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Department of the Treasury Internal Revenue Service

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 **2011**

Open to Public Inspection

Form **990** (2011)

<u>A_</u>	For the 2011 c	alendar year, or tax year beginning , and ending						
В	Check if applicable	C Name of organization		D Employer iden	tification number			
П	Address change	The Center for Civic Values						
\equiv	-	Doing Business As		85-601	.8573			
ᆜ	Name change	Number and street (or P O box if mail is not delivered to street address) Roo	m/suite	E Telephone num	ber			
\sqcup	Initial return	40 First Plaza Galleria NW 60	o7	505-76	4-9417			
	Terminated	City or town, state or country, and ZIP + 4	·					
☞	Amended return				620,052			
	Amended return	Albuquerque NM 87102 F Name and address of principal officer		G Gross receipts \$	020,032			
\square	Application pending	L	l(a) Is this a gr	oup retum for affiliates?	Yes X No			
		Michelle Giger	1/h) A!! -#	:h-44-40	Yes No			
		10 12100 1222 00110120 100, 000 00.		iliates included?				
		Albuquerque NM 87102	II NO	," attach a list (see in:	structions)			
	Tax-exempt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527						
J	Website - W		(c) Group ex	emption number				
*****	Form of organization	X Corporation Trust Association Other ► L Year of	f formation	M Sta	te of legal domicile			
<u>_</u> F	Part I Su	ımmary						
	1	scribe the organization's mission or most significant activities						
ė	Тор	rovide education and resources for public participatio	n					
auc	int	he law.						
Ë								
Š	2 Check th	s box > if the organization discontinued its operations or disposed of more than 25% of its	s net assets	,				
Ö		of voting members of the governing body (Part VI, line 1a)		3 12				
S	1	of independent voting members of the governing body (Part VI, line 1b)		4 12				
iŧie	l .	nber of individuals employed in calendar year 2011 (Part V, line 2a)		5 3				
Activities & Governance	i	nber of volunteers (estimate if necessary)		6 21	5			
ď	1	elated business revenue from Part VIII, column (C), line 12		7a	0			
	1			7b	0			
	D Net unite	ated business taxable income from Form 990-T, line 34	Prior Yea		Current Year			
	8 Contribut	ions and grants (Part VIII, line 1h)		3,748	549,185			
Revenue		service revenue (Part VIII, line 2g)	2,375	2,050				
Ver	1	nt income (Part VIII, column (A), lines 3, 4, and 7d)	8,557	29,768				
æ				2,111	32,825			
		renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,791	613,828			
_		enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)						
		nd similar amounts paid (Part IX, column (A), lines 1–3)	29	7,000	245,000			
	14 Benefits	oald to or for members (Part IX, column (A), line 4) RECEIVED other compensation, employee benefits (Part IX, column (A), lines 5–10)	47	0 006	0 182,467			
es	15 Salaries,							
cpenses	16a Profession	inal fundraising fees (Part IX, column (A), line, tie)	0	0				
		draising expenses (Part IX, column (D), line 👸 ►MAR 0 4 2021, j959						
Ŵ	17 Other ex	penses (Part IX, column (A), lines 11a–11d 11f–24e)		0,989	155,458			
	18 Total exp	enses Add lines 13–17 (must equal Part IX, column (A) Tine 25) UT		7,925	582,925			
	I is vevenue	less expenses Subtract file to north line 12-		1,134	30,903			
Net Assets or			ginning of Curi		End of Year			
Ssel	20 lotalass	ets (Part X, line 16)		6,376	1,015,773			
¥₹	21 Total liab	lities (Part X, line 26)		8,309	32,579			
		s or fund balances Subtract line 21 from line 20	97	8,067	983,194			
		gnature Block						
U tr	Inder penalties of plue, correct, and co	perviry, Ideels e hat I have examined this return, including accompanying schedules and statements, and implete Declaration of which preparer ather than officer) is based on all information of which preparer has any k	to the best of nowledge	f my knowledge and	d belief, it is			
				۵ - یہ	3-13			
Sig	an 🖊 🧗 🤄	signature of officer		Date				
He		Michelle Giger Presider	nt & C	EO				
		ype or print name and title		-				
	Print/Typ	e preparer's name Preparer's fsign fure	Date	Check X if	PTIN			
Pai	a "	al L. Moore	1	/13 self-employed	P01473163			
Pre	narer	Michael T. Wasser CDB TTG		· · · · · · · · · · · · · · · · · · ·	1 501-10103			
	e Only	PO Box 65722		irm's EIN ▶	· · ·			
	·	31b						
Mar	Firm's ac	s this return with the preparer shown above? (see instructions)	P	hone no	Y Voc No			

For Paperwork Reduction Act Notice, see the separate instructions.

495,634

) (Revenue \$

(Expenses \$

4e Total program service expenses▶

Form	990 (2011) The Center for Civic Values 85-6018573		Р	age 3
	art IV Checklist of Required Schedules	-		
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	ļ		
	complete Schedule A	1	X	
2	is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			٠,,
	candidates for public office? If "Yes," complete Schedule C, Part I	3	ļ	X
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	-	X
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,	_		x
•	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors		ļ	
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		x
7	"Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	-	 	
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u> </u>		
Ü	complete Schedule D, Part III	8		x
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,"			
	complete Schedule D, Part IV	9		x
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		x
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	X	
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	ļ	X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	i		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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 169 If "Yes," complete Schedule D, Part IX	11d	<u> </u>	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	ļ	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			l
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a		Ì	l <u></u>	
	Schedule D, Parts XI, XII, and XIII	12a	X	-
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	-	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1	X
14a	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	14b		x
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	140	 	1
13	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	13	\vdash	<u></u>
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	1	x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	''		T
••	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
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		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes." complete Schedule G. Part III	19		X

20a

20b

 $\textbf{20a} \quad \text{Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H}$

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Part IV	Checklist of Required Schedules	(continued)
L DIT IA	Cliecklist of Required Octionales	(COHEH LUCU)

