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Form 990

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

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2011 calendar year, or tax year beginning Oct 1 2011, and ending Sep 30 2012 Utah Domestic Violence Advisory Council D Employer Identification Number C Name of organization Check if applicable Address change Utah Domestic Violence Council 87-0524312 Room/suite E. Telephone number Number and street (or P.O. box if mail is not delivered to street addr) Name change 205 North 400 West (801) 521-5544 Instal return State 7IP code + 4 City, town or country Terminated Salt Lake City UT 84103-1125 G Gross receipts \$ 684,562 Amended return (a) Is this a group return for affiliates? F Name and address of principal officer Yos Application pending H(b) Are all affiliates included? Yes Margaret R. Coleman 205 N. 400 West Salt Lake City UT 84103-1125 If 'No,' attach a list (see instructions) 4947(a)(1) or 527 X 501(c)(3) 501(c) () < (insert no) Website: > www.udvc.org H(c) Group examplion number Form of organization X Corporation Trust L Year of Formation Association M State of legal domicile Part | Summary The mission of UDVC is to create a state where Domestic Briefly describe the organization's mission or most significant activities: Violence is intolerable. Domestic violence is also referred to as interpersonal violence. Sexual violence and sexual Governance intimidation occurs together with interpersonal violence. The majority of UDVC member programs servicing domestic violence victims in Utah are therefore dual programs meeting the needs of sexual assault survivors. Check this box ► ☐ If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a)..... 1.2 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2011 (Part V, line 2a) . . 5 11 Total number of volunteers (estimate if necessary) 6 7 a 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** Contributions and grants (Part VIII, line 1h). 563,816. 650,494. 46,206 34,068. Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 610,022 684,562 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 313,019 336,157 The Same of the State of the St b Total fundraising expenses (Part IX, column (D), line 25) ► 332,081. 309,908. 622,927. 668,238. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 -12,905. 16,324. Beginning of Current Year End of Year Total assets (Part X, line 16) . 66,215. 110,844. 21 Total liabilities (Part X, line 26) 24,066 56,265. 54,579. 42,149 Part II Signature Block 08/13/13 Sign Date Here Executive Director Margaret Coleman Type or print name and title Preparer's signature Print/Type preparer's name Check 08/13/13 P00906951 Tami Nickel Paid Tami Nickel self-employed Preparer Firms name ► Tami Nickel, CPA, LLC **Use Only** ► PO Box 980081 Fimi's EIN > 26-1654663 Firm's address (801) 879-9333 84098-0081 Park City

May the IRS discuss this return with the preparer shown above? (see instructions) .

BAA For Paperwork Reduction Act Notice, see the separate instructions.

No

X Yes

Form	990 (2011) Utah Domestic Violence Advisory Council	87-05243	12	F	age 2
Par	t III Statement of Program Service Accomplishments				_
	Check if Schedule O contains a response to any question in this Part III				X
1	Rirefly describe the organization's mission.				
	The mission of UDVC is to create a state where Domestic Violence is intoleral				
	also referred to as interpersonal violence. Sexual violence and sexual inti	midation o	curs	<u>toge</u>	<u>ther</u>
	See Form 990, Page 2, Part III, Line 1 (continued)				
				_	
2	Did the organization undertake any significant program services during the year which were not listed on to	he prior			
	Form 990 or 990-EZ?		Yes	X	No
	If 'Yes,' describe these new services on Schedule O	_		_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	ices?	Yes	X	No
	If 'Yes,' describe these changes on Schedule O.				
4	Describe the organization's program service accomplishments for each of its three largest program service. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount others, the total expenses, and revenue, if any, for each program service reported.	es, as measure ount of grants a	d by exp nd alloc	ense: ations	to
	(Code) (Expenses \$ 243,781. including grants of \$ 0.) (F	Revenue \$.3	4,06	58.)
76	EDUCATION: Utah Domestic Violence Council (UDVC) has provided tr				
	community members concerning the dynamics of domestic violence, tra				
	and issues concerning safety and the protection of children. UDVC				
	training that was accessed by 228 individuals. UDVC is recogniz				2000
	expert in the state of Utah concerning issues of family violence. UDVC staff				ized
	training to assist in meeting the complex safety needs in a var				
	with unique service needs. Utah is a primary refugee resettleme				
	having nine different tribes of first nations peoples. UDVC hel				
	providers throughout the state about the safety concerns and ne				
	communities. UDVC convenes and facilitates monthly meetings wi	tn State	and I	oca.	
	See Form 990, Page 2, Part III, Line 4a (continued)				
41		Revenue \$			0.)
	OUTREACH: UDVC provides outreach to over 33 local Domestic Viol				
	assist in community prevention and education initiatives. UDVC'				
	information concerning prevention, safety planning, local resou				
	local, state, and national resources. UDVC participates in comm				
	partnered with many other stakeholders to provide information abou				
	people. UDVC staff work in all rural communities, and provide ou				
	communities including refugee communities, polygamist communities, nati	<u>ve tribes, </u>	_t <u>he</u> π	ilit	ary,
	the LGBTQ community, and various schools and organizations.			-	. – – -
					 .
		-			-
					- - -
4	c (Code) (Expenses \$ 139,151. including grants of \$ 0.) (Revenue \$		_	0.)
	LINKLINE: the UDVC Linkline program provides a 24/7 statewide domest	ic violenc	e cri	sis	line
	which includes interpreter services, responding to 2170 calls and provi				
	people. This service provides immediate safety planning, and re	source re	ferra	1	
	throughout Utah. This is a completely confidential service which				ted
	point of access to folks who experience barriers to services in				
	growing population of LGBT who often face cultural barriers to				In
	addition, there are families who have other religious and or cu				
	from mainstream Utah who recognize the UDVC Linkline as a safe a				
	Utah is a primary refugee resettlement area and the UDVC provice				
	interpreter services to accommodate the many languages spoken i				
	See Form 990, Page 2, Part III, Line 4c (continued)		<u></u> -	· ·	
4	d Other program services. (Describe in Schedule O)				
	(Expenses \$ 36,619. including grants of \$ 0.) (Revenue \$		0	.)	
4	e Total program service expenses ► 605, 403.				
BA	A TEEA0102 07/05/11		For	m 990	(2011)

