

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990** 

Department of the Treasury Internal Revenue Service

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

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

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

2012

Open to Public Inspection

A Fo	r the	2012 ca	lendar year, or tax year beginnin	g 01-01-2012 , 2012, and er	nding 12-31	-2012			
	eck ıf a dress cl	applicable hange	C Name of organization CIVICUS WORLD ALLIANCE FOR CIT	IZEN PARTICIPATION			<b>D Employ</b> 52-18		ntification number
_	me cha	-	Doing Business As				52-16	47010	,
	tıal retu	_	Number and street (or P.O. boy if r	naıl ıs not delivered to street address	e) Doom/suit	Δ	<u> </u>		
Tei	mınate	ed	1425 K STREET NW	itali is flot delivered to street address	s) Room/suit	E	E Telepho	ne num	ber
	nended		City or town, state or country, and	ZIP + 4			(202)	331-8	518
_		n pending	WASHINGTON, DC 20005				<b>G</b> Gross re	ceints ¢	5 2,019,776
			<b>F</b> Name and address of pri	ncipal officer		H(a) Ic th	nis a group	•	
			MARIA VAN STRAATEN				ates?	return	⊤Yes <b>▽</b> No
			1425 K STREET NW WASHINGTON, DC 20005			H/b) .			L ID E V an E Na
									ded?
I Ta	x-exen	npt status	5 √ 501(c)(3)	(insert no ) 4947(a)(1) or	527				
J W	ebsit	e:► WV	WW CIVICUS ORG			H(c) Gro	up exemptı	on nur	nder 🖛
K For	m of or	rganizatior	n 🔽 Corporation 🗆 Trust 🗀 Association	on Other ►		<b>L</b> Year of f	ormation 199	93 <b>M</b>	State of legal domicile DE
	rt I		nmary	,					
	1	Briefly d	describe the organization's missi	on or most significant activitie	es				
		SEE PA	RT III, LINE 1						
ခိုင် ရ									
Ē									
Governance	2	Check t	his box দ if the organization di	scontinued its operations or o	disposed of	more than	25% of its	net as	sets
	,	Number	of voting members of the goverr	ung hody (Part VI line 1a)				з	15
Activities &			of independent voting members					4	15
Ě			ımber of ındıvıduals employed ın					5	0
<u>ş</u>			ımber of volunteers (estımate ıf ı					6	15
٠.	7a	Total un	nrelated business revenue from P	art VIII, column (C), line 12				7a	0
	b	Net unre	elated business taxable income t	from Form 990-T, line 34 .				7b	0
						Pri	or Year		Current Year
an T	8		ibutions and grants (Part VIII, li	·			1,063,0	-	2,007,454
Ravenue	9		am service revenue (Part VIII, l tment income (Part VIII, columi			1 5		0	0
Ě	10 11		revenue (Part VIII, column (A),	, ,,			-15,61 2,40		12,276
	12		revenue—add lines 8 through 11						12,270
			<u> </u>				1,049,8	_	2,019,776
	13		s and similar amounts paid (Part				817,0	_	927,188
	14		its paid to or for members (Part less, other compensation, employ					0	0
\$	15	10)	es, other compensation, employ	ee benents (Part 1X, Column (	A), IIIIes 5-	_	151,0	84	558,942
Expenses	16a	Profes	ssional fundraising fees (Part IX,	, column (A), line 11e)				0	0
ਡੌ	Ь	Total fu	undraising expenses (Part IX, column (D	0), line 25) <b>►</b> 0					
	17		expenses (Part IX, column (A),				1,263,3	48	679,004
	18		expenses Add lines 13-17 (mu				2,231,4	-	2,165,134
. 07	19	Rever	nue less expenses Subtract line	18 from line 12			-1,181,6		-145,358
8 4 9 4						_	ng of Curren Year	16	End of Year
Net Assets or Fund Balances	20	Total	assets (Part X, line 16)				637,7	13	327,100
유 전 교	21	Total	liabilities (Part X, line 26) .				204,8	88	39,633
	22		ssets or fund balances Subtract	line 21 from line 20			432,8	25	287,467
<b>Pa</b> Unde my k	r <b>t III</b> r pena nowle	Sigr alties of dge and	ssets or fund balances Subtract  nature Block  perjury, I declare that I have ex belief, it is true, correct, and cor	amined this return, including a	accompany		es and stat	ement	s, and to the best o
r`		, "						_	
		****					2013-07-10		
Sigr		Sign	ature of officer				Oate		
Her	е		RIA VAN STRAATEN CFO e or print name and title						
		<u> </u>	Print/Type preparer's name	Preparer's signature	Da	te la	eck 🗀 ıf	PTIN	
Paid	d	L				sel	f-employed		
	u pare		Firm's name FGELMAN ROSENBERG	& FREEDMAN		Fır	m's EIN 🟲 52	-13920	08
	Pare On		Firm's address 🟲 4550 MONTGOMERY A	VE SUITE 650N		Ph	one no (301)	951-90	)90
<u> </u>	<i>,</i> J11	''y	BETHESDA, MD 20814	12930					