			Yes	No
1	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	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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		<u> </u>
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		l	
	through 24d and complete Schedule K If "No," go to line 25	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction		ļ	
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
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		<u>X</u>
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		<u> </u>
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		<u> </u>
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)		ŧ	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_ <u>X</u> _
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		<u> </u>
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			77
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	-	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			7.7
	conservation contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			v
	Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			v
	complete Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		x
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	24		x
250	IV, and V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		X
35a		35a		
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	25h		x
36	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		42
,,,	related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 55		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	- <u>"</u>		
. •	19? Note . All Form 990 filers are required to complete Schedule O	38	x	

Pa	st V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			П
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	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 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	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		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			37
L	account)?	4a		X
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?	_		v
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		X
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	50		
-	organization solicit any contributions that were not tax deductible?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ua Ua		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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		
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.		1	
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 b	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	 		
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations.Enter	 	1	
· · a	Gross income from members or shareholders			
þ	Gross income from other sources (Do not net amounts due or paid to other sources	 	1	
-	against amounts due or received from them)		1	
2a	Section 4947(a)(1) non-exempt charitable trusts.ls the organization filing Form 990 in lieu of Form 1041?	12a	ı	:
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120	-	
3	Section 501(c)(29) qualified nonprofit health insurance issuers.		I	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which		1	
	the organization is licensed to issue qualified health plans		1	
С	Enter the amount of reserves on hand		1	
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule X 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 12 1a 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 12 1b 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 X 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b X stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a a The organization's CEO, Executive Director, or top management official X 15b Other officers or key employees of the organization 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 X 16a with a taxable entity during the year? 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 List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year 20 State the name, physical address, and telephone number of the person who possesses the books and records of the 40 First Plaza Galleria NW, Ste 607 organization > The Center for Civic Values 505-764-9417 NM 87102 Albuquerque

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 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 polither the erganization per any related erganizations companyated any current officer director, or trustee

Check this box if neither the orga	nization nor any	relate	ed or	ganı	zatio	ns cor	mpe	ensated any current officer,	director, or trustee	
(A) Name and Title	(B) Average hours per week (describe hours for	(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	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(1) Nicole Werkmeist								-		
Past Chair	1.00	X						0	0	0
(2) David M. Berlin	1 00							0	0	o
Chair	1.00	X		\vdash		1		<u> </u>		<u> </u>
(3) Ina Simmons Director	1.00	x						o	0	0
(4) John P. Hays				—		1 1				
Director	1.00	x						0	0	0
(5) Lynda M. Latta										
Vice Chair	1.00	X						0	0	_0
(6) Thomas F. Kelehe										
Director	1.00	X						0	0	0
(7) Melissa Patterso	n	i								
Director	1.00	X						0	0	0
(8) Thomas R. Brione										
Director	1.00	X						0	0	0
(9) Clay Campbell						1				
Director	1.00	X				Ш		0	0	0
(10) Jane Webster				Ì		1 1				
Director	1.00	X		<u> </u>				0	0	0
(11)Denise Chavez										
Director	1.00	X						0	0	0
(12) Neil Candelaria										
Director	1.00	X		<u> </u>		\vdash		0	0	0
(13) Jack B. Jacks	1 20	-							^	_
Fin Comm Chair	1.00	X	\vdash	\vdash		\vdash		0	0	0
(14)Michelle Giger Pres/CEO	40.00			x				73,132	o	o
			ــــــــــــــــــــــــــــــــــــــ		ــــــ	<u> </u>		,202		

Par	* VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	es, a	nd Highest Compensated	Employeescontinued)			
	(A) Name and title	(B) Average hours per week (describe hours for	bo	x, unl	Pos check ess pe ind a c	(C) osition k more than one person is both an director/trustee)			(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estima amoui othe compen from	ated nt of er sation	
		related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(1.2.130100)	organiz and rel organiz	ation lated	
(15)													
(16)													
(17)	· -			_						-			
(18)			-	 									
(19)	···												
(20)													
(21)							t						
(22)							<u> </u>						
(23)													
(24)													
(25)													
1b	Sub-total				<u>. </u>	1	<u> </u>	>	73,132				
c d	Total from continuation she Total (add lines 1b and 1c)	ets to Part VII,	Sect	ion /	4			>	73,132		 		
2	Total number of individuals (increportable compensation from				iose	liste	d abo	ve)	who received more than \$1	00,000 in		,,,	
3	Did the organization list any fo				uste	e ke	v em	vola	ee, or highest compensated	1		Yes	No
4	employee on line 1a? If "Yes," For any individual listed on line	complete Schedue 1a, is the sum o	ıle J f rep	for s ortat	uch de c	indiv ompe	ridual ensa	ion :	and other compensation froi		3		X
_	organization and related organ individual	_								A. dood	4		х
5	Did any person listed on line 1a for services rendered to the org	ganization? If "Ye								aividuai	5_		X
Sec 1	tion B. Independent Contract Complete this table for your five	e highest compe									 		
	compensation from the organiz	(A) business address	mper	nsati	on to	or the	cale	nda		the organization's tax year (B) tion of services	a	(C) ompensat	bon
									•				
										, , , , , , , , , , , , , , , , , , , ,			
								T					<u>. </u>
2	Total number of independent c		_						listed above) who	0			
DAA	Hore than \$100,000 (or compensation	0111		orya	. 112 a l	avii P			<u> </u>	<u>F</u>	m 990	(2011)