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			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
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		_X
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	_	Х
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		X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
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		х
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		900	
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
١	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	11 b		X
•	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	11 c		х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		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	11 f		х
	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	Х	
	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		х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
•	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		x
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		х
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		х
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		х
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		х
	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		х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X_
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		<u> </u>

			Yes	No
21 `	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? 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		x
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? <i>If 'Yes,' complete Schedule J</i>	23		х
24:	a 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, and 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		x
1	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
•	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a	:	х
ı	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		х
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		х
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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
i	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		х
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		х
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		х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37_		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 Note. All Form 990 filers are required to complete Schedule O	38	Х	
BA	4	Forr	n 990	(2011)

87-0524312 Page 5 Part V. Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1ь 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 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 11 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 3Ь 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 Х c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 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 Х b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 a b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f Х g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h : J.Ā 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 西蒙 在手 北方 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9ь 10 Section 501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 132 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 13b c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year?

14b

Form 990 (2011) Utah Domestic Violence Advisory Council 87-0524312 Page 6 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1 a 12 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 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Х 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 one or more members of the governing body? 7 a Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7h Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a Х a The governing body? b Each committee with authority to act on behalf of the governing body? 8_b Х Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X 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 X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a 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 Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c 13 Х 13 Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 14 X 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? Х a The organization's CEO, Executive Director, or top management official 15a 15b Х **b** Other officers of 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 with a taxable entity during the year? 16a Х 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 taken steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ► Utah Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, 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 organization: Margaret R. Coleman __205 North 400 West Salt Lake City UT __84103-1125 ____ (801) 521-5544

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

- 1 a 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	nor any r	elated	org	anız	atıo	n com	pen	sated any current office	cer, director, or trustee	e
-		(C)								
(A) Name and title	(B) Average hours per week	unles	s per	ck mo	both	an one n an offi ustee)	box, cer	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation
	(describe hours for related organiza- tions in Schedule O)	ज्ञातान्य क्षा ज्ञातान्य क्षा	anstitutional trustee	Officer	Key amployee	Higt est conçensated employae	r ormer	(W-2/1099-MISC) (W-2/1099-MISC)		from the organization and related organizations
(1) Anne Burkholder										
Board Chair	4.00	Х		X				0.	0.	0.
(2) James Harper										
Chair Elect	3.00	Х	<u> </u>	Х				0.	0.	0.
(3) Antonette Gray			1							
Secretary	3.00	Х	<u> </u>	Х				0.	0.	0.
_(4)_Jaylyn_Hawks Treasurer	3.00	х		Х				0.	0.	0.
(5) Kathryn Monson			T							
Past Board Chair	3.00	Х		х				0.	0.	0.
(6) Jerry Blackburn									-	
Committee Chair	2.00	Х						0.	0.	0.
(7) Annette MacFarlane Committee Chair	2.00	х				•		0.	0.	0.
(8) Katy Peterson			T							
Committee Chair	2.00	x						0.	0.	0.
_(9)_Ned_Searle Committee Chair	2.00	x				i		0.	0.	
(10) Kevin Nudd			┞							
At-Large Member	2.00	х						0.	0.	0.
(11) Dorothy Hall			T							
At-Large Member	2.00	х						0.	0.	0.
(12) Judy Monarque										
At-Large Member	2.00	X				<u> </u>		0.	0.	0.
(13) Margaret R. Coleman			1							
Executive Director	50.00		<u> </u>	X	Х		ļ	0.	0.	0.
(14) Judy Kasten-Bell									_	
Past Exec Dir	40.00	<u> </u>	1	X	Х	<u> </u>	<u> </u>	37,260.	0.	15,914.

