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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)

OMB No 1545-0047

Open to Public Inspection

Dep	artment of t	the Treasury se Service	► The organization may h	nave to use a copy of this		-	rtına reallı	rements	Open to F	
A			ndar year, or tax year beginn			ind ending	rung roqui	Terriorito	, 20	
В			C Name of organization Civic Ve		, 2011, 8	ind ending		D Employe	r identification nu	ımber
$\overline{\Box}$	Address		Doing Business As Civic Ven						94-3274339	
$\bar{\sqcap}$	Name cha	-	Number and street (or P O box		et address)	Room/suite		E Telephon		
Ħ.	Instial retu	-	114 Sansome Street		,	85	n		415-430-0141	
\Box		Terminated City or town, state or country, and ZIP + 4							413-430-0141	
Π	Amended		San Francisco, CA 94104					G Gross red	cointe \$	
$\overline{\Box}$		•	F Name and address of principal o	fficer Marc Freedman	****		H(a) Is this		or affiliates? Yes	V No
	. +	p veg	same as C above					• .	cluded? Yes	
$\overline{}$	Tax-exem	npt status	✓ 501(c)(3)	(c) () ◀ (insert no)	4947(a)(1) or	527			list (see instructio	
J	Website:		w encore org	(c) / 1 (insert no / [1 4947(4)(1) 01	<u> </u>	i	p exemption		,
K				ociation ☐ Other ►	L Yes	ar of formation			of legal domicile	CA
P	art I	Summ						1 0.0.0	or regar corrient	
	1		scribe the organization's m	ussion or most significa	nt activities:	A think to	ank and a	n incubato	r that generate	
_			I invents programs that refra							
Activities & Governance			cations, and consulting, Civi							
Ē			ence and talents of older ad			ine racas, pe	3110103, 011	а оррога.	inties for apply	9
Ş			is box ▶☐ if the organization			snosed of i	more than	25% of a	te not accote	
ဇိ			of voting members of the go			sposed or i	more trial	3	no net assets.	10
•ජ ග	1		of independent voting mem				• •	4		9
ij			nber of individuals employe				•	—		24
Ę			nber of volunteers (estimate		, ille	: Za) .	• •	5 6		0
Š	1		•	121		· · · ·	•			
			elated business revenue fro ated business taxable incoi				•	7a		0
	 	IAGE OF REL	ated business taxable incol	THE TROUT FORTH 990-14 M	ne 34		Prior Y	7b	Current Ye	0
92		Contribut	cons and exects (Dest VIII I	41	* 0 20.	\rightarrow				
	1		cions and grants (Part VIII, li	. \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		•	5,074 821		,626,546
Revenue	1		service revenue (Part VIII, li			/ŏ/ —		41,689		187,724
æ			nt income (Part VIII, column	· · · V	2 / B	(&)		3,917		1,877
			enue (Part VIII, column (A),		, add/17e)	`%.:		3,186		41,435
_			enue—add lines 8 through 1			ye 12)		5,123,613 2,329,453		.857,582
		Grants and similar amounts paid (Part IX, column (A), lines 1–3)								567,257
					0		0			
98	15		other compensation, employe			5–10)		2,823,906	2	,281,521
Expenses	16a		nal fundraising fees (Part IX			·		92,434		
삸	_b		draising expenses (Part IX,			9,198		f	·	
_	17		penses (Part IX, column (A),					2,533,226		,226,031
			enses Add lines 13–17 (mu		nn (A), line 25	i) ·		7,779,019		,074,809
_		Revenue	less expenses. Subtract lin	e 18 from line 12 .				,655,406)		217,227)
ets or						Beg	inning of Ci		End of Ye	
SSet	20		ets (Part X, line 16) .			· ·	14	4,636,679	11	,653,588
Net Asse	21		ılitıes (Part X, lıne 26)			· · <u> </u>		367,014		601,150
			s or fund balances. Subtra	ct line 21 from line 20			14	4,269,665	11	,052,438
P	art II	Signat	ure Block							
			ry, I declare that I have examined to						ny knowledge and	belief, it is
tr.	ie, correct,	, and compl	ete Declaration of preparer (other t	han officer) is based on all inf	formation of which	ch preparer ha	is any know	ledge	4	
			Mund					5/8	112	
Sig		Signa	ature of officer				Da	ate /		
He	ere		MARC FREEDMI	an CEO						
_		Туре	or print name and title							
Pa	id	Print/Typ	oe preparer's name	Preparer's signature		Date		Check	T if PTIN	
	eparer	r L		1				self-emp	loyed	
	se Only		ame ▶				Firm	n's EIN ▶	•	
_	~ Oilly	,	ddress ▶					one no		
Ма	y the IR:		this return with the prepare	er shown above? (see i	instructions)		1		Yes	No
_			ction Act Notice, see the sep			Cat No	11282Y	:		90 (2011)

orm 99	0 (2011) Page 2
Part	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	A think tank and an incubator that generates ideas and invents programs that reframe the debate about aging in America Through
	research, advocacy, program development, and consulting, Civic Ventures generates and promotes the ideas, policies,
	and opportunities for applying the experience and talents of older adults in solving social problems
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
Ū	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
•	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code:) (Expenses \$ 2,369,698 including grants of \$ 25,000) (Revenue \$ 0)
	The Encore Campaign is a multi-year initiative that aims to define the decades between the end of middle careers and true
	retirement as a time to do work for the greater good. The campaign involves research, analysis, partnerships, publications and
	communications By accelerating the development of a new stage of paid work in fields with looming labor shortages, such as
	education, health care, the nonprofit sector and government work. Civic Ventures hopes to deliver the experience and energy of
	tens of millions of people now entering their 50s and 60s to help tackle society's greatest challenges www encore org
4b	(Code:) (Expenses \$1,360,595 including grants of \$510,000) (Revenue \$0)
	The Purpose Prize is a multi-year initiative to invest in older social innovators by recognizing outstanding achievements,
	creating a network of people wanting to use their retirement years for the greater good, and channeling funds and assistance
	to these new pioneers www encore org/prize
4c	(Code.) (Expenses \$ 1,006,484 including grants of \$ 32,257) (Revenue \$ 0)
	Encore Programs support individual transition to encore careers and to demonstrate the value of engaging experienced older
	adults in social purpose work. In 2011, Civic Ventures supported two major initiatives
	The Encore College Initiative supports community colleges that are reaching out to boomers in new ways with innovative
	messages, strategies, and schedules to prepare boomers and older adults for paid encore careers in education, health care,
	environment and social services www encore org/colleges
	<u> </u>
	The Encore Fellowships Network is a national initiative that works with corporations, organizations and individuals who are
	interested in creating Encore Fellowships in communities across the U.S. Encore Fellowships are an innovative new way for
	experienced, highly skilled employees to transition from midlife careers to encore careers that combine personal meaning.
	continued income and social impact www encore org/fellowships
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

