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### **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

A For the 2011 calendar year, or tax year beginning , 2011, and ending , 20											
ī	В	Check if	heck if applicable C Name of organization Character Training Institute, Inc.  D Employer identification number								
[	_,	Address	• •	Doing Business As Character First	73-1572941						
i	_	Name ch	•	Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telephon	· · · · · · · · · · · · · · · · · · ·				
í	_	Initial ret	•	13800 Benson Road 206		·	405-815-0001				
ľ	_	Terminat				100 010 0001					
ľ	_			City or town, state or country, and ZIP + 4 Edmond, OK 73013-6422		G Grass ro	ocupto ¢ 1	,285,476			
ı I	_	Amende				G Gross re					
i	′	Applicati	on pending				for affiliates? 🔲 Yes				
							cluded? Yes				
!	7 Tax exempt states						list (see instruction	115)			
:						exemption					
	K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation 1999						of legal domicile	OK			
	Pa	art I	Summ	<u> </u>		- · · · · · · · · · · · · · · · · · · ·	<del></del>				
	1	1	•	escribe the organization's mission or most significant activities: The mission				ute is to			
			promote	true success in businesses, schools, families, and communities by encouraging	good c	haracter.					
	2										
	Ĕ										
	Activities & Governance	2	Check th	his box $lacktriangle$ $lacktriangle$ if the organization discontinued its operations or disposed of mo	ore than	25% of i	its net assets.				
	Ö	3	Number	of voting members of the governing body (Part VI, line 1a)		3		4			
	S	4	Number	of independent voting members of the governing body (Part VI, line 1b)		4		4			
	iţi	5		mber of individuals employed in calendar year 2011 (Part V, line 2a)		5		13			
	cţì	6		mber of volunteers (estimate if necessary)		6		-0-			
	ď	7a		related business revenue from Part VIII, column (C), line-12		7a		-0-			
		b		lated business taxable income from Form 990-T, Re-34 FIVED		7b		-0-			
	_		TTOT GIND		Prior Ye		Current Y	ear			
		8	Contribu			186,405		128,224			
	Revenue	9		tions and grants (Part VIII, line 1h)		,042,183		1,128,953			
	Vel	10		ent income (Part VIII, column (A), lines 3, 4, and 7d)		22		12			
	æ	11	Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  UT		10,405		28,288			
		12	Total rev	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,239,016		1,285,476			
				and similar amounts paid (Part IX, column (A), lines 1–3)		-0-	<u> </u>	-0-			
		13				-0-		-0-			
SCANNED		14		paid to or for members (Part IX, column (A), line 4)		696,667		670,039			
Š	Expenses	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)		-0-		-0-			
3	eü	16a		onal fundraising fees (Part IX, column (A), line 11e)			·				
Ħ	χ̈	_ b		ndraising expenses (Part IX, column (D), line 25)	`	740.070		670.024			
$\supset$		17		spenses (Part IX, column (A), lines 11a–11d, 11f–24e)		740,978		672,031			
۲.		18		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		1,437,645		1,342,070			
2		19	Revenue	e less expenses. Subtract line 18 from line 12		-198,629	5-4-47	-56,594			
<u>₩</u> :^	Sor			<u> </u>	ning of Ci	urrent Year	End of Ye				
œ	set	20		sets (Part X, line 16)		412.563		335,347			
	ξĒ	21		oilities (Part X, line 26)		176,986		156,363			
2012	žē	22		ets or fund balances. Subtract line 21 from line 20		235,578		178,984			
2		art II	<del></del>	ture Block							
	Un	der pena	alties of pen	s, and to	the best of r	my knowledge and	d belief, it is				
	tru	e, correc	t, and comp	plete. Declaration of preparer lether than officerous based on all information of which preparer has	any know	reage	<i>t</i>				
				Mound AVAU		5/15	2012				
	Sig	gn	Sig	nature of officer	Di	ate '					
	He	re	$ \mathbf{k}  =$	THOMAS A. HILL CHAIRMAN OF THE	<u> 300</u>	<u>P)                                    </u>					
			Тур	e or print name and title							
	Pa	id	Print/T	ype preparer's name Preparer's signature Date		Check	☐ if PTIN				
			S.F.			self-em					
		epare	1	name ▶	Fire	m's EIN ▶					
	US	se On	יי עי	address ▶		one no					
	Ma	y the I		ss this return with the preparer shown above? (see instructions)			<u> </u> Ye	s 🗌 No			
	_			uction Act Notice, see the separate instructions. Cat No 11	282Y		Form	990 (2011)			