Part VII Section A. Officers, Directors, Trust	ees, k	Кеу	Em	plo	ye	es, a	and	l Highest Com	pensated Empl	oyees (co	nt)
				((-	
Name and title	(B) Average hours per	offic	, unle er an	ss pe id a d	rson i irecto	than c s both r/trust	an ee)	(D) Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimate amount of compensa	other tion
	week (describ e	Individure or dire	Institu	Officer	Key e	Highes	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from th organizat and rela	ion
	week (describ e hours for related organi- zations	ctor	Institutional trustee	_	nploye	st com	۳			organizati	ons
	organi- zations in Sch O)		trustee		Ж	Highest compensated employee					
(15) Kendra Wyckoff				,,	,,			0 021	0		000
Interim Exec Dir	40.00			X	Х			9,231.	0.		980.
(17)	-										
(18)											
(19)											
(20)											
(21)	<u> </u>				_						
(22)	ļ	-									
(23)		ļ									
(24)											
(25)								·			
1 b Sub-total							•	46,491.	0.	16,	894.
c Total from continuation sheets to Part VII, Section A	4						▶				
d Total (add lines 1b and 1c)							>	46,491.	0.	·	894.
2 Total number of individuals (including but not limited from the organization ► 0	l to tho:	se lis	sted	abo	ve) v	who i	rece	eived more than \$	100,000 of reportabl	le compensa	tion
										Yes	
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or trust <i>dıvıdua</i>	ee, l	кеу (emp	loye	e, or	hıgl	hest compensated	l employee	3	X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the	ortable an \$15	cor 50,00	nper	nsatı <i>f 'Ye</i>	on a	nd o	ther lete	compensation fro Schedule J for	om	,	
such individual5 Did any person listed on line 1a receive or accrue co	ompens	satio	n fro	m a	nv u	nrela	ated	organization or in	ndıvıdual	4	X
for services rendered to the organization? If Yes, consection B. Independent Contractors	omplete	e Sc	hedu	ile J	for	such	per	rson		5	<u> </u>
1 Complete this table for your five highest compensate	ed inde	pend	lent	cont	ract	ors t	hati	received more tha	n \$100,000 of		
compensation from the organization Report compen	sation	for t	he c	aler	ldar	year	end	i -			
(A) Name and business addres	s							Description		(C) Compensal	ion
							_				
	•										
	, <u></u>										
2 Total number of independent contractors (including I \$100,000 in compensation from the organization ►		limit	ed t	o the	ose	istec	ab	ove) who received	I more than	<u>,</u>	
											

Par	t VIII Statement of Revenue				
•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in Ins 1a-1f: b 1,999. 1 d 607,779. 1 d 40,716.	650, 494.			
	Business Code				
Ē	2a Conference Reg Fees 611430	25,245.	25,245.	0.	0.
E.	b Training Reg Fees 611430	8,823.	8,823.	0.	0.
Ş	c				
SER	d				
PROGRAM SERVICE REVENUE	e				
20	f All other program service revenue				
-æ	g Total. Add lines 2a-2f ►	34,068.			
	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 				
	6a Gross rents				
	b Less rental expenses				:
	c Rental income or (loss)				,
i	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
NUE	8a Gross income from fundraising events (not including \$				3 1
OTHER REVENU	of contributions reported on line 1c).				
E	See Part IV, line 18 a				
6	b Less: direct expenses c Net income or (loss) from fundraising events		-		
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns				
	and allowances a				
	b Less. cost of goods sold b				
	c Net income or (loss) from sales of inventory			-	
	Miscellaneous Revenue Business Code				
	11a				<u> </u>
	b	 			
	d All other revenue				-
	e Total. Add lines 11a-11d				1
	12 Total revenue. See instructions	684,562.	34,068.	0.	0.