\$4,736,777

4e Total program service expenses ▶

Part	Checklist of Required Schedules			
4	le the executation described in each of 504/2/(0) on 4047/2/(4) /attention a minute foundation (0.16 fill) on 2		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	✓_	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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	1	
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, Part III	5		√
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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		✓
	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		✓
	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		✓
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e	✓	√
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	1	
	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		√
14 a	5	14a		✓
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 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		1
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		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	L	L.

Part	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	\	
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	✓	
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	>	
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		√
	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? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√ √
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		1
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		√
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 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
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		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
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		/
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		√
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		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	\
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R,</i>			
38	Part VI	37	_	✓
•		, 50	7	

Part				_
	Check if Schedule O contains a response to any question in this Part V			<u> </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 48			
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 24			
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)			
3а	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	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	·		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			-
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			İ
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	^	3	\$~
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		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
ď	If "Yes," indicate the number of Forms 8282 filed during the year			<u> </u>
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		/
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓_
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.			
а	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		<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			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	_		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year .			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
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			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
h	If "Vos " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schodule O	14h		I

Louin as				raye o
Part	, , , , , , , , , , , , , , , , , , , ,			
	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	<u> </u>		<u>. </u>
Secti	on A. Governing Body and Management		Yes	No
10	Enter the number of voting members of the severage had at the end of the tay year.		165	10
1a	Enter the number of voting members of the governing body at the end of the tax year. 1a 10 If there are material differences in voting rights among members of the governing body, or	1/2 3	3,	
	if the governing body delegated broad authority to an executive committee or similar		on e Sala	
	committee, explain in Schedule O.	7.		
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 9		12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	*."	
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	-	1
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? .	5		1
6	Did the organization have members or stockholders?	6		✓
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		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			1
•	stockholders, or persons other than the governing body?	7b	36.	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	100	*	, ,,,
_	• •		,	ļJ
a b	The governing body?	8a 8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	00	<u> </u>	
_	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		/
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	iue Ci	ode.)	,
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12.3	1 85	<u> </u>
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u> </u>	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	<u> </u>
С	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	Did the organization have a written whistleblower policy?	13	√	Ļ
14	Did the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	√	
b	Other officers or key employees of the organization	15b	√	ļ
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	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	127	(4)
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ California			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	า 501(c)(3)s	i only)
	☐ Own website ☐ Another's website ☑ Upon request			
19	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 inter	rest p	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	;	
	organization: ▶ Douglas Braley, 114 Sansome Street, Suite 850, San Francisco, CA 94104 - (415) 430-0141			

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 neither the organization no	r any relate	d orga	anız	atio	n c	ompe	nsa	ited any curren	t officer, director	r, or trustee
(A) Name and Title	(B) Average hours per week	(do n box, i	ot ch	Pos- neck ss pe d a d	c) ition more rson	e than o	one an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(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)	compensation from the organization and related organizations
(1) Ruth Wooden										
Chair	3	1		1				· 0	o	0
(2) Michael Bailin										
Vice Chair	1 3	 		✓				0	o	0
(3) Sherry Lansing										
Secretary	3	1		✓				o	0	0
(4) Lewis Feldstein										
Treasurer	3	✓		✓				0	o	0
(5) Laura Carstensen										
Director] 3	✓						0	0	0
(6) Ellen Goodman										
Director] 3	✓					ŀ	0	0	0
(7) Suzanne Braun Levine										
Director	3	✓						0	0	0
(8) Webb McKinney										
Director	3	✓						0	0	0
(9) Beverly Ryder										
Director] 3	✓						0	0	0
(10) Marc Freedman										
CEO	40	✓		✓	✓	✓		275,022	0	36,098
(11) James Emerman										
Executive Vice President	40				✓		1	156,663	0	30,889
(12) Stefanie Weiss										
Vice President	40					✓		129,592	0	22,571
(13) Douglas Braley										
Vice President	40					✓	-	128,714	0	22,571
(14) Michelle Hynes			Ī							
Vice President	40				<u></u>	1		124,800	0	21,095

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	yees	s, ar	nd H	lighes	st C	ompensated E	mployees (contin	ued)		
	(A) Name and title	(B) Average hours per	Position (do not check more than o box, unless person is both officer and a director/truste					an	(D) Reportable compensation	(E) Reportab		(F Estim amou	ated	
		week (describe hours for related organizations in Schedule O)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizati (W-2/1099-N	ons	oth comper from organi and re organiz	er nsation the zation elated	
(15) D	avid Bank													
	President	40					1		124,198		0		22,	100
	arcı Alboher						,		112 701				22	222
(17)	President	40			-		✓		113,781		0		22,	,333
<u> </u>		-												
(18)											`			
(19)							_							
(20)														
(21)		 			-				-					
(22)											-			
(23)														
(24)														
(25)								-		_				
1b	Sub-total	l		l	l		l	<u> </u>	1,052,770		0		177	,657
C	Total from continuation sheets to Part	VII, Sectio	n A					•	0		0			0
d	Total (add lines 1b and 1c)	•						▶	1,052,770		0		177,	,657
2	Total number of individuals (including bureportable compensation from the organ	t not limited	d to th				above	e) w	ho received m	ore than \$1	00,00	0 of		
													Yes	No
3	Did the organization list any former of					-	•		oloyee, or high	est compe	ensate	m -m * 2 2 1 7	#2 L	/s
4	employee on line 1a? If "Yes," complete											3	- îs 12	√
*	For any individual listed on line 1a, is the organization and related organizations													
	individual	-										4	1	V.Z.
5	Did any person listed on line 1a receive of									ation or inc	dividu	al 💹:	Sal	
	for services rendered to the organization	? If "Yes," c	compl	ete	Sch	nedu	ıle J f	or s	such person	· · · <u> </u>		5		✓_
	on B. Independent Contractors										- 010	20.000 -6		
1	Complete this table for your five highest compensation from the organization. Repyear												ı's tax	Κ
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compensa	tion	
	lurst - PO Box 20009 Stanford, CA 94309							Pro	ogram Design &	Develop			137,	,125
Lesly	e Louie - PO Box 20009 Stanford, CA 94309							Pro	ogram Design &	Develop			130	,267
								_			-			
						-			 					
2	Total number of independent contractor received more than \$100,000 of compensations.							th	nose listed abo	ove) who				

