

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Organization Exempt From Income Tax

OMB No 1545-0047

(HTA)

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

		Revenue	Service		The orga	anızatıon ma	y have to use	a copy of	this return to	satisfy s	tate rep	orting red	uirem			Ins	pectio	n
7	F	or the	2009 cal	endar ye	ar, or tax	year begin	ning	7/	1/2009	<u> </u>	, and er				/2010			
	_	eck if app		Please use IRS	C Name	of organizatio	n Fami	ly Voices					D Em	ployer i	dentificat	ion numl	per	
<u></u>	∑ Ac	ldress cl	nange	label or	Doing	Business As							35-043	30800				
Ļ	_ Na	ıme cha	nge	print or type	Numb	er and street (or PO box if m	aıl ıs not del	vered to stree	et address)	Ro	om/suite	E Tel	ephone r	number			
Ļ	Ini	tıal retur	n	See	3701 Sa	an Mateo B	Blvd. NE				20	0 5	505-8	72-477	4			
L	Te	rminate	t	Specific Instruc-			r country, and Z	IP + 4										
L	Ar	nended	return	tions	Albuque	erque			NM	87	7110		G Gro	ss recei	ots \$		1,0	<u>36,432</u>
Ĺ	Ap	plication	pending	FN	lame and	address of p	orincipal office	er.				H(a) Is th	is a gro	up returi	n for affilia	tes?	Yes	X No
				Sophie	Arao-Ng	uyen <u>2340</u>	Alamo SE S	Suite 102,	Albuquero	que, NM	87106	H(b) Are	all affili	ates incli	uded?	[Yes	No
1	Та	x-exem	pt status	s X 50)1(c) (3) ◀ (ɪɪ	nsert no)	4947	(a)(1) or	527		lf "N	lo," atta	ach a list	(see insti	ructions)		
-					voices.or		· · · · · · ·		,,,,			H(c) Grou	in even	nntion ni	ımher 🕨			
_					orporation	Trust	Association		ther >		T. Van	r of formati					dominio	
			anization		rporation	nusi	ASSOCIATIO		ilei 📂		L Teal	r or ionnau	OII	1995	M Stat	e of legal	domicie	<u>NM</u>
•	Fe	rt I		mmary	the erec	nization's r	minoion or m	oot olanif	oont ootuu	tion:								
	ĺ		-		_		mission or m ily-centered	-			th wath	coccial l				nd/or d	licabiliti	
	8						, advocating											
	ğ					alth care.	, auvocauny	יוטי יייוטייי	Aed Policie	s, bulluli	iid bioi	essivilai	<u> </u>	ıà bai ii	ieiziliha	s, anu s	eiviid	<u>as</u>
	Activities & Governance				, -		ization disco	antinuad i	o oporatio	oo or dia		of mara		050/ 0	 : :ta ==at		·	
	ဗ္					_	governing bo		•		•		ulan	23% U 	3	asseis	•	14
	es es				_	_	nbers of the								4			14
	ξ						', line 2a) .								5			13
=	Act						te if necess						•		6			0
2011						•	enue from P	• •						`.	7a			0
ന -							ome from Fo								7b			0
6-3- - -1									TEUE				Prior '	Year		Cui	rent Yea	
	_	8	Contrib	utions ar	nd grants	(Part VIII,	line 1h) .	. 8	MAY į		RS-OSC			1,140	,218		9	75,385
NOC	Jue					e (Part VIII	, lıne 2g) .	. 기품].	MAY I	7. 2011.				87	,737			55,260
	Revenue						nn (A), lines				181				356			216
	-	11	Other re	evenue (Part VIII	, column (A	A), lines 5, 6 (must equal F	d, 8 c, 9q,	be land	(e)	٢-١				,793			5,571
2-										i£12 ₩ 1				1,280	,104		1,0	36,432
SCANNED							Part IX, colui	• •	•						0			0
ပ္မွ			Benefits paid to or for members (Part IX, column (A), line 4)												0			
(C)	ses										680			6	25,982			
	Expens		Professional fundraising fees (Part IX, column (A), line 11e)									0		0				
	Exp		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f).							8 T 286.3	510,765			8784T-1		04.000		
		18	Total e	vnenses	Add line	., coluitiii (r se 13_17 /r	must equal F	Dart IX co	–241). Jump (Δ)	line 25\				1,191				81,303 07.285
							line 18 from				•	<u> </u>			,495			
_	or es		101011	10 1000 0	Aponoco	. Gubtiaot i	10 10 110111	1110 12.	•	<u>· · · ·</u>	<u> </u>	Beginn	ing of (Current		Fn	d of Year	70,853
	Assets or d Balances	20	Total as	ssets (Pa	art X, line	e 16) . . .									,629			90,265
	ABB														,747			79,236
_	Fund	22	Net ass	sets or fu	ınd balar	nces. Subtr	act line 21 f	rom line 2	0						,882			11,029
		rt II	Sig	gnature	Block							.			<u> </u>			,020
			Und	ler penaltie	s of perjury	, I declare that	t I have examine	ed this return	, including ac	companying	g schedul	les and sta	tement	s, and to	the best	of my kno	wledge	
			and	belief, it is	true, correc	ct, and comple	ete Declaration	of preparer (other than off	icer) is base	ed on all i	information	of whi	ch prepa	rer has ar	ny knowle	dge	
			k	0.			No	ינ	7)					14-1	12/11			
	Sig	n			e of officer	nao.	· nguy	~ //	· · ·					<u> </u>	104/11		,	
	Her	е		~	HIE	AnA	9 - NGU	1.YEA	OL D	4	=XF()	LTIV	=	Date	ECTO	~m		
			▏◗		orint name a		<u> </u>	CILIU,	, V / (, W	·	742	4/10		WIR	<u> </u>	<u> </u>		
-			Pre	parer's	, ,		· · · · · · · · · · · · · · · · · · ·		Date	 9	To	heck if			Preparer	's identify	na numh	ner
	Paid	j		nature	K1		1		/	-	se	elf-	_		(see instru	ictions)	yuiill	,
	Pre	parer's	• 	n's name (1/1/	my	n u	سعم		5/11/201	1 e	mployed		<u>ப</u>	P01469	9709		
	Use	Only		n's name (d elf-employe	•		L. Cover, CF						EIN	>	<u>85-047</u>	<u>4715</u>		
				lress, and Z		9636 Vil	la Del Rey N	NE, Albuq	uerque, N	M 87111			Phone	no 🕨	(505) 7	97-099	5	
	Мау	the IF	RS discu	uss this r	eturn wit	h the prepa	arer shown a	above? (s	ee instruct	ions)						X		No
							lotice, see th							<u>_</u>	<u> </u>		<u></u>	20 (2222)