Part	
1	Check if Schedule O contains a response to any question in this Part III
•	The mission of the Character Training Institute is to promote true success in businesses, schools, families, and communities by
	encouraging good character.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	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?
4	If "Yes," describe these changes on Schedule O.  Describe the argenization's program continue accomplishments for each of its three largest program continue as measured by
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 \$154,614 including grants of \$) (Revenue \$149,407 )
	During 2011, about 60 Conferences, Events, ant Training Seminars were held with about 3000 people attending.
41-	(Code: ) (Expenses \$ 15.900 including grants of \$ ) (Revenue \$ 0.00 )
4b	(Code: ) (Expenses \$ 15,900 including grants of \$ ) (Revenue \$ 0.00 )  During 2011, CTI held the Summer Institute for 2 representatives (Juniors & Seniors) from each of the 22 Oklahoma Teacher
	Education colleges or universities. This program assists future teachers of Oklahoma to understand and develop the need for
	character training. Training sessions were held to provide Character First tools and resources to attendees for future use as
	character adjustors
	Character Educators.
4c	(Code: ) (Expenses \$ 822,953 including grants of \$ ) (Revenue \$ 979,546 )
	During 2011, CTI distributed character training books, literature, and materials with a retail value over 1,100,000.
	Other program services (Describe in Schedule O.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ 2.650 including grants of \$ ) (Revenue \$ 0 )
4d 4e	or the first term of the firs

Part I	V Checklist of Required Schedules							
			Yes	No				
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	ļ		ı				
	complete Schedule A	1	✓					
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓					
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to							
	candidates for public office? If "Yes," complete Schedule C, Part I	3		✓				
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)							
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		✓				
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? If "Yes," complete Schedule C,		ı	,				
	Part III	5		<b>∀</b>				
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? If							
	"Yes," complete Schedule D, Part I	6		✓				
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,							
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓				
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"							
	complete Schedule D, Part III	8		✓				
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? If "Yes,"			ĺ				
	complete Schedule D, Part IV	9		✓				
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted							
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓				
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.							
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"							
_	complete Schedule D, Part VI	11a		1				
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? If "Yes," complete Schedule D, Part VII	11b		1				
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more							
•	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1				
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? If "Yes," complete Schedule D, Part IX	11d		✓				
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1				
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)? If "Yes," complete Schedule D, Part X	11f		✓				
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete							
	Schedule D, Parts XI, XII, and XIII	12a	ļ	✓				
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if							
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		✓				
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		1				
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1				
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? If "Yes," complete Schedule F, Parts I and IV	14b		✓				
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		1					
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1				
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance							
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1				
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? If "Yes," complete Schedule G, Part I (see instructions)	17		1				
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on							
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	-	<b>/</b>				
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		1	T				
-	If "Yes," complete Schedule G, Part III	19		1				
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	20a		1				
b		20b						
		Fo	m 99	0 (2011				

Part l	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<b>✓</b>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<b>✓</b>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		<b>√</b>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? <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>	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I	25b		<b>/</b>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26	_	1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		<b>√</b>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		✓
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	1	