Part IX | Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a re	sponse to any question	in this Part IX		
Do l	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	53,497.	45,472.	5,350.	2,675.
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	236,047.	214,615.	17,581.	3,851.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	16,125.	13,700.	2,052.	373.
10	Payroll taxes	30,488.	27,699.	2,141.	648.
11	Fees for services (non-employees).				
a	n Management				
t	Legal				
(: Accounting	11,479.	0.	11,479.	0.
C	i Lobbying				
€	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
ç	Other	92,811.	88,524.	4,287.	0.
12	Advertising and promotion				
13	Office expenses	18,541.	16,301.	2,157.	83.
14	Information technology				
15	Royalties				
16	Occupancy	21,944.	20,186.	1,538.	220.
17	Travel	75,468.	72,295.	2,842.	331.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	44,558.	44,103.	455.	0.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,284.	1,168.	103.	13.
23 24	Insurance 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)	1,100.	0.	1,100.	0.
	Local_Coalition	23,000.	23,000.	0.	0.
t	Victim Assistance	21,538.	21,538.	0.	0.
	Printing/Reproduction	8,188.	8,023.	165.	0.
(Miscellaneous	12,170.	8,779.	3,365.	26.
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	668,238.	605,403.	54,615.	8,220.
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		1		
	SOP 98-2 (ASC 958-720)	<u></u>			
BAA					Form 990 (2011)

Pa	<u>rt∙X</u>	Balance Sheet				
			-	(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing		38,552.	1	52,467.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	<u> </u>
	4	Accounts receivable, net		22,022.	4	54,300.
	5	Receivables from current and former officers, directors and highest compensated employees. Complete Part I	s, trustees, key employees, I of Schedule L		5	
	6	Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contributions organizations of section 501(c)(9) voluntary organizations (see instructions)		6		
A	7	Notes and loans receivable, net			7	·
Š	8	Inventories for sale or use			8	
ASSETS	_	Prepaid expenses and deferred charges		2,494.	9	1,899.
3			1 1	2,434.	7	1,033.
	10a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	10a 17,275.			,
	b	Less: accumulated depreciation	10b 15,097.	3,147.	10 c	2,178.
	11	Investments – publicly traded securities		_	11	
	12	Investments – other securities See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11	,	13		
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line	34)	66,215.	16	110,844.
	17	Accounts payable and accrued expenses	•	24,066.	17	52,179.
	18	Grants payable			18	
	19	Deferred revenue			19	4,086.
Ļ	20	Tax-exempt bond liabilities			20	
Å	21	Escrow or custodial account liability Complete Part I'	V of Schedule D		21	
A B I L I	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per of Schedule L	stees, key employees, sons Complete Part II		22	
Ţ	23	Secured mortgages and notes payable to unrelated th	ird parties		23	
E S	24	Unsecured notes and loans payable to unrelated third	•		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24) Company of the com	•		25	
	26	Total liabilities. Add lines 17 through 25		24,066.	26	56,265.
Ñ		Organizations that follow SFAS 117, check here ►	X and complete lines			
N E T		27 through 29 and lines 33 and 34.				
Ş	27	Unrestricted net assets		42,149.	27	46,829.
ASSETS	28	Temporarily restricted net assets			28	7,750.
	29	Permanently restricted net assets		29		
R		Organizations that do not follow SFAS 117, check he	re ► and complete			,
F		lines 30 through 34.	_			-
FUZD	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipm	ent fund		31	
î	32	Retained earnings, endowment, accumulated income,			32	
BALAZCES	33	Total net assets or fund balances		42,149.	33	54,579.
Š	34	Total liabilities and net assets/fund balances		66,215.	34	110,844.

BAA

Form 990 (2011)

	524312		Pa	age 12
Part-XI Reconciliation of Net Assets				
Check if Schedule O contains a response to any question in this Part XI				
•				
1 Total revenue (must equal Part VIII, column (A), line 12)	1	68	34,5	62.
2 Total expenses (must equal Part IX, column (A), line 25)	2	66	58,2	238.
3 Revenue less expenses Subtract line 2 from line 1	3		16,3	324.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			L49.
Other changes in net assets or fund balances (explain in Schedule O)	5			394.
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	r	54.5	- 579.
Part XII Financial Statements and Reporting			, 1 , 5	
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	Γ	_		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
b Were the organization's financial statements audited by an independent accountant?	ŀ	2b	х	 -
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a review, or compilation of its financial statements and selection of an independent accountant?	audit,	2 c	х	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				,
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued of separate basis, consolidated basis, or both	on a		Ì	Á
X Separate basis Consolidated basis Both consolidated and separate basis	-			,
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Audit Act and OMB Circular A-133?	gle	3a	х	
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	d audit	3Ь	х	
BAA	·	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.

