6a	Did the organization solicit any contributions that were not tax deductible?		6a		Х
b	If Yes," did the organization include with every solicitation an express statement that such	contributions or			
	gifts were not tax deductible?	N/A	6ь		ļ
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contributio	n of more than \$75?	7a		Х
b	If 'Yes," did the organization notify the donor of the value of the goods or services provided	12 N/A	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for v	which it was			
	required to file Form 8282?		7c		X
ď	If Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiu	ms on a personal			l
_	benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber		7f	<u> </u>	X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as	•	7g		Х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a For	rm 1098-C as			l v
	required?	do and postion E00(a)(2)	7h	-	X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised functions supporting organizations. Did the supporting organization, or a fund maintained by a spon	, ., .			
	have excess business holdings at any time during the year?	isoning organization,	8		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised fund	de	Ť	<del> </del>	<del>- ^``</del>
a	Did the organization make any taxable distributions under section 4966?	<b>uo</b> .	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		X
10	Section 501(c)(7) organizations.Enter				1
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			l
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1		
11	Section 501(c)(12) organizations.Enter	<del> L</del>	1		
а	Gross income from members or shareholders	11a	ļ		
b	Gross income from other sources (Do not net amounts due or paid to other sources		1	1	
	against amounts due or received from them )	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lie	u of Form 1041?	12a		Х
b	If Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		_	

JVA

Section	on A. Governing Body and Management			
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the		Yes	No
	circumstances, processes, or changes in Schedule O. See instructions		i	
1a				
b	Enter the number of voting members of the governing body  Enter the number of voting members that are independent  1b 3	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	-		
-	any other officer, director, trustee, or key employee?	2		v
3	Did the organization delegate control over management duties customarily performed by or under the direct	-	-	X
•	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	<b>⊢</b>		
	of the governing body?	7a		Χ
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	<del></del>		- 71
	the year by the following			
а	The governing body?	8a		Χ
b	Each committee with authority to act on behalf of the governing body?	8b	<del> </del>	X
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			- 11
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		Х
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	<del>  •</del>		
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at		<del> </del>	
	the organization's mailing address? If `Yes," provide the names and addresses in Schedule O	11		Χ
Section	on B. Policies	1		
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	-		
	. , , , , , , , , , , , , , , , , , , ,			
	rise to conflicts?	12b		Χ
С		12b		Х
С	rise to conflicts?	12b		X
c 13	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		Х
13	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?	12c		X
13 14	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?	12c		X
13 14	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by	12c		X X X
13 14 15	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision	12c 13 14		X
13 14 15	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?	12c 13 14		X X X
13 14 15	nise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?	12c 13 14		X X X
13 14 15 a b	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)	12c 13 14		X X X
13 14 15 a b	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	12c 13 14 15a 15b		X X X
13 14 15 a b	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	12c 13 14 15a 15b		X X X
13 14 15 a b	nise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	12c 13 14 15a 15b		X X X X X X X X X X X X X X X X X X X
13 14 15 a b	nise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	12c 13 14 15a 15b		X X X
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	12c 13 14 15a 15b		X X X X X X X X X X X X X X X X X X X
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  In C. Disclosure	12c 13 14 15a 15b		X X X X X X X X X X X X X X X X X X X
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13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  In C. Disclosure  List the states with which a copy of this Form 990 is required to be filed NM  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply	12c 13 14 15a 15b		X X X X X X X X X X X X X X X X X X X
13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If ``Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If ``Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  In C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ NM  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  Own website Another's website Upon request	12c 13 14 15a 15b		X X X X X X X X X X X X X X X X X X X
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13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If ``Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If ``Yes,'' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  In C. Disclosure  List the states with which a copy of this Form 990 is required to be filed  In the states with which a copy of this Form 990 is required to be filed  In the states with which a copy of this Form 990 is required to be filed  In the states with which a copy of this Form 990 is required to be filed  In the states with which a copy of this Form 990 is required to be filed  In the states with which a copy of this Form 990 is required to be filed  In the states with which a copy of this Form 990 is required to be filed  In the states with which a copy of this Form 990 is required to be filed  In the states with which a copy of this Form 990 is required to be filed  In the states with which a copy of this Form 990 is required to be filed  In the states with which a copy of this Form 990 is required to be filed  In the states with which a copy of this Form 990 is required to be filed  In the stat	12c 13 14 15a 15b		X X X X X X X X X X X X X X X X X X X
13 14 15 a b 16a b Section 17 18	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  In C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ NM  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  Own website Another's website Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest	12c 13 14 15a 15b		X X X X X X X X X X X X X X X X X X X

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization (A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	Po		(checl		at apply)		Reportable	Reportable	Estimated
	hours per week	TRUSTEE OR	-20101-024-	OFF-CER	KEY EMPLOYEE	<b>Ⅲ№</b> □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	FOR <b>X</b> ER	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
	2.00		- "	Х				0	0	0
Sonny Weahkee Secretary Charlotte Little	2.00			Х				О	0	o
	2.00			Х				0	0	0
										:

