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Form 990   Department of the Treasury Internal Revenue Service	<b>Return of Organization Exempt From Income Tax</b>  <b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</b>  ▶ The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047  <b>2011</b>  <b>Open to Public Inspection</b>
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<b>A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011</b>		
<b>B</b> Check if applicable <input type="checkbox"/> Address change  <input type="checkbox"/> Name change  <input type="checkbox"/> Initial return  <input type="checkbox"/> Terminated  <input type="checkbox"/> Amended return  <input type="checkbox"/> Application pending	<b>C</b> Name of organization COMMUNITY VIOLENCE INTERVENTION CENTER  Doing Business As  Number and street (or P O box if mail is not delivered to street address) Room/suite 211 SOUTH 4TH STREET  City or town, state or country, and ZIP + 4 GRAND FORKS, ND 58201	<b>D Employer identification number</b>  45-0359167 <b>E Telephone number</b>  (701) 746-0405 <b>G</b> Gross receipts \$ 2,359,543
	<b>F</b> Name and address of principal officer KRISTI HALL-JIRAN 211 SOUTH 4TH STREET GRAND FORKS,ND 58201	<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) <b>H(c)</b> Group exemption number ▶
	<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀(insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
	<b>J Website:</b> ▶ WWW.CVICONLINE.ORG	

<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	<b>L</b> Year of formation 1980	<b>M</b> State of legal domicile ND
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<b>Part I</b>	<b>Summary</b>
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Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities TO ASSIST VICTIMS OF VIOLENCE AND TO PROMOTE SAFETY, PEACE AND RESPECT FOR ALL INDIVIDUALS																								
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets																								
	<table><tr><td><b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .</td><td><b>3</b></td><td>12</td></tr><tr><td><b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .</td><td><b>4</b></td><td>12</td></tr><tr><td><b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a) . . . . .</td><td><b>5</b></td><td>71</td></tr><tr><td><b>6</b> Total number of volunteers (estimate if necessary) . . . . .</td><td><b>6</b></td><td>145</td></tr><tr><td><b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .</td><td><b>7a</b></td><td>0</td></tr><tr><td><b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .</td><td><b>7b</b></td><td>0</td></tr></table>	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b>	12	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<b>4</b>	12	<b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a) . . . . .	<b>5</b>	71	<b>6</b> Total number of volunteers (estimate if necessary) . . . . .	<b>6</b>	145	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	<b>7a</b>	0	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .	<b>7b</b>	0						
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Revenue	<table><tr><td><b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .</td><td><b>Prior Year</b></td><td><b>Current Year</b></td></tr><tr><td><b>9</b> Program service revenue (Part VIII, line 2g) . . . . .</td><td>1,840,656</td><td>1,816,927</td></tr><tr><td><b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .</td><td>203,409</td><td>206,793</td></tr><tr><td><b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td>7,438</td><td>8,119</td></tr><tr><td><b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .</td><td>267,302</td><td>288,671</td></tr><tr><td></td><td>2,318,805</td><td>2,320,510</td></tr></table>	<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .	<b>Prior Year</b>	<b>Current Year</b>	<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	1,840,656	1,816,927	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .	203,409	206,793	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	7,438	8,119	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	267,302	288,671		2,318,805	2,320,510						
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Expenses	<table><tr><td><b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . .</td><td>162,822</td><td>183,531</td></tr><tr><td><b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .</td><td>0</td><td>0</td></tr><tr><td><b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</td><td>1,561,558</td><td>1,693,221</td></tr><tr><td><b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .</td><td>0</td><td>0</td></tr><tr><td><b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶156,785</td><td></td><td></td></tr><tr><td><b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .</td><td>485,390</td><td>436,523</td></tr><tr><td><b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)</td><td>2,209,770</td><td>2,313,275</td></tr><tr><td><b>19</b> Revenue less expenses Subtract line 18 from line 12 . . . . .</td><td>109,035</td><td>7,235</td></tr></table>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . .	162,822	183,531	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	0	0	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,561,558	1,693,221	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	0	0	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶156,785			<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .	485,390	436,523	<b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,209,770	2,313,275	<b>19</b> Revenue less expenses Subtract line 18 from line 12 . . . . .	109,035	7,235
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<b>Part II</b>	<b>Signature Block</b>
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	***** Signature of officer	2012-08-13 Date		
	KRISTI HALL-JIRAN EXECUTIVE DIRECTOR Type or print name and title			
<b>Paid Preparer's Use Only</b>	Preparer's signature ▶ JANELLE MULROY	Date	Check if self-employed ▶ <input type="checkbox"/>	Preparer's taxpayer identification number (see instructions) P00167925
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶	BRADY MARTZ AND ASSOCIATES PC PO BOX 14296  GRAND FORKS, ND 582084296		EIN ▶ 45-0310328
				Phone no ▶ (701) 775-4685

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☒

1

Briefly describe the organization's mission

TO ASSIST VICTIMS OF VIOLENCE AND TO PROMOTE SAFETY, PEACE AND RESPECT FOR ALL INDIVIDUALS

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes

☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes

☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code ) (Expenses \$ 979,183 including grants of \$ 182,841 ) (Revenue \$ 87,468 )

LIGHT OF HOPE PROGRAM OUR LIGHT OF HOPE PROVIDES THE ONLY PLACE OF REFUGE IN OUR COMMUNITY FOR ADULTS AND CHILDREN WHO ARE BEING ABUSED IN THEIR OWN HOMES OR HARMED BY SEXUAL VIOLENCE OR STALKING. WE OFFER A SAFE WAY THROUGH THE CRISIS AND SUPPORT TOWARD ACHIEVING LONG-TERM STABILITY, PROVIDING OPPORTUNITIES TO HEAL AND GAIN KNOWLEDGE AND SKILLS THAT ENABLE OUR CLIENTS TO THRIVE IN A SAFE AND HEALTHY ENVIRONMENT. IN 2011, WE SERVED 1,395 ADULTS AND CHILDREN. OUR CLIENTS ARE TELLING US THAT OUR SERVICES ARE MAKING A DIFFERENCE. 100% OF 279 CLIENTS SURVEYED IN 2011 REPORTED THAT OUR SERVICES WERE BENEFICIAL TO THEIR LIVES. SERVICES AND GOALS INCLUDE: 1. CRISIS SERVICES: GOAL 1 - ENSURE THE SAFETY OF ADULTS, CHILDREN AND FAMILIES. OUR CRISIS SERVICES PROVIDE A LIFELINE THAT ENSURES SAFETY, INCLUDING SHELTER, 24-HOUR CRISIS LINE, ASSISTANCE WITH PROTECTION ORDERS, LEGAL REPRESENTATION, ADVOCACY, COLLABORATION WITH LAW ENFORCEMENT, CHILD PROTECTIVE SERVICES AND OTHERS, EMERGENCY FINANCIAL ASSISTANCE AND RELATED SUPPORT. OF 190 CLIENTS SURVEYED, 93% SAID THEY FELT SAFER AFTER RECEIVING CRISIS SERVICES. INDIVIDUALS RECEIVING OUR CRISIS SERVICES HAVE TOLD US: "I WAS SO AFRAID TO COME - WHAT I RECEIVED WAS FAR MORE THAN I COULD HAVE IMAGINED OR HOPED FOR!" "I FEEL SAFER ALREADY." "I GOT A PROTECTION ORDER. IT WAS THE BEST THING I'VE EVER DONE IN MY WHOLE LIFE." 2. WELLNESS SERVICES: GOAL 2 - ENHANCE THE WELL-BEING OF ADULTS AND CHILDREN. OUR WELLNESS SERVICES PROMOTE STABILITY AND HEALING, HELPING BOTH ADULTS AND CHILDREN TO COPE WITH THE TRAUMA OF VIOLENCE, TEACHING CHILDREN NONVIOLENT WAYS OF RELATING TO END THE CYCLE OF VIOLENCE, AND ASSISTING FAMILIES IN DEVELOPING RELATIONSHIPS THAT ARE BASED ON SAFETY, TRUST AND POSITIVE COMMUNICATION. OUR WELLNESS SERVICES INCLUDE INNOVATIVE COUNSELING AND THERAPY GROUPS FOR TEENS, GROUPS AND PLAY THERAPY FOR YOUNG CHILDREN, AND SUPPORT GROUPS, COUNSELING AND PARENTING EDUCATION FOR ADULTS. OF 145 ADULT CLIENTS SURVEYED, 95% STATED THEY INCREASED KNOWLEDGE OF THE DYNAMICS OF VIOLENCE, AND 85% OF 143 SHOWED IMPROVEMENT IN EMOTIONAL CONDITION. CHILD/YOUTH OUTCOMES WERE ALSO POSITIVE. 100% OF 11 SURVEYED OR RATED INCREASED KNOWLEDGE OF ABUSE AND NONVIOLENT WAYS OF RELATING, AND 100% EXHIBITED A POSITIVE CHANGE IN RELATIONSHIP SKILLS. INDIVIDUALS RECEIVING OUR WELLNESS SERVICES HAVE TOLD US: "THE COUNSELORS WERE VERY HELPFUL AND PATIENT. THEY HELPED ME LEARN ABOUT TOOLS AND RESOURCES TO HELP ME MOVE FORWARD. THIS IS A WONDERFUL PLACE." "MY ABILITY TO HANDLE SITUATIONS HAS IMPROVED SO MUCH, I CAN COPE MUCH MORE EASILY AS WELL." 3. SELF-SUFFICIENCY SERVICES: GOAL 3 - PREVENT HOMELESSNESS AND INCREASE FINANCIAL INDEPENDENCE. LAST YEAR, A RECORD 29% OF LOCAL ADULTS AND CHILDREN SERVED FOR FAMILY VIOLENCE BECAME HOMELESS, SPENDING A TOTAL OF 6,689 NIGHTS HOMELESS OR IN OUR SHELTER. OUR SELF-SUFFICIENCY SERVICES PROVIDE RELIEF TO FAMILIES IN DIRE STRAITS, OFFERING CAREER COUNSELING, HOUSING ASSISTANCE AND TRANSITIONAL HOUSING TO ASSIST THEM IN ATTAINING FINANCIAL INDEPENDENCE. CAREER COUNSELING: WE HELP INDIVIDUALS TO IDENTIFY EDUCATIONAL AND CAREER GOALS, MAKE APPLICATION TO INSTITUTIONS OF HIGHER LEARNING, FINANCIAL AID AND AREA EMPLOYMENT, GAIN ACCESS TO JOBS, AND INCREASE MONEY MANAGEMENT SKILLS. IN 2011, 90% OF THE 83 CLIENTS WHO WERE PROVIDED CAREER COUNSELING TOOK STEPS TOWARD SECURING EMPLOYMENT OR HIGHER EDUCATION. HOUSING ASSISTANCE: WE HELP INDIVIDUALS TO SECURE LOW-INCOME HOUSING OR OTHER OPTIONS, AND PROVIDE FINANCIAL ASSISTANCE TO PAY FOR RENTAL DEPOSITS AND COMMUNITY REFERRALS. FURTHER, OUR HOPE TRANSITIONAL HOUSING PROJECT OFFERS HOUSING AND INTENSIVE SUPPORT FOR SINGLE-PARENT FAMILIES WORKING TO ATTAIN SELF-SUFFICIENCY. IN 2011, 92% OF THE 210 CLIENTS WHO WERE ASSISTED WITH HOUSING ISSUES TOOK STEPS TOWARD SECURING PERMANENT HOUSING, AND 100% OF EIGHT TRANSITIONAL CLIENTS TOOK STEPS TOWARD MEETING THEIR SELF-SUFFICIENCY GOALS. INDIVIDUALS RECEIVING OUR SELF-SUFFICIENCY SERVICES HAVE TOLD US: "CVIC HAS HELPED ME THROUGH SO MUCH. WITHOUT YOUR HELP, I HAVE NO IDEA HOW I WOULD BE COPING IN MY EVERY DAY LIFE. THANKS SO MUCH FOR ALL YOU DO!" "I DON'T KNOW WHAT I WOULD HAVE DONE WITHOUT CVIC'S HELP."

