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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

2012

OMB No 1545-1150

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

Open to Public Inspection

Department of the Treasury

		III Service	► The organization may have to use a copy of this return to satisfy state reporting requirement	s					
_			ar year, or tax year beginning , 2012, and ending		, 20				
_	heck if ap	•	C Name of organization D Em	ployer i	dentification number				
=	Address c	-	FRIENDS FOR A NON-VIOLENT WORLD, INC.		11-1403496				
	Name cha	-	Number and street (or P O box, if mail is not delivered to street address) Room/suite E Te	ephone r	number				
	initial retur Terminate		1050 SELBY AVE	651-917-0383					
=	Amended		City or town, state or country, and ZIP + 4	oup Exe	emption				
\equiv		n pending	SAINT PAUL MN 55104 N	ımber	>				
G A	Account	ting Method	☐ Cash	▶ □	if the organization is not				
1.1	Vebsit	e:► www			tach Schedule B				
JT	ax-exen	npt status (che	990, 99	00-EZ, or 990-PF)					
K	Check ► ☐ If the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally								
r	not more than \$50,000 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if								
			oses to file a return, be sure to file a complete return						
LA	dd lines	5b, 6c, and 7	b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part	II,					
hi	ne 25, c	olumn (B) belo	ow) are \$500,000 or more, file Form 990 instead of Form 990-EZ	▶ :	109,663				
P	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the instr	uction					
			the organization used Schedule O to respond to any question in this Part I						
	1		ons, gifts, grants, and similar amounts received	<u>.</u>	70,507				
	2		ervice revenue including government fees and contracts	2	17,885				
	3	_	ip dues and assessments	3	0				
	4	Investmen		4	†··				
	1 _			—	0				
	5a		bunt from sale of assets other than inventory	\dashv					
	b		or other basis and sales expenses	┥ᇎ					
	C		ss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0				
	6	_	nd fundraising events						
ø	а		ome from gaming (attach Schedule G if greater than	1					
Revenue				0					
Ş	ь		ome from fundraising events (not including \$ 0 of contributions						
æ			raising events reported on line 1) (attach Schedule G if the						
		sum of suc	ch gross income and contributions exceeds \$15,000). 6b 20,00	15					
	С		ct expenses from gaming and fundraising events . 6c 87	_					
	d	Net incom	ie or (loss) from gaming and fundraising events (add lines 6a and 6b and subtrac	: j					
		lıne 6c)		6d	11,298				
	7a	Gross sale	es of inventory, less returns and allowances						
	b	Less: cost	of goods sold						
	С	Gross prof	fit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0				
	8		nue (describe in Schedule O)	8	1186				
	9	Total reve	enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	100,876				
	10	Grants and	d similar amounts paid (list in Schedule O)	10	0				
	11		ald to or for members	11	0				
Ś	12	•	ther compensation, and employee benefits	12	40,223				
Expenses	13		nal fees and other payments to independent contractors	13	5264				
bei	14		y, rent, utilities, and maintenance	14	20,052				
翌	15		ublications postage and shipping	15	5063				
	16		enses (describe in Schedule O)	_ 16	24,603				
	17	-	enses. Add lines 10 through 16	一家	 				
	18		(deficit) for the year (Subtract line 17 from line 9)	常	95,205				
ets	19		s or fund balances at beginning of year (from line 27, column (A)) (must agree with		5671				
SS	'3				63 -0-				
Net Assets	20	=		20	57,707				
Š	20		inges in the account of fulfild balances (explain in concedure of		1 22 270				
_	21		s or fund balances at end of year. Combine lines 18 through 20	21	63,379 Form 990-EZ (2012)				
For	raper	work Reduct	tion Act Notice, see the separate instructions. Cat No 106421		rom: 330-EZ (2012)				