Form 990 (2008)

JVA

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Part	<u></u>		s, Trust	ees, F			ees, and	High	est Compensated I	mployees(continue	d)		
	, (A)	(B)	_		(0	•			(D)	(E)		(F)	
•	Name and title	Average hours per week	PO DIRECTOR INDIVIDUAL	I RUST EE	O F F I C E R	K E M P L OYEE	at apply)  HOMPLOYEE  HOMPLOYEE  TED	FOR MER	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	com fro org: and	timate nount of other pensation the anization	of tion e on ed
				Å L							orga	ınızatıd	ons
1b	Total								0	0	0		
2	Total number of individual	ls (including i	those in	1a) wł	no rece	eived r	nore tha	n \$10	0,000 in reportable o	ompensation from the	ne		
	organization >								<del></del>			Yes	No
3	Did the organization list ai	ny <b>former</b> of	ficer du	ector o	or trust	ee ke	v emalo	vee n	r highest compensat	ed		Tes	NO
-	employee on line 1a? If	-						,, -			3		X
4	For any individual listed or	n line 1a, is t	he sum (	of repo	ortable	comp	ensation	and o	other compensation	from			
	the organization and relate	ed organizati	ons grea	ater th	an \$15	50,000	? If `Ye	s," cor	mplete Schedule J fo	r such			
_	Individual								1-1-1		4	<u> </u>	X
5	Did any person listed on li services rendered to the o				•		-		-	r	5		X
Sectio	n B. Independent Contrac		11 165	, com	piete	Scriedi	ule J IOI	Sucii	person			<u> </u>	<u> </u>
1	Complete this table for yo		st compe	ensate	d inde	pende	nt contra	actors	that received more t	han \$100,000 of			
	compensation from the or	_	•			•							
		(A)	·						(B)		(	C)	
	Name a	ind business	address	·					Description of si	ervices	Compe	nsatio	n
						_							
		<u>-</u>											
	<del></del>				_								
2	Total number of independ	ent contracto	rs (ınclu	ding tl	hose ir	1) wt	no receiv	ed mo	ore than \$100,000 in				-
	compensation from the or									L			
JVA	08 99078 TWF 26873	Copyrigh:	Forms (So	oftware (	Only) - 2	WT 800					Form	990	(2008)

Center for Civic Action 02-0779812 Page 9 Part VIII Statement of Revenue (A) **(B)** (D) Related or exempt function Total revenue Unrelated Revenue excluded from tax business under sections 512, 513, or 514 revenue G I H O F H N T S T 1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c SIMILAR GRANTS d Related organizations 1d e Government grants (contributions) 1e All other contributions, gifts, grants, & similar amounts not included above 1f 122,000 OAAMS \$ g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 122,000 **Business Code** R OS GΕ R R R A V E M I V CE ΕN f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 103 103 Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss)  $\blacktriangleright$ (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses 0 c Gain or (loss) Т d Net gain or (loss) Н 8a Gross income from fundraising Ε R events (not including \$ of contributions reported on line 1c) R See Part IV, line 18 Ε b Less direct expenses c Net income or (loss) from fundraising events Ε ▶ N 9a Gross income from gaming activities See Part IV, line 19 а b Less direct expenses c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11a b C d All other revenue e Total. Add lines 11a-11d ▶ Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e 122,103 103

JVA

Form 990 (2008)