4b

(Code ) (Expenses \$ 187,144 including grants of \$ 590 ) (Revenue \$ 15,828 )

PATHWAYS TOWARD JUSTICE PROGRAM THE PATHWAYS TOWARD JUSTICE PROGRAM PROVIDES CRIMINAL JUSTICE ADVOCACY AND SUPPORT FOR VICTIMS OF CRIME, INCLUDING ASSAULT, RAPE, SEXUAL ABUSE, BURGLARY, CRIMINAL TRESPASS, TERRORIZING, MANSLAUGHTER, MURDER, FORGERY, HARASSMENT AND OTHER CRIMES. THESE INDIVIDUALS OFTEN ARE UNDER EXTREME EMOTIONAL STRESS AT THE TIME THEY ARE THRUST INTO A SYSTEM OF WHICH THEY HAVE LITTLE KNOWLEDGE. THEY NORMALLY ARE UNAWARE OF THEIR RIGHTS AS CRIME VICTIMS AND HAVE NO WAY OF KNOWING HOW THEIR CASES ARE PROCEEDING THROUGH THE SYSTEM OR THE FINANCIAL COMPENSATION AVAILABLE TO THEM IF THEY HAVE SUFFERED FINANCIAL LOSSES BECAUSE OF THE CRIME. WE PROVIDE ADVOCACY AND SUPPORT TO ENSURE THEIR RIGHTS ARE UPHELD THROUGH THE COURT PROCESS. IN 2011, WE SERVED 672 ADULTS AND CHILDREN OF 63 CLIENTS SURVEYED, 98% SAID OUR SERVICES WERE BENEFICIAL TO THEIR LIVES. INDIVIDUALS RECEIVING OUR SERVICES HAVE TOLD US: "YOU HAVE BEEN A JOY TO WORK WITH, YOU ARE EXTREMELY KNOWLEDGEABLE ABOUT THE SYSTEM AND LAWS, YOU ARE VERY PROFESSIONAL, AS WELL AS PERSONABLE, MAKING IT MUCH EASIER FOR THE ONES WHO ARE CONFUSED AND HURT. THANK YOU FROM THE BOTTOM OF MY HEART FOR BEING YOU. YOU AND YOUR ORGANIZATION HAVE WORKED AND CONTINUE TO WORK HARD FOR THE ONES WHO ARE TOO AFRAID TO STAND UP FOR THEMSELVES, YOU ARE MAKING A DIFFERENCE IN THIS SCARY WORLD AND FOR THAT I AM GRATEFUL." "THANKS FOR EVERYTHING. YOUR UNDERSTANDING THROUGHOUT ALL OF THIS HAS BEEN A GREAT HELP. AND, JUST LETTING ME TALK HAS BEEN A RELIEF FOR ME." SERVICES AND GOALS INCLUDE: 1. ADVOCACY: GOAL 1 - ENSURE THE RIGHTS OF VICTIMS INVOLVED IN THE CRIMINAL JUSTICE SYSTEM FOR THE CRIMES COMMITTED AGAINST THEM. WE HELP VICTIMS OF CRIME NAVIGATE THE COURT SYSTEM, ASSISTING BOTH ADULTS AND CHILDREN IN COPING WITH THE TRAUMATIC EFFECTS OF VICTIMIZATION AND THE DEMANDS OF JUSTICE SYSTEM INVOLVEMENT. WE ARE INVOLVED WITH CASES THROUGH EVERY STEP OF BOTH THE CRIMINAL JUSTICE AND JUVENILE COURT SYSTEMS, NOTIFY CLIENTS OF THEIR CASE STATUS, ADVOCATE ON THEIR BEHALF, AND ASSIST THEM IN OBTAINING STATE FUNDS TO PAY FOR MEDICAL AND OTHER BILLS RESULTING FROM THE CRIME AND IN ACCESSING OTHER COMMUNITY SERVICES. IN 2011, 98% OF 63 CLIENTS SURVEYED SAID THEY WERE KEPT WELL INFORMED ABOUT THEIR CASE. 2. COLLABORATION: GOAL 2 - INCREASE VICTIM PARTICIPATION IN THE CRIMINAL JUSTICE PROCESS. WE ASSIST VICTIMS OF CRIME IN BECOMING ACTIVE PARTICIPANTS IN THE PROCESS, FROM PRESSING CHARGES TO COMPLETING VICTIM IMPACT STATEMENTS. WE COLLABORATE EXTENSIVELY WITH PROSECUTORS, LAW ENFORCEMENT AND COURT PERSONNEL TO ENSURE THAT VICTIMS' QUESTIONS AND CONCERNS ARE ADDRESSED AND THAT THEY ARE ADEQUATELY PREPARED PRIOR TO THEIR CASES GOING TO TRIAL. WE ALSO WORK WITH HUMAN SERVICE AND OTHER AGENCIES TO ENSURE VICTIMS RECEIVE NEEDED SERVICES THAT WILL FACILITATE THEIR PARTICIPATION AND WELL-BEING. IN 2011, 215 VICTIMS WERE PROVIDED THE OPPORTUNITY TO COMPLETE VICTIM IMPACT STATEMENTS TO ENSURE THEIR VOICE WAS HEARD.

4c

(Code ) (Expenses \$ 432,010 including grants of \$ ) (Revenue \$ 15,000 )

