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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990. A For the 2013 calendar year, or tax year beginning 01/01 2013, and ending 20 12/31 B Check if applicable C Name of organization D Employer identification number Address change Friends for a Non-Violent World Inc 41-1403496 Name change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Initial return 651-917-0383 Terminated City or town state or province country and ZIP or foreign postal code F Group Exemption Amended return Number ▶ Saint Paul, MN 55104 Application pending Other (specify) Accrual H Check ► ☐ if the organization is not G Accounting Method ☐ Cash I Website: ▶ required to attach Schedule B www.fnvw.org (Form 990, 990-EZ, or 990-PF) J Tax-exempt status (check only one) — ✓ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or **K** Form of organization ✓ Corporation Trust Other L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 119,747 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I Check if the organization used Schedule O to respond to any question in this Part I \square Contributions, gifts, grants, and similar amounts received 1 78,765 2 2 Program service revenue including government fees and contracts 18,576 3 3 Membership dues and assessments. 0 Investment income . 4 0 5a Gross amount from sale of assets other than inventory 5a 0 Less: cost or other basis and sales expenses 5b 0 Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . 5c 0 Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than Revenue \$15,000) 0 Gross income from fundraising events (not including \$ o of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 6b Less: direct expenses from gaming and fundraising events . . 6c Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d 11,027 7a Gross sales of inventory, less returns and allowances Less cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c 0 Other revenue (describe in Schedule O) See Schedule O, Statement 1 R 3,200 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 111,568 10 Grants and similar amounts paid (list in Schedule O) 10 RECEIVED. 381 Benefits paid to or for members 11 11 0 12 12 Salanes, other compensation, and employee benefits . 43,048 13 Professional fees and other payments to independent contractor 13 10,550 14 14 Occupancy, rent, utilities, and maintenance 23,005 15 15 Printing, publications, postage, and shipping. 4,770 Other expenses (describe in Schedule O) See Schedule O, Statement 250EN 16 16 23,452 Total expenses. Add lines 10 through 16 17 17 105,206 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 6,362 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 63,379 20 Other changes in net assets or fund balances (explain in Schedule O)... 20 0 Net assets or fund balances at end of year. Combine lines 18 through 20 21 69,741

	55 22 (25.5)					go
Pai					,	
	Check if the organization used Schedul	e O to respond to a	ny question in this			· · · · · · · · · · · · · · · · · · ·
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		• •	59,429		69,368
23	Land and buildings . Other assets (describe in Schedule O) See Sche			4,844	23	0
24	Total assets	dule O, Statement o		64,273		4,396 73,764
25 26	Total liabilities (describe in Schedule O) See S		4	894	$\overline{}$	4,023
20 27	Net assets or fund balances (line 27 of column			63,379	-	69,741
Par						
	Check if the organization used Schedul	•			(Poo	Expenses juired for section
What	is the organization's primary exempt purpose?	Creating non-violen				c)(3) and 501(c)(4)
as m	ribe the organization's program service accomp easured by expenses. In a clear and concise in one benefited, and other relevant information for e	manner, describe the			4947	inizations and section 7(a)(1) trusts, optional others)
28	The ALTERNATIVES TO VIOLENCE PROJECT serv					
	of county jails, and members of the general public	by teaching non-violer	nt conflict resolution	and		
	(Continued on Schedule O, Statement 5)					
00	·	t includes foreign gra			28a	27,525
29	PEOPLE CAMP held a week-long, intergenerationa					
	community living, peacemaking, and the exploration (Continued on Schedule O, Statement 6)	on or ideas and issues	related to an annual	tneme. In 2013,		
	-2	it includes foreign gra	ints check here	▶ □	29a	15,031
30	PEACE EDUCATION AND ADVOCACY educates co			the	234	13,031
30	transforming power and practice of nonviolence ar					
	(Continued on Schedule O, Statement 7)	TO OT VICE THE CONTROL OF CONTROL		3 001100111119		
		it includes foreign gra	ints, check here .	. ▶ □	30a	17,494
31	Other program services (describe in Schedule O				-	
		it includes foreign gra		▶ □	31a	12,588
32	Total program service expenses (add lines 28a				32	72,638
Par			n one even if not com	pensated-see the ii	nstruc	ctions for Part IV)
-	Check if the organization used Schedul	e O to respond to a	ny question in this	Part IV		<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-)		Ċ	Estimated amount of their compensation
Rob	rt Nechal	20	15,60		0	0
Man	ging Director					
Rae	Cornelius	1	ļ ·)	0	0
	d Member					
	Daneker	1	l l		0	0
	d Member				_	
	ara Gerten	4	'	P	0	0
	Surer	1			0	
	Hinz	'	'	1	١	U
	d Member	4		0	0	0
Secr	y Murphy			4	٦	ū
	Rode	1		0	0	0
	d Member				1	
	- Wellison					
					_	
		I	1	1	- 1	