orm 9	990 (2009)	Family Voices	85-0430800	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
•	Briefly de	escribe the organization's mission:		
	Family V	oices aims to achieve family-centered care for all children and youth with special health ca	are needs and/or disal	bilities
	by provio	ling information to families, advocating for improved policies, building professional/family p	artnerships, and serv	ing as
	a trusted	resource on health care		
2	Did the c	organization undertake any significant program services during the year which were not list	ed on	
		Form 990 or 990-EZ?		X No
	•	describe these new services on Schedule O.		
3		organization cease conducting, or make significant changes in how it conducts, any progra	m	
•		?	l "1	X No
		describe these changes on Schedule O.	163	
4		e the exempt purpose achievements for each of the organization's three largest program so	andiane by avanances	
4				
		501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report to	ne amount of grants a	ana
	allocatio	ns to others, the total expenses, and revenue, if any, for each program service reported.		
				
4a) (Expenses \$ 1,012,755 including grants of \$ 0) (Re		,260)
	Provide	information and education concerning the health care of children with special health needs	<u>.</u>	
		•••••••••••••••••••••••••••••••••••••••		
		••••••		
4b	(Code:) (Expenses \$ 0 including grants of \$ 0) (Re	venue \$	0)
	(0000.	The state of the s	vende φ	<u>-</u>
		•••••••••••••••••••••••••••••••••••••••		
		•		
		••••••		
		••••••		
	· · · ·			
4C	(Code:) (Expenses \$ 0 including grants of \$ 0) (Re	venue \$	<u>0</u>)
		*		

		•••••••		
4d	Other p	rogram services. (Describe in Schedule O.)	*	
	(Expens	·	0)	
46		rogram service expenses 1 012 755		

Form 9	990 (2009) Family Voices	430800	Р	age 3
Part	t 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	<u> </u>
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			
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
•	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		 ^
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		×
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	 '	╁	 ^
8		ا ،		
_		8	+	X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	}	1	1
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	ł		
	quasi-endowments? If "Yes," complete Schedule D, Part V	. 10	ļ	X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	1	ì	
	VII, VIII, IX, or X as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	İ		
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that			
	addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	Х	
12A		No I	TÀ	
		X	ļ	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
-	Did the organization maintain an office, employees, or agents outside of the United States?	14a	+	\ ^
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	· 14a	+	+^
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	446		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	14b	+	X
13	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II			
16		15	┿-	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		1	1
47	to individuals located outside the United States? If "Yes," complete Schedule F, Part III.	16	₩	<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			1
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	. 17	-	X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	l l		
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	. 18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	. 19		<u> </u>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	L	X

<u> </u>	Officerrist of regained confedence (continued)	1		
01	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		Yes	No
21	In the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			-^-
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			<u> </u>
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		L
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27	A=, =	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	SEE .		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>			١.,
•	Schedule L, Part IV	28b	ļ —	<u> </u>
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV.	00-		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29	<u> </u>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29	<u> </u>	 ^- -
	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	50		 ^
	Part I	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	<u> </u>	l —	 ``
	If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	Ì		
	Schedule R, Part V, line 2	35		X
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			1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
		37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	L