Pa	t II Balance Sheets (see the instructions	for Part II)				
	Check if the organization used Schedule	•	ny question in this	Part II		🗸
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		[60,076		59,249
23	Land and buildings				23	0
24	Other assets (describe in Schedule O)		<i>.</i> .	6328	_	4844
25	Total assets			66,404		64,273
26	Total liabilities (describe in Schedule O)	· · · · · · · · · · · · · · · · · · ·		8697		
27	Net assets or fund balances (line 27 of column			57,707	27	63,379
Par		•		•	ł	Expenses
What	Check if the organization used Schedule is the organization's primary exempt purpose?	creating non-violent				quired for section (c)(3) and 501(c)(4)
						inizations and section
as m	ribe the organization's program service accompleasured by expenses. In a clear and concise nons benefited, and other relevant information for e	nanner, describe the	e services provide	d, the number of		7(a)(1) trusts, optional others)
28	The ALTERNATIVES TO VIOLENCE PROJECT serve	s inmates of Minneso	ta corrections facilit	ies, residents of		
	county jails, & members of the general public by tea	ching non-violent cor	offict resolution & co	mpassionate		
	communication In 2012, 25 volunteers facilitated 35					
		t includes foreign gra			28a	22,239
29	PEACE EDUCATION & ADVOCACY educated comm					
	power & practice of non-violence & on vital national					
	we focused on conflicts involving Iran, Syria, Palest				00-	
30		t includes foreign gra			29a	11,3 <u>71</u>
30	PEOPLE CAMP held a week-long, intergenerational, community living, peacemaking & the exploration of					
	ages attended & learned about gardening, cooking v			ioz peopie oi aii		
		t includes foreign gra		• П	30a	14,093
31	Other program services (describe in Schedule O)	<u></u>				11,000
	(Grants \$) If this amount	t includes foreign gra	ants, check here .	▶ 🗆	31a	12,465
32	Total program service expenses (add lines 28a	through 31a)	·		32	60,168
Par	IV List of Officers, Directors, Trustees, and Ke	y Employees List eac	h one even if not com	pensated (see the in	struc	tions for Part IV)
	Check if the organization used Schedule	e O to respond to a			<u>., .</u>	<u> </u>
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)		1.0	Estimated amount of other compensation
Robe	rt Nechal, Managing Director (Apr-Dec, 2012)		}			
		20	10,500	0	0	. 0
Rae (Cornelius, Board Member					
		1	(0	0	0
Gail	Paneker, Board Member					_
	And Contain Transport	1	<u> </u>	<u> </u>	<u> </u>	0
Багра	ıra Gerten, Treasurer			<u>,</u>	٥	0
Mary	Hinz, Board Member			<u>'</u>	-	
		·· ₁		<u>, </u>	٥	0
Cath	Murphy, Secretary				1	
		4		o	0	0
Erika	Thorne, Managing Director (Jan-Mar, 2012)					· - · · · · · · · · · · · · · · · · · ·
		30	558	4	0	0
						į.
			 		+	
						:
					+	-
			 	 	+	
		-			-	

Part				
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	v . Yes	⊔ No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	162	N 0
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			_ •
35a	change on Schedule O (see instructions)	34		✓
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	_	✓_
	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0	•		
ь 38а	Did the organization file Form 1120-POL for this year?	37b 38a		√
	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0; section 4912 ▶ 0; section 4955 ▶ 0			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	<u>-</u> -	,
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			•
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization	:		
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		/
41	List the states with which a copy of this return is filed ▶ Minnesota			
42a		551-21		
	Located at ► 270 Cottage PI, Shoreview MN ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over	55126	5-3002	
D	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No
	If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	1	✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the tax year	· ·	. i	► □
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		Yes	No
	completed instead of Form 990-EZ	44a		✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
c d	Did the organization receive any payments for indoor tanning services during the year?	44c	-	✓
u	explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		1
45b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		1