Pa	rt V	II Staten	nent of Reve	nue					·	
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
တ တ	40	Fodorated car	naigne	1a	•••••			TOVENIED		012, 070, 01 017
불림		Federated cam								
윤립		Membership du		1b			1	1		
A,t		Fundraising ev		1c						
을림	d	Related organi	zations	1d			1			
S.E	е	Government grants (contributions)	1e		93,049				
P.S.	f	All other contribution	s, gifts, grants,						1	
풀쁿		and similar amounts	not included above	1f		456,136				
들의	g	Noncash contribution	ns included in lines 1a-1	ıf :	\$					
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add line				•	549,185			
0			<u> </u>			Busn Code	, , , , , , , , , , , , , , , , , , ,			
릶	2a	Moole Tree	ıal Registrat	[Page	Busin code	2,050	2,050	1	
اَقِ		MOCK III	iai Registiat	.1011 1	ees		2,000	2,030	-	- "
ė	b					<u> </u>				
Program Service Revenue	С					 				
လ္မ	d									
a	е									
ō,	f	All other progra	am service reven	ue						
<u>~</u>	g	Total. Add line	s 2a-2f			>	2,050			
	3	Investment inc	ome (including d	ividend	ls, interes	t,				
		and other simil	ar amounts)			▶	29,768			29,768
	4	Income from in	vestment of tax-	exemp	t bond pro	ceeds 🕨				
	5	Royalties		•	•	▶				
			(ı) Real		(n) F	Personal				***************************************
	6a	Gross rents		,067	(,	5.55.1.0.				
				,224						
	b	Less rental exps								
	С	Rental inc or (loss)		,843			20.040		i	20 042
	d 7a	Net rental inco			1	•	30,843			30,843
	, 4	sales of assets	(i) Securities		(n)) Other				
		other than inventory								
	b	Less cost or other							1	
		basis & sales exps								
	С	Gain or (loss)								
	d	Net gain or (los	ss)			• •				
_	8a	_	om fundraising ever	nts						
nue		(not including \$	-							
e K			eported on line 1c)							
Other Revel		See Part IV, line		а					1	
her	.			a b						
퓽		Less direct ex	•	(1	
	C		(loss) from fundr		events					
	9a		om gaming activities	5						
		See Part IV, line		а						
		Less direct ex		b						
	С	Net income or	(loss) from gamı	ng acti	vities	•				
	10a	Gross sales of	inventory, less							
		returns and alle	owances	а						
	b	Less cost of g	oods sold	b						
			(loss) from sales	of inv	entory	•]		
	Ť		cellaneous Revenue	_ , .,,,,		Busn. Code				
	11a	Miscellan	*				1,982	†	j	1,982
	b	ocorran					2,502			1,302
	ر د	۰۰۰۰ مطابع ۸۱۱				-	-			
	d	All other reven					1 000			······································
	e	Total. Add line				P	1,982		_	·
	12	Total revenue	 See instruction 	S			613,828	2,050	0	62,593

Form 990 (2011)

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)

requi	red to complete columns (B), (C), and (D)				
	Check if Schedule O contains a response to				
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
_7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	245,000	245,000		
2	Grants and other assistance to individuals in				
	the U S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	50 100	65 007	7 214	721
	trustees, and key employees	73,132	65,087	7,314	731
6	Compensation not included above, to disqualified	1			
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	CA F00	46 005	10 503	
7	Other salaries and wages	64,598	46,095	18,503	
8	Pension plan accruals and contributions (include	10 217	0 300	1 970	58
_	section 401(k) and 403(b) employer contributions)	10,317 23,438	8,389 18,977	1,870 4,348	113
9	Other employee benefits	10,982	8,744	2,171	67
10	Payroll taxes	10,962	0,744	2,111	- 67
11	Fees for services (non-employees)				
a	Management				
b	Legal	6,774		6,774	
C	Accounting	0,714		0,114	
d	Lobbying Professional fundamental converses See Root IV, line 17				
e	Professional fundraising services See Part IV, line 17				
f ~	Investment management fees Other	8,138	8,138		
9 12	F	0,130	0,130		
12 13	Advertising and promotion Office expenses	4,873	3,534	1,298	41
14	Information technology		3,334	1,230	
15	Royalties				
16	Occupancy	43,156	35,502	7,485	169
17	Travel	.5/25	55/552	.,, 200	
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,986	4,679	298	9
20	Interest		- 7		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,275	1,825	1,450	
23	Insurance	4,173	2,908	1,227	38
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e if	1		•	
	line 24e amount exceeds 10% of line 25, column	1		1	
	(A) amount, list line 24e expenses on Schedule O)	1		1	
а	Mock Trial Competition	23,189	23,189		
ь	Fundraising	19,570			19,570
C	Bank Charges	16,137	15,928	209	
d	Investment fees	7,424		7,424	
е	All other expenses	13,763	7,639	4,961	1,163
25	Total functional expenses Add lines 1 through 24e	582,925	495,634	65,332	21,959
26					
DAA	Tollowing OOT 30-2 (MOO 300-120)		<u></u> <u>J</u>		Form 990 (2011)