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

✓ Yes ☐ No

Par		f Program Servio			II	
ORG WOR PRO SUP	Briefly describe the or CUS WORLD ALLIANC ANIZATIONS AND INC LD THROUGH VOLUNT MOTE RESEARCH AND PORT EXEMPLARY PRO	ganization's mission CE FOR CITIZEN PAI DIVIDUALS DEDICA ARY INITIATIVE, P DISSEMINATION C JECTS AND EXPERI	RTICIPATIO TED TO STR HILANTHRO FINFORMA ENCES, ASS	N, INC (CIVICUS) ENGTHENING CITI PY, AND COMMUNI TION, OFFER BROA IST IN REMOVING	IS A NONPROFIT MEMBERSHIP AL ZEN ACTION AND INFLUENCE THE TY SERVICE CIVICUS'S MAIN OB D MEETING AND PARTNERSHIP O THE LEGAL OBSTACLES IMPEDING	LIANCE OF ROUGHOUT THE JECTIVES ARE TO PPORTUNITIES, G THE
	NG, VOLUNTEERING,					
2	Did the organization un the prior Form 990 or 9 If "Yes," describe these	990-EZ?			ar which were not listed on	┌ Yes ┌ No
3	Did the organization ce services?	ase conducting, or m	ake significar	-	conducts, any program	┌ Yes ┌ No
4	Describe the organizat	ion's program service .(c)(3) and 501(c)(4)	accomplishn organizations	are required to rep	three largest program services, as m ort the amount of grants and allocatio	
4a	MOBILIZATION, COMMUNIC WITH DONORS (FROM FUI PRODUCES THE WEEKLY N IT ALSO MANAGES OUR CE ALLIANCE OF CIVIL SOCIET EVENTS, SUCH AS THE WO ASSEMBLY WITH ITS OVER	CATIONS AND CONVENING NDING PROPOSALS TO REI IEWSLETTER E-CIVICUS, INTRAL CONTACT AND COITY ORGANIZATIONS ITS MORLD ASSEMBLY AND NATIFALL THEME "ACTING TOGE USINESS LEADERS AND REITS AND	i 1 RESOURCE NO CORTING) AND GODISSEMINATES PONTENT DATABASI AIN ACTIVITIES CONSULTA	MOBILIZATION THE UNIT RANTS MANAGEMENT 2 DLICY STATEMENT AND P E 3 CONVENING THIS U ARE THE MEMBERSHIP M TIONS AND EVENTS ON V GT WORLD" SERVES AS A	654,775 ) (Revenue \$ IERSHIPS AT CIVICUS IT IS COMPOSED OF T LEADS THE RESOURCE MOBILIZATION STRAT COMMUNICATIONS THE UNIT MANAGES THE RESS RELEASES AND PRODUCES THE ORGAN NIT LEADS THE NETWORK MANAGEMENT, AS ANAGEMENT AND THE ORGANIZATION OF CIV ARIOUS CIVIL SOCIETY TOPICS 4 WORLD AS PRIMARY VENUE FOR CIVIL SOCIETY PRACTI GENCIES TO COME TOGETHER FOR THE PURF	EGY, THE RELATIONSHIPS CIVICUS WEBSITES, IZATION'S PUBLICATIONS CIVICUS IS A GLOBAL ITCUS CIVIL SOCIETY SEMBLY WORLD TIONERS, RESEARCHERS
4b	WITH THE EXECUTIVES OF EDUCATE CIVIL SOCIETY O BETTER ABLE TO ENGAGE : RESTRICTIVE OR REPRESS	NATIONAL GOVERNMENT: ORGANIZATIONS AND CITIZ IN THE DECISIONS AFFECT SIVE LEGISLATION THAT IN BODIES (E G INTERNATION	A ADVOCACY UNI S AND INTERNAT ZENS ON ISSUES TING THEIR LIVE FRINGES UPON NAL MONETARY I	TONAL ORGANIZATIONS ( DEALING WITH FREEDON S IN FEW SPECIFIC CAS CITIZENS' UNIVERSAL HU	197,009 ) (Revenue \$ D LEGISLATIVE LOBBYING, IT DOES TAKE UP A DN THE BASIS OF OUR VALUES AND OBJECTIV AS OF ASSEMBLY, ASSOCIATION OR EXPRESS: ES, CIVICUS SUPPORTS ITS NATIONAL PARTN MAN RIGHTS CIVICUS ALSO ENGAGES IN MC NAL DECISION MAKING FORUMS (E G UNITEI	ES CIVICUS WORKS TO ION SO THAT THEY ARE IERS IN CHALLENGING DRE DIRECT ADVOCACY
4c	ENVIRONMENT FOR CIVIL GLOBAL ORGANIZATIONS A CSI SEEKS TO STRENGTHE ASSOCIATION BY FACILITA WILL ALSO ENHANCE SYNE ASSOCIATION, ASSEMBLY, PERIODIC REVIEW (UPR) DEVELOP AND IMPLEMENT CSI WILL PROMOTE GREAT ASSISTANCE TO LOCAL CINREGULATORY THREATS AG	SOCIETY ORGANIZATIONS AND THEIR NETWORKS WO EN THE MANDATE OF THE TING CONSULTATIONS WI RGIES BETWEEN RELATEL AND EXPRESSION IN ADD MECHANISM AND THE UN A SET OF INDICATORS TH FER PROTECTION FOR THI ALL SOCIETY ACTIVISTS IN INSTICTIVE SPACE AS TH INCLUDE THE PRODUCTION	C) AIMS TO PROT THE CSPI FOCU PRKING IN PART UN SPECIAL RAP TH CIVIL SOCIET D UN MANDATE H DITION, THE CSI HUMAN RIGHTS HAT MEASURE TH E FREEDOMS OF THEIR EFFORTS IEY EMERGE IN DN OF FILMS ON	JSES ON FREEDOMS OF A NERSHIP AT THE COUNTI PORTEUR (UNSR) ON TH Y, AND BY PROVIDING R OLDERS BY HELPING TO WILL ALSO WORK TO PRO COUNCIL FURTHERMOR E ENABLING ENVIRONME ASSOCIATION AND ASSEI TO ADVANCE AN ENABLI ADDITION, THE CSI WILL CIVIL SOCIETY, AND THE	49,716 ) (Revenue \$ SPACE BY FOSTERING AN ENABLING LEGAL AN ASSEMBLY, ASSOCIATION AND EXPRESSION, ERY, REGIONAL AND INTERNATIONAL LEVELS AS ERIGHTS TO FREEDOM OF PEACEFUL ASSEMESEARCH AND ORGANIZATIONAL SUPPORT TO DEVELOP "SOFT NORM" STANDARDS RELATING DIVIDITY OF THE CONTROL OF THE STANDARDS RELATING THE CIVIL SOCIETY ENGAGEMENT WITH THE LEGAL OF THE STANDARDS AT THE LEGAL SPACE FOR CIVIL SOCIETY AND TO LINCREASE PUBLIC AWARENESS ON CIVIL SOCIETY ISSUES	NCOMPASSING FOUR T THE GLOBAL LEVEL, THE IBLY AND OF O THE UNSR THE CSI IG TO THE FREEDOMS OF HE UN UNIVERSAL ESS, THE CSI WILL HE REGIONAL LEVEL, THE PROVIDE TECHNICAL RESPOND TO CIETY ISSUES
	(Code CIVIL SOCIETY WATCH	) (Expenses \$	71,731	including grants of \$	5,330 ) (Revenue \$	)
	(Code CRISIS RESPONSE FUND	) (Expenses \$	68,638	including grants of \$	13,615 ) (Revenue \$	)
	(Code AFFINITY GROUPS OF NON	) (Expenses \$ IPROFITS	47,861	including grants of \$	) (Revenue \$	)
	(Code PARTICIPATORY GOVERNA	) (Expenses \$ NCE	44,841	including grants of \$	) (Revenue \$	)
	(Code LEGITIMACY AND TRANSPA	) (Expenses \$ ARENCY	31,956	including grants of \$	) (Revenue \$	)
	(Code EVERY HUMAN HAS RIGHT	) (Expenses \$ S	18,833	including grants of \$	) (Revenue \$	)
	(Code CIVIL SOCIETY INDEX	) (Expenses \$	15,982	including grants of \$	) (Revenue \$	)
	(Code GENDER AND DIVERSITY	) (Expenses \$	8,165	including grants of \$	6,743 ) (Revenue \$	)
4d	Other program servic (Expenses \$	308,007 incl	uding grants o		5,688 ) (Revenue \$	)
4e	Total program service	expenses 🟲	1,743,115			