Form 990-1	EZ (2012)						F	age 4	
40 0	and the evenement of the state	and the state of the state of the		lll4 -4			Yes	No	
	od the organization engage, directly or it candidates for public office? If "Yes," o		' ~	benair or or i	• •	46	-	Ĩ	
Part VI			,			10			
	All section 501(c)(3) organization		estions 47-49b and	52, and com	plete the t	ables f	or lin	es	
	50 and 51							_	
	Check if the organization used Sc	hedule O to respond	d to any question in t	his Part VI	<u> </u>		· ·		
47 D	old the organization engage in lobbying	activities or have a	section 501/h) electio	n in effect di	inna the tax	,	Yes	No	
	ear? If "Yes," complete Schedule C, Par					47	1		
-	s the organization a school as described in			48	<u> </u>	1			
	old the organization make any transfers t					49a		1	
	Complete this table for the organization's mployees) who each received more thar								
	imployees) who each received more than			(d) Health b		enter r	vone.		
	(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week	(c) Reportable compensation	contributions to	employee (e)	Estimate			
	paid more than \$100,000	devoted to position	(Forms W-2/1099-MISC)	benefit plans, ar compens		other compensation			
NONE									
									
f T	and a section of athere are also as a section	\$100.000	. ▶ 0					·	
	otal number of other employees paid ov complete this table for the organization		· · · ·	contractors	who each re	rewed	more	thar	
	100,000 of compensation from the orga			CONTRACTORS	willo each le	CEIVEU	111016	: urai	
(a) Na	me and address of each independent contractor pa	aid more than \$100,000	(b) Type of serv	vice .	(c) Co	mpensat	ion		
			(3) 1) pe of seri						
NONE			_						
			-						
					·				
			4						
			-						
d T	otal number of other independent contra	actors each receiving	over \$100.000	>	0				
	old the organization complete Schedule	_		and 4947(a)(
	onexempt charitable trusts must attach					✓ Yes		No	
	alties of perjury, I declare that I have examined this ct, and complete Declaration of preparer (other that					ledge and	d belief,	ıt ıs	
- Correc	ct, and complete declaration of preparer torner that	n officer) is based on all info	ormation of which preparer	nas any knowledg					
Sign	Signature of officer			Date					
Here	,	TEN T	reasurel	22.0	5/13/13	3			
	Type or print name and title	10			1 -11				
Paid	Print/Type preparer's name	Preparer signature	Da Da	12/3	Check If	PTIN			
Prepar	'er Gillian Martin	1 produce	$\mathcal{N}\cup$ \Box	21417	self-employed	PO	14647	97	

Firm's name ► Clarity Bookkeeping LLC

Firm's address > 270 Cottage PI, Shoreview MN 55126

May the IRS discuss this return with the preparer shown above? See instructions

20-5142594

Firm's EIN ▶

Phone no

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047 2012

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Name of the or	ganization						=	mployer id	entification	num	ber	
		DLENT WORLD, I							41-14		6	
			ity Status (All orga						nstructio	ns.		
1	hurch, conv chool descr ospital or a nedical rese	vention of church ibed in section cooperative hos arch organizatio	tion because it is: (Foines, or association of 170(b)(1)(A)(ii). (Attacspital service organizan operated in conjunc	churches h Schedu tion desc	describe le E.) ribed in s	ed in sect section 1	tion 170(70(b)(1)(b)(1)(A)(i) A)(iii).		(iii). E	Enter the	
5 🗌 An	hospital's name, city, and state: I 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.)											
7 🗸 An	organizatio	n that normally	nment or governmenta receives a substantia (A)(vi). (Complete Par	part of					nt or from	n the	general p	oublic
9 □ An rec sup												
11 An pur 509 a e By oth	organization organization of organization of organization	on organized an ne or more pub ck the box that o b Type nis box, I certify indation manage	operated exclusively d operated exclusive licly supported organ describes the type of the control of the contro	ely for th nizations of supporting EFunction is not con	e benefit described g organiz nally integ ntrolled d	t of, to point of the control of the	perform to the completion of t	the funct a)(1) or se te lines 1 Type III-N y by one	ions of, ection 509 1 e throug lon-funct or more 6	9(a)(2 gh 11 :iona disqi	2). See se 1h. Ily integrat ualified pe	ection ted ersons
f If t org g Sın	he organiza janization, c	ation received a heck this box . 17, 2006, has th	written determination							oe III	supportir	ng
(ii)	(iii) below, t	the governing bo ember of a perso	ndirectly controls, eith ody of the supported on on described in (i) abo a person described in	organizati ove?	on?				d in (ii) ar · · · · · ·		Yes 11g(i) 11g(ii)	No
		•	on about the supporte									
(i) Name of organi		(II) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	rganization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organi U	s the tion in col zed in the S ?	(v11) A	Amount of me support	onetary
				Yes	No	Yes	No	Yes	No			
(A)												
(B)												
(C)											_	
(D)		·			_				-			
(E)		 										
		ı			1	İ		1		1		