Part	Statements Regarding Other IRS Fillings and Tax Compliance			·
` 1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		Yes	No
	U.S. Information Returns Enter -0- if not applicable	'		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	*	,	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
·	gaming (gambling) winnings to prize winners?	1c	X	J
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	_^_	
24	Statements, filed for the calendar year ending with or within the year covered by this return.			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see			
	instructions)			•
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	-\$*		J
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5</u> b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
_	Prohibited Tax Shelter Transaction?	<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		,,
b	organization solicit any contributions that were not tax deductible?	6a		X
U	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			 .
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1	ستر ا	ž
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	i	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	· *	_	3
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	- 47		1
	benefit contract?	_7е		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<u>7</u> f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h	<u> </u>	ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?			ļ
9	Sponsoring organizations maintaining donor advised funds.	8	-	<u> </u>
а	Did the organization make any taxable distributions under section 4966?		·	ļ
þ	Did the organization make a distribution to a donor, donor advisor, or related person?	<u>9a</u> 9b		
10	Section 501(c)(7) organizations. Enter:	<u> </u>	-	<u> </u>
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			1.
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			1
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

Form 990 (2009) Family Voices Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No Enter the number of voting members that are independent . . . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Х 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . Did the organization become aware during the year of a material diversion of the organization's assets? . . . 5 Does the organization have members, stockholders, or other persons who may elect one or more members 7a Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. The governing body?... а 8a Х Each committee with authority to act on behalf of the governing body? Χ 8b Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Х b If "Yes." does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c 13 13 Х Does the organization have a written document retention and destruction policy? Х 14 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? # 18 15a 15b If "Yes" to line 15a or 15b, 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 Х 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 ► NM 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available. Check all that apply. Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Lacey Keene 3701 San Mateo NE, Suite 200, Albuquerque, NM 87109

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not company to any current officer, director, of

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
John Foley Director	0.3	Х						0	0	0
Wendy Jones Secretary	0 5	Х		X				0	0	0
Mary Marin Director	0.3	X						0	0	0
Merle McPherson, MD Director	0.3	Х						0	0	0
Marcia O'Malley Director	0.3							0	0	0
Carolyn H. Richardson, Ed.D. Director	0.3							0	0	0
Mercedes Rosa Director	0.3	X						0	0	0
Linda Rowley Director	0.3	X						0	0	0
Susan Sherry Director	0.3	Х						0	0	0
Scott C. Suzuki, JD, MPH Vice President	0.5	Х		x				0	0	0
Renee Turchi Treasurer	0.5	Х		x				0		0
Ruth Walden President	0.5	Х		×				0		0
Grace Pushparany Williams Director	0.3							0		0
Joan Christopher Dırector	0.3	х						0	0	0
Sophie Arao-Nguyen Executive Director	40.			X				71,872	0	18,613
Lacey Keene Fınancıal Administrator	40.			×				38,890		

	(A) Name and business address	(B) Description of services	(C) Compensation	
				0
				0
				0
				0
				0
2	Total number of independent contractors (including but not limited to those listed all	bove) who received		

21

60,831

1,036,432

Total. Add lines 11a-11d

Total revenue. See instructions.

12

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (A) Do not include amounts reported on lines 6b, (D) Total expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S See Part IV, line 21 . . . Grants and other assistance to individuals in the U.S. See Part IV, line 22 3 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 0 Compensation of current officers, directors, trustees, and key employees 110,762 108,541 2,221 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 406.648 389,263 17,385 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . 14,753 14,194 559 9 Other employee benefits 59,809 57,535 2,274 10 Payroll taxes 34,010 32,721 1,289 11 Fees for services (non-employees). Management Legal. 0 b Accounting C 12,699 11,683 1.016 Lobbying. d 0 The section of * A. 3 Professional fundraising services. See Part IV, line 17 0 Investment management fees 0 259,480 234,740 21,245 3,495 12 Advertising and promotion 0 Office expenses 13 80,733 61,561 8,630 10,542 14 Information technology 0 15 Royalties . 0 16 Occupancy . . . 34,308 25,764 8.544 17 Travel. 75,817 69.853 5,964 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings. . . 1,500 1.500 20 Interest 0 Payments to affiliates 21 0 22 Depreciation, depletion, and amortization . . . 2,848 2,848 0 23 Insurance 2,077 2,077 Other expenses Itemize expenses not ş'n covered above. (Expenses grouped together f' and labeled miscellaneous may not exceed voje 🏶 5% of total expenses shown on line 25 below.) Lobbying costs 1,165 1,165 Miscellaneous 10.676 5,735 4,786 155 0 d 0 0 All other expenses 0 Total functional expenses. Add lines 1 through 24f 25 1,107,285 1,012,755 80,338 14,192 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 campaign and fundraising solicitation

85-0430800

Part X **Balance Sheet** (A) (B) Beginning of year End of year Cash-non-interest-bearing 400.215 1 313,361 1 2 2 163.678 3 3 147.218 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 0 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete ol 6 Assets 7 Notes and loans receivable, net 0 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges . . . 8,218 14,113 10a Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D Less. accumulated depreciation 10b 49.900 10,518 10c 15,573 Investments—publicly traded securities 11 11 0 Investments—other securities See Part IV, line 11 12 ol 12 0 13 Investments—program-related. See Part IV, line 11. ol 13 0 14 ol 14 15 ol 15 0 16 Total assets. Add lines 1 through 15 (must equal line 34) 582,629 16 490.265 17 Accounts payable and accrued expenses 100.747 17 79,236 Grants payable 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key # 12 m employees, highest compensated employees, and disqualified 0 22 Secured mortgages and notes payable to unrelated third parties . . . 23 0 23 0 Unsecured notes and loans payable to unrelated third parties 24 ol 24 0 25 Other liabilities. Complete Part X of Schedule D ol 25 26 Total liabilities. Add lines 17 through 25. 100,747 26 79,236 Organizations that follow SFAS 117, check here X and **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 464,394 27 398,396 28 17,488 28 12,633 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here ▶ │ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds. 32 33 481,882 33 411,029 34 582,629 34 490.265