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			100	1	100
	2	Savings and temporary cash investments			58,535	2_	111,756
-	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			25,308	4	28,294
	5	Receivables from current and former officers, directors, tr	ustees, key				
		employees, and highest compensated employees Comp	lete Part II of				
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined u	inder section		-		
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	ind contributing				
		employers and sponsoring organizations of section 501(c)(9) voluntary				
छ		employees' beneficiary organizations (see instructions)				6	
Assets	7	Notes and loans receivable, net				7	
۲	8	Inventones for sale or use				8	
-	9	Prepaid expenses and deferred charges		_	3,219	9	2,965
	10a	Land, buildings, and equipment cost or					
		other basis Complete Part VI of Schedule D	10a	394,573			
	b	Less accumulated depreciation	10b	284,306	119,215	10c	110,267
	11	Investments—publicly traded securities			827,871	11_	760,263
	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			2,128	15_	2,128
\perp	16	Total assets. Add lines 1 through 15 (must equal line 34)		1,036,376	16	1,015,773
	17	Accounts payable and accrued expenses			31,082	17	25,884
	18	Grants payable		ļ		18	
	19	Deferred revenue		ļ	27,227	19	6,695
	20	Tax-exempt bond liabilities			20		
1	21	Escrow or custodial account liability Complete Part IV of			21		
Sa	22	Payables to current and former officers, directors, trustee	s, key				
<u> </u>		employees, highest compensated employees, and disqua	alified persons				
Liabilities		Complete Part II of Schedule L				22	
٦	23	Secured mortgages and notes payable to unrelated third	parties			23	
- 1	24	Unsecured notes and loans payable to unrelated third pa	rties]		24	
	25	Other liabilities (including federal income tax, payables to	related third				
ı		parties, and other liabilities not included on lines 17-24)	Complete Part X				
		of Schedule D			FO 200	25	20 550
4	26	Total liabilities. Add lines 17 through 25	-1		58,309	26	32,579
		Organizations that follow SFAS 117, check here	s and complete	•			
Balances		lines 27 through 29, and lines 33 and 34.			000 400		007.006
la l	27	Unrestricted net assets			890,420		807,986
8	28	Temporarily restricted net assets			52,702	28	139,713
5	29	Permanently restricted net assets			34,945	29	35,495
ׅׅׅׅ֡֝֞֞֞֓֓֡֡֝֟֝֓֓֓֡֡֟֝		Organizations that do not follow SFAS 117, check h	ere and				
8		complete lines 30 through 34.					
se	30	Capital stock or trust principal, or current funds				30	
21	31	Paid-in or capital surplus, or land, building, or equipment			···-	31	
	32	Retained earnings, endowment, accumulated income, or	other funds		070 067	32	003 104
	33	Total net assets or fund balances			978,067	33	983,194
	34	Total liabilities and net assets/fund balances			1,036,376	34	1,015,773

Form **990** (2011)

огт	990 (2011) The Center for Civic Values 85-6018573			Pa	ige 12
Pa	rt 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)	111		513,	828
2	Total expenses (must equal Part IX, column (A), line 25)	2			925
3	Revenue less expenses Subtract line 2 from line 1	3			903
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			067
5	Other changes in net assets or fund balances (explain in Schedule O)	5			776
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	9	983,	194
Pa	rt 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 X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				1
	Schedule O				1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u></u>
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				l
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				1
	issued on a separate basis, consolidated basis, or both				1
	Separate basis Consolidated basis Both consolidated and separate basis				1
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?		3a		X
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		36	1	

Form **990** (2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

The Center for Civic Values

Employer identification number 85-6018573

			THE CENTER I	OI CIVIC VALUES)				
P	art I	Reas	on for Public Charity	Status (All organizations r	must cor	nplete t	his par	t) See	instru	ctions	S		
The	orgar	nization is not a	a private foundation because	it is (For lines 1 through 11, che	ck only or	ne box)				·			
1	Ň		•	ciation of churches described in	-		A)(i).						
2	H		cribed in section 170(b)(1)(A			(-)(-)(-	-,(-,-						
3	H			e organization described in secti	on 170(h)	/4 \/ A \/ iii							
_	H							V A VIIIV			stalla nama		
4			- · · · · · · · · · · · · · · · · · · ·	in conjunction with a hospital des	scribea in	section 1	ר)(מ)טיו)(A)(III).	Enter tr	ie nospi	itars name,		
	$\overline{}$	city, and state											
5		An organizati	on operated for the benefit of	f a college or university owned or	operated	by a gove	rnmenta	I unit de	scribed	IU			
		section 170(b)(1)(A)(iv).(Complete Part	II)									
6		A federal, sta	te, or local government or go	vernmental unit described in sec	tion 170(b)(1)(A)(v	/).						
7	X	An organizati	on that normally receives a s	ubstantial part of its support from	a govern	mental un	it or fron	the ger	neral pu	blic			
	ш	-	section 170(b)(1)(A)(vi).(Co					ŭ	•				
8				70(b)(1)(A)(vi).(Complete Part II	١								
9		-				tabutana	mombo	robin fo	oo ood	aross			
9		-	•) more than 33 1/3% of its suppor						_			
		•	•	pt functions—subject to certain e						its			
		• •	•	d unrelated business taxable inco	•		1 tax) fr	om busir	nesses				
	_	acquired by the	ne organization after June 30), 1975 See section 509(a)(2) . (Complete	Part III)							
10		An organizati	on organized and operated e	xclusively to test for public safety	/ See sec	tion 509(a)(4).						
11		An organizati	on organized and operated e	xclusively for the benefit of, to pe	rform the	functions	of, or to	carry ou	t the				
		purposes of o	ne or more publicly supporte	ed organizations described in sec	tion 509(a)(1) or sec	ction 509	(a)(2) S	See sec	tion			
		509(a)(3). Ch	eck the box that describes th	ne type of supporting organization	n and com	plete lines	11e thr	ough 11	h				
		a Type	. —	c Type III–Functiona			d		e IIIOti	ner			
е				anization is not controlled directly	, ,		or more						
·	L	-	•	than one or more publicly suppo					-				
			-	than one of more publicly suppo	nteu organ	iizations t	16361106	. III 3001	1011 000	(4)(1)			
		or section 509			T 1 T.	II T	III		_				
f		_		mination from the IRS that it is a	rype i, ry	pe II, or I	ype III s	upportin	g				
		-	check this box										
g		Since August	17, 2006, has the organizati	on accepted any gift or contributi	on from a	ny of the							
		following per	sons?										
		(i) A persor	who directly or indirectly con	ntrols, either alone or together wi	th persons	describe	d ın (ıı) a	and				Yes	No
		(III) belov	v, the governing body of the	supported organization?							11g(i)		
		(ii) A family	member of a person describe	ed in (i) above?							11g(ii	,T	
			ontrolled entity of a person de	• •							11g(ii		1
h			ollowing information about th	., .,							(3(_
	u) Nam	ne of supported	(II) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did y	ou notify	(41)	s the	(vu) An	nount of	
		ganization	(11) 2.114	(described on lines 1–9	1 ' '	sted in your		ization in	organizat			port	
		-		above or IRC section	, ,,	document?	col (i)			zed in the			
				(see instructions)				ort?		§ ?	1		
					Yes	No	Yes	No	Yes	No			
A)													
		<u> </u>											
B)													
C)													
•						!							
D)													
_					L	<u> </u>							
E)						[
					<u> </u>				ļ				
					1								
Γot	al		1	1	‡	1	l		1		1		

Page 2

Support Schedule for Organizations Described in Sections 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.)