							, age =
Part							
	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if the	e organization	n failed to qua	alify under
	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
-	membership fees received. (Do not						
	include any "unusual grants.")	88,525	112.070	77 514	71,482	70,214	419,813
2	Tax revenues levied for the	66,323	112,078	77,514	71,402	70,214	415,613
_	organization's benefit and either paid						
	to or expended on its behalf .	ا					
3	The value of services or facilities	0	0	0	0	0	0
3							
	furnished by a governmental unit to the organization without charge.	_			_		
	_	0	0	0	0	0	0
4	Total. Add lines 1 through 3	88,525	112,078	77,514	71,482	70,214	419,813
5	The portion of total contributions by		4			}	
	each person (other than a						
	governmental unit or publicly			-	j		
	supported organization) included on		•				
	line 1 that exceeds 2% of the amount				1	,	
	shown on line 11, column (f)						0
6	Public support. Subtract line 5 from line 4						419,813
Secti	on B. Total Support					•	
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	88,525	112,078	77,514	71,482	70,214	419,813
8	Gross income from interest, dividends,				,	,	11010.10
_	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	4005	1	254	1701	2400	7100
9	Net income from unrelated business	4005	<u>'</u>	351	1701	2400	7168
9	activities, whether or not the business						
	is regularly carried on	_	_	_		_	_
40	- ·	0	0	0	0	0	0
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	41,712	19,381	29,405	32,821	28,262	153,981
11	Total support. Add lines 7 through 10						580,962
12	Gross receipts from related activities, etc	•	•			12	
13	First five years. If the Form 990 is for the	_	i's first, second	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he			· · · · ·			▶ □
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2012 (line 6	6, column (f) dı	vided by line 1	1, column (f))		14	72 %
15	Public support percentage from 2011 Sch	hedule A, Part I	II, line 14 .			15	71 %
16a	331/3% support test - 2012. If the organize	zation did not o	check the box	on line 13, and	l line 14 is 33 ¹ /	3% or more, cl	neck this
	box and stop here. The organization qua	lifies as a publi	icly supported	organizatıon			. ▶ 📝
b	331/3% support test-2011. If the organ					15 is 33 ¹ / ₃ %	or more,
	check this box and stop here. The organ	zation qualifies	s as a publicly	supported org	anization .		. ▶ □
17a	10%-facts-and-circumstances test - 20	012. If the orga	ınızation did no	ot check a box	on line 13, 16	a. or 16b. and	line 14 is
	10% or more, and if the organization me						
	Part IV how the organization meets the "f						
	organization			-	•	•	`. ▶ □
ь	10%-facts-and-circumstances test – 20						and lies
U		_					
	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						
18	Private foundation. If the organization di						
10	Fire organization di	u not check a	box on line 13,	, 10a, 100, 178	, or irb, cnec	k mis box and	SEE

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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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				ļ		
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	ļ	ļ- ·				
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	<u> </u>	ļ			ļ	
b	Amounts included on lines 2 and 3						
	received from other than disqualified				1		
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	•	<u> </u>					
8	Add lines 7a and 7b			-			
Ū	line 6)	3					
Secti	on B. Total Support		l	<u> </u>		1	
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	,	1				
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		ļ <u></u> —			ļ	
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
42	(Explain in Part IV.)				-	<u> </u>	-
13	Total support. (Add lines 9, 10c, 11, and 12.)]		
14	First five years. If the Form 990 is for the	ne organizatio	n's first secon	d third fourth	or fifth tax w	l lear as a sectio	n 501(c)(3)
	organization, check this box and stop he	_			_		
Secti	on C. Computation of Public Support						<u> </u>
15	Public support percentage for 2012 (line			3, column (f))		15	%
16	Public support percentage from 2011 Sci	. ,	•			16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2012 (y line 13, colu	mn (f))	17	%
18	Investment income percentage from 201	1 Schedule A,	Part III, line 17			18	%
19a	331/3% support tests - 2012. If the organ						
	17 is not more than 331/3%, check this box		_				_
b	331/3% support tests - 2011. If the organiz						
	line 18 is not more than 331/3%, check this		=				
20	Private foundation. If the organization di	d not check a	box on life 14	. 19a. or 19b.	check this box	and see instru	ictions 🕨 🗀