Part IX Statement of Functional Expenses

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

Do not include amounts reported on lines 6), 10, 89, 89, 80 to for Part VIII. 10, 89, 89, 80 to for Part VIII. 10, 80, 89, 80 to for Part VIII. 11, 80, 89, 80 to for Part VIII. 12, 80, 89, 80 to for Part VIII. 13, 80, 89, 80 to for Part VIII. 14, 80, 89, 80 to for Part VIII. 15, 80, 89, 80 to for Part VIII. 16, 80, 80, 80 to for Part VIII. 17, 80, 80, 80 to for Part VIII. 18, 80, 80, 80 to for Part VIII. 19, 80, 80, 80 to for Part VIII. 19, 80, 80, 80 to for Part VIII. 19, 80, 80, 80 to for Part VIII. 10, 80, 80, 80 to for Part VIII. 10, 80, 80, 80 to for Part VIII. 10, 80, 80, 80 to for Part VIII. 11, 80, 80, 80 to for Part VIII. 12, 80, 80, 80 to for Part VIII. 11, 80, 80, 80 to for Part VIII. 12, 80, 80, 80 to for Part VIII. 12, 80, 80, 80 to for Part VIII. 13, 80, 80, 80 to for Part VIII. 14, 80, 80, 80 to for Part VIII. 15, 80, 80 to for Part VIII. 16, 80, 80 to for Part VIII. 17, 80, 80, 80 to for Part VIII. 18, 80, 80 to for Part VIII. 19, 80, 80 to for Part V		All other organizations must complete column	(A) but are not req		columns (B), (C), and	(D).
Total expenses   Program service   Program se	Do no		(A)		(C)	
1 Grafts and other assistance to governments and organizations in the U.S. See Part IV, line 21 95,500 95,500 95,500   2 Grafts and other assistance to individuals in the U.S. See Part IV, line 22   3 Grafts and other assistance to governments, organizations, and inclivational outside the U.S. See Part IV, line 15 and 16   4 Benefits paid to of for members   5 Compension of current officers, directors, trustees, and key employees   19,335   17,788   1,547   6 Compension of current officers, directors, trustees, and key employees   19,335   17,788   1,547   7 Ofter salaries and wages   2			l otal expenses	Program service expenses	Management and   general expenses	Fundraising expenses
the U.S. See Part N. line 2  Grants and other assistance to individuals in the U.S. See Part N. line 12  Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV. lines 15 and 16  Benefits paid to or for members  Compensation of current officers directors, trustees, and key employees  Compensation not included above, to disqualified persons (as defined under section 4958(N(1)) and persons (as defined under section 4958(N(1)) a	1	Grants and other assistance to governments and				
the U.S. See Part N. line 2  Grants and other assistance to individuals in the U.S. See Part N. line 12  Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV. lines 15 and 16  Benefits paid to or for members  Compensation of current officers directors, trustees, and key employees  Compensation not included above, to disqualified persons (as defined under section 4958(N(1)) and persons (as defined under section 4958(N(1)) a		organizations in the U.S. See Part IV, line 21	95,500	95,500		
a Crants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16  Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of trusted officers, directors, trustees, and key employees Compensation of trusted officers, directors, trustees, and key employees Compensation of trusted of the directors of trustees, and key employees Compensation of trusted of trustees Compensation of	2	Grants and other assistance to individuals in				-
organizations, and individuals outside the U.S. See Part IV. lines 15 and 16 Bernefits pad to or for members Compensation of current officers, directors, frustees, and key employees Compensation included above, to dequalified persons (as defined under section 4958((1)4) and persons described in section 4958((3)48) Person plan contributions (include section 401(k)) and persons described in section 4958((3)48) Person plan contributions (include section 401(k)) and section 403(k) employer contribution 401(k) employer contributions (include section 401(k)) and section 403(k) employer contribution 401(k) employer contribution 401(k) employer contribution 401(k) employer contribution 401(k) employer co		the U.S. See Part IV, line 22				
U. S. See Part IV. lines 15 and 16  ### Benefits paid to or for members    Compensation of current officers, directors, trustees, and key employees   19,335   17,788   1,547	3	Grants and other assistance to governments,				
8 Benefits pad to or for members Compensation of current officers, directors, trustees, and key employees Compensation of ournent officers, directors, trustees, and key employees Compensation not included above, to dequalified persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and section 403(f) employer contributions)  8 Pension plan contributions (include section 401(k) and section 403(f) employer contributions)  9 Other employee benefits 8 887 816 71  10 Payroll taxes 8 887 816 71  11 Fees for services (non-employees)  12 Advertising and fundraising services See Part IV, line 17 investment management fees 9 Other 9 Other 13 Office expenses 9 Other 3, 634 3, 343 291  24 Advertising and promotion 0 Clifice expenses 15 86 539 47  17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 11 Intrarel 21 Payments to affiliates 22 Depreciation, depletion, and amortization 15 Insurance 16 Occupancy 17 Travel 18 Payments to affiliates 29 Depreciation, depletion, and amortization 15 Insurance 20 Other expenses litemize expenses not covered above (Expenses prouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) 18 Business meetings 12,917 11,884 1,033 160 Printing 341 314 27 2,521 2,319 202 2 Tinsurance 2,003 1,843 160 4 Printing 341 314 27 5 Reput 1,007 1,175 102 5 Total functional expenses. Add lines 1 through 24f 6 Joint Costs. Check here ▶ if following SOP 98-2 Complete this line only if the organization reported in column (8) joint costs from a combined deductional		organizations, and individuals outside the				