COMMUNITY INNOVATIONS PROGRAM COMMUNITY INNOVATIONS WORKS ON A COMMUNITY LEVEL TO BOTH PREVENT DOMESTIC AND SEXUAL VIOLENCE AND TO ENHANCE THE WAY IN WHICH WE COLLABORATIVELY RESPOND TO VIOLENCE. WE OFFER TWO MAJOR COMPONENTS: (1) BROAD-BASED PREVENTION EDUCATION FOR ADULTS AND YOUTH, AND (2) PROFESSIONAL COLLABORATION AND TRAINING. IN 2011, 145 PROFESSIONALS PARTICIPATED IN THE COORDINATED COMMUNITY RESPONSE PROJECT TO IMPROVE THE WAY OUR COMMUNITY RESPONDS TO DOMESTIC AND SEXUAL VIOLENCE, AND MORE THAN 90 PARTICIPATED IN THE SAFER TOMORROWS PROJECT TO REDUCE AND END CHILDHOOD EXPOSURE TO VIOLENCE. OVER THE YEAR, WE PROVIDED 357 EDUCATION AND TRAINING PRESENTATIONS TO 10,102 PEOPLE, INCLUDING 2,129 PROFESSIONALS, 2,388 CHILDREN AND YOUTH, AND 5,585 ADULTS. OF 2,255 ADULTS AND YOUTH SURVEYED, 97% SAID OUR PRESENTATIONS WERE BENEFICIAL TO THEM. INDIVIDUALS ATTENDING OUR PRESENTATIONS HAVE TOLD US: "I NEVER HAD SOMETHING IMPACT ME LIKE THIS PRESENTATION HAS." "IT WAS STRAIGHT FORWARD INFORMATION THAT TEENS CAN RELATE TO." "IT REALLY HIT HOME WITH ME. IT MADE ME REALIZE SOME THINGS ABOUT THE RELATIONSHIPS I AM IN AND I LEARNED THAT HEALTHY RELATIONSHIPS TAKE A LOT OF WORK." "I MIGHT BE ABLE TO USE THE SERVICES PROVIDED." "I LEARNED HOW TO HELP THE VICTIM AND HOW TO REPORT, WHICH IS VERY IMPORTANT TO KNOW AS A FUTURE EDUCATOR." "ALL THE INFORMATION REGARDING HOW WE AS HEALTHCARE PROVIDERS CAN DEAL WITH THESE SITUATIONS WAS HELPFUL." SERVICES AND GOALS INCLUDE: 1. COMMUNITY EDUCATION: GOAL 1 - PREVENT VIOLENCE BY RAISING COMMUNITY MEMBERS' AWARENESS OF VIOLENCE AND OFFERING HEALTHY FRIENDSHIP AND RELATIONSHIP EDUCATION. GENERAL EDUCATION: WE OFFER EDUCATIONAL PRESENTATIONS TO SCHOOLS, SERVICE ORGANIZATIONS, PLACES OF WORSHIP AND OTHER COMMUNITY GROUPS ON DOMESTIC VIOLENCE, CHILD ABUSE, SEXUAL ASSAULT, DATING VIOLENCE, ELDER ABUSE, WHERE TO GO FOR HELP, AND CHARACTERISTICS OF HEALTHY RELATIONSHIPS. OF 1,437 EDUCATION PARTICIPANTS SURVEYED IN 2011, 92% SAID OUR PRESENTATIONS INCREASED THEIR AWARENESS OF ISSUES AND SERVICES. YOUTH VIOLENCE PREVENTION: WE OFFER PROGRAMMING THAT HELPS TO PREVENT ABUSE OR SEXUAL ASSAULT BEFORE IT EVER HAPPENS. WITH THE ASSISTANCE OF LOCAL PROFESSIONALS, WE OFFER TWO PRIMARY PROGRAMS: (1) HOW TO AVOID DATING A JERK (ETTE) WE REACH HIGH SCHOOL TEENS AND YOUNG ADULTS WITH THIS ENTERTAINING HEALTHY RELATIONSHIP CURRICULUM, ADDRESSING TOPICS SUCH AS RIGHTS AND RESPONSIBILITIES OF INDIVIDUALS WITHIN RELATIONSHIPS, BOUNDARIES, AND ESTABLISHING ONE'S IDENTITY AND FUTURE PLANS. (2) FRIENDSHIPS THAT WORK: A POSITIVE FRIENDSHIP CURRICULUM. WE REACH MIDDLE SCHOOL YOUTH WITH A CURRICULUM DESIGNED TO FOSTER POSITIVE FRIENDSHIPS, PROVIDING SKILLS FOR DEVELOPING FUTURE HEALTHY INTIMATE RELATIONSHIPS. IN ALL OUR PRESENTATIONS TO YOUTH, 89% OF 884 SURVEYED SHOWED AN INCREASE IN KNOWLEDGE OF ABUSE AND HEALTHY RELATIONSHIPS. 2. PROFESSIONAL COLLABORATION AND TRAINING: GOAL 2 - IMPROVE OUR COMMUNITY'S EFFECTIVENESS IN RESPONDING TO AND IN ENDING VIOLENCE. COORDINATED COMMUNITY RESPONSE PROJECT: WE SPEARHEAD THIS MAJOR COLLABORATIVE EFFORT INVOLVING 13 LOCAL AGENCIES THAT COLLABORATE CLOSELY TO TRACK CASES OF DOMESTIC AND SEXUAL VIOLENCE THROUGH THE CRIMINAL JUSTICE SYSTEM, ANALYZE COMPUTERIZED DATA TO DETERMINE GAPS IN OUR SYSTEM'S RESPONSE, AND PARTICIPATE IN TRAINING AND DIALOGUE TO STRATEGICALLY ADDRESS THE GAPS. OUR PROJECT HAS CONDUCTED SAFETY ASSESSMENTS, REVISED POLICIES AND PROCEDURES, AND DEVELOPED STRATEGIES THROUGH MANY COMMITTEES THAT HAVE MARKEDLY IMPROVED OUR RESPONSE TO LETHAL SITUATIONS, CHILDREN, RURAL, ELDERLY, MILITARY AND OTHER COMMUNITY MEMBERS IMPACTED BY DOMESTIC AND SEXUAL VIOLENCE. OUR PROGRESS INCLUDES: CHILDREN ARE SAFER, AS LAW ENFORCEMENT RESPONDING TO CALLS FOR DOMESTIC VIOLENCE INCREASED REPORTS OF CHILD ABUSE OR NEGLECT FROM 30% OF LAW ENFORCEMENT REPORTS THAT NOTED CHILD WITNESSES IN 2002 TO 68% IN 2011. DEFENDANTS CONVICTED AND ORDERED INTO CVIC'S OFFENDER PROGRAM INCREASED FROM 23% OF OFFENDERS SENTENCED IN 2006 TO 48% IN 2011. PROSECUTION INCREASED THE CONVICTION RATE IN DOMESTIC VIOLENCE CASES FROM 65% IN 2005 TO 78% IN 2011. LAW ENFORCEMENT INCREASED THE ARREST RATE IN PROTECTION ORDER VIOLATIONS FROM 37% IN 2010 TO 45% IN 2011. SAFER TOMORROWS PROJECT: WE PARTICIPATE IN THE GRAND FORKS SAFER TOMORROWS PROJECT, THE LARGEST COLLABORATIVE EFFORT TO PREVENT YOUTH EXPOSURE TO VIOLENCE IN OUR COMMUNITY'S HISTORY. SAFER TOMORROWS WAS ONE OF FOUR PROJECTS IN THE NATION TO BE AWARDED A \$2 MILLION U.S. DEPARTMENT OF JUSTICE DEFENDING CHILDHOOD INITIATIVE GRANT OVER TWO YEARS TO ADDRESS THE NEEDS OF LOCAL CHILDREN EXPOSED TO VIOLENCE. THE CITY OF GRAND FORKS, CVIC, LUTHERAN SOCIAL SERVICES OF ND AND GRAND FORKS PUBLIC SCHOOLS PROVIDE LEADERSHIP TO THE PROJECT, COLLABORATING WITH MORE THAN 40 AGENCIES THROUGHOUT GRAND FORKS COUNTY TO PREVENT AND REDUCE THE IMPACT OF VIOLENCE ON LOCAL CHILDREN, FAMILIES AND OUR COMMUNITY USING A MAJOR COMMUNITY NEEDS AND RESOURCES ASSESSMENT TO PROVIDE DIRECTION. WE COLLABORATIVELY DEVELOPED A STRATEGIC PLAN TO PROVIDE AN OUTCOME-DRIVEN ROAD MAP FOCUSING ON THREE KEY AREAS: (1) PREVENTION, INCLUDING HEALTHY RELATIONSHIP EDUCATION IN ALL SCHOOLS IN THE COUNTY, A MAJOR PUBLIC AWARENESS CAMPAIGN, COACHING BOYS WITHIN SPORTS PROGRAMS TO NEVER EQUATE VIOLENCE WITH STRENGTH, AND EXPANSION OF A HOME VISITING PROGRAM TO PREVENT CHILD MALTREATMENT, (2) INTERVENTION, INCLUDING NEW THERAPY FOR CHILD AND YOUTH VICTIMS OF ALL CRIME, EXPANDED RESTORATIVE JUSTICE SERVICES, EXTENSIVE PROFESSIONAL COLLABORATION, TRAINING AND RELATED AREAS, AND (3) DATA, INVOLVING COLLECTION AND ANALYSIS TO BETTER UNDERSTAND AND RESPOND TO LOCAL VIOLENCE. PROFESSIONAL TRAINING: OUR PROFESSIONAL TRAINING IS DESIGNED TO ADDRESS AREAS NEEDING IMPROVEMENT WITHIN OUR COORDINATED RESPONSE. WE TRAIN LAW ENFORCEMENT OFFICERS, PROSECUTORS, COURT PERSONNEL, HEALTHCARE PROFESSIONALS, EDUCATORS, FIRE/RESCUE PERSONNEL AND OTHERS TO MORE EFFECTIVELY IDENTIFY AND RESPOND TO DOMESTIC VIOLENCE, SEXUAL ASSAULT, STALKING, DATING VIOLENCE AND CHILD AND ELDER ABUSE. OF 127 PROFESSIONALS TAKING PRE- AND POST-TRAINING TESTS IN 2011, 97% DEMONSTRATED INCREASED KNOWLEDGE OR ANSWERED ALL QUESTIONS CORRECTLY ON BOTH. FURTHER, 98% OF 818 PROFESSIONALS SURVEYED INDICATED CVIC'S TRAINING PROVIDED THEM WITH KNOWLEDGE OR SKILLS THAT WILL ASSIST THEM IN THEIR LINE OF WORK, AND 100% OF THOSE RESPONDING TO SIX-MONTH FOLLOW-UP SURVEYS SAID THEY USED SKILLS LEARNED FROM THE WORKSHOP SOMETIMES OR OFTEN.

(Code ) (Expenses \$ 136,791 including grants of \$ ) (Revenue \$ 53,647 )