Part IV	Checklis	t of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
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		Νo
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		No
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		No
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νo
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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		No
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		Νο
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Νο
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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 and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
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	Yes	
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	Yes	
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		No
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		No
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νο
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20Ь		

Par	t IV Checklist of Required Schedules (continued)						
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νo			
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		No			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No			
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	<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?						
25a	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						
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		No			
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L,  Part II						
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		No			
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)						
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No			
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No			
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	28c		No			
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No			
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No			
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		No			
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		No			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes				
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No			
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b					
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No			
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		No			
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes				

Pell	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	<u> </u>	 Yes	l No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   3		103	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	-		
_	gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		110
	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		No
ь				110
_	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		Νo
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	0.0		
-	2	5c		
	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 as charitable contributions?	6a		Νo
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	]		
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ט	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	· · · · · · · · · · · · · · · · · · ·	]		
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	ļ <sup> </sup>		
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax		103	110
	year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Νo
6	Did the organization have members or stockholders?	6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Νο
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R		0- 4	- \
	The section B. Folicies (This section B requests information about poincies not required by the Internation	event		e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?  The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No

- List the States with which a copy of this Form 990 is required to be filed▶
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - Own website Another's website Vpon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►ORIN SCHEPPS CONSULTANCE ACC SERVICES 10706 BETHESDA, MD (301)654-1564

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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 related organization compensated any current officer, director, or trustee

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot ecto	not box h ar or/tr	offic	ess er	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations		
(1) DAVID BONBRIGHT	2 00	×		х				0	0	0		
CHAIR												
(2) NYARADZAYI GUMBONZVANDA VICE CHAIR	2 00	×		×				0	0	0		
(3) UYGAR OZESMI	2 00											
TREASURER	2 00	Х		х				0	0	0		
(4) MAJA DARUWALA	2 00	x		x				0	0	0		
SECRETARY (5) AMSALE MARYAM	2 00											
	2 00	x						0	0	0		
BOARD MEMBER (6) ANTONELLA VALMORBIDA	2.00											
BOARD MEMBER	2 00	×						0	0	0		
(7) DEBBIE KADDU-SERWADDA	2 00	<u> </u>										
BOARD MEMBER		X						0	0	0		
(8) FELICIANO REYNA	2 00	×						0	0	0		
BOARD MEMBER												
(9) HENRI ROUILLE D'ORFEUIL	2 00	×						0	0	0		
BOARD MEMBER								ŭ	0			
(10) MARTA CUMBI	2 00	x						0	0	0		
BOARD MEMBER		_ ^						0	0	0		
(11) NABILA HAMZA	2 00	,,							0			
BOARD MEMBER		X						0	0	0		
(12) RAJIV JOSHI	2 00	,,							0			
BOARD MEMBER		×						0	0	0		
(13) RASMA PIPIKE	2 00							_	_	_		
BOARD MEMBER		X						0	0	0		
(14) SAMUEL WORTHINGTON	2 00									_		
BOARD MEMBER		X						0	0	0		
(15) SEONGHOON LEE	2 00	Ţ.,						_	_	_		
BOARD MEMBER		×						0	0	0		
(16) KATSUJI IMATA	40 00											
DEPUTY SECRETARY GENERAL				×				119,600	0	0		
(17) INGRID SRINATH	40 00											
SECRETARY GENERAL (THROUGH 3/12)				X				22,000	0	0		
								I		Form <b>990</b> (2012)		

\$100,000 of compensation from the organization 🗝

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d on is	ne b both	ox, an d	heck unless officer stee)		Repor comper from organiza	table nsation the tion (W-	(E) Reportable compensation from related organizations (W	-	(F) Estima amount o compens from t	ited fother sation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)	C	organizat relat organiza	e d
lb Sub-Total			•				<b>-</b>						
c Total from continuation shee	ets to Part VII, S	ect ion A	Α.	•			F						
d Total (add lines 1b and 1c)			•	•	•	•	_		141,600		0		
Total number of individuals (i \$100,000 of reportable comp						d abov	e) w	ho receive	d more th	nan			
												Yes	No
B Did the organization list any f	ormer officer, di	rector o	r trus	tee,	key	emplo	yee,	, or highes	t compen	sated employee		163	110
on line 1a? If "Yes," complete	Schedule J for suc	ch indivi	dual	•	•		•				3		No
For any individual listed on lir organization and related orga													
ındıvıdual					•		•				4		No
5 Did any person listed on line services rendered to the orga										or individual for	5		N. a
		,					•						No
Section B. Independent Co													
Complete this table for your f compensation from the organ												tax year	•
	( <b>A</b> ) Name and business	address							Des	<b>(B)</b> cription of services	[	(C Compe	
			-						·		$\blacksquare$		
2 Total number of independent co	ontractors (inclu	ding but	not	lımıt	ed to	o thos	e list	ed above)	who rece	ived more than			