5 Compensation of current officers, directors, flustess, and key employees 6 Compensation not include above, to disqualified persons (as defined under section 4958(f)(1)) and persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(3)(8) 7 Other salaries and wages 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Pees for services (non-employees) 11 Pees for services (non-employees) 12 Accounting 13 Lobbyring 14 Lobbyring 15 Professional fundraising services See Part IV, line 17 16 Investment management fees 17 Univestment management fees 18 Other 18 Other 3, 634 3, 343 291 19 Advertising and promotion 19 Office expenses 19 Other 19 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 12 Payments to affiliates 12 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 12 Payments to affiliates 12 Payments to affiliate to a filiate to a filia		U.S. See Part IV, lines 15 and 16				
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6 Compensation not included above, to disqualified persons (as defined under section 4988(c)(3)(B)  7 Other salaries and wages  8 Pension plan contributions (include section 401(k) and section 403(k) employer contributions)  9 Other employee benefits  8 Pension plan contributions  11 Payroll taxes  887 816 71  10 Payroll taxes  887 816 71  11 Fees for services (non-employees)  11 Again a section 403(k) employer contributions)  12 Management  13 Logal  14 Lobbying  15 Professional fundraising services See Part IV, line 17 (Investment management fees)  15 Other  16 Octor of the services of the servic		trustees, and key employees	19,335	17,788	1,547	
persons described in section 4958(c)(3)(B)  7 Other salaries and wages  8 Pension plan contributions (include section 401(k) and section 403(k) employer contributions)  9 Other employee benefits  10 Payroll taxes  887 816 71  11 Fees for services (non-employees)  11 Fees for services (non-employees)  12 Management  13 Legal  14 Lobbying  15 Professional fundraising services See Part IV, line 17 fivestiment management fees  17 Investment management fees  18 Office expenses  19 Other  20 Other  30 Office expenses  586 539 47  11 Information technology  26,374 24,264 2,110  27 Travel  18 Payments of travel or entertainment expenses for any federal, slate, or local public officials  19 Conferences, conventions, and meetings  10 Interest  11 Payments of travel or entertainment expenses of covered above (Expenses shown on line 25 below)  18 Business meetings  19 Travel & ent  20 Other expenses Itemize expenses not covered above (Expenses shown on line 25 below)  21 Business meetings  22 This urance  23 Insurance  24 Other expenses shown on line 25 below)  25 Business meetings  26 Travel & ent  27 Selt 2, 319 202  27 Travel (Expenses shown on line 25 below)  28 Business meetings  29 Travel & ent  20 Conference, conventious may not exceed  5% of total expenses shown on line 25 below)  29 Travel & ent  20 Travel & ent  20 Conference, solventious may not exceed  5% of total expenses shown on line 25 below)  29 Travel & ent  20 Travel & ent  21 Payment to affiliates  22 Depreciation, depletion, and amortization  21 Insurance  22 Depreciation, depletion, and amortization  23 Insurance  24 Other expenses shown on line 25 below)  29 Travel & ent  20 Travel & ent  20 Travel & ent  20 Travel & ent  21 Payment to affiliate  22 Depreciation, depletion, and amortization  23 Insurance  24 Other expenses flemize expenses not  25 Concepted this line only if the organization reported in column (B) joint costs from a combined educational	6	Compensation not included above, to disqualified			· · · · · ·	
7 Other salaries and wages 8 Pension plan contributions (include section 401(k) and section 402(b) employer contributions) 9 Other employee benefits 11 Fees for services (non-employees) a Management b Legal c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees 0 Other 3, 634 3, 343 291 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalities 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings Interest 11 Payments to affiliates 22 Depreciation, depletion, and amortization 1 Insurance 24 Other expenses information technology and amortization 25 Insurance 26 Other expenses shown on line 25 below) 27 Business meetings 28 Travel & ent 2,521 2,319 202 29 Travel & ent 2,521 2,319 202 20 Tinsurance 20 Printing 341 314 27 20 Rent 305 281 24 21 Joint Costs. Check here   If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational		persons (as defined under section 4958(f)(1)) and				
8 Pension plan contributions (include section 401(k) and section 401(b) employer contributions)  9 Other employee benefits  10 Payroll taxes  11 Fees for services (non-employees)  1 Management  1 Legal  1 Lobbying  1 Professional fundraising services See Part IV, line 17  1 Investment management fees  9 Other  2 Advertising and promotion  3 Office expenses  1 Information technology  1 Royalties  1 Occupancy  1 Travel  1 Payments of travel or entertainment expenses for any federal, state, or local public officials  2 Depreciation, depletion, and amortization  1 Insurance  2 Other expenses flemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  1 Bus liness meetings  1 Travel & ent  2 Printing  3 All 1 286 25  885 814 71  1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		persons described in section 4958(c)(3)(B)				
and section 403(b) employer contributions)  9 Other employee benefits  885 814 71  Payroll taxes  887 816 71  Fees for services (non-employees)  a Management  b Legal  c Accounting  d Lobbyring  e Professional fundraising services See Part IV, line 17  f Investment management fees  9 Other  20 Advertising and promotion  10 Office expenses  586 539 47  11 Information technology  26,374 24,264 2,110  Royalties  Royalties  10 Coccupancy  17 Travel  18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  Interest  21 Payments to affiliates  22 Depreciation, depletion, and amortization  Insurance  24 Other expenses flemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  8 Business meetings  1 Travel & ent  2 2,521 2,319 202  1 Trisurance  2 2,003 1,843 160  9 Printing  341 314 27  e Rent  4 All other expenses. Add lines 1 through 24f  1 All other expenses.  2 All other expenses.  3 16,876 161,166 5,710  3 Joint Costs. Check here ▶  If following SOP 98-2 Complete this end if the organization reported in column (β) joint costs from a combined educational	7	Other salaries and wages				