Part	V Statements Regarding Other IRS Filings and Tax Compliance			Page 5
	Check if Schedule O contains a response to any question in this Part V			
	•		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   18			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	<b>✓</b> _	
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 13			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		·	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			,
	account)?	4a		<b>✓</b>
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.			J
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>✓</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>-</b>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	<u></u>		,
<b>h</b>	organization solicit any contributions that were not tax deductible?	6a		<b>-</b>
þ		6b	[	Ì
7	gifts were not tax deductible?	0.0	-	-
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	<u> </u>	1
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			t
•	required to file Form 8282?	7c		1
ď	If "Yes," indicate the number of Forms 8282 filed during the year	<u> </u>		<u> </u>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
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	<b></b>	1
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	<u> </u>	<b>/</b>
9	Sponsoring organizations maintaining donor advised funds.		ł	
а	Did the organization make any taxable distributions under section 4966?	9a	<u> </u>	✓
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	✓
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	1		
Ь	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	- تـ را		
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	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	l	1	I _

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves on hand . . . . . . . . . . . . . . . .

the organization is licensed to issue qualified health plans

Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which

Did the organization receive any payments for indoor tanning services during the tax year? . . . . .

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

13a

14a

14b

13b 13c

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response to any question in this Part VI	ee ins	tructi	ons.
Section	on 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent .    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	- · -	
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	•	<b>✓</b>
4 5 6	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  Did the organization become aware during the year of a significant diversion of the organization's assets?.  Did the organization have members or stockholders?	4 5 6		<b>√</b> ✓
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		<b>✓</b>
b 8	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓
	the year by the following:	8a		<b>✓</b>
a b	The governing body?	8b		<b>√</b>
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		<b>✓</b>
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
40-	Did the averagination have level shorters branches as offiliates?	100	Yes	No ✓
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		<b>V</b>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b		<b>✓</b>
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		_
13 14 15	Did the organization have a written whistleblower policy?	13		<b>√</b>
a b	The organization's CEO, Executive Director, or top management official	15a 15b		<b>✓</b>
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		· /
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	_	
	ion C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed    Oklahoma  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Sectio available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3):	s only)
19	Own website Another's website Upon request  Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	of inte	rest ¡	oolicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ► Stephen Ketola, 13800 Benson Road, Suite 206, Edmond, OK 73013 405-815-0001 ext.321	of th	е	

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

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

1a Complete this table for all persons required to be listed. 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. 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if heither the organization nor	any related	a orga	anız	atio	n c	ompe	nsa	ited any curren	t onicer, airecto	r, or trustee.
				((	<b>&gt;</b> )					
(A)	(B)	(B) Position		(D)	(E)	(F)				
Name and Title	Average	(ao not cneck			do not check more than one ox, unless person is both an				Reportable	Estimated
	hours per	DOX, divided person is sellinging		Reportable compensation	compensation from	amount of				
	week	_	_			r —	<u> </u>	from	related	other
	(describe hours for	호호	I St	Officer	ę	클	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e dr	盲	멱	풀	oyer c	<b>Ē</b>	(W-2/1099-MISC)		organization
	organizations	우플	na l		Key employee	l <sup>™</sup> ä		1		and related
	in Schedule O)	Individual trustee or director	Institutional trustee		ď	l e				organizations
	0,	6	tee	'		Highest compensated employee				
/41 T = 1170								-		
(1) Tom Hill		,	]	,			ļ	1		
Chairman of the Board	12	✓		✓		ļ.—	⊢	-0-	-0-	-0-
(2) Kay Hill		١.							_	_
Director	2	<b>✓</b>				<u> </u>		-0-	-0-	-0-
(3) Thomas Hill III										
Director	0	✓					<u> </u>	-0-	-0-	-0-
(4) Larry Rhoads		:								
Driector	_ 2	✓_				<u> </u>		\$10,368	-0-	\$2,829
(5)										
(6)										
(7)										
(8)						ļ ——				
		<del>                                     </del>	⊬	-	⊬	├─	<del> </del>			
(9)										
(10)										
(11)										
(12)										
(13)	<u> </u>			-	<del> </del>	<del>                                     </del>	$\vdash$	-		
	ļ <u>.</u>	ļ <u> </u>		<b> </b>	<del> </del> —	↓	<del> </del>	ļ		
(14)	1									}