Par	VIII	Statement of Reve	enue		-				
,	* **.	** * * *			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Reven excluded fr under sec 512, 513,	nue rom tax ctions
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns Membership dues . Fundraising events . Related organizations Government grants (con All other contributions, gi and similar amounts not inc	itributions)	1a 16 16 16 16 16 16 16				,	\$
直	g	Noncash contributions includ							
<u>ဒီ နို</u>	h	Total. Add lines 1a-1	f		1,626,546	•			
evenue	2a	Honoraria		Business Code 900099	9,049	9,049			
ě	b	Conference fees		900099	45,175	45,175			
ž	C d	Contract Fees for Serv	/ice	900099	133,500	133,500	~	 	
Program Service Revenue	e f	All other program sen					 -		
Pog	g	Total. Add lines 2a-2			187,724				
	3	Investment income	(including di	vidends, interest,	101,121				
	4	and other similar amo	t of tax-exemp	ot bond proceeds ►	1,877				1,877
	5	Royalties			41,435			<u> </u>	41,435
	6a	Gross rents .	(i) Real	(II) Personal	~		*	*	4
	b	Less: rental expenses						*	
	C	Rental income or (loss)			٠, ٠		*.	8	ji.
	d	Net rental income or (
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(II) Other	ķ	*	. 3	¥.	*
	b	Less cost or other basis and sales expenses .			, ,		\hat{x}_{2}^{i}	,	₩
	c d	Gain or (loss) Net gain or (loss) .		. <u> </u>					
r Revenue	8a	Gross income from fu events (not including \$ of contributions reporte See Part IV, line 18	ed on line 1c).		,	% -	<i>A</i> >v 1		
Other	ь	Less: direct expenses		a b					
0		Net income or (loss) fi		·					
		Gross income from ga See Part IV, line 19 .	ımıng activitie	s.					
		Less: direct expenses Net income or (loss) fi Gross sales of in returns and allowance	rom gaming aventory, les	activities ►					
	b	Less: cost of goods s	old	b					
	 _	Net income or (loss) fi		Business Code					
	11a				<u> </u>				
	b			-				 	
	С								
	d	All other revenue .							
		Total. Add lines 11a-							
	12	Total revenue. See in	nstructions		1,857,582	187,724			43,312

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).

<u> </u>	Check if Schedule O contains a respons				· · · · · ·
8b, 9t	nt include amounts reported on lines 6b, 7b, o, 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	492,257	492,257		*
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	75,000	75,000		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16			: *	` v
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	511,986	435,188	41,654	35,144
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,365,612	1,230,476	111,413	23,723
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	114,331	104,439	8,089	1,803
9	Other employee benefits	163,970	101,257	62,540	173
10	Payroll taxes	125,622	111,659	10,224	3,739
11	Fees for services (non-employees):				
а	Management				
b	Legal	1,034		1,034	
С	Accounting	14,625		14,625	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	1,093,960	1,070,251	23,709	
12	Advertising and promotion	264,766	264,766		
13	Office expenses	11,656	2,739	8,917	
14	Information technology				
15 16	Royalties	240 212		240,313	
17	Occupancy	240,313 147,358	139,843	7,360	155
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	147,358	139,043	7,300	
19	Conferences, conventions, and meetings .	315,014	292,907	22,107	
20	Interest	310,014	202,007	22,107	
21	Payments to affiliates				<u> </u>
22	Depreciation, depletion, and amortization .	31,699	6,837	24,862	_
23	Insurance	10,159		10,159	
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) amount, list line 24e expenses on Schedule O)	ļ			
а	Telephone & Internet	35,591	12,208	23,383	
b	Postage & Shipping	9,784	5,783	4,001	
C	Printing & Publications	30,610	24,636	5,974	
d	Hospitality, Equip maintenance & other	19,462	12,145	7,169	148
е	All other expenses Shared cost allocation		354,386	(358,707)	4,321
25	Total functional expenses. Add lines 1 through 24e	5,074,809	4,736,777	268,826	69,206
26	Joint costs. Complete this line only if the 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)				
					Form 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year Cash-non-interest-bearing . . 717,420 1 53,016 2 6,356,555 Savings and temporary cash investments 6,141,549 2 Pledges and grants receivable, net 3 5,087,904 7,599,051 3 4 9,980 4 30.225 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 0 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), 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) . 0 6 0 Assets 7 0 Notes and loans receivable, net 0 7 Я 0 0 8 43,924 9 Prepaid expenses and deferred charges . . . 51,653 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 277,147 Less: accumulated depreciation b | 10b | (238.584)68,725 10c 38,563 11 0 Investments—publicly traded securities 0 11 12 Investments-other securities. See Part IV, line 11 0 0 12 13 0 Investments—program-related. See Part IV, line 11. 0 13 14 0 14 0 15 Other assets. See Part IV. line 11 43,400 48,300 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 11,653,588 14.636,679 **16** 17 Accounts payable and accrued expenses . . 337,103 **17** 467,540 18 0 18 117,500 Deferred revenue . . 19 ol 19 0 Tax-exempt bond liabilities 20 20 0 0 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 0 0 Payables to current and former officers, directors, trustees, key 22 Liabilities employees, highest compensated employees, and disqualified persons. 0 22 0 23 Secured mortgages and notes payable to unrelated third parties . . . 0 23 0 Unsecured notes and loans payable to unrelated third parties . . . 24 0 24 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 29,911 16,110 25 26 Total liabilities. Add lines 17 through 25 . 367,014 601,150 Organizations that follow SFAS 117, check here ▶ ☑ and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 1.870,182 2,053,391 Temporarily restricted net assets . . . 28 12,399,472 28 8,999,047 Permanently restricted net assets . . 29 0 0 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 0 30 0 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 0 31 0 Retained earnings, endowment, accumulated income, or other funds . 32 of 32 0 33 14.269.665 33 11,052,438 11,653 588 Total liabilities and net assets/fund balances 14,636,679 **34** Form 990 (2011)