9 Other employee benefits 885 814 71 10 Payroll taxes 887 316 71 11 Fees for services (non-employees) a Management b Legal c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other 3,634 3,343 291 24 Advertising and promotion 13 Office expenses 15 Royaltes 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings interest 11 Insurance 21 Depreciation, depletion, and amortization insurance 22 Depreciation, depletion, and amortization insurance 23 Insurance 24 Other expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a Business meetings b Travel & ent 2,521 2,319 202 c Insurance 12,917 11,884 1,033 b Travel & ent 2,521 2,319 202 c Insurance 12,917 11,884 1,033 b Travel & ent 2,521 2,319 202 c Insurance 19 Printing 341 314 27 c Rent 305 281 24 f All other expenses 5 Total functional expenses. Add lines 1 through 24f 10 All other expenses 1,277 1,175 102 166,876 161,166 5,710 Complete this line only if the lorganization reported in column (B) joint costs from a combined educational	8	Pension plan contributions (include section 401(k)				
9 Other employee benefits  10 Payroll taxes  11 Fees for services (non-employees)  a Management b Legal c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other 2 Advertising and promotion 3 Office expenses 6 Occupancy 11 Information technology 8 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Insurance 2 Other expenses grouped together and labeled miscellaneous may not exceed 5% of fotal expenses shown on line 25 below) 8 Business meetings b Travel & ent C Insurance 2 C Insurance 9 Printing 1 All other expenses 2 All other expenses 3 All 1 All 27 3 All other expenses 5 All 1 All 27 4 All other expenses 5 All 1 All 27 5 Total functional expenses. Add lines 1 through 24f 1 All other expenses Complete this line only if the lof granuzation reported in column (B) joint costs from a combined educational		and section 403(b) employer contributions)	311	286	25	
10   Payroll taxes   887   816   71	9	Other employee benefits				
11 Fees for services (non-employees) a Management b Legal c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other 3,634 3,343 291  24 Advertising and promotion 13 Office expenses	10	• •		<del> </del>		<del>-</del>
Management	11	•		1		
c Accounting d Lobbying Professional fundraising services See Part IV, line 17 f Investment management fees g Other 3,634 3,343 291  12 Advertising and promotion 13 Office expenses 586 539 47 Information technology 26,374 24,264 2,110 15 Royalties 16 Occupancy 7 Travel 7 Travel 7 Travel 8 Payments to affiliates 7 Pravel 8 Depreciation, depletion, and amortization 8 Depreciation, depletion and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a Business meetings 12,917 11,884 1,033 b Travel 4 ent 2,203 1,843 160 d Printing 341 314 27 e Rent 305 Complete this line only if the organization roof line roof the roof of the roof of the responses 1 (1,175 102) 25 Total functional expenses. Add lines 1 through 24f Complete this line only if the organization column (8) joint costs from a combined educational	а	Management				
c Accounting d Lobbying Professional fundraising services See Part IV, line 17 f Investment management fees g Other 3,634 3,343 291  12 Advertising and promotion 13 Office expenses 586 539 47 Information technology 26,374 24,264 2,110 15 Royalties 16 Occupancy 7 Travel 7 Travel 7 Travel 8 Payments to affiliates 7 Pravel 8 Depreciation, depletion, and amortization 8 Depreciation, depletion and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a Business meetings 12,917 11,884 1,033 b Travel 4 ent 2,203 1,843 160 d Printing 341 314 27 e Rent 305 Complete this line only if the organization roof line roof the roof of the roof of the responses 1 (1,175 102) 25 Total functional expenses. Add lines 1 through 24f Complete this line only if the organization column (8) joint costs from a combined educational	b	-				
e Professional fundraising services See Part IV, line 17 f Investment management fees g Other 3,634 3,343 291  12 Advertising and promotion 3 Office expenses 586 539 47 14 Information technology 26,374 24,264 2,110  18 Royalites 10 Occupancy 7 Travel 7 Travel 7 Travel 7 Travel 7 Travel 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 8 Travel 8 Teampens of travel or entertainment expenses for any federal, state, or local public officials 9 Teampens of travel or entertainment expenses 8 Teampens 1 Travel 9 Teampens 1 T	С	Accounting				
Investment management fees   3,634   3,343   291	d	Lobbying		·		
3,634   3,343   291	е	Professional fundraising services See Part IV, line 17				<del>_</del> ·
3,634   3,343   291	f	Investment management fees		<del></del> -		
Advertising and promotion	g	•	3,634	3,343	291	
14	-	Advertising and promotion	7,			-
14	13		586	539	47	
15 Royalties Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 1 Insurance 24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) 28 Business meetings 29 Travel & ent 20 Expenses grouped together and labeled miscellaneous expenses shown on line 25 below) 29 Travel & ent 20 Expenses 3 12,917 11,884 1,033 160 17 11,033 16 17 11,033 16 17 11,033 16 17 11,033 16 17 11,033 16 17 11,033 16 17 11,033 16 17 11,033 160 17 11,000 17 11,0	14	Information technology			<del></del>	
Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  Business meetings 12,917 11,884 1,033  b Travel & ent 2,521 2,319 202 c Insurance 2,003 1,843 160 d Printing 341 314 27 e Rent 305 281 24 All other expenses Add lines 1 through 24f Joint Costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	15	Royalties	· · · · ·		·	·