Part V	***	Statement of Revenue		on the Don't VIII			_
		Check if Schedule O contains a respon	se to any question i	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
(0	1a	Federated campaigns 1a					
nts International	Ь	Membership dues 1b	21,703				
Contributions, Giffs, Grants and Other Similar Amounts							
S. A	С .						
Giff Ilar	d	Related organizations 1d					
Ë,Ë	е	Government grants (contributions) <b>1e</b>	1,094,684				
ion I S	f	All other contributions, gifts, grants, and <b>1f</b>	891,067				
tributic Other		similar amounts not included above  Noncash contributions included in lines					
<u> </u>	g	1a-1f \$					
Cont	h	Total. Add lines 1a-1f		2,007,454			
			Business Code				
Program Service Revenue	2a						
e ke	Ь						
ብ ጠ	С						
Y V	d						
33	e						
ia E		All other program corrupts					
Ş	f	All other program service revenue					
4	g	Total. Add lines 2a-2f	🛌				
	3	Investment income (including dividend		46			46
	4	and other similar amounts)  Income from investment of tax-exempt bond p	-				
	5	Royalties					
		(ı) Real	(II) Personal				
	6a	Gross rents	(ii) i cissilai				
	ь	Less rental					
	c	expenses Rental income					
		or (loss)					
	d	Net rental income or (loss)					
	7a	(1) Securities Gross amount	(II) O ther				
	74	from sales of assets other than inventory					
	ь	Less cost or					
		other basis and sales expenses					
	С	Gain or (loss)					
	d	Net gain or (loss)					
une	8a	Gross income from fundraising events (not including \$					
Other Revenue		of contributions reported on line 1c) See Part IV, line 18					
je	Ь	Less direct expenses b					
<b>⋷</b> │	c	Net income or (loss) from fundraising e	vents 🛌				
	9a	Gross income from gaming activities See Part IV, line 19					
	ı.	a					
	b c	Less direct expenses <b>b</b> Net income or (loss) from gaming activ	uties				
		Gross sales of inventory, less					
		returns and allowances .					
		а					
	b	Less cost of goods sold <b>b</b>					
ļ	С	Net income or (loss) from sales of inve	•				
]		Miscellaneous Revenue	Business Code	_			
	11a	FOREIGN CURRENCY EXCH	900099	11,771			11,771
	b	OTHER REVENUE	900099	505			505
	c						
	d	All other revenue					
	е	Total. Add lines 11a-11d	▶	12,276			
	12	Total revenue. See Instructions		2,019,776	0	0	12,322
				2,013,110	Y	0	1 12,324

	Part IX Statement of Functional Expenses ection 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)									
J G C [1]	Check if Schedule O contains a response to any question in this Pa			note column (A)						
	ot include amounts reported on lines 6b, p, 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	927,188	927,188							
4	Benefits paid to or for members									
5	Compensation of current officers, directors, trustees, and key employees	141,600	102,420	39,180						
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	396,048	248,926	147,122						
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)									
9	Other employee benefits	21,294	13,915	7,379						
10	Payroll taxes									
11	Fees for services (non-employees)									
а	Management									
b	Legal	365	172	193						
c	Accounting	103,007	48,586	54,421						
d	Lobbying									
e	Professional fundraising services See Part IV, line 17									
f	Investment management fees									
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	96,086	45,321	50,765						
12	Advertising and promotion	30,000	13,321	30,703						
13	Office expenses	80,292	62,733	17,559						
14	Information technology	33,232	02,733	17,555						
15	Royalties									
16	Occupancy	18,100	14,319	3,781						
17	Travel	170,641	94,899	75,742						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	170,011	31,033	73,712						
19	Conferences, conventions, and meetings	176,176	171,735	4,441						
20	Interest	7,035	4,692	2,343						
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	394		394						
23	Insurance									
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)									
а	RECRUITMENT COSTS	26,908	8,209	18,699						
b										
С										
d										
e	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	2,165,134	1,743,115	422,019	0					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)									

Part X Balance Sheet

		Check if Schedule O contains a response to any question in this Pa	rt X				
					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			141,407	1	84,263
	2	Savings and temporary cash investments			144,597	2	2,501
	3	Pledges and grants receivable, net			279,989	3	1,696
	4	Accounts receivable, net			13,563	4	7,929
	5	Loans and other receivables from current and former officers, directly employees, and highest compensated employees. Complete Part Schedule L	II of	tees, key		5	
sts	6	Loans and other receivables from other disqualified persons (as de 4958(f)(1)), persons described in section 4958(c)(3)(B), and con and sponsoring organizations of section 501(c)(9) voluntary emplorganizations (see instructions) Complete Part II of Schedule L	mployers		6		
Assets	7	Notes and loans receivable, net				7	
₫	8	Inventories for sale or use		i		8	
	9	Prepaid expenses and deferred charges			3,655	9	3,266
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			, , , , , , , , , , , , , , , , , , ,		
	Ь	Less accumulated depreciation	10b	778	1,308	10c	1,478
	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			53,194		225,967
	16	Total assets. Add lines 1 through 15 (must equal line 34)			637,713		327,100
	17	Accounts payable and accrued expenses		•	38,476	17	17,150
	18	Grants payable				18	,
	19	Deferred revenue		'	16,556	19	6,801
	20	Tax-exempt bond liabilities			10,000	20	
	21	Escrow or custodial account liability Complete Part IV of Schedu				21	
ities	22	Loans and other payables to current and former officers, directors	, trustees,			21	
Liabilit		key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
<u>-</u>		·			149,413		0
	23	Secured mortgages and notes payable to unrelated third parties			149,413	23	
	24	Unsecured notes and loans payable to unrelated third parties .				24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part X D	ofSchedu		443	25	15,682
	26	Total liabilities. Add lines 17 through 25			204,888	26	39,633
		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽		ete			
<b>У</b>		lines 27 through 29, and lines 33 and 34.					
ä	27	Unrestricted net assets			39,907	27	-33,330
	28	Temporarily restricted net assets			392,918	28	320,797
₹	29	Permanently restricted net assets				29	
sets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	►   and				
o .a	30	Capital stock or trust principal, or current funds		ı		30	
φ	31	Paid-in or capital surplus, or land, building or equipment fund				31	
AS S	32	Retained earnings, endowment, accumulated income, or other fund				32	
¥ĕ	33	Total net assets or fund balances			432,825	33	287,467
Ź	34	Total liabilities and net assets/fund balances			637,713	34	327,100
		. I I I I I I I I I I I I I I I I I I I	- • •		007,710	J-7	527,100