D	1	2
Page		_

Par				\Box
	Check if Schedule O contains a response to any question in this Part XI	·	<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1 1	1,857,	,582
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,074,	,809
3	Revenue less expenses. Subtract line 2 from line 1	3	(3,217,2	227)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	14,269,	,665
5	Other changes in net assets or fund balances (explain in Schedule O)	5		0
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	11,052,	,438
Part	Financial Statements and Reporting			_
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>		No
1	Accounting method used to prepare the Form 990. Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain in		
2a b c d	Were the organization's financial statements compiled or reviewed by an independent accountant? Were the organization's financial statements audited by an independent accountant? If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account if the organization changed either its oversight process or selection process during the tax year, expended to line 2a or 2b, check a box below to indicate whether the financial statements for the years are suited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	versight untant? kplain in ear were forth in ergo the	2a	
	required addit of addits, explain why in ochequie of and describe any steps taken to undergo such a		Form 990 (2	2011
			FOIIII 330 (2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

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

Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Civio	Ventures								94-32	74339		
Pai	rt I Reason	for Public Cha	rity Status (All orga	nization	s must c	omplete	this par	rt.) See ıı	nstructio	ns.	_	
The	organization is no	t a private founda	ation because it is: (Fo	r lines 1 t	through 1	1, check	only one	box.)				
1	A church, cor	ention of churc	ches, or association of	churches	s describe	ed in sec	tion 170	(b)(1)(A)(i)).			
2	_	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3			spital service organiza									
4		_	on operated in conjun	ction with	n a hospit	al descrit	oed in se	ction 170)(b)(1)(A)((iii). Ente	r the	
	•	ne, city, and stat										
5		on operated for b)(1)(A)(iv). (Com	the benefit of a colle-	ge or uni	versity ov	wned or	operated	by a go	vernment	al unit d	escrib	ed in
6 7			nment or governmentaries receives a substantia						it or from	n the ger	neral n	nublic
•	described in	section 170(b)(1)(A)(vi). (Complete Par	t II.)			govenn	nomai an	01 11011	i ino goi	iorai p	Jub0
8			in section 170(b)(1)(A		-							
9			receives: (1) more that									
			d to its exempt funct									
			ent income and unrel						n 511 ta	x) trom	pusine	esses
		=	after June 30, 1975. Se						•			
10	-	-	d operated exclusively		•	-						
11			nd operated exclusive									
			olicly supported organ describes the type of								ee 3c	CHOII
								ic iiies i] Type II	I Otha	. .
_	a ☐ Type I		Type II c that the organization		III–Functi			lu hu ono				
٠	other than for	undation manage	ers and other than one	e or more	ntrollea a 2 publick	eupports	munecu d organ	iy by one izations c	or more (lescribed	uisquaiiii In sectio	on 509	130113 3(a)(1)
	or section 50		crs and other than on	c or more	publicly	Support	o organ	ization o	100011000	000	000	· (~)(·)
f			a written determination	on from	the IRS t	hat it is	a Type	1 Type I	I. or Tvp	e III sur	portir	na
•		check this box										" []
g	•		the organization accep	nted anv	aift or co	ontributio	n from a	nv of the	· !			
-	following per		and organization addop	prod diriy	9 0. 0.	3		,				
	(i) A person	who directly or	indirectly controls, eit	her alone	or toget	her with	persons	described	d in (II) ar	nd	Yes	No
			ody of the supported							11g(ı)		
			on described in (i) abo			_				11g(ii		
			a person described in							11g(in	1	
h			ion about the support								· · · · · ·	
(i)	Name of supported	(ii) EIN	(III) Type of organization		organization		ou notify	(vi)	s the	(vii) A	mount o	of
	organization		(described on lines 1–9		sted in your		ization in of your	organizat	ion in col zed in the	SL	pport	
			above or IRC section (see instructions))	governing	document?	sup			S?			
_			, , , , , , , , , , , , , , , , , , , ,	Yes	No	Yes	No	Yes	No			
(A)								-				
(B)	_											
							···-					
(C)												
(D)												
(E)												
T-4-		230										

organization . . .

Schedule A (Form 990 or 990-EZ) 2011 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.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Gifts. grants, contributions. membership fees received. (Do not include any "unusual grants ") . . . 4.172.967 3.049.999 28,085,882 14,453,351 4,775,259 1,634,306 levied revenues organization's benefit and either paid to or expended on its behalf The value of services or facilities 3 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . 4,172,967 3.049.999 4,775,259 1,634,306 28,085,882 14,453,351 5 The portion of total contributions by each person (other than а governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . 16,401,022 Public support. Subtract line 5 from line 4. w.C 11,684,860 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 7 Amounts from line 4 4,172,967 14,453,351 4,775,259 28,085,882 3,049,999 1,634,306 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 171,027 35,930 3,918 1.877 454,171 241,420 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 28.540.053 Gross receipts from related activities, etc. (see instructions) . 12 12 576.462 13 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 . . . Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 14 40 94 % Public support percentage from 2010 Schedule A, Part II, line 14 41 43 15 15 331/3% support test-2011. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization **7** 331/3% support test-2010. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2011, If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in

Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

b 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

.

. .

.

 \Box

Part III	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 P	art II.
If the organizat	tion fails to qualify under	the tests listed below, please complete Part II.)	