Payments of travel or entertainment expenses for any federal, state, or local public officials  Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  Business meetings Travel & ent 2,521 2,319 202 c Insurance 2,003 1,843 160 d Printing 341 314 27 e Rent 305 281 24 f All other expenses Add lines 1 through 24f  Joint Costs. Check here ▶ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	16	Occupancy				
for any federal, state, or local public officials  Conferences, conventions, and meetings  Interest  Payments to affiliates  Depreciation, depletion, and amortization  Insurance  Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  Business meetings  Travel & ent  Travel & ent  Travel & ent  Printing  Rent  All other expenses  Joint Costs. Check here  If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	17	Travel				· · · · · · · · · · · · · · · · · · ·
Conferences, conventions, and meetings	18	Payments of travel or entertainment expenses				
20		for any federal, state, or local public officials				
Payments to affiliates  Depreciation, depletion, and amortization  Insurance  Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  Business meetings  Travel & ent  Insurance  Insurance  Printing  Rent  All other expenses. Add lines 1 through 24f  Joint Costs. Check here  Insurance   If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	19	Conferences, conventions, and meetings				
Depreciation, depletion, and amortization  Insurance  Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  Business meetings  Travel & ent  Insurance  Insurance  Printing  Rent  All other expenses  Total functional expenses. Add lines 1 through 24f  Joint Costs. Check here   Insurance   Itemize   Itemiz	20	Interest				
23	21	Payments to affiliates				
Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  a Business meetings 12,917 11,884 1,033  b Travel & ent 2,521 2,319 202  c Insurance 2,003 1,843 160  d Printing 341 314 27  e Rent 305 281 24  f All other expenses Add lines 1 through 24f 166,876 161,166 5,710  26 Joint Costs. Check here ▶ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	22	Depreciation, depletion, and amortization				
covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  a Business meetings 12,917 11,884 1,033  b Travel & ent 2,521 2,319 202  c Insurance 2,003 1,843 160  d Printing 341 314 27  e Rent 305 281 24  f All other expenses 1,277 1,175 102  25 Total functional expenses. Add lines 1 through 24f 166,876 161,166 5,710  26 Joint Costs. Check here ▶ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	23	Insurance				
and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  a Business meetings  b Travel & ent  c Insurance  d Printing  e Rent  f All other expenses  Total functional expenses. Add lines 1 through 24f  26 Joint Costs. Check here ▶ ☐ if following SOP 98-2  Complete this line only if the organization reported in column (B) joint costs from a combined educational	24	Other expenses Itemize expenses not				
5% of total expenses shown on line 25 below )  a Business meetings		covered above (Expenses grouped together				
a Business meetings b Travel & ent c Insurance d Printing e Rent f All other expenses Complete this line only if the organization reported in column (B) joint costs from a combined educational  12,917 11,884 1,033 2,521 2,319 202 2,003 1,843 160 341 314 27 305 281 24 1,277 1,175 102 166,876 161,166 5,710		and labeled miscellaneous may not exceed				
b Travel & ent c Insurance d Printing e Rent f All other expenses Complete this line only if the organization reported in column (B) joint costs from a combined educational  2,521 2,319 202 2,003 1,843 160 341 314 27 305 281 24 1,277 1,175 102 166,876 161,166 5,710		5% of total expenses shown on line 25 below)				
c         Insurance         2,003         1,843         160           d         Printing         341         314         27           e         Rent         305         281         24           f         All other expenses         1,277         1,175         102           25         Total functional expenses. Add lines 1 through 24f         166,876         161,166         5,710           26         Joint Costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational         166,876         161,166         5,710	а	Business meetings	12,917	11,884	1,033	
c Insurance       2,003       1,843       160         d Printing       341       314       27         e Rent       305       281       24         f All other expenses       1,277       1,175       102         25 Total functional expenses. Add lines 1 through 24f       166,876       161,166       5,710         26 Joint Costs. Check here ▶ if following SOP 98-2             Complete this line only if the organization reported in column (B) joint costs from a combined educational       166,876       161,166       5,710	b	Travel & ent	2,521	2,319		
e Rent f All other expenses 1,277 1,175 102  Total functional expenses. Add lines 1 through 24f  25 Total functional expenses. Add lines 1 through 24f  26 Joint Costs. Check here ▶ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	c	Insurance	2,003	1,843	160	
f     All other expenses     1,277     1,175     102       25     Total functional expenses. Add lines 1 through 24f     166,876     161,166     5,710       26     Joint Costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational     1,277     1,175     102	d	Printing	341	<del></del>	27	
f     All other expenses     1,277     1,175     102       25     Total functional expenses. Add lines 1 through 24f     166,876     161,166     5,710       26     Joint Costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational     1,277     1,175     102	е	Rent	305		24	
Total functional expenses. Add lines 1 through 24f  26 Joint Costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	f	All other expenses	1,277		102	
26 Joint Costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	25	Total functional expenses. Add lines 1 through 24f			5,710	
Complete this line only if the organization reported in column (B) joint costs from a combined educational	26					
column (B) joint costs from a combined educational						
		column (B) joint costs from a combined educational				