PART II, LINE 10, Other Income: People Camp, \$14.039; Holiday Fair, net, \$11.298; Fiscal Sponsorship Administration Fees, \$455; Event Receipts, \$991; In-Kind, \$293; Miscellaneous, \$1186 = \$28.262.	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).
Event Receipts, 3991; In-Kind, \$293; Miscellaneous, \$1186 = \$28,262	PART II, LIN	IE 10, Other Income [.] People Camp, \$14,039; Holiday Fair, net, \$11,298; Fiscal Sponsorship Administration Fees, \$455;
	Event Rece	pts, \$991; In-Kind, \$293; Miscellaneous, \$1186 = \$28,262.
		·

	*	

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2012

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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	s," to Form 990, Part IV, line 4, or Form	n 990-EZ, Part VI, I	line 47 (Lobbying	Activities)	, then			
• S	• Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B								
	•	that have NOT filed Form 5768 (election					١		
If the	organization answered "Yes	s," to Form 990, Part IV, line 5 (Proxy '	Tax) or Form 990-E	Z, Part V, line 35	ic (Proxy Ta	ax), then			
	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III		·r-		tification number			
	of organization			Em					
	IDS FOR A NON-VIOLENT W		504/			41-1403496			
		e organization is exempt und				organization.			
1	•	the organization's direct and indire		=	Part IV.				
2	Political expenditures		• • • •		▶ ⊅	· 			
3	Volunteer hours				• •				
Part	I-B Complete if th	e organization is exempt und	er section 501(c)(3).					
1	Enter the amount of any	excise tax incurred by the organiza	tion under section	n 4955 .	. ▶ \$				
2	Enter the amount of any	excise tax incurred by organization	managers under	section 4955 .	. ▶ \$				
3	If the organization incurr	ed a section 4955 tax, did it file For	m 4720 for this ye	ear?		🔲 Yes [No		
4a	Was a correction made?	·				🗌 Yes [No		
b	If "Yes," describe in Part								
Part		e organization is exempt und				<u>(c)(3).</u>			
1		tly expended by the filing organiz							
_					-				
2		filing organization's funds contrib		•					
•	•				· .				
3		expenditures. Add lines 1 and 2			J-POL,				
					• •				
4		n file Form 1120-POL for this year'				LYes	No		
5		ses and employer identification nur lents. For each organization listed,							
		ontributions received that were pro							
		fund or a political action committee							
				1		Γ			
	(a) Name	(b) Address	(c) EIN	(d) Amount pa		(e) Amount of political contributions received			
				funds If none,		promptly and dire	ctly		
						delivered to a sepa			
						none, enter -0-			
(1)					-				
(2)									
				ļ	.,,				
(3)									
(4)									
(5)									
(6)		ļ							

d Grassroots nontaxable amount

f Grassroots lobbying expenditures

e Grassroots ceiling amount (150% of line 2d, column (e))