Par	Reconcilliation of Net Assets Check If Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,0	019,776
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,:	165,134
3	Revenue less expenses Subtract line 2 from line 1	3		-	145,358
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			432,825
5	Net unrealized gains (losses) on investments	5			+32,023
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		-	287,467
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. $\sqsubset$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	า			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493191003033

Employer identification number

OMB No 1545-0047

0040

2012

Open to Public Inspection

#### **SCHEDULE A**

(Form 990 or 990EZ)

Total

Department of the Treasury
Internal Revenue Service

Name of the organization

# Public Charity Status and Public Support

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

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

CIVICUS WORLD ALLIANCE FOR CITIZEN PARTICIPATION 52-1847010 **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). 1 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 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). 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) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% 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 331/3% of its support from gross 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). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 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 I **b** Type II **c** Type III - Functionally integrated **d** Type III - Non-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 section 509(a)(2) If the organization received a written determination from the IRS that it 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? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h (i) Name of (ii) EIN (iv) Is the (v) Did you notify (vi) Is the (vii) A mount of (iii) Type of support ed organization organization in the organization organization in monetary organization (described on col (i) listed in in col (i) of your col (i) organized support lines 1-9 above your governing support? in the US? or IRC section document? (see instructions)) Yes Yes Yes No No No

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

S	ection A. Public Support							
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2	012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,092,622	3,003,430	1,433,000	1,063,023	i	2,007,454	9,599,529
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							
4	the organization without charge <b>Total.</b> Add lines 1 through 3  The portion of total contributions	2,092,622	3,003,430	1,433,000	1,063,023	-	2,007,454	9,599,529
5	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							2,079,630
6	(f)  Public support. Subtract line 5 from line 4							7,519,899
S	ection B. Total Support	l						
	endar year (or fiscal year beginning in) 🏲	(a) 2008	<b>(b)</b> 2009	(c) 2010	( <b>d)</b> 2011	(e) 2	012	(f) Total
7	A mounts from line 4	2,092,622	3,003,430	1,433,000	1,063,023	2	2,007,454	9,599,529
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	20,982	5,421	1,352	261		46	28,062
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 )	13,563	42,549	5,627	2,405		12,276	76,420
11	Total support (Add lines 7 through 10)							9,704,011
12	Gross receipts from related activiti	es, etc (see instr	uctions)			12		
	First five years. If the Form 990 is this box and stop here							ation, check
	ection C. Computation of Pub							
14	Public support percentage for 2012	, , ,	•	l 1, column (f))		14		77 490 %
15	Public support percentage for 2011	. Schedule A, Part	t II, line 14			15		70 290 %
	<b>33</b> 1/3% <b>support test—2012.</b> If the and <b>stop here.</b> The organization qua	alıfıes as a publıcl	y supported orgar	nization				<b>►</b>  ✓
	33 1/3% support test—2011. If the box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization meeorganization	n qualifies as a pu — <b>2012.</b> If the orga tion meets the "fa	blicly supported o inization did not c icts-and-circumst	organization heck a box on lin tances" test, che	e 13, 16a, or 16l ck this box and <b>s</b>	o, and lin s <b>top here</b>	e 14 . Explain	<b>▶</b> ┌
b 18	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part IV how the organizal supported organization Private foundation. If the organizationstructions	nization meets the tion meets the "fa	: "facts-and-cırcu ıcts-and-cırcums†	mstances" test, tances" test The	check this box ai organization qua	nd <b>stop h</b> alifies as	ere. a publicly	

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🏲	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
_	purpose						
3	Gross receipts from activities that are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities		_				
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons						
Ь	A mounts 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						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
Sa	rom line 6 ) ction B. Total Support						
	ndar year (or fiscal year beginning					l	
Caic	in) 🟲	<b>(a)</b> 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	(e) 2012	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar						
	sources						
ь	Unrelated business taxable						
_	income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part IV )						
13	Total support. (Add lines 9, 10c,						
	11, and 12)						
14	First five years. If the Form 990 is	for the organizati	on's first, second	d, third, fourth, or	fifth tax year as	a 501(c)(3) orga	·
<u> </u>	check this box and stop here	lia Summant D	orconto a a				<u>► </u>
	ction C. Computation of Pub Public support percentage for 2012			12 column (f))		14-1	
15				: 13, COIUIIII (I))		15	
16	Public support percentage from 201					16	
	ction D. Computation of Inv				(4)		
17	Investment income percentage for	<b>2012</b> (line 10c, c	olumn (f) divided	by line 13, colum	nn (f))	17	
18	Investment income percentage from	n <b>2011</b> Schedule	A, Part III, line	17		18	
					1 4 E	h 22 + 120/	d line 17 is not
19a	33 1/3% support tests—2012. If the	_		•		· · ·	d line 17 is not

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Fo	rm 990 or 990-E2) 2012 Page
Part IV	<b>Supplemental Information.</b> 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).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493191003033