	(A) Name and title	(B) Average hours per week	box,	unles	s pe l a d	Ition more	than o	an ee)	(D)  Reportable compensation from	(E)  Reportable compensation fro	om	(F) Estimate amount other	of
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	5)	compensa from th organizat and relat organizati	ation le tion ted
(15)								_					
(16)													
(17)													
18)												-	
(19)													·
												· · ·	
								_			-		
											-		
						_					_		
(25)						-					-	<u> </u>	<u> </u>
	Sub-total							<b>▶</b>	\$10,368		-0-		\$2,829
<u>d</u>	Total (add lines 1b and 1c)	t not limited	to th					<b>▶</b> ∋) w	\$10,368 ho received m	<u> </u>	-0- ,000 o	f	\$2,829
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc	tor, o					emp	oloyee, or high	nest compens	ated	3 Ye	es No
4	For any individual listed on line 1a, is the organization and related organizations undividual	greater th	an \$	150,	,000	)? <i>I</i> 	f "Ye	s,"	complete Sch	nedule J for	such	4	1
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or indiv	idual	5	1
Section	on B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Repyear.												s tax
	(A) Name and business add	dress							(B) Description of s	services	Co	(C) empensation	on
	<del>-</del>												
								$\vdash$					
								1					

Part	VIII	Statement of Revenue					
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1a	Federated campaigns 1a					
E Z	ь	Membership dues 1b					
ا ق ق	С	Fundraising events 1c					
ii ii	d	Related organizations 1d					
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contributions) 1e					
Si Si	f	All other contributions, gifts, grants,					
F E		and similar amounts not included above 1f	128,224				
필리	g	Noncash contributions included in lines 1a-1f: \$					
2 E	h	Total. Add lines 1a-1f	•	128,224			
		Total / Ida iii ioo Ida II	Business Code	,		-	
ᇣ	2a	Conference Fees	611430	2,344	2,344	-	
é	b	Sales of Character Materials	451211	979,546	979,546		
8	C	Consulting and Training	611430	147,063	147,063		
Ž	d	Consulting and Training	011430	147,003	147,003		<del></del>
Š	_			-··			
<u>ra</u>	e	All other program service revenue .					
Program Service Revenue			•	1,128,953			
	<u>g</u> 3	<b>Total.</b> Add lines 2a–2f		1,120,953	Т	1	
	٦		<b>&gt;</b>	12	12		
		•	ļ	12	. 12		· · · · · · · · · · · · · · · · · · ·
	4	Income from investment of tax-exempt bo	·	26,788	26,788		
	5	Royalties	(ii) Personal	20,788	20,700	<del></del>	
			(ii) r ersonar	i			
	6a	Gross rents					
	b	Less: rental expenses					ı
	C	Rental income or (loss)					
	d	Net rental income or (loss)  Gross amount from sales of (i) Securities	<b>&gt;</b>				
	7a		(II) Other				· I
	ь	assets other than inventory Less: cost or other basis					
	c	and sales expenses .  Gain or (loss)					1
	ď	Net gain or (loss)	•				eta a atau amanda de
Ð							
nue	8a	Gross income from fundraising					ŧ
Other Rever		events (not including \$					
ά		of contributions reported on line 1c).					
Ē		See Part IV, line 18 a				!	
ŏ		Less: direct expenses <b>b</b> [		n — —			
		Net income or (loss) from fundraising	events . 🕨				
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b				•	
	C	Net income or (loss) from gaming activ	vities ▶				
	10a	Gross sales of inventory, less					
		returns and allowances a					
		Less: cost of goods sold b					
	С	Net income or (loss) from sales of inve					
		Miscellaneous Revenue	Business Code				
	11a	Selling of vehicle	900099	1,500	1,500		
	b						
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d		1,500			
	12	Total revenue. See instructions	•	1,285,476	1,157,252		1