	dule C (Form 990 or 990-EZ) 2012					Page 2
Par	t II-A Complete if the organizatio	n is exempt u	nder section 50	1(c)(3) and file	d Form 5768 (ele	ction under
	section 501(h)).				•	
A (Check 🕨 🗌 if the filing organization be	longs to an aff	iliated group (an	d list in Part IV	each affiliated gro	oup member's
	name, address, EIN, exper	nses, and share	e of excess lobb	yıng expenditur	es).	
в (Check 🕨 🗌 if the filing organization ch	ecked box A a	nd "limited cont	rol" provisions a	ipply.	
		ying Expenditu			(a) Filing	(b) Affiliated
	(The term "expenditures" m	eans amounts (paid or incurred.)	1	organization's totals	group totals
18	Total lobbying expenditures to influence	200	0			
t	 Total lobbying expenditures to influence 	a legislative boo	dy (direct lobbying))	400	0
C	realization (and investigation)				600	0
C	Other exempt purpose expenditures .				94,605	
€	the property of the contract o				95,205	0
f	Lobbying nontaxable amount. Enter	the amount fro	om the following	table in both		
	columns.				19,041	19,041
	If the amount on line 1e, column (a) or (b) is	The lobbying r	nontaxable amount	is:		-
	Not over \$500,000	20% of the am-	20% of the amount on line 1e			45 K12
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000	l l	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	\$175,000 plus 10% of the excess over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	\$225,000 plus 5% of the excess over \$1,500,000			-
	Over \$17,000,000	\$1,000,000				
ē	•	•		4760	0	
ŀ	3				0	0
i	Subtract line 1f from line 1c. If zero or le	•			0	0
j	If there is an amount other than zero		•	•		☐ Yes ☐ No
	reporting section 4911 tax for this year?	<u> </u>				☐ tes ☐ NO
	4-Ye (Some organizations that ma		eriod Under Sec		plata all of the five	
	columns below.					•
	Lobbying	Expenditures l	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a		26,491	22,452	21,056	19,041	89,040
t	Lobbying ceiling amount (150% of line 2a, column (e))					133,560
		865	390	1215	600	3070

6623

720

5613

270

5264

1080

Schedule C (Form 990 or 990-EZ) 2012

22,260

33,390

2270

4760

200

Part	II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT 1 (election under section 501(h)).	iled l	Form	ı 57 6 8		
For 6	esch '	Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a	a)		(b)	
		of the lobbying activity.	Yes	No	A	moun	t
1	legisla	g the year, did the filing organization attempt to influence foreign, national, state or local atton, including any attempt to influence public opinion on a legislative matter or indum, through the use of.		-			
а	Volun	teers?					
b	Paid s	staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media	advertisements?			L		
d	Mailın	gs to members, legislators, or the public?					
е	Public	cations, or published or broadcast statements?	لــــــا				
f		s to other organizations for lobbying purposes?	igsquare		<u> </u>		
g		contact with legislators, their staffs, government officials, or a legislative body?	igsqcut		<u> </u>		
h	Rallie	s, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			<u> </u>		
i	Other	activities?			<u> </u>		
j		Add lines 1c through 1i					
2a		e activities in line 1 cause the organization to be not described in section 501(c)(3)?		ļ			-
b		s," enter the amount of any tax incurred under section 4912					
С		s," enter the amount of any tax incurred by organization managers under section 4912		ļ			
d		filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	\ <u></u>				
Part	III-A	Complete if the organization is exempt under section 501(c)(4), section 501(c)(O), (or se	ction		
		501(c)(6).				Yes	No
4	14/	contraction all (000) are served along and advistable by manufactured			4	1.03	110
1		substantially all (90% or more) dues received nondeductible by members?		•	1 2	\vdash	1
2		ne organization make only in-house lobbying expenditures of \$2,000 or less?				-	┼──
3		e organization agree to carry over lobbying and political expenditures from the prior year?			3		Ь
Part	III-B	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."				line	3, is
1	Dues.	assessments and similar amounts from members		1			
2	Section	on 162(e) nondeductible lobbying and political expenditures (do not include amounts cal expenses for which the section 527(f) tax was paid).	of				
а	Curre	nt year		2a			
b		over from last year		2b			
C	Total	•		2c			
3	Agare	gate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3	-		
4		ices were sent and the amount on line 2c exceeds the amount on line 3, what portion of					
		s does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
		olitical expenditure next year?		4	1		
5	Taxat	ole amount of lobbying and political expenditures (see instructions)		5			
Par	t IV	Supplemental Information					
		s part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5;	Part I	I-A (a	ffiliatec	grou	ıp
list); F	art II-A	, line 2; and Part II-B, line 1. Also, complete this part for any additional information.					