orm 9	990 (2009) Family Voices	85-0430800	Pá	age 12					
Part XI Financial Statements and Reporting									
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	-	Yes	No					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a		X					
b	Were the organization's financial statements audited by an independent accountant?		Х						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	. 2c		x					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:	-	*						
3a b	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		Х						

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

trust. Open to P

Department of the Treasury Internal Revenue Service

 Open to Public Inspection

OMB No 1545-0047

Name	lame of the organization										Employer identification number			
Famil			<u>-</u>								430800			
Par				arity Status (All org						nstructio	ns.			
	rgar		•	ation because it is: (Fo		_		-						
1	H			ches, or association of			ea in sec	11011 170(D)(1)(A)(I).				
2	H			n 170(b)(1)(A)(ii). (At		-	acetics:	170/5\/1\	/A\/:::\					
3	님	· •	•	ospital service organi						/L\/4\/A\	/!!!\	41		
4		hospital's na	me, city, and sta								· ·			
5		_	-	the benefit of a collect (Complete Part II.)	ge or univ	ersity owr	ned or ope	erated by	a governi	mental ur	nit descr	ibed		
6		A federal, sta	ate, or local gove	ernment or governmer	ntal unit d	escribed i	in sectior	170(b)(1	I)(A)(v).					
7	X	-		y receives a substantia (1)(A)(vi). (Complete F	•	its suppor	t from a g	jovernme	ntal unit c	or from the	e genera	al publi	ic	
8		A community	trust described	in section 170(b)(1)((A)(vi) . (C	omplete F	Part II.)							
9				y receives. (1) more th		•		om contri	butions, r	nembersi	hip fees,	and g	ross	
		support from	gross investme	ed to its exempt function ont income and unrelated after June 30, 1975.	ted busine	ess taxabl	e income	(less sec	tion 511 t				S	
10		An organizat	tion organized a	nd operated exclusive	ly to test	for public	safety Se	ee sectio	n 509(a)(4).				
11		An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3) . Check the box that describes the type of supporting organization and complete lines 11e through 11h.												
		a Type	I b 🗌	Type II c	Туре	e III–Func	tionally in	ntegrated		d \square 1	Type III-	-Other		
е		By checking	this box, I certif	y that the organization	is not co	ntrolled di	irectly or i	ndirectly	by one or	more dis	squalified	t		
		persons other		on managers and othe									on	
f			zation received a	a written determinatior		RS that			II, or Typ	e III supp 	orting			
g		Since Augus following per		the organization acce	pted any	gift or con	itribution 1	from any	of the					
				or indirectly controls,								Yes	No	
				verning body of the su							11g(i)			
				person described in (i y of a person describe							11g(ii)			
h				ation about the suppor							11g(iii)			
		e of supported ganization	(II) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the o	organization sted in your document?	(v) Did y the organ col (i)	ou notify nization in of your port?	organiza (i) organi	Is the tion in col ized in the S?		Amount	t of	
					Yes	No	Yes	No	Yes	No				
	-		 	<u> </u>		-					 		0	
													0	
													0	
													<u>_</u> 0	
												_	0	
Tota	i											·		