NEW CHOICES PROGRAM THE NEW CHOICES PROGRAM PREVENTS VIOLENCE WITHIN FAMILIES, ADDRESSING THE ROOT CAUSES OF VIOLENCE THROUGH THE TREATMENT OF OFFENDERS TO NOT ONLY PROTECT VICTIMS BUT TO PREVENT CHILDREN FROM LEARNING VIOLENT BEHAVIORS AND THUS STOP THE INTERGENERATIONAL CYCLE OF VIOLENCE. THIS PROGRAM IS THE ONLY ONE IN THE AREA THAT MEETS THE NORTH DAKOTA STATE STANDARDS FOR OFFENDER TREATMENT. RECENT DATA ON OUR OFFENDER TREATMENT PROGRAM SUGGESTS VERY POSITIVE RESULTS. A 2011 STUDY CONDUCTED BY CVIC USING LAW ENFORCEMENT, COURT AND CVIC'S NEW CHOICES PROGRAM DATA AND TRACKING 130 OFFENDERS COMPLETING THE PROGRAM BETWEEN 2004 AND 2009 REVEALED THAT THESE MEN SHOWED A DRASTIC DROP IN SYSTEM INVOLVEMENT DURING THE TWO YEARS FOLLOWING TREATMENT (THROUGH 2011): 75% DECREASE IN LAW ENFORCEMENT INVOLVEMENT NEEDED AT THOSE HOMES, FROM 314 CALLS INVOLVING 112 OFFENDERS TO 78 CALLS INVOLVING 45 OFFENDERS. 91% DROP IN PROTECTION ORDERS, FROM 35 ORDERS PLACED UPON 29 OFFENDERS TO 3 ORDERS PLACED ON 3 OFFENDERS. 86% DECREASE IN CRIMINAL DOMESTIC VIOLENCE CHARGES, FROM 220 CHARGES ON 109 OFFENDERS TO 30 CHARGES ON 16 OFFENDERS. SERVICES AND GOALS INCLUDE: 1. EDUCATION AND TREATMENT GROUPS: GOAL 1 - INCREASE GROUP PARTICIPANTS' KNOWLEDGE OF THE DYNAMICS OF DOMESTIC VIOLENCE AND THEIR INDIVIDUAL ABUSE OF POWER AND CONTROL. WE PROVIDE FOUR, ONGOING 27-SESSION GROUPS FOR MEN WHO HAVE ABUSED THEIR PARTNERS, USING A NATIONALLY ACCLAIMED CURRICULUM THAT CHALLENGES BATTERERS' BELIEF SYSTEMS REGARDING VIOLENCE AND TEACHES SKILLS THAT FACILITATE CHANGE IN THEIR BEHAVIOR. TOPICS INCLUDE THE EFFECTS OF DOMESTIC VIOLENCE ON CHILDREN, EMOTIONAL ABUSE, PHYSICAL ABUSE, SEXUAL ABUSE, INTIMIDATION, ECONOMIC ABUSE AND RELATED SUBJECTS. WITH EACH TOPIC, WE OFFER A NONVIOLENT OR NON-CONTROLLING METHOD FOR PARTICIPANTS TO PRACTICE AND APPLY, SUCH AS POSITIVE SELF-TALK, COMPROMISE AND EFFECTIVE USE OF TIME-OUTS. IN 2011, WE SERVED 153 MEN, WITH 102 PARTICIPATING IN GROUP TREATMENT. MANY MEN ARE ORDERED OR REQUIRED TO PARTICIPATE BY THE COURTS AND SOCIAL SERVICES. OF 30 MEN COMPLETING GROUP DURING THE YEAR, 93% DEMONSTRATED INCREASED KNOWLEDGE OF DOMESTIC VIOLENCE AND AWARENESS OF THEIR INDIVIDUAL ABUSE OF POWER AND CONTROL. MEN WHO RECEIVED OUR SERVICES COMMENTED AS FOLLOWS: "EVEN THOUGH I WAS FORCED TO TAKE THIS COURSE I AM GLAD I STUCK IT OUT. I ALWAYS BLAMED THE ALCOHOL BUT NOW I KNOW THAT I ALSO USED A LOT OF POWER AND CONTROL. IN THE PAST I ALWAYS THOUGHT THAT THE CHILDREN NEVER HEARD OR SAW IT AS THEY WERE IN BED. NOW I KNOW THEY HEARD EVERY ARGUMENT AND ME HITTING THEIR MOTHER. THE ARGUING IS LESS NOW AND USING THE 'TIME OUTS' HAVE HELPED A LOT." "I'M CLOSER TO MY KIDS FROM THIS CLASS AND LEARNED NOT TO JUMP TO CONCLUSIONS, TO TALK CALM." NEW CHOICES "HAS TOTALLY CHANGED MY OUTLOOK ON VIOLENCE, RELATIONSHIPS AND MYSELF." IN 2009, WE ALSO BEGAN A GROUP FOR WOMEN WHO HAVE BEEN VIOLENT WITHIN THEIR INTIMATE RELATIONSHIPS, IN 2011, WE SERVED 22 WOMEN, WITH 11 PARTICIPATING IN GROUP TREATMENT. 2. COLLABORATION: GOAL 2 - HOLD PARTICIPANTS ACCOUNTABLE. WE COLLABORATE REGULARLY WITH THE CRIMINAL JUSTICE SYSTEM REGARDING OFFENDERS COURT-ORDERED INTO TREATMENT TO ENSURE THERE IS A SYSTEM IN PLACE TO HOLD THEM ACCOUNTABLE. WE NOTIFY THE COUNTY PROSECUTOR OF OFFENDERS WHO DO NOT MAKE CONTACT WITH OUR PROGRAM TO BEGIN GROUP OR WHO VIOLATE CONDITIONS OF THEIR TREATMENT CONTRACT WHILE ENROLLED IN OUR PROGRAM. FURTHER, WE HAVE STRUCTURED OUR GROUPS TO BEST ACCOMMODATE THE COURT SYSTEM, ROTATING TREATMENT TOPICS EVERY TWO TO THREE WEEKS. OFFENDERS MAY ENTER GROUP AT THE BEGINNING OF ANY TOPIC AND THUS DO NOT HAVE TO WAIT WEEKS OR MONTHS BEFORE ENTERING THE PROGRAM. IN 2011, OF THE 57 MEN THAT VIOLATED THEIR CONTRACT WITH NEW CHOICES, 47 WERE SUSPENDED OR HAD ADDITIONAL GROUP SESSIONS ADDED TO THEIR CONTRACT AND 14 WERE TERMINATED AND REFERRED BACK TO COURT FOR VIOLATIONS. IN ADDITION, 17 WERE REFERRED BACK TO COURT FOR NOT FOLLOWING THROUGH ON THE RECOMMENDATION THAT THEY WERE APPROPRIATE FOR GROUP. A TOTAL OF 18 INDIVIDUALS RESTARTED GROUP BASED ON AN ORDER FROM THE COURT. 3. VICTIM SERVICES: GOAL 3 - INCREASE SAFETY AND AWARENESS OF SERVICES FOR INTIMATE PARTNERS OF GROUP PARTICIPANTS FOR THOSE BEGINNING GROUP. CONTACT IS MADE WITH PARTICIPANTS' PARTNERS TO EXPLAIN THE GROUP PROCESS, INFORM THEM OF SERVICES AND CONDUCT SAFETY PLANNING. PARTNERS ARE NOTIFIED AT ANY TIME WE BELIEVE THEY MAY BE IN DANGER BASED ON PARTICIPANTS' COMMENTS IN TREATMENT. IN 2011, 100% OR 134 VICTIMS FOR WHOM WE HAD CONTACT INFORMATION WERE OFFERED SERVICES AND MADE AWARE OF SAFETY CONCERNS WHEN NEEDED, 78 RECEIVED ONGOING SERVICES FROM CVIC'S LIGHT OF HOPE PROGRAM.

(Code ) (Expenses \$ 143,017 including grants of \$ 100 ) (Revenue \$ 34,850 )

KIDS FIRST PROGRAM KIDS FIRST PROVIDES SUPERVISED CHILD VISITATIONS AND EXCHANGES TO ENSURE THE SAFETY OF AT-RISK CHILDREN AND PARENTS, PROMOTE POSITIVE PARENT-CHILD RELATIONSHIPS, AND HELP FAMILIES THROUGH DIFFICULT OR TRANSITIONAL PERIODS, SUCH AS ABUSE OR NEGLECT, DOMESTIC VIOLENCE, PARENTAL CONFLICT IN REGARD TO SEPARATION OR DIVORCE, AND OTHER SITUATIONS. WE OFFER A SAFE AND NURTURING ENVIRONMENT THAT FEATURES STATE-OF-THE-ART SECURITY, INCLUDING A WALK-THROUGH METAL DETECTOR, ELECTRONIC MONITORING SYSTEMS AND ALARM BUTTONS THAT ARE LINKED TO LAW ENFORCEMENT, IN ORDER TO ENSURE THE SAFETY OF THOSE WE SERVE. WE COLLABORATE CLOSELY WITH THE COURTS AND SOCIAL SERVICES TO ENSURE THE SAFETY OF CHILDREN AND FAMILIES. IN 2011, WE SERVED 143 CHILDREN AND 221 ADULTS (103 FAMILIES), PROVIDING 712 SUPERVISED PARENTING TIME SESSIONS AND 299 SUPERVISED EXCHANGES OF CHILDREN. OF 123 PEOPLE SURVEYED, 88% WERE SATISFIED WITH SERVICES (IT IS IMPORTANT TO NOTE THAT MANY ARE MANDATED TO RECEIVE SERVICES). INDIVIDUALS RECEIVING OUR SERVICES HAVE TOLD US: "IT'S A SAFE, WELCOMING ENVIRONMENT. MY KIDS LOVE COMING HERE AND THE ROOMS ARE BRIGHT COLORS THEN JUST MAKE YOU FEEL CONTENT. THE KIDS LOVE THE TOYS THE MOST!" "I APPRECIATE THE SERVICES PROVIDED BY THE STAFF AND AM GRATEFUL FOR NOT HAVING TO BE LEFT WITH ALTERNATIVE SITUATIONS." "THANK YOU FOR HAVING YOUR PROGRAM, IT HELPS US TO STAY TOGETHER AS A FAMILY." SERVICES AND GOALS INCLUDE: 1. SUPERVISED PARENTING TIME: GOAL 1 - ENHANCE THE SAFETY OF CHILDREN AT RISK OF ABUSE OR NEGLECT DURING PARENTING TIME SESSIONS. SUPERVISED PARENTING TIME ENSURES THE SAFETY OF CHILDREN AND PROMOTES HEALTHY PARENT-CHILD INTERACTIONS. WE PROVIDE SEPARATE ROOMS FURNISHED WITH COMFORTABLE FURNITURE, BOOKS, TOYS AND GAMES THAT PROMOTE LEARNING AND HELP PARENTS TO SPEND QUALITY TIME WITH THEIR CHILDREN. VISITS ARE SUPERVISED BY PROFESSIONAL STAFF THAT OBSERVES THE VISIT EITHER IN THE SAME ROOM OR IN THE NEXT ROOM VIA AUDIOVISUAL EQUIPMENT, DEPENDING ON THE LEVEL OF SUPERVISION REQUESTED OR ORDERED BY THE COURT OR CHILD PROTECTIVE SERVICES. OUR STAFF MONITORS INTERACTIONS, ANSWERS QUESTIONS, PROVIDES FEEDBACK AND PROMOTES POSITIVE PARENTING SKILLS. IN 2011, PARENTS WERE PROVIDED PARENTING FEEDBACK AND INFORMATION IN 95% OF THE VISITS. 2. SUPERVISED EXCHANGES: GOAL 1 - PROVIDE FOR SMOOTH AND SAFE TRANSFERS OF CHILDREN BETWEEN PARENTS OR CARETAKERS. SUPERVISED EXCHANGES PROVIDE PARENTS THAT NO LONGER LIVE TOGETHER A SAFE PLACE TO EXCHANGE THEIR CHILDREN FOR VISITATION, PREVENTING HARASSMENT OR ABUSE AND ENSURING THAT CHILDREN ARE NOT EXPOSED TO PARENTAL CONFLICTS DURING THE EXCHANGE. SCHEDULES ARE COORDINATED SO THAT THERE IS NO CONTACT BETWEEN PARENTS WHEN DROPPING OFF OR PICKING UP CHILDREN.