#### 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 respons				
	t include amounts reported on lines 6b, 7b, , 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				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
<b>4</b> <b>5</b>	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	13,197	10,558	2,639	
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 8	Other salaries and wages	561,370	449,096	112,274	
9	Other employee benefits	52,152	41,722	10,430	
10	Payroll taxes	43,319	34,655	8,664	
11	Fees for services (non-employees):				
а	Management	145,500		145,500	
b	Legal L	320		320	
C	Accounting	11,475		11,475	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				<del></del>
g	Other				
12	Advertising and promotion	11,931	11,931		
13	Office expenses	68,965	55,172	13,793	
14	Information technology	22,206	17,765	4,441	
15	Royalties				
16	Occupancy	64,950	51,960	12,990	
17	Travel	43,359	43,359		<del></del>
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	13,231	13,231		
20	Interest [				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance	8,023		8,023	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) and the list line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	70.000	70 600		
a	Commissions & Independent Contracting	78,690	78,690		
b	Postage and Shipping	66,362	66,362 100,586		
C	Publications and Product Development	100,586 15,900	15,900	<del></del>	
d	Summer Institute	20,533	5,130	15,403	·
e 25	All other expenses Miscellaneous  Total functional expenses. Add lines 1 through 24e	1,342,070	996,117	345,953	
25 26	Joint costs. Complete this line only if the	1,342,070	330,117	343,853	
<b>∠</b> 0	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   ☐ if following SOP 98-2 (ASC 958-720)				

Pa	art X	Balance Sneet			
			(A) Beginning of year		(B) End of year
I	1	Cash – non-interest-bearing	16,615	1	6,928
	2	Savings and temporary cash investments	115,934	2	121,946
ļ	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	77,688	4	125,948
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
Assets	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
se	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use	202,326	8	80,525
- 1	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	ь	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	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)	412,563		335,347
	17	Accounts payable and accrued expenses	176,986		156,363
	18	Grants payable	170,000	18	.00,000
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
G	22	Payables to current and former officers, directors, trustees, key			
Liabilities	22	employees, highest compensated employees, and disqualified persons.  Complete Part II of Schedule L	<u> </u>	22	
ia		·		23	
_	23	Secured mortgages and notes payable to unrelated third parties			
	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		25	
	26	Total liabilities. Add lines 17 through 25	176,986	26	156,363
ses		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
ā	27	Unrestricted net assets	235,578	27	178,984
Bal	28	Temporarily restricted net assets	0	28	
ᅙ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.			
Š	30	Capital stock or trust principal, or current funds		30	<del></del>
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
<u>e</u> t	33	Total net assets or fund balances	235,578		178,984
ž	34	Total liabilities and net assets/fund balances	412,563	_	335,347

m 990 (2011)	Page <b>12</b>

Part	XI Reconciliation of Net Assets				<del></del>
	Check if Schedule O contains a response to any question in this Part XI				
		1			
1	Total revenue (must equal Part VIII, column (A), line 12)				5,476
2	Total expenses (must equal Part IX, column (A), line 25)				2,070
3	Revenue less expenses. Subtract line 2 from line 1	<u> </u>		-59	9,594
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4			23	5,578
5	Other changes in net assets or fund balances (explain in Schedule O)				
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	}			
	column (B))			178	8,984
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:  Cash Accrual Other		ļ		į
	If the organization changed its method of accounting from a prior year or checked "Other," explain	ווח	1		į
	Schedule O.				<u> </u>
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. L:	2a		✓
b	Were the organization's financial statements audited by an independent accountant?	. [3	2b		✓
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversi	~			
	of the audit, review, or compilation of its financial statements and selection of an independent accountar	it? ;	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain	n in		,	
	Schedule O.				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year w	ere			į
	issued on a separate basis, consolidated basis, or both:	1			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				į
За	As a result of a federal award, was the organization required to undergo an audit or audits as set fort	n in 🗀			
	the Single Audit Act and OMB Circular A-133?		3a 📗		✓
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 audit	s [	3b		
			Form	990	(2011)

#### SCHEDULE A

(Form 990 or 990-EZ)

#### **Public Charity Status and Public Support**

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization 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.