Schedule C (For	chedule C (Form 990 or 990-EZ) 2012							
Part IV	Supplemental Information (continued)							
		·						

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name (or the organization					Employer identific	cation number
FRIEN	DS FOR A NON-VIOLENT WORLD,						1403496
Par	Fundraising Activities. Form 990-EZ filers are	•	_		vered "Yes" to Fo	orm 990, Part IV,	ine 17.
1	Indicate whether the organization				www.a.a.a.twataa. Ch	solvall that apply	···.
'_		on raised funds			_		
а	☐ Mail solicitations		e L		on of non-governm		
Ь	Internet and email solicitation	ns	f L		on of government	grants	
C	Phone solicitations		g	Special t	fundraising events		
d	☐ In-person solicitations						
2a	Did the organization have a wri	tten or oral agre	ement with	any individ	dual (including offic	ers, directors, trus	tees
	or key employees listed in Form						
b	If "Yes," list the ten highest paid		-			_	
_	compensated at least \$5,000 by			diaisers) pi	discant to agreeme	anta unuer Willer ti	ie iuliulaisel is to be
	compensated at least \$5,000 b	y the organization)II.				
							T
	(i) Name and address of individual	Jame and address of individual (III) Did fundraiser have			(v) Amount paid to	(vi) Amount paid to	
	or entity (fundraiser)	(ii) Activity	custody o	r control of	(iv) Gross receipts from activity	(or retained by) fundraiser listed in	(or retained by)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Contric	outions?	1	col (ı)	organization
			Yes	No			
1					1		
•							
		 	+	·	 		+
2							
		_					
3		1					
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4		1	ľ				
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8			1				
		<u></u>					
9			-				
			1				
10							
							
Total				•			
3	List all states in which the orga	nization is regis	tered or lic	ensed to s	olicit contributions	or has been notifi	ed it is exempt from
•	registration or licensing	inzudon lo regio	nered or no	crisca to s	Onon Commoduona	or nas been noun	ca it is exempt from
	registration of neerising						
					*		
			•••				
					•••••		

Pa	art II	Fundraising Events. Con than \$15,000 of fundraising gross receipts greater tha	ng event contributions	on answered "Yes" to and gross income on	Form 990, Part IV, line Form 990-EZ, lines 1 a	18, or reported more and 6b. List events with			
		<u> </u>	(a) Event #1 HOLIDAY FAIR (event type)	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))			
Revenue	1	Gross receipts	20,085			20,085			
ш	2	Less: Contributions Gross income (line 1 minus	0			0			
_	ļ	line 2)	20,085			20,085			
	4	Cash prizes	0			0			
Direct Expenses	5	Noncash prizes				0			
	6	Rent/facility costs	0			0			
	7	Food and beverages	0			0			
	8	Entertainment	0			0			
	9	Other direct expenses .	8787			8787			
Pa	10 11 rt III	Direct expense summary. Ac Net income summary. Comb Gaming. Complete if the than \$15,000 on Form 9	ine line 3, column (d), a e organization answei	nd line 10		(8787) 11,298 reported more			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))			
æ	1	Gross revenue							
ses	2	Cash prizes							
xpeu	3	Noncash prizes							
Direct Expenses	4	Rent/facility costs							
_	5	Other direct expenses .							
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes% ☐ No					
	7	Direct expense summary Ad	dd lines 2 through 5 in c	olumn (d)		()			
	8								
ç	a Is b If		perate gaming activities	n each of these states		🗌 Yes 🗎 No			
10		Vere any of the organization's of "Yes," explain:	gaming licenses revoked	d, suspended or termina	ated during the tax year	? . Yes No			