4d

Other program services (Describe in Schedule O )

(Expenses \$ 279,808 including grants of \$ 100 ) (Revenue \$ 88,497 )

4e



















Total program service expenses

\$ 1,878,145

Form 990 (2011)

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)? <i>If "Yes," complete Schedule A.</i> 	1	Yes	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i> 	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i> 	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i> 	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i> 	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i> 	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> 	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i> 	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> 	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> 	11b	Yes	
c	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? <i>If "Yes," complete Schedule D, Part VIII.</i> 	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> 	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> 	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> 	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Part I.</i> . . . . .	14b		No
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 U S ? <i>If "Yes," complete Schedule F, Part II and IV.</i> . . . . .	15		No
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 U S ? <i>If "Yes," complete Schedule F, Part III and IV.</i> . . . . .	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i>	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i> . . . . .	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i> . . . . .	19		No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i> . . . . .	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements . . . . .	20b		

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21		No
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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	23		No
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		
c	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
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? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V		Statements Regarding Other IRS Filings and Tax Compliance		
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>				
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	28	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0	
c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return. .	2a	71	
b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		2b		Yes
3a. Did the organization have unrelated business gross income of \$1,000 or more during the year? .		3a		No
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 or securities account)? .	4a		No
b. If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .	5a		No
b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c. If "Yes" to line 5a or 5b, did the organization file Form 8886-T? .		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? .	6a		No
b. 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 and services provided to the payor? .		7a		No
b. If "Yes," did the organization notify the donor of the value of the goods or services provided? .		7b		
c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? .		7c		No
d. If "Yes," indicate the number of Forms 8282 filed during the year. .		7d		
e. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? .		7e		No
f. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .		7f		No
g. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? .		7g		
h. If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? .		7h		Yes
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? .		8		
9. Sponsoring organizations maintaining donor advised funds.				
a. Did the organization make any taxable distributions under section 4966? .		9a		
b. Did the organization make a distribution to a donor, donor advisor, or related person? .		9b		
10. Section 501(c)(7) organizations. Enter				
a. Initiation fees and capital contributions included on Part VIII, line 12. .		10a		
b. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		10b		
11. Section 501(c)(12) organizations. Enter				
a. Gross income from members or shareholders. .		11a		
b. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). .		11b		
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		
13. Section 501(c)(29) qualified nonprofit health insurance issuers.				
a. Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.		13a		
b. Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. .		13b		
c. Enter the aggregate amount of reserves on hand. .		13c		
14a. Did the organization receive any payments for indoor tanning services during the tax year? .		14a		No
b. If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. .		14b		

Part VI

**Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  
Check if Schedule O contains a response to any question in this Part VI ☒

Section A. Governing Body and Management			Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year . . . . .	1a	12		
	b	Enter the number of voting members included in line 1a, above, who are independent . . . . .	1b		
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		No	
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? . . . . .	3		No	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .	4		No	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	5		No	
6	Did the organization have members or stockholders? . . . . .	6		No	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .	7a		No	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .	7b		No	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following . . . . .				
a	The governing body? . . . . .	8a	Yes		
b	Each committee with authority to act on behalf of the governing body? . . . . .	8b	Yes		
9	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 . . . . .	9		No	
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)					
10a	Did the organization have local chapters, branches, or affiliates? . . . . .	10a		No	
	b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	11a	Yes		
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	12a	Yes		
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	12b	Yes		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .	12c	Yes		
13	Did the organization have a written whistleblower policy? . . . . .	13	Yes		
14	Did the organization have a written document retention and destruction policy? . . . . .	14	Yes		
15	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? . . . . .				
a	The organization's CEO, Executive Director, or top management official . . . . .	15a	Yes		
b	Other officers or key employees of the organization . . . . .	15b	Yes		
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions) . . . . .				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	16a		No	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	16b			

Section C. Disclosure	
17	List the States with which a copy of this Form 990 is required to be filed <input checked="" type="checkbox"/> _____
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization <input checked="" type="checkbox"/> KRISTI HALL-JIRAN 211 SOUTH 4TH STREET GRAND FORKS, ND 58201 (701) 746-0405

Part VII

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 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 neither the organization nor any related organizations compensated any current or former officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TOM ERICKSON DIRECTOR	1.00	X		X				0	0	0
(2) RANDY BOETTNER DIRECTOR	1.00	X						0	0	0
(3) DR. LINDA NEUERBURG DIRECTOR	1.00	X						0	0	0
(4) JOHN PACKETT DIRECTOR	1.00	X						0	0	0
(5) JIM SONDREAL DIRECTOR	1.00	X						0	0	0
(6) MARCIA KELLEY DIRECTOR	1.00	X						0	0	0
(7) MARK SANFORD DIRECTOR	1.00	X						0	0	0
(8) DARLA ADAMS DIRECTOR	1.00	X						0	0	0
(9) ROBIN RUNGE DIRECTOR	1.00	X						0	0	0
(10) SANDY DITTUS DIRECTOR	1.00	X						0	0	0
(11) HEATHER STRANDELL PRESIDENT	1.00	X		X				0	0	0
(12) MARLENE MILLER PRESIDENT-ELECT	1.00	X		X				0	0	0
(13) EDIE DAHLEN DIRECTOR OF PLANNING & FIN	40.00			X				62,463	0	5,325
(14) KRISTI HALL-JIRAN EXECUTIVE DIRECTOR	40.00			X				79,372	0	2,732



## Part VII

<b>1b</b>	<b>Sub-Total . . . . .</b>	<b>▼</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A . . . . .</b>	<b>▼</b>			
<b>d</b>	<b>Total (add lines 1b and 1c) . . . . .</b>	<b>▼</b>	141,835	0	8,057

**2** Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 0

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

## **Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Part VIII

Statement of Revenue

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a	76,420				
	b	Membership dues . . . . .	1b					
	c	Fundraising events . . . . .	1c	13,863				
	d	Related organizations . . . .	1d					
	e	Government grants (contributions)	1e	1,485,241				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	241,403				
	g	Noncash contributions included in lines 1a-1f \$ 60,667						
	h	Total. Add lines 1a-1f . . . . .						1,816,927
Program Service Revenue			Business Code					
	2a	GRANTS FROM COUNTY & C	624100	165,000	165,000			
	b	PROGRAM FEES	624100	23,655	23,655			
	c	BATTERERS TREATMENT	624100	10,000	10,000			
	d	VISITATION PROGRAM FEE	624100	8,138	8,138			
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f . . . . .			206,793			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . .			8,278		8,278	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties . . . . .						
	6a	(i) Real		(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss) . . . . .						
	7a	(i) Securities		(ii) Other				
				100				
				259				
				-159				
	d	Net gain or (loss) . . . . .				-159		-159
	8a	Gross income from fundraising events (not including \$ 13,863 of contributions reported on line 1c) See Part IV, line 18 . . . . .				254,410		254,410
	a			293,184				
	b	Less direct expenses . . . . .		38,774				
	c	Net income or (loss) from fundraising events . .						
9a	Gross income from gaming activities See Part IV, line 19 . . . . .							
a								
b	Less direct expenses . . . . .							
c	Net income or (loss) from gaming activities . .							
10a	Gross sales of inventory, less returns and allowances . . . . .							
a								
b	Less cost of goods sold . . . . .							
c	Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue			Business Code					
11a	OTHER INCOME		900099	34,261	34,261			
b								
c								
d	All other revenue . . . . .							
e	Total. Add lines 11a-11d . . . . .			34,261				
12	Total revenue. See Instructions . . . . .			2,320,510	241,054	0	262,529	

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)  
Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	183,531	183,531		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	153,236		79,614	73,622
6	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	1,330,603	1,094,932	167,883	67,788
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	22,716	18,693	2,866	1,157
9	Other employee benefits	79,290	65,247	10,004	4,039
10	Payroll taxes	107,376	79,219	17,978	10,179
11	Fees for services (non-employees)				
a	Management				
b	Legal	2,944	2,944		
c	Accounting	8,645	8,645		
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	12,537	12,537		
13	Office expenses	60,231	60,231		
14	Information technology				
15	Royalties				
16	Occupancy	43,880	43,880		
17	Travel	38,370	38,370		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,767	1,767		
20	Interest	1,275	1,275		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	71,358	71,358		
23	Insurance	31,466	31,466		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O )				
a	CONTRACTS & SERVICES	122,390	122,390		
b	REPAIRS AND MAINTENANCE	17,783	17,783		
c	BANK & OTHER FEES	7,027	7,027		
d	CLIENT ASSISTANCE	5,620	5,620		
e					
f	All other expenses	11,230	11,230		
25	Total functional expenses. Add lines 1 through 24f	2,313,275	1,878,145	278,345	156,785
26	Joint costs. Check here if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

						(A)		(B)
						Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .				807	1	618
	2	Savings and temporary cash investments . . . . .				38,584	2	55,321
	3	Pledges and grants receivable, net . . . . .				709,594	3	566,419
	4	Accounts receivable, net . . . . .				180	4	183
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .					5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .					6	
	7	Notes and loans receivable, net . . . . .					7	
	8	Inventories for sale or use . . . . .					8	
	9	Prepaid expenses and deferred charges . . . . .				13,362	9	20,690
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D . . . . .	10a	1,804,961				
	b	Less: accumulated depreciation . . . . .	10b	710,098	1,125,530	10c	1,094,863	
	11	Investments—publicly traded securities . . . . .					11	
	12	Investments—other securities. See Part IV, line 11 . . . . .				290,717	12	356,392
	13	Investments—program-related. See Part IV, line 11 . . . . .					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) . . . . .				2,178,774	16	2,094,486
Liabilities	17	Accounts payable and accrued expenses . . . . .				54,949	17	34,904
	18	Grants payable . . . . .					18	
	19	Deferred revenue . . . . .					19	
	20	Tax-exempt bond liabilities . . . . .					20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .					21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .					22	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .					23	
	24	Unsecured notes and loans payable to unrelated third parties . . . . .					24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .				160,568	25	99,982
	26	Total liabilities. Add lines 17 through 25 . . . . .				215,517	26	134,886
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.							
	27	Unrestricted net assets . . . . .				1,261,988	27	1,258,252
	28	Temporarily restricted net assets . . . . .				450,115	28	383,194
	29	Permanently restricted net assets . . . . .				251,154	29	318,154
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.							
	30	Capital stock or trust principal, or current funds . . . . .					30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .					31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .					32	
	33	Total net assets or fund balances . . . . .				1,963,257	33	1,959,600
	34	Total liabilities and net assets/fund balances . . . . .				2,178,774	34	2,094,486

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,320,510
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,313,275
3	Revenue less expenses Subtract line 2 from line 1	3	7,235
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,963,257
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-10,892
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,959,600

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 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	Yes	
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 separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	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?	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A  
(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization COMMUNITY VIOLENCE INTERVENTION CENTER	Employer identification number  45-0359167
--	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety Se**section 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

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

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Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

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Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	1,252,579	1,122,555	1,355,759	1,840,656	1,816,927	7,388,476
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,252,579	1,122,555	1,355,759	1,840,656	1,816,927	7,388,476
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						184,501
6 Public Support. Subtract line 5 from line 4						7,203,975

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	1,252,579	1,122,555	1,355,759	1,840,656	1,816,927	7,388,476
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	24,289	12,961	7,673	7,438	8,119	60,480
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						7,448,956
12 Gross receipts from related activities, etc (See instructions )					12	830,497
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	96 710 %
15	Public Support Percentage for 2010 Schedule A, Part II, line 14	15	96 330 %
16a	33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b	33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 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 circumstances" test The organization qualifies as a publicly supported organization		
b	10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 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 circumstances" test The organization qualifies as a publicly supported organization		
18	Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		

Part IIIPart III

Support Schedule for Organizations Described in IRC 509(a)(2)  
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 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 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b>						

Section C. Computation of Public Support Percentage			
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15		
16 Public support percentage from 2010 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17		
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2011. 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 <b>stop here</b> . The organization qualifies as a publicly supported organization			
b 33 1/3% support tests—2010. 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 <b>stop here</b> . The organization qualifies as a publicly supported organization			
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions			