· (Complete only if you checked the box on line 5, 7, or 8 of Part I.)										
<u>Secti</u>	on A. Public Support									
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants ")	1,618,304	1,391,896	1,036,735	1,140,218	975,385	6,162,538			
2	Tax revenues levied for the organization's	.,		-,,	.,,-					
_	benefit and either paid to or expended on									
	its behalf	o	o				0			
3	The value of services or facilities	- · · ·								
3	furnished by a governmental unit to the									
	organization without charge	اه	_				0			
			0				0			
4	Total. Add lines 1 through 3	1,618,304	1,391,896	1,036,735	1,140,218	975,385	6,162,538			
5	The portion of total contributions by each		•	·		*				
	person (other than a governmental unit		*	<i>,</i> ,						
	or publicly supported organization)		• ~:		,	*				
	included on line 1 that exceeds 2% of the	* *	*		*	^ _				
6	amount shown on line 11, column (f).	* :			*		0.400.500			
6 Soot	Public support. Subtract line 5 from line 4. ion B. Total Support		x			<u> </u>	6,162,538			
	ndar year (or fiscal year beginning in)	(a) 000E	(b) 0000	(a) 0007	(4) 0000	(=) 0000	(0 T-1-1			
		(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
7	Amounts from line 4	1,618,304	1,391,896	1,036,735	1,140,218	975,385	6,162,538			
8	Gross income from interest, dividends,									
	payments received on securities loans,									
	rents, royalties and income from similar									
9	Sources	0	2,650	3,614	356	216	6,836			
9	Net income from unrelated business activities, whether or not the business is									
	regularly carried on									
10	Other income. Do not include gain or			-			0			
	loss from the sale of capital assets									
	(Explain in Part IV.)	o	22,437	91,214	139,530	60,831	314,012			
11	Total support. Add lines 7 through 10.	₩ **> ₹	ZZ,407	31,214	109,000	00,631	6,483,386			
12	Gross receipts from related activities, etc. (s	see instructions	<u> </u>			12	0,403,300			
13	First five years. If the Form 990 is for the o									
	organization, check this how and ston here	rganizations in	ist, second, trii	iu, iouriii, or iii	iii iax year as a	a section 501(c)(3) _ [
<u>C1</u>	organization, check this box and stop here		• • • •	· · · · · · · · · · · · · · · · · · · 		· · · · · ·				
	ion C. Computation of Public Suppor					γ				
14 15	Public support percentage for 2009 (line 6,	column (1) alvid	led by line 11,	column (f))		14	95.05%			
	Public support percentage from 2008 Sched	ule A, Paπ II, I	ine 14				96 21%			
16a	33 1/3% support test-2009. If the organiza	ition did not che	eck the box on	line 13, and lin	ie 14 is 33 1/39	% or more, che	ck this box			
_	and stop here. The organization qualifies a	s a publicly sur	oported organiz	zation			▶ <u> X</u>			
b	33 1/3% support test-2008. If the organization	ition did not che	eck a box on lir	ne 13 or 16a, a	nd line 15 is 3	3 1/3% or more	, check this			
	box and stop here. The organization qualifi	es as a publicly	y supported or	ganızation			▶ 🗌			
17a	10%-facts-and-circumstances test-2009.	If the organiza	tion did not ch	eck a box on lir	ne 13, 16a, or	16b, and line 14	1 is 10%			
	or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how									
_	the organization meets the "facts-and-circur	mstances" test.	The organizat	ion qualifies as	s a publicly sup	ported organiz	ation 🕨 🔲			
b	10%-facts-and-circumstances test-2008.	If the organiza	tion did not ch	eck a box on lii	ne 13, 16a, 16t	o, or 17a, and li	ne 15 is 10%			
	or more, and if the organization meets the "	facts-and-circu	mstances" test	, check this bo	x and stop he	r e. Explain ın F	Part IV how			
	the organization meets the "facts-and-circuit	mstances" test.	The organizat	ion qualifies as	s a publicly sup	ported organiz	ation . 🕨 🔲			
18	Private foundation. If the organization did not ch	neck a box on line	e 13, 16a, 16b. 1	7a ,or 17b, chec	k this box and se	e instructions	. ▶□			
			, -,, .	, ,			· • 🖵			

20

85-0430800 Page 3 Schedule A (Form 990 or 990-EZ) 2009 Family Voices Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not 0 include any "unusual grants.") . . Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 0 organization's tax-exempt purpose Gross receipts from activities that are not an 0 unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on 0 ıts behalf The value of services or facilities furnished by a governmental unit to the organization without charge 0 0 Total, Add lines 1 through 5. O 0 7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . . 0 b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year 0 Add lines 7a and 7b. 0 0 Public support (Subtract line 7c from 44.5 line 6.) 0 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 6 0 0 0 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 0 Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . 0 Add lines 10a and 10b 0 0 0 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on . . 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . 13 Total support. (Add lines 9, 10c, 11, 0 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 0.00% Public support percentage from 2008 Schedule A, Part III, line 15 16 16 0.00% Section D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . . . 17 0.00% Investment income percentage from 2008 Schedule A, Part III, line 17 18 18 0.00% 19a 33 1/3% support tests-2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is

not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests-2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . .

Schedule A (Form	990 or 990-EZ) 2009	Family Voices	85-0430800	Page 4
Part IV	Supplemental	Information. Complete this part to provide the explanations required	by Part II, line 10	
•	Part II, line 17a	or 17b; and Part III, line 12. Provide any other additional information.	See instructions	
		•••••••••••••••••••••••••••••••••••••••		
				·
		•••••••••••••••••••••••••••••••••••••••		
		•••••••••••••••••••••••••••••••••••••••		·
				·
		•••••••••••••••••••••••••••••••••••••••		
		••••••		
		•••••••••••••••••••••••••••••••••••••••		
		•••••		
		•••••••••••••••••••••••••••••••••••••••		
		•••••		
		•••••••••••••••••••••••••••••••••••••••		
		•		
		•		
		•		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

▶ Complete if the organization is described below.