Part				_
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part		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	Yes	No ✓
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		✓_
b	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a 35b		✓
С	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	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		√
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0			
b	Did the organization file Form 1120-POL for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	Joa		
39	Section 501(c)(7) organizations Enter:			
а	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 ▶			
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		✓
С	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 ► MN			
42a	· · · · · · · · · · · · · · · · · · ·		0-2436	
h	Located at ► 270 Cottage PI, Shoreview, MN 55126-3002 ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over	55126	-3002 Yes	
-	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	100	√
	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.			
C	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		✓
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		•	▶ □
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		✓
C	Did the organization receive any payments for indoor tanning services during the year?	44c		✓
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	440 45a		√
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		✓

Form 99	0-EZ (20	13)						F	age 4
	_			<u> </u>		_	,	Yes	No
46		e organization engage, directly or in			behalf of or	in oppositi	i		,
		ididates for public office? If "Yes," o		, Part I	· · · ·	- 	46		_✓_
Part		Section 501(c)(3) organizations All section 501(c)(3) organization:		estions 47, 49h and	52 and co	molete the	tables f	or lin	00
		50 and 51.	s must answer que	Stions 47-490 and	JZ, and Coi	Tiplete trie	: lables i	OI III	62
		Check if the organization used Sch	nedule O to respond	to any question in t	hıs Part VI				
		SHOOK II the organization adda our	iodale o to respond	1 to diff quoditori iii i		<u>· · · · · · · · · · · · · · · · · · · </u>	<u> </u>	Yes	No
47		e organization engage in lobbying If "Yes," complete Schedule C, Part		section 501(h) election	on in effect o	lunng the t	ax 47	1	
48	-	organization a school as described in		n)? If "Yes." complete	Schedule E		48	 	/
49a		e organization make any transfers to					49a		1
b		s," was the related organization a se	·				49b		
50		lete this table for the organization's							
	emplo	yees) who each received more than	\$100,000 of compe	nsation from the orga			, enter "N	None "	
	(a) (Name and title of each employee	(b) Average hours per week	(c) Reportable compensation	(d) Health contributions		(e) Estimate	ed amoi	unt of
	(a) (varie and the or each employee	devoted to position	(Forms W-2/1099-MISC)	benefit plans a		other cor	npensat	ion
None									
NONE									
			·						
					<u> </u>				
f	Total	number of other employees paid over	er \$100,000	>					
51		lete this table for the organization' 000 of compensation from the orga			contractors	who each	received	more	than
	(a) I	Name and business address of each independ	ent contractor	(b) Type of serv	/ice	(c)	Compensat	ion	
None									
				-					
				-					
				1					
			 -	<u> </u>					
d		number of other independent contra			1 10 17/ 1				
52		e organization complete Schedule A tempt charitable trusts must attach a			and 4947(a)		► ✓ Yes	. 🗆 1	No
Under c		of perjury I declare that I have examined this r	-		ents, and to the				
		complete Declaration of preparer (other han							
		Dorbard Her	ten						
Sign		Signature of officer Date							
Here		Barbara Gerten, Treasurer Type or print name and title							
		Print/Type preparer's name	Preparer s agnature	Da Da	nte, ,		, PTIN		
Paid Pren		Gillian Martin	Preparer salgnature Man	Tun 1	16/14	Check L	if	14647	97