Employer identification number

Chara	cter Training Instit	ute, Inc.							73-157	2941	
Parl	Reason for	or Public Char	rity Status (All orgai	nızatıons	must co	omplete	this par	t.) See ir	nstructio	ns.	
The o	rganization is not	a private founda	tion because it is: (Fo	r lines 1 tl	hrough 1	1, check	only one	box.)			
1	A church, conv	ention of church	nes, or association of	churches	describe	d in <b>sec</b> t	ion 170(	b)(1)(A)(i)			-
2	A school desci	ribed in <b>section</b>	170(b)(1)(A)(ii). (Attac	h Schedu	ıle E.)						
3	☐ A hospital or a	cooperative hos	spital service organiza	tion desc	ribed in s	ection 1	70(b)(1)(	A)(iii).			
	A medical rese		n operated in conjunc						)(b)(1)(A)(i	iii). Enter	the
5		n operated for t	the benefit of a collect plete Part II.)	ge or univ	versity ov	vned or o	perated	by a go	vernmenta	al unit de	scribed in
	☐ An organizatio	n that normally	nment or governmenta receives a substantia <b>(A)(vi).</b> (Complete Par	I part of I					at or from	the gene	eral public
8	☐ A community t	rust described in	n section 170(b)(1)(A)	(vi). (Con	nplete Pa	rt II.)					
	An organization receipts from support from	n that normally activities related gross investme	receives: (1) more that to its exempt functint income and unrel	an 33¹/₃% ions—sub ated bus	of its su oject to c siness tax	pport fro ertain ex able inc	ceptions ome (les	s, and (2) ss section	no more	than 331	/3% of its
10	☐ An organizatio	n organized and	operated exclusively	to test fo	r public s	afety. Se	e sectio	n 509(a)(	4).		
11	purposes of o	ne or more pub	nd operated exclusive dicly supported organ describes the type of	nizations (	described	l in secti	on 509(a	ı)(1) or se	ection 509	9(a)(2). Se	
	a ☐ Type I	ь 🗆	- ·	☐ Type						Type III-	-Other
е	☐ By checking the	nis box, I certify ndation manage	that the organization ers and other than one	is not cor	ntrolled d	irectly or	indirecti		or more of	disqualifie	d persons
f			a written determination	on from t	the IRS t	hat it is	а Туре	I, Type	ll, or Typ	e III supp	oorting
	•	check this box .									· · 🗆
g	Since August following pers		he organization accep	pted any	gift or co	ontributio	n from a	iny of the	)		
	(i) A person (iii) below.	who directly or i	ndirectly controls, eitlody of the supported o	her alone organizati	or togetl	her with	persons 	describe	d in (ii) an	nd [11g(i)]	Yes No
	* *	•	on described in (ı) abo	-						11g(ii)	
			a person described in							11g(iii)	<del></del>
h			on about the support							ויייאפייין	
	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	(iv) Is the o	organization sted in your document?	the orgai	ou notify nization in of your port?	organiza	Is the tion in col ized in the S?		nount of oport
			(see instructions))	Yes	No	Yes	No	Yes	No		
(A)											
(B)							:				
(C)											
(D)	· · · · · · · · · · · · · · · · · · ·										
(E)											
	<del></del>						1		<u> </u>		