Secti	on A. Public Support	,		, p	<u>p.</u>	,	
	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.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an		 				
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge				İ		
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons				1		
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	Z15828	A CONTRACTOR OF THE PARTY OF TH		**************************************	. 5 militir (, 1 military)	
	line 6)		7 m / m		Training		
Secti	on B. Total Support	_ 			•		
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for t	he organization	n's first, secon	d. third. fourth	o, or fifth tax v	ear as a section	n 501(c)(3)
	organization, check this box and stop he						
Secti	on C. Computation of Public Suppo			· · · · · · · · · · · · · · · · · · ·			
15	Public support percentage for 2011 (line			3, column (fl)		15	%
16	Public support percentage from 2010 Sc					16	%
	on D. Computation of Investment In	come Perce	ntage	<u> </u>			
17	Investment income percentage for 2011			y line 13, colu	mn (f))	17	%
18	Investment income percentage from 201					18	%
19a	331/3% support tests—2011. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2010. If the organi		_				
-	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization d		_				

Schedule A (F	orm 990 or 990-EZ) 2011	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
•	•••••••••••••••••••••••••••••••••••••••	
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

easury

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

See separate instructions.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

• Se	ection 501(c)(3) organizations	that have filed Form 5768 (election und	der section 501(h)) C	Complete Part II-A Do not co	omplete Part II-B
		that have NOT filed Form 5768 (election			
If the	organization answered "Yes	s" to Form 990, Part IV, line 5 (Proxy 1	Гах) or Form 990-E	Z, Part V, line 35c (Proxy T	ax), then
	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III			A161 - A1
	of organization			Employer ide	ntification number
	Ventures				94-3274339
		e organization is exempt und			organization.
1	· ·	the organization's direct and indire	ct political campa	ign activities in Part IV.	
2	Political expenditures .				5
3	Volunteer hours				
Part	I-B Complete if th	e organization is exempt und	er section 501(c	c)(3).	
1		excise tax incurred by the organiza			\$
2		excise tax incurred by organization			\$
3	-	ed a section 4955 tax, did it file For	•		, Yes No
4a				Jul	. Yes No
b	If "Yes," describe in Part		• •		
Part		e organization is exempt und	er section 501/e	c) except section 501	I(c)(3)
1		ly expended by the filing organiz			. (0)(0).
				•	3
2		filing organization's funds contrib			
		ivities			8
3		expenditures Add lines 1 and 2)
					}
4		n file Form 1120-POL for this year		`	Yes No
5		ses and employer identification nur			
J	organization made paymethe amount of political co	ents. For each organization listed, ontributions received that were prolifical action committee.	enter the amount mptly and directly	paid from the filing organ delivered to a separate i	nzation's funds. Also enter political organization, such
	as a separate segregated	Tund or a political action committee	rac) ii addiilo	Tai space is fleeded, prov	T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Pa	ırt	Section 501(h)).	is exempt under section 501(c)(3) and filed	d Form 5768 (ele	ction under
A	CI		ongs to an affiliated group (and list in Part IV eses, and share of excess lobbying expenditur		up member's
В	CI	neck > I if the filing organization che	cked box A and "limited control" provisions a	pply.	
		Limits on Lobby	ring Expenditures ans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1	a	Total lobbying expenditures to influence p	public opinion (grass roots lobbying) .	1,753	
	b	Total lobbying expenditures to influence a	a legislative body (direct lobbying)	0	
	С	Total lobbying expenditures (add lines 1a	and 1b)	1,753	
	d	Other exempt purpose expenditures		5,073,056	
	e	Total exempt purpose expenditures (add	lines 1c and 1d)	5,074,809	
	f	Lobbying nontaxable amount Enter the columns.	ne amount from the following table in both	403,740	
		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	۸۲,, ۲۶ ۱۱۱۵ - ۲	, i
		Not over \$500,000	20% of the amount on line 1e	* ;.	
		Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		4. , "" "p"
		Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	· *****	,
		Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		**
		Over \$17,000,000	\$1,000,000	* * * * * * * * * * * * * * * * * * * *	y, %
	g	Grassroots nontaxable amount (enter 259	6 of line 1f)	100,935	
	h	Subtract line 1g from line 1a. If zero or les	ss, enter -0-	0	
	i	Subtract line 1f from line 1c. If zero or less	s, enter -0	0	
	j	If there is an amount other than zero or reporting section 4911 tax for this year?	on either line 1h or line 1i, did the organization	file Form 4720	☐ Yes ☐ No

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

	Lobbying Expenditures During 4-Year Averaging Period										
Calendar year (or fiscal year beginning in)		(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total					
2a	Lobbying nontaxable amount	633,930	629,773	538,951	403,740	2,206,394					
b	Lobbying ceiling amount (150% of line 2a, column (e))	%	* * * * * * * * * * * * * * * * * * * *	*		3,309,591					
С	Total lobbying expenditures	62,470	34,607	738	1,753	99,568					
d	Grassroots nontaxable amount	158,483	157,443	134,738	100,935	551,599					
e	Grassroots ceiling amount (150% of line 2d, column (e))		,	,	,	827,399					
f	Grassroots lobbying expenditures	0	15,723	738	1,753	18,214					

Schedule C (Form 990 or 990-EZ) 2011

· Schedule C (Fo	rm 990 or 990-EZ) 2011	Page 4
Part IV	Supplemental Information (continued)	
	·	
*		

· SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Open to Public Inspection