**Part IV** **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

Additional Data

Software ID:  
Software Version:  
EIN: 45-0359167  
Name: COMMUNITY VIOLENCE INTERVENTION CENTER

Form 990, Special Condition Description:

Special Condition Description
-------------------------------

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services					
(Code	) (Expenses \$	136,791	including grants of \$	) (Revenue \$	53,647 )
NEW CHOICES PROGRAM THE NEW CHOICES PROGRAM PREVENTS VIOLENCE WITHIN FAMILIES, ADDRESSING THE ROOT CAUSES OF VIOLENCE THROUGH THE TREATMENT OF OFFENDERS TO NOT ONLY PROTECT VICTIMS BUT TO PREVENT CHILDREN FROM LEARNING VIOLENT BEHAVIORS AND THUS STOP THE INTERGENERATIONAL CYCLE OF VIOLENCE THIS PROGRAM IS THE ONLY ONE IN THE AREA THAT MEETS THE NORTH DAKOTA STATE STANDARDS FOR OFFENDER TREATMENT RECENT DATA ON OUR OFFENDER TREATMENT PROGRAM SUGGESTS VERY POSITIVE RESULTS A 2011 STUDY CONDUCTED BY CVIC USING LAW ENFORCEMENT, COURT AND CVIC'S NEW CHOICES PROGRAM DATA AND TRACKING 130 OFFENDERS COMPLETING THE PROGRAM BETWEEN 2004 AND 2009 REVEALED THAT THESE MEN SHOWED A DRASTIC DROP IN SYSTEM INVOLVEMENT DURING THE TWO YEARS FOLLOWING TREATMENT (THROUGH 2011) 75% DECREASE IN LAW ENFORCEMENT INVOLVEMENT NEEDED AT THOSE HOMES, FROM 314 CALLS INVOLVING 112 OFFENDERS TO 78 CALLS INVOLVING 45 OFFENDERS 91% DROP IN PROTECTION ORDERS, FROM 35 ORDERS PLACED UPON 29 OFFENDERS TO 3 ORDERS PLACED ON 3 OFFENDERS 86% DECREASE IN CRIMINAL DOMESTIC VIOLENCE CHARGES, FROM 220 CHARGES ON 109 OFFENDERS TO 30 CHARGES ON 16 OFFENDERS SERVICES AND GOALS INCLUDE 1 EDUCATION AND TREATMENT GROUPS GOAL 1 - INCREASE GROUP PARTICIPANTS' KNOWLEDGE OF THE DYNAMICS OF DOMESTIC VIOLENCE AND THEIR INDIVIDUAL ABUSE OF POWER AND CONTROL WE PROVIDE FOUR, ONGOING 27-SESSION GROUPS FOR MEN WHO HAVE ABUSED THEIR PARTNERS, USING A NATIONALLY ACCLAIMED CURRICULUM THAT CHALLENGES BATTERERS' BELIEF SYSTEMS REGARDING VIOLENCE AND TEACHES SKILLS THAT FACILITATE CHANGE IN THEIR BEHAVIOR TOPICS INCLUDE THE EFFECTS OF DOMESTIC VIOLENCE ON CHILDREN, EMOTIONAL ABUSE, PHYSICAL ABUSE, SEXUAL ABUSE, INTIMIDATION, ECONOMIC ABUSE AND RELATED SUBJECTS WITH EACH TOPIC, WE OFFER A NONVIOLENT OR NON-CONTROLLING METHOD FOR PARTICIPANTS TO PRACTICE AND APPLY, SUCH AS POSITIVE SELF-TALK, COMPROMISE AND EFFECTIVE USE OF TIME-OUTS IN 2011, WE SERVED 153 MEN, WITH 102 PARTICIPATING IN GROUP TREATMENT MANY MEN ARE ORDERED OR REQUIRED TO PARTICIPATE BY THE COURTS AND SOCIAL SERVICES OF 30 MEN COMPLETING GROUP DURING THE YEAR, 93% DEMONSTRATED INCREASED KNOWLEDGE OF DOMESTIC VIOLENCE AND AWARENESS OF THEIR INDIVIDUAL ABUSE OF POWER AND CONTROL MEN WHO RECEIVED OUR SERVICES COMMENTED AS FOLLOWS "EVEN THOUGH I WAS FORCED TO TAKE THIS COURSE I AM GLAD I STUCK IT OUT I ALWAYS BLAMED THE ALCOHOL BUT NOW I KNOW THAT I ALSO USED A LOT OF POWER AND CONTROL IN THE PAST I ALWAYS THOUGHT THAT THE CHILDREN NEVER HEARD OR SAW IT AS THEY WERE IN BED NOW I KNOW THEY HEARD EVERY ARGUMENT AND ME HITTING THEIR MOTHER THE ARGUING IS LESS NOW AND USING THE 'TIME OUTS' HAVE HELPED A LOT " "I'M CLOSER TO MY KIDS FROM THIS CLASS AND LEARNED NOT TO JUMP TO CONCLUSIONS, TO TALK CALM " NEW CHOICES "HAS TOTALLY CHANGED MY OUTLOOK ON VIOLENCE, RELATIONSHIPS AND MYSELF "IN 2009, WE ALSO BEGAN A GROUP FOR WOMEN WHO HAVE BEEN VIOLENT WITHIN THEIR INTIMATE RELATIONSHIPS, IN 2011, WE SERVED 22 WOMEN, WITH 11 PARTICIPATING IN GROUP TREATMENT 2 COLLABORATION GOAL 2 - HOLD PARTICIPANTS ACCOUNTABLE WE COLLABORATE REGULARLY WITH THE CRIMINAL JUSTICE SYSTEM REGARDING OFFENDERS COURT-ORDERED INTO TREATMENT TO ENSURE THERE IS A SYSTEM IN PLACE TO HOLD THEM ACCOUNTABLE WE NOTIFY THE COUNTY PROSECUTOR OF OFFENDERS WHO DO NOT MAKE CONTACT WITH OUR PROGRAM TO BEGIN GROUP OR WHO VIOLATE CONDITIONS OF THEIR TREATMENT CONTRACT WHILE ENROLLED IN OUR PROGRAM FURTHER, WE HAVE STRUCTURED OUR GROUPS TO BEST ACCOMMODATE THE COURT SYSTEM, ROTATING TREATMENT TOPICS EVERY TWO TO THREE WEEKS, OFFENDERS MAY ENTER GROUP AT THE BEGINNING OF ANY TOPIC AND THUS DO NOT HAVE TO WAIT WEEKS OR MONTHS BEFORE ENTERING THE PROGRAM IN 2011, OF THE 57 MEN THAT VIOLATED THEIR CONTRACT WITH NEW CHOICES, 47 WERE SUSPENDED OR HAD ADDITIONAL GROUP SESSIONS ADDED TO THEIR CONTRACT AND 14 WERE TERMINATED AND REFERRED BACK TO COURT FOR VIOLATIONS IN ADDITION, 17 WERE REFERRED BACK TO COURT FOR NOT FOLLOWING THROUGH ON THE RECOMMENDATION THAT THEY WERE APPROPRIATE FOR GROUP A TOTAL OF 18 INDIVIDUALS RESTARTED GROUP BASED ON AN ORDER FROM THE COURT 3 VICTIM SERVICES GOAL 3 - INCREASE SAFETY AND AWARENESS OF SERVICES FOR INTIMATE PARTNERS OF GROUP PARTICIPANTS FOR THOSE BEGINNING GROUP, CONTACT IS MADE WITH PARTICIPANTS' PARTNERS TO EXPLAIN THE GROUP PROCESS, INFORM THEM OF SERVICES AND CONDUCT SAFETY PLANNING PARTNERS ARE NOTIFIED AT ANY TIME WE BELIEVE THEY MAY BE IN DANGER BASED ON PARTICIPANTS' COMMENTS IN TREATMENT IN 2011, 100% OR 134 VICTIMS FOR WHOM WE HAD CONTACT INFORMATION WERE OFFERED SERVICES AND MADE AWARE OF SAFETY CONCERNS WHEN NEEDED, 78 RECEIVED ONGOING SERVICES FROM CVIC'S LIGHT OF HOPE PROGRAM					
(Code	) (Expenses \$	143,017	including grants of \$	100 ) (Revenue \$	34,850 )
KIDS FIRST PROGRAM KIDS FIRST PROVIDES SUPERVISED CHILD VISITATIONS AND EXCHANGES TO ENSURE THE SAFETY OF AT-RISK CHILDREN AND PARENTS, PROMOTE POSITIVE PARENT-CHILD RELATIONSHIPS, AND HELP FAMILIES THROUGH DIFFICULT OR TRANSITIONAL PERIODS, SUCH AS ABUSE OR NEGLECT, DOMESTIC VIOLENCE, PARENTAL CONFLICT IN REGARD TO SEPARATION OR DIVORCE, AND OTHER SITUATIONS WE OFFER A SAFE AND NURTURING ENVIRONMENT THAT FEATURES STATE-OF-THE-ART SECURITY, INCLUDING A WALK-THROUGH METAL DETECTOR, ELECTRONIC MONITORING SYSTEMS AND ALARM BUTTONS THAT ARE LINKED TO LAW ENFORCEMENT, IN ORDER TO ENSURE THE SAFETY OF THOSE WE SERVE WE COLLABORATE CLOSELY WITH THE COURTS AND SOCIAL SERVICES TO ENSURE THE SAFETY OF CHILDREN AND FAMILIES IN 2011, WE SERVED 143 CHILDREN AND 221 ADULTS (103 FAMILIES), PROVIDING 712 SUPERVISED PARENTING TIME SESSIONS AND 299 SUPERVISED EXCHANGES OF CHILDREN OF 123 PEOPLE SURVEYED, 88% WERE SATISFIED WITH SERVICES (IT IS IMPORTANT TO NOTE THAT MANY ARE MANDATED TO RECEIVE SERVICES) INDIVIDUALS RECEIVING OUR SERVICES HAVE TOLD US "IT'S A SAFE WELCOMING ENVIRONMENT MY KIDS LOVE COMING HERE AND THE ROOMS ARE BRIGHT COLORS THEN JUST MAKE YOU FEEL CONTENT THE KIDS LOVE THE TOYS THE MOST!" "I APPRECIATE THE SERVICES PROVIDED BY THE STAFF AND AM GRATEFUL FOR NOT HAVING TO BE LEFT WITH ALTERNATIVE SITUATIONS " "THANK YOU FOR HAVING YOUR PROGRAM, IT HELPS US TO STAY TOGETHER AS A FAMILY "SERVICES AND GOALS INCLUDE 1 SUPERVISED PARENTING TIME GOAL 1 - ENHANCE THE SAFETY OF CHILDREN AT RISK OF ABUSE OR NEGLECT DURING PARENTING TIME SESSIONS SUPERVISED PARENTING TIME ENSURES THE SAFETY OF CHILDREN AND PROMOTES HEALTHY PARENT-CHILD INTERACTIONS WE PROVIDE SEPARATE ROOMS FURNISHED WITH COMFORTABLE FURNITURE, BOOKS, TOYS AND GAMES THAT PROMOTE LEARNING AND HELP PARENTS TO SPEND QUALITY TIME WITH THEIR CHILDREN VISITS ARE SUPERVISED BY PROFESSIONAL STAFF THAT OBSERVES THE VISIT EITHER IN THE SAME ROOM OR IN THE NEXT ROOM VIA AUDIOVISUAL EQUIPMENT, DEPENDING ON THE LEVEL OF SUPERVISION REQUESTED OR ORDERED BY THE COURT OR CHILD PROTECTIVE SERVICES OUR STAFF MONITORS INTERACTIONS, ANSWERS QUESTIONS, PROVIDES FEEDBACK AND PROMOTES POSITIVE PARENTING SKILLS IN 2011, PARENTS WERE PROVIDED PARENTING FEEDBACK AND INFORMATION IN 95% OF THE VISITS 2 SUPERVISED EXCHANGES GOAL 1 - PROVIDE FOR SMOOTH AND SAFE TRANSFERS OF CHILDREN BETWEEN PARENTS OR CARETAKERS SUPERVISED EXCHANGES PROVIDE PARENTS THAT NO LONGER LIVE TOGETHER A SAFE PLACE TO EXCHANGE THEIR CHILDREN FOR VISITATION, PREVENTING HARASSMENT OR ABUSE AND ENSURING THAT CHILDREN ARE NOT EXPOSED TO PARENTAL CONFLICTS DURING THE EXCHANGE SCHEDULES ARE COORDINATED SO THAT THERE IS NO CONTACT BETWEEN PARENTS WHEN DROPPING OFF OR PICKING UP CHILDREN					