Sec	tion A. Public Support						
Caler	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")	474,058	458,680	667,530	483,748	549,185	2,633,201
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	474,058	458,680	667,530	483,748	549,185	2,633,201
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						2,633,201
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	474,058	458,680	667,530	483,748	549,185	2,633,201
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	156,761	107,358	72,751	72,307	66,835	476,012
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)	5,467	4,062	3,242	4,546	1,982	19,299
11	Total support. Add lines 7 through 10						3,128,512
12	Gross receipts from related activities, etc. (see instructions)				12	2,050
13	First five years. If the Form 990 is for the		second, third, fourth	n, or fifth tax year as	s a section 501(c)(3	3)	
	organization, check this box and stop here	-		·			▶ □
Sec	tion C. Computation of Public Su	pport Percenta	ge				
14	Public support percentage for 2011 (line 6,	column (f) dıvıded b	y line 11, column (i	ስ)		14	84.17%
15	Public support percentage from 2010 Scheen	dule A, Part II, line 1	4			15	83.47%
16a	33 1/3% support test—2011. If the organization qualif				/3% or more, chec	k this	► X
b	33 1/3% support test—2010. If the organic check this box and stop here. The organiz			•	s 33 1/3% or more,		>
17a	10%-facts-and-circumstances test—20° 10% or more, and if the organization meets Part IV how the organization meets the "factors and the state of the	the "facts-and-circu	ımstances" test, ch	eck this box and st	t op here. Explain in	า	_
b	organization 10%-facts-and-circumstances test—20° 15 is 10% or more, and if the organization r	_		•		ne	>
	Explain in Part IV how the organization med supported organization					у	▶ □
18	Private foundation. If the organization did instructions	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		>

Part III Support Schedule f

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.)

tion A. Public Support dar year (or fiscal year beginning in)▶ Gifts, grants, contributions, and membership	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011		(D. T.)
Gifts, grants, contributions, and membership			(6) 2003	(4) 2010	(6)2011		(f) Total
fees received (Do not include any "unusual grants")							
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							
Gross receipts from activities that are not an unrelated trade or business under section 513				<u></u>			
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
The value of services or facilities furnished by a governmental unit to the organization without charge							
Total. Add lines 1 through 5							
Amounts included on lines 1, 2, and 3 received from disqualified persons							
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		_					
Add lines 7a and 7b							
Public support (Subtract line 7c from line 6)							
tion B. Total Support					-		
dar year (or fiscal year beginning in)▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011		(f) Total
Amounts from line 6							
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
Add lines 10a and 10b							
Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
Total support. (Add lines 9, 10c, 11, and 12)							
First five years. If the Form 990 is for the o	organization's first,	second, third, four	th, or fifth tax year	as a section 501(c)	(3)		
							<u> </u>
		-					
		•	(f))				<u>%</u>
						16	<u>%</u>
-			nalumm (f)			17	
· · · · · · · · · · · · · · · · · · ·		=	column (1))			-	<u>%</u> %
			14 and line 15 is ~	nore than 33 1/20/	and line	10	70_
							▶ □
		=					
• • • • • • • • • • • • • • • • • • • •							▶ [
	-	_					> _
	furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Add lines 7a and 7b Public support (Subtract line 7c from line 6) tion B. Total Support dar year (or fiscal year beginning in)▶ Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization, check this box and stop here tion C. Computation of Public Supublic support percentage for 2011 (line 8, Public support percentage from 2010 Scheetion D. Computation of Investment income percentage from 2010 Scheetion D. Computation of Investment Investment income percentage from 2010 if the organ 17 is not more than 33 1/3%, check this box 33 1/3% support tests—2010. If the organ line 18 is not more than 33 1/3%, check this box	furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Add lines 7a and 7b Public support (Subtract line 7c from line 6) Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support, (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, organization, check this box and stop here tion C. Computation of Public Support Percental Public support percentage from 2010 Schedule A, Part III, line tion D. Computation of Investment Income Percentage from 2011 (line 10c, column (f) divided Public support percentage from 2011 (line 10c, column (f) investment income percentage from 2010 Schedule A, Part III, line tion D. Computation of Investment Income Percentage Inv	furnished in any activity that is related to the organization's tax-exempl purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from their than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support (Subtract line 7c from line 6) Cross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, four organization, check this box and stop here tion C. Computation of Public Support Percentage Public support percentage from 2010 Schedule A, Part III, line 15 this organization of the computation of Investment Income Percentage Investment income percentage from 2010 Schedule A, Part III, line 17 as 13 1/3% support tests—2011. If the organization did not check the box on line 14 line 18 is not more than 33 1/3%, check this box and stop here. The organization of the organization of the organization of line 4 line 18 is not more than 33 1/3%, check this box and stop here. The organization of the paganization of the organization of the orga	furnshed to any activity that is related to the organization's tax-evempt purpose Gross recepts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from disqualified persons hat exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support (Subtract line 7c from line 6) Bition B. Total Support dar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year organization, check this box and stop here tion C. Computation of Public Support Percentage Public support percentage from 2010 Schedule A, Part III, line 15 tion D. Computation of Investment Income Percentage Investment income percentage from 2010 Schedule A, Part III, line 17 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is m 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly	furnished in any activity that is related to the organization's tax-exempl purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from the select of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support (Subtract line 7c from line 6) Gross income from interest, dividends, payments received on securities bans, rents, royalties and income from similar sources Unrelated business taxable income (less section \$11 tax) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities in adupted in line 10b, whether or not the business is regularly carried an or loss from the sale of capital assets (Explan in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c) organization, check this box and stop here (tion C. Computation of Public Support Percentage Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) Public support percentage from 2010 Schedule A, Part III, line 17 31 /13% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization (in line 16 is more than line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization (in line 16 is more than line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly	furnished in any activity that is related to the organization's kareweith purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues leaved for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a governmental unit to the organization without charge organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support(Subtract hine 7c from line 6 Gross income from interest, dividends, payments received for securities floars, rents, replayles and income from similar sources Unrelated business taxable income (less section \$11 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Met income from unrelated business activities in tituded in line 10b, whether or not the business a regularly carried on loss from the sale of capital assets (Explan in Part IV) Total support. (Add lines 9, 10c, 11, and 12) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here the company of the sale of capital assets (Explan in Part IV) Total support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) Public support percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	furnished in any activity that is related to the organization six exempli purpose Gross receipts from activities that are not an unrelated trade or business under section \$13\$ Tax revenues level of for the organization is benefit and either paid to or expended on this behalf. The value of senores or facilities from the behalf. The value of senores or facilities from the behalf. The value of senores or facilities from the things of the organization without charge. Total, Add lines 14 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons. Amounts included on lines 2 and 3 received from disqualified persons. 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 Add lines 7 and and 7 b Public support (Subtract line 7c from line 6) Cross isone from inflered, undends, payments received in securities boars, ents, payments received on securities boars ents, payments received on securities boars, ents, organization, check this box and stop here Unrelated business activation of Public Support Percentage Further or on unrelated business activities not include gian or loss from the sale of capital assets (Explain in Part IV) Total support, (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Total support total or further than 50 (10 (in 6), column (f) divided by line 13, column (f)) [15] Total support tests—2011 (line 10c, column (f) divided by line 13, column (f)) [16] Total