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

Name of the organization

Civic Ventures

94-3274339

Part Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete

Par								
	organization answered "Yes" to For	m 990, Part IV, line 6. (a) Donor advised funds) Funds and other accounts				
1 2 3	Total number at end of year . Aggregate contributions to (during year) Aggregate grants from (during year) .	(a) DOTOL auvised tulius	(c	yr unus and other accounts				
4 5	Aggregate value at end of year Did the organization inform all donors and drunds are the organization's property, subject	onor advisors in writing that the assets		onor advised				
6	·	penefit of the donor or donor advisor, or	for any o	ther purpose Yes . No				
Par		ete if the organization answered "Yes	" to Form	990, Part IV, line 7.				
2	Purpose(s) of conservation easements held by Preservation of land for public use (e.g., re Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization easement on the last day of the tax year.	creation or education)	of a certifi	ed historic structure				
				Held at the End of the Tax Year				
а			_	2a				
b	Total acreage restricted by conservation ease		1	2b				
d	Number of conservation easements on a certification of conservation easements included historic structure listed in the National Register	d in (c) acquired after 8/17/06, and no	t on a	2c 2d				
3	Number of conservation easements modified, tax year ▶	transferred, released, extinguished, or te	rminated (by the organization during the				
4 5	Number of states where property subject to condition to be be organization have a written policity violations, and enforcement of the conservation	y regarding the periodic monitoring, in						
6	Staff and volunteer hours devoted to monitorin							
7	Amount of expenses incurred in monitoring, in ▶ \$							
8	Does each conservation easement reported of (i) and section 170(h)(4)(B)(II)?		•	\cdot \cdot \cdot \cdot \cdot \Box Yes \Box No				
9	In Part XIV, describe how the organization repr balance sheet, and include, if applicable, the to organization's accounting for conservation east	ext of the footnote to the organization's f sements.	inancial st	atements that describes the				
Pari		tions of Art, Historical Treasures, or red "Yes" to Form 990, Part IV, line 8		Similar Assets.				
1a	If the organization elected, as permitted under works of art, historical treasures, or other supublic service, provide, in Part XIV, the text of	r SFAS 116 (ASC 958), not to report in imilar assets held for public exhibition, e	ts revenue education,	or research in furtherance of				
b	If the organization elected, as permitted und works of art, historical treasures, or other sill public service, provide the following amounts in	er SFAS 116 (ASC 958), to report in its milar assets held for public exhibition, expending to these items:	revenue education,	statement and balance sheet or research in furtherance of				
2	(i) Revenues included in Form 990, Part VIII, II (ii) Assets included in Form 990, Part X If the organization received or held works of following amounts required to be reported und	f art, historical treasures, or other similar	 ar assets	. • \$				
a	Revenues included in Form 990, Part VIII, line	` '		\$				

_	•
Page	4

Part	5									
3	Using the organization's acquisition, a collection items (check all that apply).									
а	☐ Public exhibition		d	☐ Loan	or exchang	ge progr	rams			
b	☐ Scholarly research				_					
С	Preservation for future generations									
4	Provide a description of the organization	on's collections	and expla	an how t	hev further	the ora	anızation's exer	npt purp	ose ir	Part
	XIV.				,			, , , , ,		
5	During the year, did the organization s	solicit or receive	donation	s of art.	historical ti	reasures	s, or other similar	ar		
	assets to be sold to raise funds rather								es 🗌	No
Part										
	line 9, or reported an amount				,				•	•
1a					or contribut	tions or	other assets ne	ot		
	included on Form 990, Part X?			•					es 🗆	No
b	If "Yes," explain the arrangement in Pa	rt XIV and compl	ete the fo	ollowina t	able.					
							Α	mount		
С	Beginning balance					1c				
d	Additions during the year					1d				
е						1e				
f	Ending balance		-			1f				
2a	Did the organization include an amount							Y	es 🗀	No
	If "Yes," explain the arrangement in Pa		 7 1, 11710							
Par			zation ar	swered	"Yes" to F	Form 9	90. Part IV. line	e 10.		
		(a) Current year		or year	(c) Two year		(d) Three years bac		r years	back
1a	Beginning of year balance								# J.	· il
b	Contributions							1.00	T. F	
С	Net investment earnings, gains, and								io. P	7 77
	losses							:5:	. As	97 =
d	Grants or scholarships							Carrotti d		3.0
e	Other expenditures for facilities and		<u> </u>					S-14/33		
_	programs		}							, ***
f	Administrative expenses							1 * Q# ()	144 ML	1200
g g	End of year balance							125	, s 8°	
2	Provide the estimated percentage of the	e current vear er	d balanc	o (line 1c	column (s	all held :				
- а	Board designated or quasi-endowmen			e (iiie ig	j, column (c	ijj ricia i	13.			
b	Permanent endowment ▶	0%	'0							
C	Temporarily restricted endowment ▶	%								
·	The percentages in lines 2a, 2b, and 2c		1004							
3a	Are there endowment funds not in the			zation the	at are held	and ad	ministered for th	ne		
-	organization by:	p0000000000000000000000000000000000000	ic organi	Zution tin	at are note	and do	Timilotoroa tor ti	.0	Yes	No
	(i)							3a(i)		140
	(ii) related organizations		•			• •		3a(ii)		
ь	If "Yes" to 3a(ii), are the related organizations.		o annead a	 Sa Cabad	ulo D2	• •		3b	\vdash	
4	Describe in Part XIV the intended uses					• •	• •	30	<u>!</u>	
Part										
I all	Description of property	(a) Cost or of			or other basis	(0)	Neguraulatad	(d) Po	ok value	
	Description of property	(a) Cost or of		1 ' '	or other basis other)	de	Accumulated epreciation	(0) 60	JK VAILE	
1a	Land					- 5341	7 8 8 7 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u></u> .		
b	Buildings									
С	Leasehold improvements		32,927				23,421			9,506
d	Equipment		244,220				215,163		2	9.057
е	Other									
Total.	Add lines 1a through 1e. (Column (d) mi	ust equal Form 9	90, Part 2	X, columr	n (B), line 10	O(c).)	▶		3	8,563
										_

Part VII	Investments - Other Securities	s. See Form 990, Part X, I	ine 12.
(a	Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financia	derivatives		
(2) Closely-I	neld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)	(A)	 	
Part VIII	(b) must equal Form 990, Part X, col (B) line 12) ► Investments — Program Relate		line 12
		(b) Book value	I
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
_(1)			
(2)			
(3)			
<u>(4)</u>	N=		
(5)		+	
(6) (7)			
(8)	·	 	
(9)			
(10)		- 	
	(b) must equal Form 990, Part X, col. (B) line 13)	•	
Part IX	Other Assets. See Form 990, P	art X, line 15.	
		(a) Description	(b) Book value
(1) Deposit	for Rental Office - San Francisco		40,000
(2) Deposit	for Rental Office - DC		3,400
(3)			
(4)			
(5)			
_(6)			
(7)			
(8)			
(9)			
(10)	ımn (b) must equal Form 990, Part X, o	ool (P) line 15)	
Part X	Other Liabilities. See Form 990		43,400
1.	(a) Description of liability	(b) Book value	
	Income taxes	0	
	d Rent-Operating Lease SF Office	16,110	
(3)	a risk operating 20000 or office	10,110	
(4)		 	
(5)			
(6)			
(7)			
(8)			
(9)		-	
(10)			
(11)		 	
	(b) must equal Form 990, Part X, col (B) line 25.)	·	
			the organization's financial statements that reports the
	n's liability for uncertain tax positions		