SCHEDULE C  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Political Campaign and Lobbying Activities

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.

OMB No 1545-0047

2011

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

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

Name of the organization COMMUNITY VIOLENCE INTERVENTION CENTER	Employer identification number 45-0359167
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A

Check

☐

if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		1,907													
c Total lobbying expenditures (add lines 1a and 1b)		1,907													
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)		1,907													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		381													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		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	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		
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														
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														
g Grassroots nontaxable amount (enter 25% of line 1f)		95													
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -0-		1,526													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount	21	642	65	381	1,109
b Lobbying ceiling amount (150% of line 2a, column(e))					1,664
c Total lobbying expenditures	103	3,208	325	1,907	5,543
d Grassroots non-taxable amount	5	161	16	95	277
e Grassroots ceiling amount (150% of line 2d, column (e))					416
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	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?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a	Current year		
b	Carryover from last year		
c	Total		
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 lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b  
► Attach to Form 990. ► See separate instructions.

Name of the organization  
COMMUNITY VIOLENCE INTERVENTION CENTER

Employer identification number  
45-0359167

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds 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	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" 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 importantly land area  
☐ Protection of natural habitat☐ Preservation of a certified historic structure  
☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► \_\_\_\_\_

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  
► \$ \_\_\_\_\_

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research 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 assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$ \_\_\_\_\_

b

Assets included in Form 990, Part X

► \$ \_\_\_\_\_

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

1b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

2b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance . . . . .	255,366	236,014	194,118	280,408	
1b Contributions . . . . .	67,000	612	2,189	1,000	
1c Investment earnings or losses . . . . .	3,874	25,268	46,059	-73,968	
1d Grants or scholarships . . . . .					
1e Other expenditures for facilities and programs . . . . .	5,711	6,493	6,317	13,287	
1f Administrative expenses . . . . .	35	35	35	35	
1g End of year balance . . . . .	320,494	255,366	236,014	194,118	

2

Provide the estimated percentage of the year end balance held as

2a

Board designated or quasi-endowment ▶ 100 000 %

2b

Permanent endowment ▶

2c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations . . . . .

(ii)

related organizations . . . . .

3a(i)

Yes

No

3a(ii)

No

3b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .				
1b Buildings . . . . .		1,178,709	336,811	841,898
1c Leasehold improvements . . . . .		306,809	135,230	171,579
1d Equipment . . . . .		319,443	238,057	81,386
1e Other . . . . .				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶				1,094,863





Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,320,510
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,313,275
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	7,235
4	Net unrealized gains (losses) on investments	4	-3,692
5	Donated services and use of facilities	5	-7,200
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-10,892
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-3,657

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements . . . . .	1	2,366,016
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	-3,692
b	Donated services and use of facilities . . . . .	2b	10,265
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	6,573
3	Subtract line 2e from line 1 . . . . .	3	2,359,443
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIV) . . . . .	4b	-38,933
c	Add lines 4a and 4b . . . . .	4c	-38,933
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5	2,320,510

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements . . . . .	1	2,369,673
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities . . . . .	2a	17,465
b	Prior year adjustments . . . . .	2b	
c	Other losses . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	38,933
e	Add lines 2a through 2d . . . . .	2e	56,398
3	Subtract line 2e from line 1 . . . . .	3	2,313,275
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	2,313,275

Part XIVSupplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	EARNINGS FROM ENDOWMENT FUNDS ARE USED FOR OPERATIONAL EXPENSES. COMMUNITY VIOLENCE INTERVENTION CENTER'S ENDOWMENT CONSISTS OF A FUND ESTABLISHED TO SUPPORT VICTIM SERVICES. ITS ENDOWMENT IS MADE UP OF DONOR-RESTRICTED FUNDS AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES. NET ASSETS ASSOCIATED WITH THE ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS. THE BOARD OF DIRECTORS OF COMMUNITY VIOLENCE INTERVENTION CENTER HAS INTERPRETED THE NORTH DAKOTA STATE PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT (SPMIFA) AS REQUIRING THE PRESERVATION OF THE FAIR VALUE OF THE ORIGINAL GIFT AS OF THE GIFT DATE OF THE DONOR-RESTRICTED ENDOWMENT FUNDS ABSENT EXPLICIT DONOR STIPULATIONS TO THE CONTRARY. AS A RESULT OF THIS INTERPRETATION, COMMUNITY VIOLENCE INTERVENTION CENTER CLASSIFIES AS PERMANENTLY RESTRICTED NET ASSETS (A) THE ORIGINAL VALUE OF GIFTS DONATED TO THE PERMANENT ENDOWMENT, (B) THE ORIGINAL VALUE OF SUBSEQUENT GIFTS TO THE PERMANENT ENDOWMENT, AND (C) ACCUMULATIONS TO THE PERMANENT ENDOWMENT MADE IN ACCORDANCE WITH THE DIRECTION OF THE APPLICABLE DONOR GIFT INSTRUMENT AT THE TIME THE ACCUMULATION IS ADDED TO THE FUND. THE REMAINING PORTION OF THE DONOR-RESTRICTED ENDOWMENT FUND THAT IS NOT CLASSIFIED IN PERMANENTLY RESTRICTED NET ASSETS IS CLASSIFIED AS TEMPORARILY RESTRICTED NET ASSETS UNTIL THOSE AMOUNTS ARE APPROPRIATED FOR EXPENDITURE BY THE ORGANIZATION IN A MANNER CONSISTENT WITH THE STANDARD OF PRUDENCE PRESCRIBED BY SPMIFA. IN ACCORDANCE WITH SPMIFA, THE ORGANIZATION CONSIDERS THE FOLLOWING FACTORS IN MAKING A DETERMINATION TO APPROPRIATE OR ACCUMULATE DONOR-RESTRICTED ENDOWMENT FUNDS: 1. THE DURATION AND PRESERVATION OF THE ENDOWMENT FUND; 2. THE PURPOSES OF THE DONOR-RESTRICTED ENDOWMENT FUND; 3. GENERAL ECONOMIC CONDITIONS; 4. THE POSSIBLE EFFECT OF INFLATION OR DEFLATION; 5. THE EXPECTED TOTAL RETURN FROM INCOME AND THE APPRECIATION OF INVESTMENTS; 6. OTHER RESOURCES OF THE ORGANIZATION; 7. THE INVESTMENT POLICIES OF THE ORGANIZATION. ON AN ANNUAL BASIS, THE BOARD SHALL DETERMINE THE PERCENT OF INVESTMENT EARNINGS THAT WILL BE PAID TO THE COMMUNITY VIOLENCE INTERVENTION CENTER FOR SUPPORT OF OPERATIONS. IN DETERMINING THE PAYOUT AMOUNT, THE BOARD WILL TARGET AN AMOUNT EQUAL TO 5 PERCENT OF A PREVIOUS 3 YEARS ANNUAL MOVING AVERAGE OF THE FUND'S MARKET VALUE. THE BOARD IS ENCOURAGED EACH YEAR TO RESTRICT THE PAYOUT TO ONE HALF OF THE TARGETED AMOUNT WHICH WOULD LEAD TO MORE AVAILABLE SPENDING IN THE LONG RUN - AS CORPUS WILL GROW LARGER AND PRODUCE MORE REVENUE IN FUTURE YEARS. ALL EARNINGS FROM DONOR RESTRICTED FUNDS ARE CLASSIFIED AS TEMPORARILY RESTRICTED UNTIL THEY ARE SPENT. FUNDS WITH DEFICIENCIES FROM TIME TO TIME, THE FAIR VALUE OF ASSETS ASSOCIATED WITH INDIVIDUAL DONOR-RESTRICTED ENDOWMENT FUNDS MAY FALL BELOW THE LEVEL THE DONOR OR SPMIFA REQUIRES THE ORGANIZATION TO RETAIN AS A FUND OF PERPETUAL DURATION. IN ACCORDANCE WITH GAAP, DEFICIENCIES OF THIS NATURE WILL BE REPORTED IN UNRESTRICTED NET ASSETS. RETURN OBJECTIVES AND RISK PARAMETERS. COMMUNITY VIOLENCE INTERVENTION CENTER HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY ITS ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS. ENDOWMENT ASSETS INCLUDE THOSE ASSETS OF DONOR-RESTRICTED FUNDS THAT THE ORGANIZATION MUST HOLD IN PERPETUITY. UNDER THIS POLICY, AS APPROVED BY THE BOARD OF DIRECTORS, THE ENDOWMENT ASSETS ARE INVESTED IN A MANNER THAT IS INTENDED TO PRODUCE RESULTS THAT ALLOW FOR DISTRIBUTIONS OF DIVIDENDS AND INTEREST INCOME WHILE MAINTAINING THE PURCHASING POWER OF THE INVESTMENT PORTFOLIO. ACTUAL RETURNS IN ANY GIVEN YEAR MAY VARY FROM THIS AMOUNT. STRATEGIES EMPLOYED FOR ACHIEVING OBJECTIVES TO SATISFY ITS LONG-TERM RATE-OF-RETURN OBJECTIVES, THE COMMUNITY VIOLENCE INTERVENTION CENTER RELIES ON A TOTAL RETURN STRATEGY IN WHICH INVESTMENT RETURNS ARE ACHIEVED THROUGH BOTH CAPITAL APPRECIATION (REALIZED AND UNREALIZED) AND CURRENT YIELD (INTEREST AND DIVIDENDS). ALLOCATION OF THE FUND IN EQUITIES WILL FALL BETWEEN 20 AND 40 PERCENT, WITH THE BALANCE IN FIXED INCOME ASSETS AND MONEY MARKET ACCOUNTS, ENABLING SUFFICIENT LIQUIDITY.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE COMPANY'S POLICY IS TO EVALUATE THE LIKELIHOOD THAT ITS UNCERTAIN TAX POSITIONS WILL PREVAIL UPON EXAMINATION BASED ON THE EXTENT TO WHICH THOSE POSITIONS HAVE SUBSTANTIAL SUPPORT WITHIN THE INTERNAL REVENUE CODE AND REGULATIONS, REVENUE RULINGS, COURT DECISIONS, AND OTHER EVIDENCE. IT IS THE OPINION OF MANAGEMENT THAT THE CENTER HAS NO SIGNIFICANT UNCERTAIN TAX POSITIONS THAT WOULD BE SUBJECT TO CHANGE UPON EXAMINATION. THE FEDERAL INCOME TAX RETURNS OF THE ORGANIZATION ARE SUBJECT TO EXAMINATION BY THE IRS, GENERALLY FOR THREE YEARS AFTER THEY WERE FILED.
PART XII, LINE 4B - OTHER ADJUSTMENTS		SPECIAL EVENTS DIRECT EXPENSES -38,774. LOSS ON DISPOSAL OF ASSETS -159.
PART XIII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENTS DIRECT EXPENSE 38,774. LOSS ON DISPOSAL OF ASSETS 159.