OMB No 1545-0047

Open to Public

# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Financial Statements** ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Inspection

terna	al Revenue Service	► Attach to Fore	m 990. ► See separate instructions.		Inspec	tion
	me of the organi			Employer identificat	ion numbe	er
CIV	/ICUS WORLD ALLIAN	ICE FOR CITIZEN PARTICIPATION		52-1847010		
Ρā			ised Funds or Other Similar Fu		Comple	te if the
	organiz	ation answered "Yes" to Form 990	· · · · · · · · · · · · · · · · · · ·			
	Takal mumban at	h and a6	(a) Donor advised funds	(b) Funds and o	ther accou	unts
1	Total number at	t end or year :ributions to (during year)				
2 3	33 3	its from (during year)				
4		e at end of year				
5	55 5	,	L ors in writing that the assets held in donc	l vradvicod		
,	•	rganization's property, subject to the or	•	n auviseu	┌ Yes	┌ No
6	_	- · · · · · · · · · · · · · · · · · · ·	onor advisors in writing that grant funds (			
	•	haritable purposes and not for the benef ermissible private benefit?	it of the donor or donor advisor, or for an	y other purpose	☐ Yes	┌ No
Pa		·	the organization answered "Yes" to	Form 990, Part IV		,
1		onservation easements held by the org			,	
	Preservation	on of land for public use (e g , recreation	or education)  Preservation of an	historically important	land area	
	Protection	of natural habitat	Preservation of a c	ertified historic struct	ure	
	Preservation	on of open space				
2	•		qualified conservation contribution in th	ne form of a conservat	ıon	
	easement on th	ne last day of the tax year	Г	Hald at the		V
а	Total number o	f conservation easements	-	Held at the	ena or the	rear
a b		restricted by conservation easements	<u> </u>	2b		
c	_	servation easements on a certified histo	oric structure included in (a)	2c 2c		
d		servation easements included in (c) acq	` '			
_		ure listed in the National Register		2d		
3	Number of cons	servation easements modified, transferr	ed, released, extinguished, or terminated	d by the organization o	during	
	the tax year ►					
4	Number of stat	es where property subject to conservati	on easement is located 🛌	<u> </u>		
5		nization have a written policy regarding t the conservation easements it holds?	he periodic monitoring, inspection, hand	ling of violations, and	☐ Yes	┌ No
6	Staff and volun	teer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	ents during the year		
7	A mount of expe	——— enses incurred in monitoring, inspecting	, and enforcing conservation easements	during the vear		
,	<b>►</b> \$	<b>-</b>	,,			
8	Does each con and section 17		d) above satisfy the requirements of sect	:ion 170(h)(4)(B)(i)	☐ Yes	┌ No
9	balance sheet,	- · · · · · · · · · · · · · · · · · · ·	nservation easements in its revenue and e footnote to the organization's financial			
Par			s of Art, Historical Treasures, o	or Other Similar A	Assets.	
		ete if the organization answered "Y	·			
1a	works of art, his	storical treasures, or other similar asse	16 (ASC 958), not to report in its reven ts held for public exhibition, education, o o its financial statements that describes	r research in furthera		
b	works of art, his		16 (ASC 958), to report in its revenue s ts held for public exhibition, education, o e items			lıc
	(i) Revenues II	ncluded in Form 990, Part VIII, line 1		<b>►</b> \$		
	(ii) Assets incl	luded in Form 990, Part X		<b>►</b> \$		
2	If the organizat	·	ical treasures, or other similar assets foi 116 (ASC 958) relating to these items	• •		
а	Revenues inclu	ided in Form 990, Part VIII, line 1		<b>►</b> \$		

**b** Assets included in Form 990, Part X

3									_		
	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	eck —			_		significant us	e of its	
а	Public exhibition		d	ı	Loan o	rexcha	inge prog	ams			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expla	ın hov	the	y further	the or	ganızatıor	ı's ex	empt purpose	ın	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ılar	┌ Yes	┌ No
Par	Part IV, line 9, or reported an an	ements. Comple	ete ıf	the	organiz	ation			es" to Form	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lan or other interme	ediary	for c	ontribut	ions or	other ass	ets i	not	☐ Yes	┌ No
ь	If "Yes," explain the arrangement in Part XII	I and complete the	follow	ıng t	able						
									Aı	mount	
c	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?							┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII			netir	n hac h	aan nro	vided in F	art \	· I I I		Г
	rt V Endowment Funds. Complete										•
	Enactment and complete	(a)Current year		Prior	year I	<b>b (c)</b> Two	years back	(d)	Three years back	(e)Four	ears back
1a	Beginning of year balance										
b	Contributions										
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end baland	ce (lın	e 1 g	, column	(a)) he	eld as				
а	Board designated or quasi-endowment 🕨				•						
					•						
b	Permanent endowment ►										
b c	Permanent endowment F Temporarily restricted endowment F The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
	Temporarily restricted endowment ►		atıon t	:hat :		and ad	mınıstere	d for	the		
с	Temporarily restricted endowment F  The percentages in lines 2a, 2b, and 2c sho  Are there endowment funds not in the posses organization by	ssion of the organiz		:hat :		and ad	mınıstere	d for		Yes	No
c	Temporarily restricted endowment F  The percentages in lines 2a, 2b, and 2c sho  Are there endowment funds not in the posses organization by  (i) unrelated organizations	ssion of the organiz		-	are held			d for	3a	(i)	No
с За	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c show Are there endowment funds not in the posses organization by  (i) unrelated organizations	ssion of the organiz			are held 			d for	3a	(i) (ii)	No No
c 3a b	Temporarily restricted endowment F  The percentages in lines 2a, 2b, and 2c sho  Are there endowment funds not in the posses organization by  (i) unrelated organizations	ssion of the organiz	  d on S	c hec	are held Iule R?			d for	3a	(i)	No
c 3a b 4	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c shows Are there endowment funds not in the posses organization by  (i) unrelated organizations	ssion of the organization of the organization of the organization's en	 d on S dowme	chec	are held Iule R? unds			d for	3a	(i) (ii)	No No
c 3a b	Temporarily restricted endowment F  The percentages in lines 2a, 2b, and 2c sho  Are there endowment funds not in the posses organization by  (i) unrelated organizations	ssion of the organization of the organization of the organization's en	 d on S dowme	chedent for the triangle of triang	are held Iule R? unds	0.		other	3a 3a 3	(i) (ii)     (ii)     (bb	No Book value
c 3a b 4 Par	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c sho. Are there endowment funds not in the posses organization by  (i) unrelated organizations	ssion of the organization of the organization of the organization's en	 d on S dowme	chedent for the triangle of triang	are held Iule R? unds , line 10	0.	( <b>b</b> )Cost or	other	3a	(i) (ii)     (ii)     (bb	
b 4 Par	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c show Are there endowment funds not in the posses organization by  (i) unrelated organizations	ssion of the organization of the organization of the organization's en	 d on S dowme	chedent for the triangle of triang	are held Iule R? unds , line 10	0.	( <b>b</b> )Cost or	other	3a	(i) (ii)     (ii)     (bb	
c 3a b 4 Par	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c show Are there endowment funds not in the posses organization by  (i) unrelated organizations	ssion of the organization of the organization of the organization's en	 d on S dowme	chedent for the triangle of triang	are held Iule R? unds , line 10	0.	( <b>b</b> )Cost or	other	3a	(i) (ii)     (ii)     (bb	
c 3a b 4 Pa 1a b c	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c sho. Are there endowment funds not in the posses organization by  (i) unrelated organizations	ssion of the organization of the organization of the organization's en	 d on S dowme	chedent for the triangle of triang	are held Iule R? unds , line 10	0.	( <b>b</b> )Cost or	other	3a 3 (c) Accumulat depreciation	(i) (ii)     (ii)     (bb	Book value
3a b 4 Par	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c show Are there endowment funds not in the posses organization by  (i) unrelated organizations	ns listed as required the organization of the	 d on S dowme	chedent for the triangle of triang	are held Iule R? unds , line 10	0.	(b)Cost or basis (ot	other	3a 3 (c) Accumulat depreciation	(i) (ii)	