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

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

Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below Do not complete Part I-B

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Inspection

Se	ection 527 organizations Com	plete Part I-A only			
f the	organization answered "Ye	s," to Form 990, Part IV, line 4, or Forn	n 990-EZ, Part VI, I	line 47 (Lobbying Activities), then
Se	ection 501(c)(3) organizations	that have filed Form 5768 (election unde	r section 501(h)) C	Complete Part II-A Do not co	mplete Part II-B
Se	ection 501(c)(3) organizations	that have NOT filed Form 5768 (election	under section 501((h)). Complete Part II-B Do n	ot complete Part II-A
f the	organization answered "Ye	s," to Form 990, Part IV, line 5 (Proxy 1	Гах), then		
Se	ection 501(c)(4), (5), or (6) org	panizations Complete Part III			
Na	me of organization			Employe	r identification number
amı	ly Voices				85-0430800
		he organization is exempt unde	er section 501(c) or is a section 527	organization.
1	Provide a description of t	the organization's direct and indirect	political campaig	n activities in Part IV	
2	Political expenditures			• \$	
3	Volunteer hours				
_					
		he organization is exempt unde			
1		excise tax incurred by the organization			
2	-	excise tax incurred by organization r	-		
3	•	ed a section 4955 tax, did it file Form	•	ar?	. Yes No
4a		'			Yes No
b	If "Yes," describe in Part				
Pa	rt I-C Complete if t	he organization is exempt unde	er section 501(c), except section 501	<u>(c)(3).</u>
1	Enter the amount directly	y expended by the filing organization	for section 527 e	exempt function	
	activities				
2		filing organization's funds contributed	•		
	for section 527 exempt for	unction activities		▶ \$	
3	Total exempt function ex	penditures. Add lines 1 and 2. Enter	here and on Fore	m 1120-POL,	
	line 17b			•	0
4	Did the filing organization	n file Form 1120-POL for this year?			Yes No
5		sses and employer identification num			
		or each organization listed, enter the			
		butions received that were promptly			
	a separate segregated it	und or a political action committee (F	AC). If additional	space is needed, provide	e information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political
				funds If none, enter -0-	contributions received and promptly and directly
					delivered to a separate
					political organization If none, enter -0-
					110110, 011101 0
		·			_
				0	0
				0	0
				 	<u>_</u>
		1		0	0
				†	
			L	0	0
				0	<u> </u> o
		<u> </u>		0	0
For	Drivacy Act and Panerwork	Reduction Act Notice see the Instructi	ione for Form 000	C.L.J.	In O /F 000 - 000 FT 0000

Р	art II-A Complete if the organizat under section 501(h)).	ion is exempt under section 501(c)(3) and	filed Form 5768 (e	election
		belongs to an affiliated group.		
В	Check ▶ if the filing organization	checked box A and "limited control" provision	s apply.	
		bying Expenditures leans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence	public opinion (grass roots lobbying)	<u> </u>	0
b	Total lobbying expenditures to influence	a legislative body (direct lobbying)	26,390	0
C	Total lobbying expenditures (add lines 1	a and 1b)	26,390	0
d	Other exempt purpose expenditures .		986,365	0
е	Total exempt purpose expenditures (add	l lines 1c and 1d)	1,012,755	0
f	Lobbying nontaxable amount. Enter the	amount from the following table in both		
	columns.	<u>-</u>	176,276	0
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	* **	~
	Not over \$500,000	20% of the amount on line 1e	, ,	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	·	* \$.
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	* * - 4	3 4 4
	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	* * * * * * * * * * * *	4 × 3
g	Grassroots nontaxable amount (enter 25	5% of line 1f)	44,069	0
h	Subtract line 1g from line 1a. If zero or le	ess, enter -0	0	0
i	Subtract line 1f from line 1c. If zero or le	ss, enter -0	0	0
j	If there is an amount other than zero on	either line 1h or line 1i, did the organization file Fo	orm 4720 reporting	
	section 4911 tax for this year?			Yes No
	(Some organizations that n	/ear Averaging Period Under Section 501(h) nade a section 501(h) election do not have to co		ve

columns below. See the instructions for lines 2a through 2f on page 4.)

	<u>L</u>	obbying Expenditu	res During 4-Year	Averaging Period	<u> </u>	
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying nontaxable amount	216,994	188,036	166,073	176,276	747,379
b	Lobbying ceiling amount (150% of line 2a, column(e))					1,121,069
	Total lobbying expenditures	10,414	10,296	6,958	26,390	54,058
d	Grassroots nontaxable amount	54,249	47,009	41,518	44,069	186,845
е	Grassroots ceiling amount (150% of line 2d, column (e))	*		** **	, · ·	280,268
f	Grassroots lobbying expenditures	0	0		0	0

Schedule C (Form 990 or 990-EZ) 2009

Family Voices Schedule C (Form 990 or 990-EZ) 2009

Pari	Complete if the organization is exempt under section 501(c)(3) and has NOT file (election under section 501(h)).	d Fo	rm 5768	3	
	(a)		o)	
	Yes	No		ount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .				<u>.</u>
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	_			
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? . Other activities? If "Yes," describe in Part IV	_			
	Total. Add lines 1c through 1	;			0
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		\$ 3	- S	
b	If "Yes," enter the amount of any tax incurred under section 4912	را مرالا ا			
-	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.	- \$ ~ \$			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		15	: <u>%</u>	مه سام ر
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)), or	section		
	501(c)(6).				
			,	/es	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	<u> </u>	3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines "Yes."				
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
С	Total	2c			0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	_3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible				
5	lobbying and political expenditure next year?	4	ļ		
Par		_5	L		0
Com	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and, complete this part for any additional information.	Part	II-B, line	11.	
		- <i>-</i>		·	
				- 	

Famil	y Voices rm 990 or 990-EZ) 2009	85-0430800
		Page 4
Part IV	Supplemental Information (continued)	
		
•••		
·		
		•
	•	
		•••••

Schedule C (Form 990 or 990-EZ) 2009

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ► See separate instructions.