OMB No 1545-0047

**Open to Public Inspection**

45-0359167

Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		<u>RISE &amp; SHINE FOR PEACE</u> (event type)	<u>RYDELL CAR SHOW</u> (event type)	<u>14</u> (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts . . . .	189,023	44,573	73,451
	2	Less Charitable contributions . . . .	1,118	173	12,572
	3	Gross income (line 1 minus line 2) . . . .	187,905	44,400	60,879
Direct Expenses	4	Cash prizes . . . .			
	5	Non-cash prizes . . . .			
	6	Rent/facility costs . . . .	581		581
	7	Food and beverages . . . .	5,881	3,000	8,881
	8	Entertainment . . . .			
	9	Other direct expenses . . . .	9,734	173	19,405
	10	Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶			
	11	Net income summary Combine lines 3 and 10 in column (d) . . . . . ▶			

Part III Gaming.

Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue . . . . .			
	2	Cash prizes . . . . .			
Direct Expenses	3	Non-cash prizes . . . . .			
	4	Rent/facility costs . . . . .			
	5	Other direct expenses . . . . .			
	6	Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No
	7	Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶			

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No

b If "Yes," Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No
- 12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

If "Yes," enter name and address

Name

Address

16

Gaming manager information

Name

Gaming manager compensation \$

Description of services provided

☐ Director/officer

☐ Employee

☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV

Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
COMMUNITY VIOLENCE INTERVENTION CENTER

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

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Employer identification number  
45-0359167

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . . ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

**Part III**

**Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					

**Part IV**

**Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE BOARD RECEIVES MONTHLY REPORTS OF ALL GRANTS APPLIED FOR, RECEIVED, AND DENIED THEY ALSO FORMALLY MONITOR ONE RANDOM GRANT PER YEAR ADDITIONALLY, GRANT OUTCOMES AND EXPENDITURES ARE REPORTED TO GRANTORS IN PROGRESS AND FINANCIAL REPORTS
		AN ESTIMATED 80% OF ABUSE & RAPE CLIENTS SERVED IN 2011 RECEIVED HOUSEHOLD & PERSONAL CARE ITEMS

**Software ID:**  
**Software Version:**  
**EIN:** 45-0359167  
**Name:** COMMUNITY VIOLENCE INTERVENTION CENTER

**Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States**

<b>(a)</b> Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> Amount of cash grant	<b>(d)</b> Amount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	<b>(f)</b> Description of non-cash assistance
TRANSPORTATION GAS CARDS, VEHICLE REPAIRS, BUS PASSES, TRAIN & BUS TICKETS	98	11,073			
FOOD & CLOTHING GROCERY & GIFT CARDS	24	3,240			
RENT & UTILITY ASSISTANCE	45	110,490			
FURNITURE & FURNISHINGS	5	13,927			
OTHER ASSISTANCE CHILD CARE	2	550			
EMERGENCY ASSISTANCE PERSONAL EXPENSES & LODGING	3	1,322			
OTHER ASSISTANCE CHRISTMAS GIFTS	3	663			
OTHER ASSISTANCE CHANGE LOCKS, PRESCRIPTIONS, COPIES OF ID CARDS & BIRTH CERTIFICATES, PARENTING CLASSES, EMERGENCY DENTAL CARE, AUTO INSURANCE	23	1,129			
OTHER ASSISTANCE MOVING & STORAGE EXPENSES	8	1,069			
OTHER ASSISTANCE FOOD	107	6,150	1,842	DONOR REPORTED	SNACKS
HOUSEHOLD ITEMS & CLOTHING	1186		25,603	DONOR REPORTED	HOUSEHOLD ITEMS & CLOTHING
PERSONAL CARE ITEMS	1186		6,473	DONOR REPORTED	PERSONAL CARE ITEMS

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
COMMUNITY VIOLENCE INTERVENTION CENTER

Employer identification number  
45-0359167

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .	X		24,974	DONOR REPORTED
6 Cars and other vehicles . . . . .	X	1	629	BLUE BOOK VALUE
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .				
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .	X	3	1,842	DONOR REPORTED
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( PERSONAL CARE ITEMS )	X	26	6,473	DONOR REPORTED
26 Other ► ( TICKETS TO ENTERTAINMENT EVENTS )	X	1	1,424	DONOR REPORTED
27 Other ► ( COMPUTER SERVER )	X	1	1,500	DONOR REPORTED
28 Other ► ( MISCELLANEOUS )	X	70	13,863	DONOR REPORTED
Other ► ( OFFICE SUPPLIES )	X	5	1,087	DONOR REPORTED
Other ► ( PRINTING )	X	1	4,280	DONOR REPORTED
Other ► ( DENTAL WORK )	X	1	3,000	DONOR REPORTED
Other ► ( DISHWASHER )	X	1	399	DONOR REPORTED
Other ► ( MOVING & STORAGE )	X	2	1,196	DONOR REPORTED
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .			29	
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .				Yes No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?				Yes
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .				No
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				



**Part III**

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE O  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
COMMUNITY VIOLENCE INTERVENTION CENTER

Employer identification number  
45-0359167

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	A DRAFT OF THE 990 IS REVIEWED AND DISCUSSED BY THE FINANCE COMMITTEE. A COPY IS PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL.
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION REQUESTS CONFLICTS OF INTEREST BE REPORTED AS THEY ARISE. EACH BOARD MEMBER ALSO SIGNS THE CONFLICT OF INTEREST POLICY ANNUALLY. A DISCUSSION ON CONFLICT OF INTEREST AND WHAT THAT ENTAILS IS ALSO INCLUDED AS PART OF THE BOARD ORIENTATION PROCESS.
	FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION FOR THE DIRECTOR IS DETERMINED BY THE BOARD OF DIRECTORS BASED ON YEARS OF SERVICE AND A STEP SCALE. RAISES ARE INCLUDED IN THE BUDGET EACH YEAR AND THE BOARD APPROVES THE BUDGET. RAISES ARE IMPLEMENTED IF FUNDS ALLOW. SUPERVISORS APPROVE PAY INCREASES BIANNUALLY. DESIGNATED BOARD MEMBER(S) CONDUCT A SALARY SURVEY TO COMPARE SALARIES AND BENEFITS PAID BY CVIC TO THOSE REFLECTED IN THE GRAND FORKS CITY WAGE SURVEY, AND TO SALARIES AND BENEFITS PAID BY OTHER SIMILAR AGENCIES AROUND THE STATE.
	FORM 990, PART VI, SECTION C, LINE 18	COPIES OF FORM 1023 AND 990 ARE AVAILABLE TO WALK-INS AND ARE MAILED OUT UPON REQUEST.
	FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST.
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -3,692. DONATED SERVICES AND USE OF FACILITIES - 7,200. TOTAL TO FORM 990, PART XI, LINE 5 -10,892.
AUDIT COMMITTEE OVERSIGHT ROLE	FORM 990, PART XII, LINE 2C	THERE HAS BEEN NO CHANGE IN THE ROLE OF THE AUDIT COMMITTEE IN OVERSIGHT OF THE AUDIT PROCESS FROM THE PRIOR YEAR.
SERVICES PROVIDED BY VOLUNTEERS	FORM 990, PART I, LINE 6	IN 2011, 145 LOCAL VOLUNTEERS PROVIDED 5,190 HOURS OF SERVICE TO CVIC IN A VARIETY OF AREAS. SERVING AS A TABLE CAPTAIN FOR CVIC'S MAJOR ANNUAL FUNDRAISER, THE RISE AND SHINE FOR PEACE BREAKFAST, OR SPONSORING OTHER EVENTS ON CVIC'S BEHALF. INVITING OTHERS TO A BREAK THE SILENCE TOUR, A ONE-HOUR PRESENTATION ON SERVICES, WITH A TOUR OF CVIC'S OFFICES AND PROGRAMS. PROVIDING CRISIS INTERVENTION FOR VICTIMS OF ABUSE IN THE OFFICE OR BY PAGER, RESPONDING TO OUR 24-HOUR CRISIS LINE. ASSISTING IN MONITORING SUPERVISED VISITATIONS AND EXCHANGES TO ENSURE CHILDREN'S SAFETY. HELPING WITH SPECIAL PROJECTS SUCH AS PREPARING LARGE MAILINGS, ORGANIZING OUR DONATION ROOM, DOING HANDY WORK, AND RUNNING ERRANDS.