Open to Public Inspection,

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(E)

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

Utah Domestic Violence Advisory Council 87-0524312 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross X 9 investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type III - Other a | Type I Type II Type III — Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) A family member of a person described in (i) above? 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above?.. 11 g (iii) Provide the following information about the supported organization(s) h (vi) Is the organization in column (i) organized in the US? (iv) Is the organization in column (i) listed in (i) Name of supported organization (II) EIN (III) Type of organization (described on lines 1-9 above or IRC section (v) Did you notify the organization in (vii) Amount of support column (i) of your support? (see instructions)) your governing document? Yes Yes No Yes No Nο (B) (C) (D)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 Utah Domestic Violence Advisory Council 87-0524312 Part II 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 rans to quality t	muer the tests hs	ieu below, piease	complete Part III)			
Sec	tion A. Public Support		1					
	ndar year (or fiscal year nning 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	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							-
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)					,		
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support			·		·		
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011		(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activ	ities, etc (see ins	tructions)	_			12	
	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ 🗍
	tion C. Computation of Pu					-·· ₊		
	Public support percentage for 20	-	, .	e 11, column (f))		_	14	<u> </u>
	Public support percentage from 2	•	ŕ	_			15	%_
168	33-1/3% support test - 2011. If t and stop here. The organization	he organization d qualifies as a pub	id not check the b dicly supported or	ox on line 13, and ganization	I the line 14 is 33-	1/3% or more	e, chec	k this box
t	33-1/3% support test — 2010. If t and stop here. The organization	he organization d qualifies as a pub	id not check a box licly supported or	c on line 13 or 16a ganization	a, and line 15 is 33	3-1/3% or mo	re, che	eck this box
17 a	10%-facts-and-circumstances te or more, and if the organization in the organization meets the 'facts	neets the 'facts-a	nd-circumstances	' test, check this b	oox and stop here .	. Explain in P	art IV	0% how ► [
	10%-facts-and-circumstances te or more, and if the organization in organization meets the 'facts-and	neets the 'facts-a I-circumstances' t	nd-circumstances lest The organiza	' test, check this b tion qualifies as a	oox and stop here. publicly supporte	. Explain in P d organizatioi	art IV า	how the □
	Private foundation. If the organiz	ation did not che	ck a box on line 1	3, 16a, 16b, 17a,				
BAA					9	chadula A (Ec	rm QQ	0 or 990.E7\ 2011

Schedule A (Form 990 or 990-EZ) 2011 Utah Domestic Violence Advisory Council 87-0524312 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
	dar year (or fiscal yr 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			ï			
_	any 'unusual grants ')	402,589.	488,965.	522,499.	539,801.	650,494	. 2,604,348.
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				i		
3	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						
5	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	402,589.	488,965.	522,499.	539,801.	650,494	. 2,604,348.
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			<u>-</u>			
	Public support (Subtract line 7c from line 6)	50			-	1. /	2,604,348.
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6	402,589.	488,965.	522,499.	539,801.	650,494	. 2,604,348.
	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						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	26,353.	58,705.	37,773.	46,206.	34,068	. 203,105.
13	Total support. (Add Ins 9, 10c, 11, and 12)	428,942.	547,670.	560,272.	586,007.	684,562	. 2,807,453.
14	First five years. If the Form 990 organization, check this box and	stop here		, third, fourth, or	fifth tax year as a	section 501(c)(3) ▶ □
	tion C. Computation of Pu						
15	p p			13, column (f))		15	
16	Public support percentage from 2					16	93.28 %
	tion D. Computation of Inv					·	
17	Investment income percentage for	•		•	n (f))	17	
18	Investment income percentage fr					18	<u> </u>
	33-1/3% support tests — 2011. If is not more than 33-1/3%, check	this box and stop	here. The organiz	ation qualifies as	a publicly support	ted organization	n ► <u>X</u>
b	33-1/3% support tests — 2010. If line 18 is not more than 33-1/3%	, check this box an	id stop here. The	organization qual	lifies as a publicly	supported orga	3-1/3%, and nization •
20	Private foundation. If the organiz	zation did not checl	k a box on line 14	, 19a, or 19b, ch	eck this box and se	ee instructions	<u> </u>

Schedule A (Form 990 or 990-EZ) 2011 Utah Domestic Violence Advisory Council 87-0524312 Page 4
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).
Program Service Revenue
Other Income Part III, Line 12
Description: Program Service Revenue
2007: 26353.
2008: 58705.
2009: 37773.
2010: 46206.
2011: 34068.