Inspection Employer identification number

Schedule D (Form 990) 2009

Family	/ Voices	85-0430800
Part		nds or Accounts. Complete if
	the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year .	
	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	to do not add to ad
5	Did the organization inform all donors and donor advisors in writing that the assets held	f 1 1 1
_	funds are the organization's property, subject to the organization's exclusive legal control	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant	
	used only for charitable purposes and not for the benefit of the donor or donor advisor, or	
	purpose conferring impermissible private benefit?	
Part		to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or pleasure) Preservation	of an historically important land area
	Protection of natural habitat Preservation	of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contributi	on in the form of a conservation
	easement on the last day of the tax year.	
	•	Held at the End of the Tax Year
а	Total number of conservation easements	
b	Total acreage restricted by conservation easements	. 2b
C	Number of conservation easements on a certified historic structure included in (a)	. 2c
d	Number of conservation easements included in (c) acquired after 8/17/06	. 2d
3	Number of conservation easements modified, transferred, released, extinguished, or teleased, extinguished, extinguis	rminated by the organization
	during the tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspectio	n, handling of
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation	easements during the year
_	P	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation eas	ements during the year
_		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements	
_	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	Yes . No
9	In Part XIV, describe how the organization reports conservation easements in its revenue balance sheet, and include, if applicable, the text of the footnote to the organization's file.	
	the organization's accounting for conservation easements.	nanciai statements that describes
Par		Similar Assats
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	ommar Addets.
12	If the organization elected, as permitted under SFAS 116, not to report in its revenue st	atement and halance sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or r	research in furtherance of public
	service, provide, in Part XIV, the text of the footnote to its financial statements that described	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue states	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or rese	arch in furtherance of public
	service, provide the following amounts relating to these items:	
	(i) Revenues included in Form 990, Part VIII, line 1	> \$
	(ii) Assets included in Form 990, Part X	▶ \$
2	If the organization received or held works of art, historical treasures, or other similar as	sets for financial gain, provide the
	following amounts required to be reported under SFAS 116 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1	• \$
ь	Assets included in Form 990, Part X	▶ \$
For F	rivacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2009

Page	2
aye	-

Part	Organizations Maintaining	Collections of	Art, His	torical 1	reasures, e	or Oth	er Similar A	ssets (cc	ntınue	<u>d)</u>
3	Using the organization's acquisition,	accession, and of	her reco	rds, chec	k any of the	followi	ng that are a s	significant		
	use of its collection items (check all	that apply):								
а	Public exhibition		d 🔲	Loan	or exchange	progra	ms			
b	Scholarly research		e 🗍	Other	=					
С	Preservation for future genera	itions	_							-
4	Provide a description of the organiza		and expla	ain how t	hey further th	he orga	nızation's exe	mpt purpo	se in	
5	During the year, did the organization assets to be sold to raise funds rath								<u>. </u>	No
Part										
. ui (IV, line 9, or reported an ar								, rait	
1a	Is the organization an agent, trustee			-				t		
ь.	included on Form 990, Part X? If "Yes," explain the arrangement in							Ye	s l	No
b	ii res, explain the arrangement in	Part AIV and Com	piete trie	IOHOWING	j table:			Amount		
С	Beginning balance					1c	1			0
d	Additions during the year									_
e	Distributions during the year									
f	Ending balance					1f				0
2a	Did the organization include an amo							☐ Ye	s X I	No.
b	If "Yes," explain the arrangement in					• • •		□	· 100	10
Part			ization a	nswere	d "Yes" to F	orm 9	90. Part IV I	ine 10		
		(a) Current year	(b) Pro		(c) Two years		(d) Three years ba		ır years ba	ack
1a	Beginning of year balance	0	<u> </u>	J	# - '	: 4	z zawy	* 15-E	· years be	1
b	Contributions							* 35°.		
c	Net investment earnings, gains,					84.00		A THE TO LAKE	- 1885	
·	and losses									
d	Grants or scholarships				2 1 1 C	. 39	12 14 12 15 15 15 15 15 15 15 15 15 15 15 15 15	34	Ž.	
e	Other expenditures for facilities		 -		- Tan Mak	- 32/8	2.9 \$13.0.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Marin.	_
-	and programs				/#					
f	Administrative expenses					,	<u> </u>	The second second	1/24	
g	End of year balance	0		0				. ,	~	-
2	Provide the estimated percentage of		nce held		12" 22 T T 11"	2002.5 12	9 . 20062	· , ^27//~ ·	1100000	. 1
-	Board designated or quasi-endowm		%	1 as.						
b	Permanent endowment	%								
C	Term endowment	/ 9- %								
3a	Are there endowment funds not in the		he organ	ization th	at are hold a	and adr	ministered for	tha		
-	organization by	ie possession or ti	ie organ	ızalıdı ili	at are rielu a	iliu aui	ministered for		Yes	
	(i) unrelated organizations								Tes I	No
	(ii) related organizations							3a(i)	+	
b	If "Yes" to 3a(ii), are the related org									
4	Describe in Part XIV the intended u	anizations iisteu at	tion's or	d on Sch	edule R?			_3b	l	
Part		dings and Equi	nmont	Soc For	rm 000 Dos	4 V 11m	- 10			
rart										
	Description of investment	(a) Cost or oth (investment)			st or other s (other)	٠,,	ccumulated preciation	(d) Bo	ok value	
1a	Land		0		0	. 3,0%,	,, , ,			0
b	Buildings		0		0		0			0
C	Leasehold improvements	•	0		22,964		14,033		8,	<u>931</u>
d	Equipment	•	0		42,509		35,867		6,	<u>642</u>
E Tota	Other		0		0	464.	0			0
TOTA	I. Add lines 1a through 1e. (Column)	u) must equal Fori	п 990, Р	art X, col	umn (B), line	10(c)) ►		15,	<u>573</u>