Page 2

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to que 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  (a) 2011 (a) 2011 (a) 2011 (b) 2008 (c) 2009 (d) 2010 (e) 2011  (b) 2008 (c) 2009 (d) 2010 (e) 2011  (c) 2011 (e) 2011  (e) 2011 (e) 2011  (e	ify under
Section A. Public Support  Calendar year (or fiscal year beginning in)    1	
Calendar year (or fiscal year beginning in)   1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.").  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.  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).  6 Public support Subtract line 5 from line 4.  8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  9 Net income from unrelated business activities, whether or not the business is regularly carried on .  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  11 Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions).  12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 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)).  15 Salva's support test—2011, if the organization did not check the box on line 13, and line 14 is 33'a% or more, c box and stop here. The organization qualifies as a publicly supported organization.  5 33'a% support test—2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33'a% check this box and stop here. The organization qualifies as a publicly supported organization.	
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 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. 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). 6 Public support. Subtract line 5 from line 4. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on. 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) . 12   13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 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   15 Dublic support percentage form 2010 Schedule A, Part II, line 14 . 15   15 Sa31/3% support test—2011, if the organization did not check the box on line 13, and line 14 is 331/3% or more, c box and stop here. The organization qualifies as a publicly supported organization . 5 331/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 331/3% check this box and stop here. The organization qualifies as a publicly supported organization.	
membership fees received. (Do not include any "unusual grants.")  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  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) .  6 Public support. Subtract line 5 from line 4.  Section B. Total Support  Calendar year (or fiscal year beginning in) ►  7 Amounts from line 4 .  Section B. Total Support  Calendar year (or fiscal year beginning in) ►  7 Amounts from line 4 .  Section B. Total Support  Calendar year (or fiscal dividends, payments received on securities loans, rents, royalties and income from similar sources	(f) Total
niclude any "unusual grants.")  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	
2 Tax revenues levied for the organization's benefit and ether paid to or expended on its behalf	
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.  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).  6 Public support. Subtract line 5 from line 4.  8 Section B. Total Support  Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011  7 Amounts from line 4.  8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  9 Net income from unrelated business activities, whether or not the business is regularly carried on  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc. (see instructions)  13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section organization, check this box and stop here  Section C. Computation of Public Support Percentage  14 Public support percentage from 2010 Schedule A, Part II, line 14  15 Public support percentage from 2010 Schedule A, Part II, line 14  16 331/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 331/3% or more, c box and stop here. The organization did not check to box on line 13 on 16a, and line 15 is 331/3% check this box and stop here. The organization qualifies as a publicly supported organization	
to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge	
The value of services or facilities furnished by a governmental unit to the organization without charge	
furnished by a governmental unit to the organization without charge	<del></del>
organization without charge	
4 Total. Add lines 1 through 3	
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)	<del></del>
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).  6 Public support. Subtract line 5 from line 4.  Section B. Total Support  Calendar year (or fiscal year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011  7 Amounts from line 4.  8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  9 Net income from unrelated business activities, whether or not the business is regularly carried on  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	
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Section B. Total Support  Calendar year (or fiscal year beginning in)   Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Cher income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc. (see instructions)  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section organization, check this box and stop here  Section C. Computation of Public Support Percentage  Public support percentage from 2010 Schedule A, Part II, line 14  Sa31/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 331/3% or more, c box and stop here. The organization dualifies as a publicly supported organization  Check this box and stop here. The organization dualifies as a publicly supported organization.	
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9 Net income from unrelated business activities, whether or not the business is regularly carried on  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc. (see instructions)	
activities, whether or not the business is regularly carried on	
is regularly carried on	
loss from the sale of capital assets (Explain in Part IV.)	
(Explain in Part IV.)	
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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))	
Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	▶ 🗆
<ul> <li>Public support percentage from 2010 Schedule A, Part II, line 14</li></ul>	%
<ul> <li>33¹/3% support test – 2011. If the organization did not check the box on line 13, and line 14 is 33¹/3% or more, c box and stop here. The organization qualifies as a publicly supported organization</li> <li>33¹/3% support test – 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33¹/3% check this box and stop here. The organization qualifies as a publicly supported organization</li> </ul>	<del></del>
box and stop here. The organization qualifies as a publicly supported organization	
b 331/3% support test—2010. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% check this box and stop here. The organization qualifies as a publicly supported organization	. ▶ □
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 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.	ne 14 IS Volain in
Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly s	ipported
organization	. <b>&gt;</b>
and the second s	
15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and st	p here.
Explain in Part IV how the organization meets the "facts-and-circumstances" test, the organization qualifies as	publicly
supported organization	` <b>`</b> -
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and	