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, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public

				Employer Identification	FIIGHDE
Uta	ah Domestic Violence Advisory	Council		87-0524312	
Par		r Advised Funds or Other Similar Fun	ds or Acc		e ıf
		(a) Donor advised funds	(b) F	unds and other acc	ounts
1	Total number at end of year				-
2	Aggregate contributions to (during year)				· · · · · · · · · · · · · · · · · · ·
3	Aggregate grants from (during year) .				
4	Aggregate value at end of year				
5	Did the organization inform all donors and don funds are the organization's property, subject t	or advisors in writing that the assets held in donion the organization's exclusive legal control?	or advised	Yes	☐ No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for t purpose conferring impermissible private bene	s, and donor advisors in writing that grant funds the benefit of the donor or donor advisor, or for a fit?	can be ny other	Yes	☐ No
Par	t II Conservation Easements. Comp	lete if the organization answered 'Yes'	to Form 9	90, Part IV, line	
1	,				
	Preservation of land for public use (e.g., re	ecreation or education)	f an historica	ally important land a	area
	Protection of natural habitat	Preservation o	f a certified	historic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation contribution in th	e form of a	conservation easem	ent on the
	last day of the tax year			Held at the End of t	he Tay Year
a	Total number of conservation easements .		2a	Held at the Lild Of t	ile Tax Teal
	Total acreage restricted by conservation easer	nents	2b		
	Number of conservation easements on a certif		2c		
		n (c) acquired after 8/17/06, and not on a historic			
Ī	structure listed in the National Register	•	2d		
3	Number of conservation easements modified, tax year ▶	transferred, released, extinguished, or terminated	d by the orga	anization during the	
4	Number of states where property subject to co	nservation easement is located >	_		
5		garding the periodic monitoring, inspection, hand its it holds?			☐ No
6					
7	Amount of expenses incurred in monitoring, in \$\bigs\\$	specting, and enforcing conservation easements	during the y	ear	
8	Does each conservation easement reported or 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of sect	ion	Yes	☐ No
9	In Part XIV, describe how the organization rep include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its revenue and on the organization's financial statements that des	expense stat scribes the o	tement, and balance rganization's accou	e sheet, and nting for
Pai	rt III Organizations Maintaining Colle	ections of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	Other Sir	nilar Assets.	
		<u> </u>			
1 8	art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finan	SFAS 116 (ASC 958), not to report in its revenus held for public exhibition, education, or researcial statements that describes these items.	e statement h in furthera	and balance sheet nce of public servic	works of e, provide,
ŀ	b If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items:	SFAS 116 (ASC 958), to report in its revenue stands for public exhibition, education, or research in	atement and furtherance	balance sheet wor of public service, pi	ks of art, rovide the
	(i) Revenues included in Form 990, Part VIII,	line 1		► \$	
	(ii) Assets included in Form 990, Part X			► \$	
	amounts required to be reported under SFAS		financial ga	nin, provide the follo	wing
	Revenues included in Form 990, Part VIII, line	1		► \$	<u> </u>
	Accets included in Form 990 Part X			► ¢	

Part III Organizations Maintai	ining Collection	ons of Art Histo	orical Treasures or	Other Similar Ass	ets (cont	Page 2
3 Using the organization's acquisition items (check all that apply)	on, accession, and	other records, chec	ck any of the following ti	nat are a significant use	of its collec	ction
a Public exhibition		d Loan o	or exchange programs			
b Scholarly research		e 🗌 Other				
c Preservation for future genera						
4 Provide a description of the organ Part XIV					ın	
5 During the year, did the organizat assets to be sold to raise funds ra	ion solicit or recei	ve donations of art,	historical treasures, or the organization's collection	other similar	Yes	□No
Part IV Escrow and Custodia	Arrangement	s. Complete if t	he organization and	swered 'Yes' to Fo		
line 9, or reported an	amount on For	m 990, Part X,	lıne 21.		,	
1 a Is the organization an agent, trust included on Form 990, Part X?	tee, custodian, or	other intermediary f	or contributions or other	assets not		Пио
b If 'Yes,' explain the arrangement	in Part XIV and co	omplete the following	n table		Yes	∐ No
o	arr arr xiv aria co	implete the following	y table.	[Amount	
c Beginning balance				1c	Amount	
d Additions during the year				1d		
e Distributions during the year			·	1e		
f Ending balance				1f		
2a Did the organization include an ar	mount on Form 99	0, Part X, line 21?		· · · · · · · · · · · · · · · · · · ·	Yes	No
b If 'Yes,' explain the arrangement					_	_
Part V Endowment Funds. Co	mplete if the o	organization ans	swered 'Yes' to Fore	m 990, Part IV, line	∍ 10.	
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four	years back
1 a Beginning of year balance						
b Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships						:
e Other expenditures for facilities and programs					1	
f Administrative expenses						
g End of year balance	_					
2 Provide the estimated percentage	2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as.					
a Board designated or quasi-endowment ► %						
b Permanent endowment ►	b Permanent endowment ►%					
	c Temporarily restricted endowment ► %					
The percentages in lines 2a, 2b, a	and 2c should equ	al 100%				
3a Are there endowment funds not in organization by:	the possession o	f the organization th	nat are held and adminis	stered for the	Ye	s No
(i) unrelated organizations					3a(i)	- 110
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(II), are the related or	rganizations listed	as required on Sch	edule R?		3b	
4 Describe in Part XIV the intended						
Part VI Land, Buildings, and I	Equipment. Se	ee Form 990, Pa	rt X, line 10.			
Description of property	(a) (Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	value
1 a Land						
b Buildings						
c Leasehold improvements						
d Equipment	1./2.0.1 10/03/.1 2/1/03					2,178.
e Other						
Total. Add lines 1a through 1e (Column	n (d) must egual F	orm 990, Part X, co	olumn (B), line 10(c))	<u> </u>		2,178.
BAA				Sched	dule D (Form	1 990) 2011