Schedu	de G (Form 990 or 990-EZ) 2012			Pa	ge 3
11 12	Does the organization operate gaming activities with nonmembers?		Yes Yes	_	No No
13	Indicate the percentage of gaming activity operated in.				%
a	The organization's facility				%
ь 14	An outside facility				70_
	Name ►				
	Address►				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes		No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$				
С	If "Yes," enter name and address of the third party:				
	Name ►				
46	Address				
16	Gaming manager information: Name ►				
	Name P				
	Gaming manager compensation ▶ \$				
	Description of services provided ▶				
	☐ Director/officer ☐ Employee ☐ Independent contractor				
17 a	Mandatory distributions: Is the organization required under state law to make chantable distributions from the gaming proceeds to retain the state gaming license?		Yes		No
b	spent in the organization's own exempt activities during the tax year ▶ \$				
Part	Supplemental Information. Complete this part to provide the explanations required by Part I, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also copart to provide any additional information (see instructions).	line mple	2b, ete th	าเธ	
		· 			
		·			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2012

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

OMB No 1545-0047

Employer identification number Name of the organization FRIENDS FOR A NON-VIOLENT WORLD, INC. 41-1403496 PART I, LINE 8, Other Revenue: Sales of supplies, \$155; Fund balance from a sponsored project, \$455, Reimbursed expenses, \$573, Miscellaneous, \$3 = \$1186. PART I, LINE 16: Other Expenses include the following: staff training, \$95; dues, \$175; office supplies, \$1009; program supplies, \$2297; telecommunications, \$2234; information technology, \$7882; insurance, \$2320; travel, \$2500; bank charges & credit card fees, \$1169; fiscal sponsor administration fees, \$909; People Camp food, \$2614, miscellaneous, \$1399 = \$24,603 PART I, LINE 20: rounding. PART II, LINE 24: Other assets include prepaid postage, \$47; accounts receivable, \$737; prepaid insurance, \$210, prepaid rent, \$850; security deposit, \$3000 = \$4844. PART II, LINE 26: Liabilities include accounts payable, \$822; and payroll taxes payable, \$72 = \$894. PART III LINE 28: The ALTERNATIVES TO VIOLENCE PROJECT serves inmate of Minnesota corrections facilities, residents of county jails, as well as members of the general public, by teaching non-violent conflict resolution and compassionate communication. In 2012, 25 volunteers facilitated 35 workshops at 6 prisons, and 5 community workshops engaging 641 prison and 57 community participants. LINE 29: PEACE EDUCATION & ADVOCACY educated community members and public officials on the transforming power and practice of non-violence and on vital national and international issues concerning peace & justice. In 2012 we focused on conflicts involving Iran, Syria, Palestine/Israel and US foreign policy (Patriot Act, ending the war in Afghanistan). We hosted a MN ASAP speaker event which 40 people attended. To support the MN ASAP resolution, 6 people were present at Minneapolis and St. Paul City Council meetings. About 25 participants in the Minnesota Peace Project communicated with the 10 members of Minnesota's US Congressional delegation. 48 people attended one of 2 seesions held to train volunteers working to defeat the proposed Minnesota constitutional amendment banning same-sex marriage. The Syrian Support Network, by email, promoted awareness of the Syrian non-violent movements to about 2100 people. The Book Club (9 participants) met once per month to discuss books concerned with the practice of non-violence, country histories, political perspectives and the social development of today's US and world environment. Four newsletters were published and distributed to 400 people;

Cat No 51056K

Schedule O (Form 990 or 990-EZ) (2012)

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

Name of the organization	Employer identification number
FRIENDS FOR A NON-VIOLENT WORLD, INC.	41-1403496
(PART III, LINE 29, cont.) 20 electronic newsletters were distributed to approximately 2100 people About 5	550 people were engaged through
Facebook, and FNVW's website was reached by about 1500 people.	
LINE 31: OTHER PROGRAM SERVICES	
PATHWAYS TO PEACE provides personal transformation through meditations, creative visualization and i	ntention to nourish non-
violence in ourselves and in our world. 26 sessions engaged 3 participants in 2012. Expenses: \$446.	
SPONSORED PROJECTS: In 2012, FNVW acted as fiscal sponsor for three peace-related organizations: the	e Minnesota Peace Project (\$8615 in
expenses), Minnesota Peace Teams (\$2496 in expenses), and Eyes Wide Open (\$909 in expenses).	