Paid

Preparer

Use Only

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

651-210-2436

Firm's EIN ▶

Phone no

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

Name	of the organization						1	Employer i	dentificatio	n number		
Frier	nds for a Non-Violer									403496		
Pai			rity Status (All orga				<u>-</u>		nstruction	ons.		
1 2 3 4	A church, con A school desc A hospital or a A medical rese	vention of churcenbed in section a cooperative ho	ation because it is: (Fo thes, or association of a 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjun-	churche ch Sched ation des	s describi lule E) cribed in :	ed in sec section	tion 170 170(b)(1)	(b)(1)(A)((A)(iii).)(iii). Ente	er the	
5	☐ An organization	•	the benefit of a colle	ge or un	iversity o	wned or	operated	by a go	vernmen	tal unit o	descri	oed in
6 7	✓ An organization	on that normally	nment or government receives a substantia)(A)(vi). (Complete Par	al part of					nit or fror	n the ge	neral	public
8 9												
10 11												
f			a written determinatio	on from	the IRS t	that it is	a Type	I, Type	ll, or Typ	oe III su	pporti	ng
g	following pers	ons?	he organization accepindirectly controls, eitle	-	_			•		nd	Yes	No
			ody of the supported							11g(110
	(ii) A family m	ember of a pers	on described in (i) abo	ove?						11g(ı	+	
	(iii) A 35% cor	ntrolled entity of	a person described in	(i) or (ii)	above?					. 11g(ii	i)	
h	Provide the fo	llowing informat	ion about the support	ed organ	ization(s)							
(i) Name of supported (ii) EIN organization		(II) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) li	organization sted in your document?	the organ	ou notify nization in of your port?	organiza (i) organ	Is the tion in col ized in the S ?	(vii) Amou	unt of ma upport	onetary
			<u></u>	Yes	No	Yes	No	Yes	No	<u> </u>		
(A)												
(B)										<u> </u>		
(C)												
(D)												
(E)												
		1		1			1					

Part	(Complete only if you checked th	ne box on line	5, 7, or 8 of	Part I or if the	organization	failed to qua	
	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease complet	e Part III.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants ")	112,078	77,514	71,482	70,214	78,636	409,924
2	Tax revenues levied for the					ĺ	
	organization's benefit and either paid						
	to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities				1		
	furnished by a governmental unit to the						_
	organization without charge	0	0	0	0	0	0
4	Total. Add lines 1 through 3	112,078	77,514	71,482	70,214	78,636	409,924
5	The portion of total contributions by	-					
	each person (other than a	- 1-					
	governmental unit or publicly	-			ŀ		
	supported organization) included on						
	line 1 that exceeds 2% of the amount shown on line 11, column (f)	_ =	1				_
_							400.004
6 Sooti	Public support. Subtract line 5 from line 4 on B. Total Support	. = '					409,924
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	112,078	77,514	71,482	70,214	78,636	409,924
8		112,076	77,314	71,462	70,214	76,636	403,324
0	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources	1	351	1,701	2,400	2,400	6,853
9	Net income from unrelated business	-	331	1,701	2,400	2,400	0,000
Ŭ	activities, whether or not the business				1		
	is regularly carried on	o	o	اه	o	اه	0
10	Other income. Do not include gain or					_	
	loss from the sale of capital assets		į				
	(Explain in Part IV)	19,381	29,405	32,821	28,262	30,403	140,272
11	Total support. Add lines 7 through 10			1 , 1	,-	,	557,049
12	Gross receipts from related activities, etc.	. (see instructio	ns)			12	
13	First five years. If the Form 990 is for th	ne organization	's first, second	d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
	organization, check this box and stop he	re					. ▶ □
Secti	on C. Computation of Public Suppor	t Percentage					
14	Public support percentage for 2013 (line 6	6, column (f) dıv	ided by line 1	1, column (f))		14	73.59 %
15	Public support percentage from 2012 Sch	nedule A, Part I	l, lıne 14			15	72 %
16a	331/3% support test - 2013. If the organiz				line 14 is 331/3	% or more, ch	eck this
	box and stop here. The organization qua	lifies as a public	cly supported	organization			▶ [
b	331/3% support test-2012. If the organ					15 is 33½% o	or more,
	check this box and stop here. The organi	ization qualifies	as a publicly	supported orga	anızatıon .		. ▶ [
17a	10%-facts-and-circumstances test-20						
	10% or more, and if the organization med						
	Part IV how the organization meets the "fa	acts-and-circui	nstances" test	t. The organiza	tion qualifies a	is a publicly su	pported
	organization						. ▶ □
b	10%-facts-and-circumstances test - 20	012. If the orga	nization did no	t check a box	on line 13, 16a	a, 16b, or 17a,	and line
	15 is 10% or more, and if the organizat						
	Explain in Part IV how the organization m	eets the "facts	-and-circumsta	ances" test Th	ne organization	i qualifies as a	publicly
	supported organization						. ▶ [

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this 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 I	Part I or if the organization failed to	qualify under Part II.
If the organization fails to qualify under the tests list	ted below, please complete Part II.)	