Schedule D	(Form 990) 2011	Utah	Domestic	Vio	Lence Advisory	Council	87-052	24312 Page 3
Part VII	Investments -	- Other	Securities.	See l	orm 990, Part X,	line 12.		
	(a) Description of s (including nar	security one of sec	r category urity)		(b) Book value		(c) Method of valua Cost or end-of-year man	tion ket value
(1) Financia	al derivatives							
	held equity interes	sts						
(3) Other								
<u>(A)</u>								
<u>(B)</u>					· · · · · · · · · · · · · · · · · · ·			<u> </u>
(C)								
<u>(D)</u>			- 					
<u>(E)</u>								
<u>(F)</u>		- -				 		
<u>(G)</u>				-		-		
<u>(H)</u>						-		
<u>(1)</u>								
	nn (b) must equal Form				Form 990, Part X,	luna 12	·	
Part VIII	(a) Description of			. See		line 13.	2-3-M-M	
	(a) Description of	rınvesım	ent type		(b) Book value		(c) Method of valua Cost or end-of-year mar	
(1)								
(2)								7 7 7 11/11/11
(3)								
(4)							-	-
(5)								
(6)				_				
(7)							- "	
(8)								
(9)								
(10)						<u> </u>		
	n (b) must equal Form 9					<u> </u>		·- · · · · · · · · · · · · · · · · · ·
Part IX	Other Assets.	See FC	rm 990, Pa					T
				(a) Des	scription			(b) Book value
(1)								-
(3)								-
(4)	·				<u></u>			
(5)								
(6)								
(7)								· <u>-</u>
(8)								
(9)						-		
(10)								· - · · · · · · · · · · · · · · · · · ·
Total. (Col	umn (b) must equa	I Form 9	90, Part X, col	umn (B), line 15)		>	
Part X	Other Liabiliti	es. See	Form 990,	Part 2	K, line 25.			
	(a) Descrip	otion of hi	ability		(b) Book value	:		
(1) Feder	al income taxes							
(2)		·	<u> </u>					,
(3)								
(4)								
(5)		_						
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
•	n (b) must equal Form 9				<u> </u>			
2 FIN 48 (A	SC 740) Footnote	In Part X	IV, provide the	e text of	the footnote to the org	anızatıon's fın	ancial statements that re	ports the