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.	
(a) Description of security or category	(b)Book value	(c) Metho	d of valuation
(including name of security)		Cost or end-of	-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
	_		
	<u> </u>		
Part VIII Investments—Program Related. Se			
(a) Description of investment type	( <b>b</b> ) Book value		d of valuation
		Cost or end-or	-year market value
T-1-1 (C-1/2-2 (h)	<b>F</b>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. See Form 990, Part X, I			
(a) Descr			(b) Book value
	priori		
(1) ADVANCES TO SUBGRANTEES			221,380
(2) DEPOSITS			4,587
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1	5.)	<u>.</u>	225,967
			225,907
Part X Other Liabilities. See Form 990, Part	X, line 25. (b) Book value		
1 (a) Description of liability	(B) Book Value		
Federal income taxes			
DUE TO RSA	15,682		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	15,682		
	yt of the footnote to the orga		

Par	t XI Reconciliation of Revenue per Audited Financial State	emer	nts With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements .			1	2,019,776
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIII )	2d			
e	Add lines <b>2a</b> through <b>2d</b>			2e	o
3	Subtract line <b>2e</b> from line <b>1</b>			3	2,019,776
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII )	4b		1	
c	Add lines <b>4a</b> and <b>4b</b>			4c	o
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 1	12)		5	2,019,776
Part	XII Reconciliation of Expenses per Audited Financial Stat	teme	nts With Expense	s per	Return
1	Total expenses and losses per audited financial statements			1	2,165,134
2	A mounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII )	2d			
e	Add lines 2a through 2d			2e	0
3	Subtract line <b>2e</b> from line <b>1</b>			3	2,165,134
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII )	4b			
c	Add lines <b>4a</b> and <b>4b</b>			4c	0
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line	18)		5	2,165,134

#### Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		IN JUNE 2006, THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) RELEASED FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES FOR THE YEAR ENDED DECEMBER 31, 2012, CIVICUS HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10 AND DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS THE FEDERAL FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR THREE YEARS AFTER IT IS FILED

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493191003033

OMB No 1545-0047

2012

Open to Public Inspection

# SCHEDULE F (Form 990)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

**Statement of Activities Outside the United States** 

Department of the Treasury Internal Revenue Service

Name of the organization
CIVICUS WORLD ALLIANCE FOR CITIZEN PARTICIPATION

**Employer identification number** 

					52-1847010	
Pa	General Information "Yes" to Form 990, Pa			e United States. Co		ation answered
1	<b>For grantmakers.</b> Does the assistance, the grantees' elithe grants or assistance? .	gibility for the	grants or assıs	tance, and the selectio	on criteria used to awa	
2	For grantmakers. Describe in the United States.		- ·			nds outside
3	Activites per Region (The follow	ving Part 1, line 3	table can be du	iplicated if additional spa	ce is needed )	
	<b>(a)</b> Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region

<b>(a)</b> Region	offices in the region	ındependent contractors ın region	region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	a program service, describe specific type of service(s) in region	for and investments in region
SUB-SAHARAN AFRICA	1	28	GRANTS TO RECIPIENTS		906,500
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS TO RECIPIENTS		7,073
RUSSIA AND THE NEWLY INDEPENDENT STATES	0	0	GRANTS TO RECIPIENTS		13,615
<ul> <li>Sub-total</li> <li>Total from continuation sheets</li> <li>to Part I</li> </ul>	0	28			927,188 (
Totals (add lines 3a and 3b)	1	28		5000011	927,188

	(b) IRS code	(c) Region	(d) Purpose of	(e) A mount of	(f) Manner of	(g) A mount of	(h) Description	(i) Method of
(a) Name of organization	section and EIN (if applicable)		grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, othe
		RUSSIA AND THE NEWLY INDEPENDENT STATES	CRISIS RESPONSE	13,615				
		SUB-SAHARAN AFRICA	CIVIC SOCIETY WATCH, OUTREACH, POLICY AND RESEARCH, GENDER AND DIVERSITY, AND CIVIC SPACE INITIATIVE	870,000				
			ted above that are re e or counsel has pro				as	

Schedule F (Form 990) 2012 Page 3 Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (c) Number of (d) A mount of (e) Manner of cash (a) Type of grant or (b) Region (f) A mount of (g) Description (h) Method of recipients cash grant disbursement of non-cash valuation assistance non-cash (book, FMV, assistance assistance appraisal, other)

#### Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes, "the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Yes Νo Instructions for Form 926) 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Yes Νo Forms 3520 and 3520-A) 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Yes Νo Corporations. (see Instructions for Form 5471) 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Yes Νo Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. Yes Νo (see Instructions for Form 8865) 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form Νo Yes 5713).