JVA

Par	tΧ	Balance Sheet		<del></del>	<del>.</del>				
	•		-		(A) Beginning of year			B) of year	
	1	Cash non-interest bearing			56,873	1		,877	
	2	Savings and temporary cash investments			11,391	2		<u>,                                      </u>	
	3	Pledges and grants receivable, net				3			
	4	Accounts receivable, net			-	4			
	5	Receivables from current and former officers, direct	ctors, t	rustees, key					
		employees, or other related parties. Complete Part		•		5			
	6	Receivables from other disqualified persons (as de	efined (	under section					
		4958(f)(1)) and persons described in section 4958	(c)(3)(l	B) Complete					
A S		Part II of Schedule L				6			
s	7	Notes and loans receivable, net				7			
S S E T	8	Inventories for sale or use			8				
Ś	9	Prepaid expenses and deferred charges				9			
	10a	Land, buildings, and equipment cost basis	10a						
	b	Less accumulated depreciation Complete			1				
	1	Part VI of Schedule D	10b			10c			
	11	Investments publicly traded securities				11			
	12	Investments other securities See Part IV, line 1	1			12			
	13	Investments program-related See Part IV, line 1	1			13			
	14	Intangible assets				14	_		
	15	Other assets See Part IV, line 11				15			
	16	Total assets. Add lines 1 through 15 (must equal	line 34	)	68,264	16	13	,877	1
	17	Accounts payable and accrued expenses			108	17			
	18	Grants payable				18			
Ļ	19	Deferred revenue				19			
I A	20	Tax-exempt bond liabilities				20			
В	21	Escrow account liability Complete Part IV of Sche-	dule D			21			
L	22	Payables to current and former officers, directors,	trustee	es, key					
1		employees, highest compensated employees, and	disqua	alified					
Ť		persons Complete Part II of Schedule L				22			
Ė	23	Secured mortgages and notes payable to unrelate	parties		23				
S	24	Unsecured notes and loans payable				24			
	25	Other liabilities Complete Part X of Schedule D				25			
	26	Total liabilities. Add lines 17 through 25		,	108	26			
		Organizations that follow SFAS 117, check here		and					
N F		complete lines 27 through 29, and lines 33 and	34.						
= U	1	Unrestricted net assets			68,156	27	13	<b>,</b> 877	
T N	1	Temporarily restricted net assets				28			
A _	29	Permanently restricted net assets				29	_		
		Organizations that do not follow SFAS 117, che	ck he	re ▶ ∐	İ				
ĒL	l	and complete lines 30 through 34.							
FASN	1	Capital stock or trust principal, or current funds				30			
C		Paid-in or capital surplus, or land, building, or equi	•			31			
O E	1	Retained earnings, endowment, accumulated inco	me, or	other funds		32			
_	1	Total net assets or fund balances			68,156	33		<u>,877</u>	
<u> </u>		Total liabilities and net assets/fund balances			68,264	34	13	<u>,</u> 877	
Par	( AI	Financial Statements and Reporting	_	<del></del>				[ ]	
4	۸۵۵۵	unting mathed used to assess the form one.	act.	Magazial Marie				Yes	No
1		——————————————————————————————————————	Cash	Accrual Othe					v
		the organization's financial statements compiled or		•	accountant/		2a	$\vdash$	X
		the organization's financial statements audited by a		•	andrike for a constitution of		2b	$\vdash \vdash \mid$	X
С		es" to lines 2a or 2b, does the organization have a c		•	, .				į
2-		, review, or compilation of its financial statements ar		•		N/A	2c		
зa		result of a federal award, was the organization requ	ins as set form in		2-		v		
<b>L</b>		ingle Audit Act and OMB Circular A-133?		אז / זא	3a		X		
	11 Y (	es," did the organization undergo the required audit	or aud			N/A	3b		

## SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Center for Civic Action

Employer identification number 02-0779812

Part VI Section A #10^

Draft of 990 distributed via email.