		-0524312	Page 4
Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		684,562.
.2	Total expenses (Form 990, Part IX, column (A), line 25)		668,238.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		16,324.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities .		
6	Investment expenses .		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net) Add lines 4 through 8		
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	<u>. </u>	16,324.
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re		601 055
	Total revenue, gains, and other support per audited financial statements	1	691,057.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	a Net unrealized gains on investments 2 a 2 b C 405		
	Donated services and use of facilities 2b 6,495.	A STORY	
	c Recoveries of prior year grants d Other (Describe in Part XIV)		
	e Add lines 2a through 2d	2e	6 105
	Subtract line 2e from line 1	3	6,495.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1	<u> </u>	004,302.
	a Investment expenses not included on Form 990, Part VIII, line 7b		
	b Other (Describe in Part XIV.) 4b	Alle X	
	c Add lines 4a and 4b	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	684,562.
	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per		001/302.
	Total expenses and losses per audited financial statements	1	674,733.
	Amounts included on line 1 but not on Form 990, Part IX, line 25	748	
	a Donated services and use of facilities 2a 6, 495.		
1	b Prior year adjustments 2b		
	c Other losses 2c	817.2 ¹¹ .1	
(d Other (Describe in Part XIV.)		
(e Add lines 2a through 2d	2e	6,495.
3	Subtract line 2e from line 1	3	668,238.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	, मार १ म १	
;	a Investment expenses not included on Form 990, Part VIII, line 7b	- 38 6 4 6 4	
	b Other (Describe in Part XIV)		
	c Add lines 4a and 4b	4c	660 220
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIV Supplemental Information	5	668,238.
	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1.	ace 1h and 2h	
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 the additional information	nis part to prov	nde
_		<u> </u>	
BAA	TEEA3304 05/25/11	Schedule D (l	Form 990) 2011

Schedule D (Form 990) 2011 Utah Domestic Violence Advisory Council	87-0524312	Page 5
Schedule D (Form 990) 2011 Utah Domestic Violence Advisory Council Park Supplemental Information (continued)	· · · -	
		
		
	·	

TEEA3305 05/25/11

Schedule **D** (Form 990) 2011

BAA

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

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	Employer identification number
Utah Domestic Violence Advisory Council	87-0524312
Pt_VI, Line_6Members pay a fee for voting rights	s and training discounts.
Pt_VI, Line 7aThe members elected Board members a	at the annual meeting, the
number depended on the members step	pping down. Members also
had a vote regarding Officer position	ions.
Pt_VI, Line 7b Various matters were subject to app	proval of the members. These
would be communicated to the member	rs in advance of the Business
meetings (held every other month).	These were closed meetings
with the various items discussed and	nd voted upon at those meetings.
Pt_VI, Line 11a The 990 was emailed to the governing	ng body to review in advance of a
Board meeting and was discussed and	d approved at the meeting.
Pt_VI, Line 12c The written conflict of interest policy	is in the personnel manual for employees.
It does not specifically address offic	ers, directors, or trustees. The policy
will be updated, and will include m	onitoring and compliance procedures.
Pt VI, Line 15 The Board reviews and approves the compensation	sation for the Executive Director position.
Pt_VI, Line 19 Governing documents, policies and financial sta	atements are available to the public upon request.
Pt XI Line 5: 9/30/11 net assets restated	d due to prior year corrections.
Pt VI, Line 13 A written whistleblower policy will	be created and implemented in next FY.
Pt VI, Line 14 A written documentation retention a	nd_destruction_policy_will_be_created
and implemented in next FY.	

Schedule O (Form 990), Supplemental Information to Form 990

Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

with interpersonal violence. The majority of UDVC member programs servicing domestic violence victims in Utah are therefore dual programs meeting the needs of sexual assault survivors.

Schedule O (Form 990), Supplemental Information to Form 990

Form 990, Page 2, Part III, Line 4a (continued)

practices that empower victims and help heal families. UDVC offers basic and on-going advocacy training to all the domestic violence advocates in the state. UDVC also provides training to our State Department of Human Services as well as private therapists working with victims of interpersonal violence. Specialized training and resources are also offered concerning such issues as workplace violence, bullying, stalking, elder abuse, abuse of persons with disabilities and perpetrator accountability.

Schedule O (Form 990), Supplemental Information to Form 990

Form 990, Page 2, Part III, Line 4c (continued)

Beyond resource and referral, UDVC Linkline staff often engage in direct safety planning to assist persons in immediate danger to access and plan for safety.

Schedule O (Form 990), Supplemental Information to Form 990

Form 990, Page 2, Part III, Line 4d (continued)

Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 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.

Code:	Description:	CONFERENCE: the UDVC conference presents an opportunity
Expenses	36,619.	for a broad base of interested stakeholders to come
Grants Of	0.	together to hear about promising practices and best
Revenue	0.	practices to enhance the safety of victims of violence
		and their children. More than 300 participants attended
		the conference and the audience included educators,
		law enforcement, state & local officials as well as
Code:	Description:	advocates who learned about batterer intervention
Expenses	0.	programs, working with trauma, helping children heal
Grants Of	0.	and safety planning. The annual conference consistently
Revenue	0.	receives the highest ratings from attendees for its
		educational value and the practical tools it provides
		to those working with victims of domestic violence and
		their children and is also accredited to offer
Code:	Description:	Continuing Educational Units by various state/national
Expenses	0.	bodies.
Grants Of	0.	
Revenue	0.	