Schedule F (Form 990) 2012

#### Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

as applicable. Also col	ilplete tills part to provide ally ad-	didonal information (see mstructions).
Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 EVERY GRANT HAS AN ACTIVITY BUDGET FOR A STIPULATED PERIOD AT THE END OF THE ACTIVITY PERIOD, THE GRANTOR PROVIDES A DETAILED EXPENSE REPORT ACCOMPANIED BY RELEVANT DOCUMENTS CIVICUS OR ANY OF ITS DULY AUTHORIZED REPRESENTATIVES HAVE ACCESS TO ANY BOOKS, DOCUMENTS OR RECORDS FOR THE PURPOSE OF MAKING AUDITS
		Schedule F (Form 990) 2012

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493191003033

**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012

Open to Public Inspection

Name of the organizatioi	n
CIVICUS WORLD ALLIANCE FO	OR CITIZEN PARTICIPATION

Employer identification number

52-1847010

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE FEDERAL FORM 990 WAS PREPARED BY THE INDEPENDENT ACCOUNTANT AND REVIEWED BY MANAGEMENT AND THE DIRECTOR OF OPERATIONS, WHO REPRESENTS THE BOARD IT WAS THEN SENT TO ALL BOARD MEMBERS BEFORE IT WAS FILED WITH THE INTERNAL REVENUE SERVICE
	FORM 990, PART VI, SECTION B, LINE 12C	NO EMPLOYEE, OFFICER OR OTHER PERSON INVOLVED IN THE ORGANIZATION PARTICIPATES IN THE SELECTION, AWARD OR ADMINISTRATION OF A CONTRACT, IF A REAL OR APPARENT CONFLICT OF INTEREST IS INVOLVED IF A CONFLICT OF INTEREST ISSUE ARISES, THE INTERESTED PERSON RECUSES HIMSELF/HERSELF FROM VOTING ON THE RELATED MATTER AS OF 2012, CIVICUS IMPLEMENTED A NEW ANNUAL DISCLOSURE POLICY, AND ALL OFFICERS AND DIRECTORS WERE REQUIRED TO SIGN A CONFLICT OF INTEREST STATEMENT
	FORM 990, PART VI, SECTION B, LINE 15A	THE EXECUTIVE DIRECTOR'S (SECRETARY GENERAL'S) COMPENSATION IS SET BY THE BOARD, BASED UPON COMPARABLES, AND THE PROCESS IS DOCUMENTED THE LAST SALARY REVIEW TOOK PLACE IN 2012
	FORM 990, PART VI, SECTION C, LINE 19	CIVICUS MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST THROUGH ITS D.C. OFFICE

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493191003033

2012

OMB No 1545-0047

Open to Public Inspection

**Employer identification number** 

52-1847010

# **SCHEDULE R** (Form 990)

Name of the organization

CIVICUS WORLD ALLIANCE FOR CITIZEN PARTICIPATION

# **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Internal Revenue Service

Department of the Treasury

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (f) (b) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (g) Public charity status Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Direct controlling Section 512(b) (13) controlled or foreign country) (if section 501(c)(3)) entity entity? Yes No (1) CIVICUS WORLD ALLIANCE FOR CITIZEN PARTICIPATION STRENGTHEN CITIZEN SF N/A ACTION AND CIVIL SOCIETY 24 GWIGWI MRWEBI STREET NEWTOWN THROUGHOUT THE WORLD N/A JOHANNESBURG 2001

()	(b)	(c)	(d)	(e)	(f)	(g)	(h	)	(i)		i)	(k)	
(a)  Name, address, and EIN of related organization			Primary activity Legal Direct		Predominant income(related, unrelated, excluded from tax under sections 512- 514)	Share of total income	Share of	Disprop allocat	ortionate	Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?		Percentage ownership
			-					Yes	No		res	NO	
IV Identification of Related Colone 34 because it had one or								iswere	d "Ye	s" to Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreigr country)	ı	(d) Direct controlli entity	rg (e) Type of entri (C corp, S corp, or trust)	(f) Share of t income	otal Share e of	(g) e of end- -year ssets		<b>(h)</b> ercentage wnership	(b) (controlled)	(13) olled	
									-		Yes		No
	1	ĺ		I	1		ı		1				I I

Part V Transactions With Related Organizations (Complete if the organization	answered "Yes" to For	m 990, Part IV, line	e 34, 35b, or 36.)					
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No		
f 1 During the tax year, did the organization engage in any of the following transactions with one or mo	ore related organizations l	listed in Parts II-IV?						
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No		
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b	Yes			
<b>c</b> Gift, grant, or capital contribution from related organization(s)				1c		No		
d Loans or loan guarantees to or for related organization(s)								
e Loans or loan guarantees by related organization(s)								
f Dividends from related organization(s)				1f		No		
g Sale of assets to related organization(s)				1g		No		
h Purchase of assets from related organization(s)				1h		No		
i Exchange of assets with related organization(s)								
j Lease of facilities, equipment, or other assets to related organization(s)								
				1k		No		
I Performance of services or membership or fundraising solicitations for related organization(s)								
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)				1m		No_		
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				$\vdash$	Yes			
• Sharing of paid employees with related organization(s)				10	Yes			
P Reimbursement paid to related organization(s) for expenses				<b>1</b> p		No		
<b>q</b> Reimbursement paid by related organization(s) for expenses				1q		No		
r Other transfer of cash or property to related organization(s)				1r		No		
s Other transfer of cash or property from related organization(s)				1s		No		
2 If the answer to any of the above is "Yes," see the instructions for information on who must com	plete this line, including c	overed relationships	and transaction thresholds					
(a) (b) (c) (d) Name of other organization Transaction type (a-s)								

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

<b>(a)</b> Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign country) excluded from tax under section 512-		omicile income state or (related, 50 oregan unrelated, untry) excluded from tax under section 512-		(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	end-of-year			(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	]		
												1	1		

### Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Additional Data Return to Form

Software ID: Software Version:

**EIN:** 52-1847010

Name: CIVICUS WORLD ALLIANCE FOR CITIZEN PARTICIPATION

-->