Schedule A (Form 990 or 990-EZ) 2011 The Center for Civic Values Supplemental Information. Complete this part to provide the explanations required by Part II, line 10;

85-6018573

Page 4

instructions) Part II, Line 10 - Other Income Detail

Other income

\$

Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See

17,317

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990. ► See separate instructions.

2011
Open to Public Inspection

Name of the organization

Employer identification number

	······································	ļ		
T	he Center for Civic Values		<u> 35-6</u>	018573
Pa	organizations Maintaining Donor Advised Fundorganization answered "Yes" to Form 990, Part IV,		unts.	Complete if the
		(a) Donor advised funds	(t) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (dunng 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	ne assets held in donor advised		
-	funds are the organization's property, subject to the organization's exclusi			☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor advisors in wr			
	only for charitable purposes and not for the benefit of the donor or donor a	• •		
	conferring impermissible private benefit?			Yes No
Pa	ert # Conservation Easements. Complete if the organ	ization answered "Yes" to Form 990	. Part	
1	Purpose(s) of conservation easements held by the organization (check al			
-	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically import	ant land	l area
	Protection of natural habitat	Preservation of a certified historic str		
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conserva	ition contribution in the form of a conservation	1	
	easement on the last day of the tax year			
	·			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b			2b	
	Number of conservation easements on a certified historic structure include	ed in (a)	2c	
	Number of conservation easements included in (c) acquired after 8/17/06	• •		
Ī	historic structure listed in the National Register	, 4	2d	
3	Number of conservation easements modified, transferred, released, extin	guished, or terminated by the organization du		
•	tax year ▶	g		
4	Number of states where property subject to conservation easement is loc	ated >		
5	Does the organization have a written policy regarding the periodic monitor			
•	violations, and enforcement of the conservation easements it holds?	, mepoenen, namening en		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	conservation easements during the year		
•		gg ,		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing cor	servation easements during the year		
•	▶ \$	isorranon, casomonio adming ino year		
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section 170(h)(4)(B)		
-	(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization reports conservation easemen	its in its revenue and expense statement, and	ı	
	balance sheet, and include, if applicable, the text of the footnote to the org	•		
	organization's accounting for conservation easements			
Pa	art III Organizations Maintaining Collections of Art, F	listorical Treasures, or Other Sim	ilar As	ssets.
	Complete if the organization answered "Yes" to Fo	orm 990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not	to report in its revenue statement and balanc	e sheet	
	works of art, historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherance	e 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 (ASC 958), to re-	eport in its revenue statement and balance sh	eet	
	works of art, historical treasures, or other similar assets held for public ex	chibition, education, or research in furtherance	e 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 ot	ther similar assets for financial gain, provide t	he	
	following amounts required to be reported under SFAS 116 (ASC 958) re	lating to these items		
а	Revenues included in Form 990, Part VIII, line 1		>	\$
L	Assets included in Form 000. Bort Y			œ.