• Schedu	ule D (Form 990) 2011		Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial State	ments	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,857,582
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,074,809
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	(3,217,227)
4	Net unrealized gains (losses) on investments	4	0
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV.)	8	0
9	Total adjustments (net). Add lines 4 through 8	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	(3,217,227)
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
1	Total revenue, gains, and other support per audited financial statements	1	1,857,582
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments 2a	0 /2:	
b	Donated services and use of facilities	0 🔌	
C	Recoveries of prior year grants	0 🐇	
d	Other (Describe in Part XIV.)	0	
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,857,582
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1980 a	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	0	
b	Other (Describe in Part XIV.)	0	
С	Add lines 4a and 4b		0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,857,582
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Retu	'n
1	Total expenses and losses per audited financial statements	. 1	5,074,809
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	0	
b	Prior year adjustments	0	
С	Other losses	0	
d	Other (Describe in Part XIV.)	0	
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	5,074,809
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	2	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	의	
b	Other (Describe in Part XIV.)	0	
c	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,074,809
Part			
Part V	blete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Ine 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also co dditional information	mplete this	es to and 20, spart to provide
	······		

Schedule D (Fo	rm 990) 2011	Page 3
Part XIV	Supplemental Information (continued)	

	•	
••••••		

SCHEDULEI (Form 990)

Name of the organization

Civic Ventures

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

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\bigcirc	n to
(N)	Jno

OMB No. 1545-0047

Employer identification number

94-3274339

%□ **Encore Comm College** Encore Comm College (h) Purpose of grant **Encore Comm College** or assistance 14 0 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. **Encore Fellows Encore Fellows Encore Fellows** ✓Yes Purpose Prize Purpose Prize Purpose Prize Purpose Prize Purpose Prize Purpose Prize Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes' Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation cash assistance (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 20,000 10,000 5,000 100,000 5,000 5,000 56,000 50,000 100,000 10,000 100,000 100,000 (d) Amount of cash grant Part II can be duplicated if additional space is needed Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? Part General Information on Grants and Assistance 52-2215836 91-1792774 95-4714047 36-2606236 13-3464470 93-1310734 42-1757328 13-3164477 41-2061387 26-0251104 93-0811291 52-6078381 (p) EIN (7) Portland CC Found - 301 Largo Rd Portland, OR 97219 (1) 2030 Inc - 607 Cerrillos Rd Ste G (6) Harold Washigton Col-30 E Lake (2) African Immi & Ref Fndtn -11350 (12) Wayne State Univ/440 Burrough 1 (a) Name and address of organization Baroqu Rd Silver Springs MD 20901 (11) Women in Need, Inc-115 W 31st (5) Half the Sky Found-715 Hearst University Ave New York NY 10451 (10) Stoveteam Int'l - PO Box 51025 Garden Hwy Sacramento CA 95833 (4) Anne Arundel CC - 101 College St 6th FI, New York NY 10001-3403 (9) Social Ventures Ptns-221 NW (3) Am Leadership Forum-1321 Ave Ste 200 Berkeley CA 94710 St Rm 1136 Chicago IL 60601 2nd Ave, Portland, OR 97209 (8) Project Samarılan - 1401 Eugene, OR 97405-0994 Pkwy Arnold CA 21012 Santa Fe NM 87505 Detroit, MI 48202 Part II

Schedule I (Form 990) (2011)

Cat No 50055P

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

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

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

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

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\otimes	d C
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OMB No. 1545-0047

% □

(h) Purpose of grant Employer identification number or assistance 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. **Encore Fellows** ✓ Yes 94-3274339 Purpose Prize Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes' Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (e) Amount of non- (f) Method of valuation cash assistance (book, FMV, appraisal, other) . Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. 7,500 10,000 (d) Amount of cash grant Part II can be duplicated if additional space is needed (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance 58-0397204 383796793 (D) EIN 1 (a) Name and address of organization (2) Sierra Bus Cncl, 10098 Donner Pass Rd. Truckee, CA 96160 (1) iCivics, 1875 K St NW Washington, DC 20006 Name of the organization Civic Ventures Part I PartII

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

(0

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12

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(2)

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

Cat No 50055P

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Schedule I (Form 990) (2011)

Schedule I (Form 990) (2011)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Purpose Prize Awards	1	50,000		Cash	
2 Launch Pad Prizes	5	25,000		Cash	
3					
4					
гъ					
9					
		:	-1	7	in the second se
Eart W Supplemental Information, Complete this part to provide the Information required in Part I, line 2, and any other additional information. Civic Ventures makes distributions to organizations in the form of grants. Any grantee is required to sign a grant agreement that acknowledges Civic Venture's authority to withhold.	te this part to pro	ovide the information	n required in Fart I, to sign a grant agreem	part to provide the information required in Fart I, line 2, and any other additional information. of grants Any grantee is required to sign a grant agreement that acknowledges Civic Venture's authority to	intonal information. Venture's authority to withhold
and/or recover grant funds in case such funds are, or appear to be, misused. The agreement will require the grantee to use the funds only for the purposes of the grant, to return any	pear to be, misused	The agreement will re	equire the grantee to u	se the funds only for the purp	oses of the grant, to return any
funds not so expended, and to submit reports to Civic Ventures at specified intervals regarding the grantee's progress toward achieving the grant purposes, and an accounting of how	entures at specifiec	Intervals regarding the	e grantee's progress to	ward achieving the grant pur	poses, and an accounting of how
grant funds were used.					
When Civic Ventures makes grants to organizations or individuals, it shall keep adequate records and case histories to show (1) the name and address of the recipient. (2) the amount	ndividuals, it shall k	eep adequate records	and case histories to s	how (1) the name and addre	ss of the recipient, (2) the amount
distributed. (3) the purposes for which the aid was given. (4) the	ı, (4) the manner ın	which the recipient was	s selected, and (5) the	relationship, if any, between t	e manner in which the recipient was selected, and (5) the relationship, if any, between the recipient and (a) members,
officers, or trustees or the organization, (b) a grantor or substantial contributor to the organization or a member of the family of either, and (c) a corporation controlled by	substantial contrib	utor to the organization	ı or a member or a mer	nber of the family of either, ai	nd (c) a corporation controlled by
a grantor or substantial contributor					
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'SCHEDULE J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 2011 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