# LIST OF AFFILIATED ORGANIZATIONS INCLUDED IN GROUP RETURN

Open to Public Inspection	For calendar year 2008, or tax period beginning	07-01-2008, and ending	06-30-2	2009
Name of Organizat	ion	O / OI 2000, and ending	Employer Identifi	cation Number
Center for	Civic Action		02-0779812	
	Name and Address of Affiliated Organization In	ncluded in this Group Return		Organization EIN
Center for	Civic Policy			2
PO Box 276	516			01 000070
Albuquerqu	ne NM 87125			01-086970
				İ
				1

# PRINCIPAL OFFICER NAME AND ADDRESS

Attachment	1: Form 990 P	age 1, Line F		
Open to Public				
Inspection	For calendar year 2008, o	r tax period beginning	07 - 01 - 2008, and ending	06-30-2009
Name of Organizati				Employer Identification Number
	Civic Action			02-0779812
990, Page 1, Line F				
D	_			
Principal officer name	e		Charlotte China	ina
or Business Name				
business ivaine				
			· · · · · · · · · · · · · · · · · · ·	
<del></del>		<del></del>		
Street Address			1500 Lomas NW	
				<del>-</del>
U S Address				
Zip code	87104	a. 71b		NINA
•	0/104	City Albuquerque	Sta	ite <u>NM</u>
or Foreign Address				
roleigh Address				
City				
,				
Province or \$	State			
Country				
Postal code				_

### PRIMARY EXEMPT PURPOSE

Attachment 3: Form 990 Page 1, Part I

Open to Public
Inspection

For calendar year 2008 or tax period beginning 07-01, and ending 06-30-2009.

Name of Organization
Center for Civic Action

Employer Identification Number 02-0779812

#### Primary Purpose

To advocate for policies that impact the common good and welfare of New Mexicans, such as health care, energy, natural resources, the economy and jobs, and voting rights issues. To educate the public about social welfare issues that impact the common good and welfare of New Mexicans.

#### PRIMARY EXEMPT PURPOSE

Attachment 4: Form 990 Page 2, Part III

#### Primary Purpose

To advocate for policies that impact the common good and welfare of New Mexicans, such as health care, energy, natural resources, the economy and jobs, and voting rights issues. To educate the public about social welfare issues that impact the common good and welfare of New Mexicans.

#### PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT

Attachment 5: Form 990 Page 2, Part III Open to Public Inspection For calendar year 2008, or tax period beginning 07 - 01 - 2008, and ending 06-30-2009. Name of Organization **Employer Identification Number** Center for Civic Action 02-0779812 Part III - Statement of Program Service Accomplishments Code Expenses including Grants of Revenue 121,000

Lobbying: CCA researched and advocated for policies related to health care, ethics, and the state budget. CCA educated the public about issues through the placement of opinion pieces and letters to New Mexico newspapers, blogging, phone calls to New Mexico residents, and, working with allied organizations. For lobbying activities, the primary staff members involved included the Executive Director, the Policy Director, the Communications Director and the Research Director Training: CCA provided two training and leadership skills to 40New Mexico leaders who may one day run for elected or appointed office or may serve on electoral campaigns through a weekend training session. For training activities, the primary staff members involved included the Field Director and the Communications Director.

## **BOOKS ARE IN CARE OF**

Attachment	6:	Form	990	Page	6,	Part	VI,	Section	n C,	Line	20
Open to Public				-							
Inspection	For ca	alendar y	ear 2008	or tax p	eriod be	ginning	07	7-01	, and	ending	06-30-2009.
Name of Organiza											Employer Identification Number
Center for	<u>c Ciy</u>	<u>ric A</u>	ction			_				_	02-0779812
Part VI - Line 91a					_	_				_	
Individual Name								mla a O			
or								The Org	ganız	zatio	n
Business Name											
Dusiness Name											
		-							<del></del> ·	<del></del>	
Street Address								DO Dou	276		
Sileet Address								PO Box	2/6.	L 0	
										_	
U S Address											
Zıp code	8712	) <u>5</u>		0.1.	Λlhu	quero	7110				. NIM
or or	0/12			City	MIDU	quert	<u>lue</u>	-		Sta	te <u>NM</u>
Foreign Address											
. o.o.g., /											
City											
											<del></del>
Province or	State										
_											<del></del> -
Country											<u> </u>
Postal code	2										
. 55.5. 5546	-										<del>-</del>
Phone Num	nber										
											<del></del>
Fax Numbe	er										