Sche	dule D (Form 990) 2011 The Cente	er for C	civic Va	alues		85-60	18573		Page 2
Pa	rt 🔢 Organizations Maintaining	Collection	s of Art, Hi	storical Tre	asures, o	r Other Si	milar Assets	(continued)
3	Using the organization's acquisition, accessio collection items (check all that apply)	n, and other re	cords, check a	iny of the follow	ing that are a	a significant u	use of its		
а	Public exhibition		t 🗌 Loan or	exchange prog	ırams				
b	Scholarly research	ì		exchange prog	jianis				
c	Preservation for future generations	`							
4	Provide a description of the organization's col	lections and ex	olain how they	further the ora	anization's e	xempt ourpo	se in Part		
•	XIV		piani iioii iio	, idiaio, ale erg	a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
5	During the year, did the organization solicit or	receive donati	ons of art, hist	orical treasures	, or other sim	nılar			
	assets to be sold to raise funds rather than to							Yes	☐ No
Pa	rt IV Escrow and Custodial Arra					swered "Ye	es" to Form 99	0, Part IV,	
	line 9, or reported an amour								
1a	Is the organization an agent, trustee, custodia				ther assets r	not			
	included on Form 990, Part X?		-					Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV a	and complete th	ne following ta	ble					
								Amount	
С	Beginning balance						1c		
d	Additions during the year						1d		
е	Distributions during the year						1e		
f	Ending balance						1f		
2a	Did the organization include an amount on Fo	rm 990, Part X	, line 21?					Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV								
Pa	rt V Endowment Funds. Comp	lete if the or	ganization	answered "Y	es" to For	m 990, Pa	rt IV, line 10_	<u>-</u>	
		(a) Current ye	ar	(b) Prior year	(c) Two ye	ars back	(d) Three years bac	k (e) Four ye	ars back
1a	Beginning of year balance								
b	Contributions								
C	Net investment earnings, gains, and		ļ						
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance				<u> </u>				
2	Provide the estimated percentage of the curre	=	ilance (line 1g.	column (a)) he	ld as				
a	Board designated or quasi-endowment ▶	%							
	Permanent endowment ▶ %								
С	Temporarily restricted endowment ▶	%							
•	The percentages in lines 2a, 2b, and 2c should be a sh	•							
3a	Are there endowment funds not in the posses	sion of the org	anization that	are held and ad	ministered to	or the		L.	N-
	organization by								es No
	(i) unrelated organizations							3a(i)	+-
h	(ii) related organizations If "Yes" to 3a(ii), are the related organizations	hatad as sagu	rad an Cabadi	do D2				3a(ii) 3b	_
_		•						30	
D ₀	Describe in Part XIV the intended uses of the int VI Land, Buildings, and Equi				10				
+ 0	Description of property		or other basis	(b) Cost or		Ic) Acc	cumulated	(d) Book val	
	occupion of property	1 '	estment)	(b) Cost of t		1	reciation	(a) DOOK VA	
12	Land	· · · · · · · · · · · · · · · · · ·	•	 	•				
	Buildings	-		 		<u> </u>			
									
C	Leasehold improvements								

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Part VII	Investments—Other Securities. See Form 990,	Part X, line 12	
	(a) Description of security or category	(b) Book value	(c) Method of valuation
	(including name of security)		Cost or end-of-year market value
(1) Financial d	envatives		
(2) Closely-he	d equity interests		
(3) Other		_	
(A)		_	
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
<u>(l)</u>			
Total. (Column	(b) must equal Form 990, Part X, col (B) line 12)		
Part VIII	Investments—Program Related. See Form 990	, Part X, line 13	
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	·		
(10)			
	(b) must equal Form 990, Part X, col (B) line 13)		
Part IX	Other Assets. See Form 990, Part X, line 15		
	(a) Description		(b) Book value
(1)		· · · · · · · · · · · · · · · · · · ·	
(2)		 , ,	
(3)	- <u></u>		
(4)			
(5)			
(6)			
(7)		-	
(8)			
(9)		· ··	
(10)	(h) must assual Form 000, Part V, and (P) line 45)		
Part X	(b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 25.	··	<u> </u>
1.	(a) Description of liability	(b) Book value	T
	ncome taxes	(b) BOOK VAIUS	-
(2)	icome taxes		-
(3)			1
(4)			-
(5)			1
(6)	·		-
(7)			
(8)			t
(9)			
(10)			1
(11)			1
	(b) must equal Form 990, Part X, col (B) line 25)		1
	740) Footnote In Part XIV, provide the text of the footnote to the	ne organization's financial s	tatements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sche	dule D (Form 990) 2011 The Center for Civic Values 85-6018573	3	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statemen	ıts_	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	613,828
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	582,925
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	30,903
4	Net unrealized gains (losses) on investments	4	-26,827
5	Donated services and use of facilities	5_	
6	Investment expenses	6	
7	Prior period adjustments	7_	
8	Other (Describe in Part XIV)	8	1,051
9	Total adjustments (net) Add lines 4 through 8	9	-25,776
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	5,127
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur	n	1 200 201
1	Total revenue, gains, and other support per audited financial statements	1	1,309,201
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		ii
а	Net unrealized gains on investments 2a -26, 827		
b	Donated services and use of facilities 2b 723,400		
	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIV) 2d 6,224		
е	Add lines 2a through 2d	2e	702,797
3	Subtract line 2e from line 1	3	606,404
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 7,424		
b	,		5 404
С	Add lines 4a and 4b	4c	7,424
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	613,828
	art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Ret		1 204 074
1	Total expenses and losses per audited financial statements	1	1,304,074
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities 2a 723,400		
	Prior year adjustments 2b		
	Other losses 2c Cher (Describe in Part XIV) 2d 6,224		
d	,		720 624
e	Add lines 2a through 2d	2e_	729,624 574,450
3	Subtract line 2e from line 1	3	3/4,450
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 Other (Describe in Part XIV) 4a 7, 424 1,051		
	,	4-	8,475
	Add lines 4a and 4b	<u>4c</u> 5	582,925
- 	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		302,323

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines

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, line 2, 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

Part XI, Line 8 - Reconciliation of Changes - Other

Miscellaneous

\$

1,051

Part XII, Line 2d - Revenue Amounts Included in Financials - Other

Schedule D (Form 990) 2011 The Center for Civic Values	85-6018573	Page
Part XIV Supplemental Information (continued)		
Depreciation on investment property	\$ 6,2	24
Part XIII, Line 2d - Expense Amounts Included in F	inancials - Other	
Depreciation on investment property	\$ 6,2	24
Part XIII, Line 4b - Expense Amounts Included on R	eturn - Other	
Miscellaneous	\$ 1,	051

₹
27
38
ğ
121
5
8
Σ

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations,

OMB No 1545-0047

Open to Public Inspection 2011

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States ▶ Attach to Form 990.