#### Part III Support Schedule for Organizations Described in Section 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	on A. Public Support						
Calen	dar 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.")	635,516	136,774	170,438	186,405	128,224	1,257,357
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	1,958,371	1,622,857	1,346,001	1,270,036	1,358,594	7,555,859
3	Gross receipts from activities that are not an			-			
	unrelated trade or business under section 513	-0-	-0-	-0-	-0-	-0-	-0-
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf	-0-	-0-	-0-	-0-	-0-	-0-
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge	-0-	-0-	-0-	-0-	-0-	-0-
6	Total. Add lines 1 through 5	2,593,886	1,759,632	1,516,438	1,456,441	1,486,818	8,813,216
_	Amounts included on lines 1, 2, and 3	2,333,000	1,733,032	1,510,430	1,430,441	1,400,010	0,013,210
	received from disqualified persons .	630,124	127,508	137,442	175,523	153,895	1,224,492
b	Amounts included on lines 2 and 3		<del></del>		•		·
_	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	144,781	179,913	161,667	178,390	270,026	934,777
-	Add lines 7a and 7b	774,905	307,421	299,109	353,913	423,921	2,159,269
8	Public support (Subtract line 7c from						
Casti	line 6.)					ļ	6,653,947
	on B. Total Support dar year (or fiscal year beginning in) ▶	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	2,593,886	1,759,632	1,516,438	1,456,441	1,486,818	8,813,215
10a	Gross income from interest, dividends,	2,000,000	1,100,002	1,010,100	2,100,111	1,100,510	3,0 13,2 15
	payments received on securities loans, rents,						
	royalties and income from similar sources .	5,834	13,091	7,068	8,928	26,800	61,721
b							
	section 511 taxes) from businesses						
	acquired after June 30, 1975	-0-	-0-	-0-	-0-	-0-	-0-
	Add lines 10a and 10b	5,834	13,091	7,068	8,928	26,800	61,721
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on	-0-	-0-	-0-	-0-	-0-	-0-
12	Other income. Do not include gain or	-0-	-0-	-0-	-0-	-0-1	
12	loss from the sale of capital assets						
	(Explain in Part IV.)	258	-0-	-0-	1,500	1,500	3,258
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	2,599,979	1,772,723				8,878,194
14	First five years. If the Form 990 is for the	-					. –
	organization, check this box and stop he			· · · · ·	· · · · ·	• • • • •	▶ 🗆
	on C. Computation of Public Support Public support percentage for 2011 (line			13 column (fl)		15	75 %
15 16	Public support percentage for 2011 (iiile of Public support percentage from 2010 Sci						77 %
	on D. Computation of Investment In						77 70
17	Investment income percentage for 2011 (			y line 13, colu	mn (f))	17	0 %
18	Investment income percentage from 2010						0 %
19a	331/3% support tests-2011. If the organ	ization did not	check the bo	x on line 14, a	nd line 15 is n	nore than 331/39	
	17 is not more than 331/3%, check this box		=				
b	331/3% support tests—2010. If the organiz						
	line 18 is not more than 331/3%, check this		_				_
_20	Private foundation. If the organization d	id not check a	box on line 14	, 19a, or 19b,	cneck this box	and see instru	ctions 🕨 🔲

Part II, line 1/a or 1/b; and Part III, line 12. Also instructions).	complete this part for any additional information. (See
Part III, line 12	·
Character First sold one of their vehicles for \$1,500.	
	······

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10;

#### **SCHEDULE O** (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

73-1572941

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Character Training Institute, Inc.

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

► Attach to Form 990 or 990-EZ.

Employer identification number

The character coach program in local schools was discontinued and the focus shifted to working more with training future teachers.  The Summer Institute was developed to assist teacher candidates understand the need for character and how to effectively use
The Summer Institute was developed to assist teacher candidates understand the need for character and how to effectively use
character training resources in the classroom.
Part III 4d
This amount helps CTI fulfill the purpose of giving to other organizations which have a similar purpose of promoting character.
Part VI Section A 2
Three of the board of directors have a family relationship. Two have a business relationship.
Part VI Section A 8a
The meetings held by the Board of Directors were not documented.
Part VI Section A 8b
CTI does not have committees with authority to act on behalf of the governing body.
Part VI Section B 11
A copy of the Form 990 was sent via email to each of the current members of the Board of Directors before being filed.
Part VI Section C 19
The governing documents and financial statements for CTI are available upon request and may be inspected at our office.