Civic Ventures

Inspection Employer identification number

94-3274339

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	, ,		
	✓ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees		,	
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
			ľ	
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to		١,	
	explain	1b	✓	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,	- 1	,	
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	1	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the	ŝ		
	organization's CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director Explain in Part III.		Š	
				ľ
	✓ Compensation committee		**	
	 ☐ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee 			
	Approval by the board of compensation committee	*	4	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:	*****	<i>a</i> ,	, ,
а	Receive a severance payment or change-of-control payment?	4a		<i>J</i>
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	 	1
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	 	1
·	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.	<u> </u>	 	<u> </u>
	The first in any of more the persons and provide the applicable amounts for the first in any			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			×
	compensation contingent on the revenues of:		l	
а	The organization?	5a		✓
b	Any related organization?	5b		✓
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	,		
	compensation contingent on the net earnings of:			
а	The organization?	6a	ļ.—	/
b	Any related organization?	6b	<u> </u>	✓
_	If "Yes" to line 6a or 6b, describe in Part III.		ļ	ļ
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			,
_	payments not described in lines 5 and 6? If "Yes," describe in Part III	7	├ ─	1
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			1
9	In Part III	8	┼—	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	' ₉		

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

For each individual whose compensation must be reported in Schedule J, report compensation from the organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note The sum of columns (Rividual for each listed individual must actual the total amount of Earth 200 Bart VIII Section A line to a amount of columns (Rividual for each listed individual must actual the total amount of Earth 200 Bart VIII Section A line to a amount of columns (Rividual for each listed individual must actual the total amount of Earth 200 Bart VIII Section A line to a amount of columns (Rividual for each listed individual must actual the total amount of Earth 200 Bart VIII Section A line to a amount of columns (Rividual for each listed individual must actual the total amount of Earth 200 Bart VIII Section A line to a amount of Earth 200 Bart VIII Section A line to a amount of Earth 200 Bart VIII Section A line to a amount of Earth 200 Bart VIII Section A line to a amount of Earth 200 Bart VIII Section A line to a amount of Earth 200 Bart VIII Bart 200 Bart VIII Bart 200 Bart VIII Bart 200 Bart 2

Note. The sum of columns (B)(i)-(iii) for each listed individual must	or eacl	h listed individual mu	st equal the total amo	ount of Form 990, Pa	ed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.	a, applicable columr	ι (D) and (E) amounts	s for that individual.
		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(!
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	(r) Compensation reported as deferred in prior Form 990
Marc Freedman	(3)	250,022	25,000	0	22,050	14,048	311,120	0
-	€							
James Emerman	8	156,663	0	0	14,400	16,489	187,552	0
2								
Stefanie Weiss	(9)	129,592	0	0	11,682	10,889	152,163	0
3	(E)							
Doug Braley	8	128,714	0	0	11,682	10,889	151,285	0
4	€							
	ε							
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Schedule J (Form 990) 2011

Schedule J (Form 990) 2011
Part III Supplemental Information Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
The Board supports the CEO of the organization serving as an international spokesperson for the organization and its mission, and considers regular travel and public
speaking to be a significant part of the CEO's responsibility. As such, the Board amended its travel policy in 2008 to allow the CEO to select business or first-class
air travel for domestic flights as he determines the business-related situation warrants it based on flight duration, destination, and flight availability and schedule, and
that the travel policy be limited to the CEO only and that the amendment be reviewed and approved on an annual basis. All travel expenses are processed once travel
s completed and are subject to a written reimbursement request with proper substantiation. In 2011, the Board reviewed this travel policy and made no changes to it
Schedule J (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service 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.

Open to Public Inspection

Name of the organization

Civic Ventures

Employer identification number 94-3274339

Core, Part VI 11a Board-adopted resolution that states the Form 990 and its related Schedules be reviewed and approved, on behalf
of the Board, by the Audit Committee and the Treasurer prior to filing, and that the Form 990 and its related Schedules be delivered to
the full Board at the regularly scheduled meeting following the approval
Core, Part VI 12c Civic Ventures monitors and enforces its conflict of interest policy through board and staff orientations, by annual
written disclosures by board and staff, by written disclosure statements by board, staff, and key volunteers evaluating and recommending
grant awards to organizations and individuals, and by requesting for and reporting in meeting minutes any disclosures of real
or potential conflicts at the time any board resolution is considered and adopted
Core, Part VI 15 Civic Ventures Board of Directors must review and approve the initial and any subsequent adjustments to compensation
for any board members, officers, and key employees Prior to changes in compensation for any board members, officers, and key
employees, a committee of the board reviews job descriptions and performance, as well as data compiled by the Vice President of Finance
detailing the key management positions and related compensation for other nonprofit organizations similar to Civic Ventures in budget size,
program activity, and funding sources Data is drawn from individual research/contacts, organizational websites, and published Form 990s
In addition, the Board of Directors reviews and approves an annual personnel plan and payroll budget, including any budgeted
bonus, merit, or COLA increases
Core, Part VI 19 Civic Ventures makes its governing documents, Form 1023, Form 990, conflict of interest policies, and audited financial
statements available to any party making the request. All documents exist in paper or digital form and are provided at no charge via
first-class mail or e-mail
Core, Part VI, Line 4 Civic Ventures amended its bylaws in 2011 as follows
A Article VII, Section 4 - Selection and Term of Office of Directors - limits terms to three consecutive 3-year terms with
eligible re-election following one full year after the expiration of the director's last full term
B Article IX, Sections 1, 2, and 7 - Designation and description of duties of the Vice Chair officer