Employer Identification number

ŝ Yes × 85-6018573 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?
 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States The Center for Civic Values General Information on Grants and Assistance Parti

2 Describe III all IV the organization of procedures for monitoring the case of grant father and control of the	in osn our fillioning		THE CHIECO CHECO				
Part II Grants and Other Assistance to Governments and	overnments an	d Organ	Organizations in the United States. Complete if the organization answered "Yes"	ited States. Com	plete if the orga	nization answ	ered "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. Part II can be diminated if additional space is needed.	recipient that re	ceived m	iore than \$5,000 C	heck this box if n	o one recipient	received more	than \$5,000
1 (a) Name and address of organization	(b) EIN	(c) IRC	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant
or government		section if applicable	grant	cash assistance	(book, riwy, appraisar, other)	non-cash assistance	or assistance
(1) Advocacy Inc.							
6301 4th St. NW, Ste. 3		_		•			civil legal services
Albuquerque NM 87107	85-0354799	3	30,000				
(2) Enlace Comunitario							
2425 Alamo Ave. SE #A							civil legal services
Albuquerque NM 87106	85-0473384	3	30,000				
(3) NM Center on Law & Poverty							
3117 Silver Ave. SE					- 1		civil legal services
Albuquerque NM 87106	85-0437960	3	75,000				
(4) Pegasus Childrens Legal Services							
4916 4th St. NW							civil legal services
Albuquerque NM 87107	46-0509986	3	20,000		1 P		
(5) Senior Citizens Law Office							
4317 Lead Ave. SE, #A	-						civil legal services
Albuquerque NM 87108	85-0314545	3	40,000				
(6) Catholic Charities - Las Cruces							
2205 S Main St.							civil legal services
Las Cruces NM 88005	20-1144913	3	10,000				
(7) Native American Disability Law							
3535 E 30th Street, Suite 201							civil legal services
Farmington NM 87402	35-2238666	3	10,000				
(8) Law Access NM							
4141 Montgomery Blvd NE							civil legal services
Albuquerque NM 87109	81-0553998	3	30,000				
;							

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

6

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

Schedule I (Form 990) (2011)

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Schedule I (F	Schedule I (Form 990) (2011) The Center for Civic Values	or Civic Value		85-6018573		Page 2
Part III	Grants and Other Assistance to Individuals in the Ur Part III can be duplicated if additional space is needed	Individuals in the United In t	nited States. Comp	olete if the organization	nited States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.	990, Part IV, line 22.
	(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)	(e) Method of valuation (book, 15) Description of non-cash assistance FMV, appraisal, other)
-			:			
7						
<u></u>						
4						
co.						
ဖ						
Part IV	Supplemental Information. Complete this part to provide	plete this part to provi	de the information r	equired in Part I, line	de the information required in Part I, line 2, and any other additional information.	information.

Schedule I (Form 990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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.

2011 Open to Public Inspection

OMB No 1545-0047

Internal Revenue Service

The Center for Civic Values

Employer identification number 85-6018573

Amended Return Explanation

One donor improperly omitted which whin added necessitated the inclusion of Schedule B.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 REVIEWED BY PRESIDENT/CEO ON BEHALF OF THE BOARD OF DIRECTORS.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

CONFLICTS COULD ARISE DURING THE PROCESS TO AWARD GRANTS. AFFECTED

MEMBERS WOULD NOT BE ALLOWED TO PARTICIPATE IN THE DECISION MAKING PROCESS.

ADDITIONAL CONFLICTS COULD ARISE IN THE MOCK TRIAL PROGRAM WITH

BOARD MEMBERS SERVING AS ATTORNEY COACHES FOR THE TEAMS. THOSE

SITUATIONS WOULD BE HANDLED IN A SIMILAR MANNER. THESE CONFLICTS ARE EASILY

IDENTIFIED BY THE ORGANIZATION'S EMPLOYEES.

Form 990, Part VI, Line 15a - Compensation Process for Top Official BOARD OF DIRECTORS DETERMINES THE ANNUAL SALARY OF THE PRESIDENT/CEO.

Form 990, Part VI, Line 15b - Compensation Process for Officers BOARD OF DIRECTORS DETERMINES THE SALARY OF THE CFO.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation AVAILABLE FOR REVIEW IN PERSON AFTER RECEIVING AND APPROVING FORMAL REQUEST.

Form 4562

Name(s) shown on return

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasury Internal Revenue Service

► See separate instructions.

► Attach to your tax return.

Identifying number

85-6018573 The Center for Civic Values Business or activity to which this form relates Indirect Depreciation **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I 500,000 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 11 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 15 Property subject to section 168(f)(1) election $3,\overline{136}$ Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property) (See instructions) Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2011 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check have Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery placed in (a) Classification of property (e) Convention (f) Method (q) Depreciation deduction (business/investment use period only-see instructions) service 19a 3-year property 5-year property 7-year property d 10-year property 15-year property 20-year property f g 25-year property 25 yrs S/L h Residential rental 27 5 yrs ММ S/L property MM 27 5 yrs. S/L мм Nonresidential real S/L 39 yrs property ММ S/L Section C-Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L 40 yrs MM S/L 40-vear Part IV Summary (See instructions) 21 21 Listed property Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 3,136 22 and on the appropriate lines of your return Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasury Internal Revenue Service

See separate instructions.

Attach to your tax return

Identifying number Name(s) shown on return 85-6018573 The Center for Civic Values Business or activity to which this form relates Rent **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I 500,000 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 2,000,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 (a) Description of property (c) Elected cost (b) Cost (business use only) 6 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not _include listed property.) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 15 6,224 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property) (See instructions) Part III Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2011 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (f) Method (a) Classification of property (husiness/investment use (e) Convention (a) Depreciation deduction placed in period only-see instructions) service 19a 3-year property b 5-year property 7-year property d 10-year property 15-year property f 20-year property 25-year property 25 yrs S/L ММ S/L Residential rental 27 5 yrs property MM 27 5 yrs S/L мм S/L Nonresidential real 39 yrs property MM S/L Section C-Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year 12 yrs S/L MM S/L 40-year 40 vrs Part IV Summary (See instructions) 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here

portion of the basis attributable to section 263A costs

and on the appropriate lines of your return Partnerships and S corporations—see instructions

For assets shown above and placed in service during the current year, enter the

6,224

22