		•
200	•	. •

Part VII Investments—Other Securiti	es. See Form 990, Part X,	line 12.	rago o
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year m	
Financial derivatives	(0	
Closely-held equity interests			
Other		o	
	-	0	
	• •	0	
		0	<u> </u>
	-	0	
		0	
	-	ol	
		0	
		0	
, , , , , , , , , , , , , , , , , , , ,	<u>`</u>	0	
Part VIII Investments—Program Rela	ted. See Form 990, Part X	(, line 13.	·
(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year m	
	(0	
		0	
		0	
		0	
		0 0	
	· · · · · · · · · · · · · · · · · · ·	0	
		0	
		0	·
		0	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0 *** * * * * * * * * * * * * * * * * *	
Part IX Other Assets. See Form 990,			
	(a) Description		(b) Book value
		• • • • • • • • • • • • • • • • • • • •	0
			0
			0
			0
			0
			0
			0
			0
Total (Column /h) must squal Form 200, Bort	(and (D) line (E)		0
Part X Other Liabilities. See Form 9	00 Part V line 25.	<u> </u>	0
1. (a) Description of liability	(b) Amount		
Federal income taxes	(b) Amount	0 * *	\$
		*	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
Total (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	0	
		O	
2. FIN 48 Footnote. In Part XIV, provide the text organization's liability for uncertain tax positions	. or the loothole to the organi; : under FIN 48	zation's linaricial statements that	reports the

Part	Reconciliation of Change in Net Assets from Form 990 to Audited F	inancial Sta	tements
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1,036,432
2	Total expenses (Form 990, Part IX, column (A), line 25)		1,107,285
3	Excess or (deficit) for the year. Subtract line 2 from line 1		-70,853
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV.)		
9	Total adjustments (net) Add lines 4 through 8		0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		-70,853
Par			
1	Total revenue, gains, and other support per audited financial statements	*	1 1,036,432
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		^
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d		2e 0
3	Subtract line 2e from line 1	[3 1,036,432
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		
С	Add lines 4a and 4b		4c 0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5 1,036,432
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With	Expenses p	er Return
1	Total expenses and losses per audited financial statements		1,107,285
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
þ	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d		2e 0
3	Subtract line 2e from line 1	<u>L</u>	1,107,285
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		.
C	Add lines 4a and 4b		4c 0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<u> </u>	5 1,107,285
Par	t XIV Supplemental Information	·	
and	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lin 2b; Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, line part to provide any additional information.	es 2d and 4b.	Also complete

			•
			Schedule D (Form 990) 2009

•	Family Voices			85-0430800	
Schedule D (Form	990) 2009				Page 5
Part XIV	Supplemental Inform	mation (continued)			
			*		
		••••••			
					• • • • • • • • • • • • • • • • • • • •
		·			• • • • • • • • • • • • • • • • • • • •
	• • • • • • • • • • • • • • • • • • • •				
				••••••	
		• • • • • • • • • • • • • • • • • • • •			

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

• Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Family Voices

Employer identification number 85-0430800

Form 990 Part VI Section A Line 6 During FYE 6-30-09, Family Voices launched a membership
program to eventually include membership levels foe State Affiliate Organizations (SAOs),
other organizations and individuals. A very small number of individual memberships were
received since implementing this program. Members pay a membership fee and receive associated
benefits.
Form 990 Part VI Section B Line 11A The Family Voices Board of Directors reviews the 990
annually priot to its submission to the IRS. A draft of the 990 is prepared by the external
CPA. It is reviewed by the Finance Administrator, Deputy Director, and the Executive Director.
The revised draft is sent via email to all board members for their review. After review and
comment from the board of directors and any necessary changes made, the 990 is submitted to
the IRS
Form 990 Part VI Section B Line 12c Monitoring and enforcement of the conflict of interest
policy includes a written document that is signed on an annual basis by incoming members of
the board of directors.
Form 990 Part VI Section B Line 15a Determining the compensation of the Executive Director
includes the use of comparable organizations' Form 990s, review of compensation surveys
compiled by national nonprofit organizations, and approval of the board
Form 990 Part VI Section C Line 19 Governing documents, conflict of interest policy, and
financial statements are available to the public upon request. Partial financial statements
are included in the Annual Report, which is sent to constituents and is available on the
Family Voices website.