Section	on A. Public Support		· · · · · ·				
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees			, -,		,	
	received (Do not include any "unusual grants ")						
2	Gross receipts from admissions, merchandise			~			
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose					,	
3	Gross receipts from activities that are not an						
•	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge		į				
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .		ļ			<u> </u>	
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6)						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
4.4	and 12.)		 				= F01/a\/0\
14	First five years. If the Form 990 is for the organization, check this box and stop he	_					. —
Cooti				•	· · · ·	<u> </u>	
	on C. Computation of Public Suppor			3 column (f)		15	0/
15	Public support percentage for 2013 (line to		· · · · · · · · · · · · · · · · · · ·	• • • •		16	<u>%</u>
16 Sacti	Public support percentage from 2012 Schon D. Computation of Investment In					10	
<u> </u>	Investment income percentage for 2013 (_	v line 13 colu	mn (fl)	17	%
	Investment income percentage for 2013 (18	%
18	331/3% support tests—2013. If the organ				 nd line 15 is n		
19a	17 is not more than 331/3%, check this box						
h	331/2% support tests—2012. If the organiz		_			-	
b	line 18 is not more than 331/3%, check this l						
20	Private foundation. If the organization di					_	_
						ouu	

Schedule A (Form 990 or 990-EZ) 2013

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. ► See separate instructions.

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 o	rganızation answered "Yes,	," to Form 990, Part IV, line 4, or Forr	n 990-EZ, Part VI, I	line 47 (Lobbying Activities)), then
• Se	ction 501(c)(3) organizations t	that have filed Form 5768 (election und	er section 501(h)) C	Complete Part II-A Do not co	mplete Part II-B
• Se	ction 501(c)(3) organizations t	that have NOT filed Form 5768 (election	n under section 501	(h)) Complete Part II-B Do r	not complete Part II-A
If the o	rganization answered "Yes,	," to Form 990, Part IV, line 5 (Proxy `	Tax) or Form 990-E	Z, Part V, line 35c (Proxy T	ax), then
	ction 501(c)(4), (5), or (6) orga	nizations Complete Part III			
Name o	of organization			Employer ider	ntification number
Friend	s for a Non-Violent World Ir	ıc			41-1403496
Part	I-A Complete if the	e organization is exempt unde	er section 501(c) or is a section 527 (organization.
1	Provide a description of t	he organization's direct and indire	ct political campa	ign activities in Part IV.	
2	Political expenditures			▶ \$	}
3	Volunteer hours				***************************************
Part	-B Complete if the	e organization is exempt unde	er section 501(c)(3).	
1	Enter the amount of any	excise tax incurred by the organiza	tion under section	n 4955 ▶ \$	5
2	Enter the amount of any	excise tax incurred by organization	managers under	section 4955 ▶ \$)
3	If the organization incurre	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	I-C Complete if the	e organization is exempt und	er section 501(c), except section 501	(c)(3).
1	Enter the amount direct	ly expended by the filing organiz	ation for section	527 exempt function	
	activities			<i></i> > \$	
2	Enter the amount of the	filing organization's funds contrib	uted to other org	janizations for section	
	527 exempt function activ	vities	•	▶ \$	
3	· · · · · · · · · · · · · · · · · · ·	expenditures. Add lines 1 and 2.	Enter here and	on Form 1120-POL,	
	line 17b			> \$	
4	Did the filing organization	n file Form 1120-POL for this year			∐ Yes _ No
5		ses and employer identification nur			
		ents. For each organization listed, o			
		ontributions received that were pro-			=
	as a separate segregated	fund or a political action committe	e (PAC). If additio	nal space is needed, prov	ide information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	,		• •	filing organization's	contributions received and
				funds if none, enter -0-	promptly and directly delivered to a separate
					political organization If
					none enter-0-
(1)					
·''					
(2)			ı.		
\ - ,					
(3)					
(4)					
(5)					
(e)				†	

Par	t II-A Complete if the organizatio section 501(h)).	n is exempt under section 501(c)(3) and filed	d Form 5768 (ele	ction under
Α (ongs to an affiliated group (and list in Part IV		up member's
		nses, and share of excess lobbying expenditur	•	
В		ecked box A and "limited control" provisions a	<u> </u>	
		ying Expenditures	(a) Filing organization's totals	(b) Affiliated group totals
_		eans amounts paid or incurred.)	Organization's totals	group totals
16	Total lobbying expenditures to influence	public opinion (grass roots lobbying)	1,720	_
Ł	Total lobbying expenditures to influence	a legislative body (direct lobbying)	160	
•	Total lobbying expenditures (add lines 1	a and 1b)	1,880	
C	Other exempt purpose expenditures		103,216	
•	Total exempt purpose expenditures (add	lines 1c and 1d)	105,096	
f	Lobbying nontaxable amount. Enter columns	the amount from the following table in both	21,019	
	If the amount on line 1e, column (a) or (b) is	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e	j	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		-
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25	% of line 1f)	5,255	
ŀ	Subtract line 1g from line 1a If zero or le	ss, enter -0	0	
i	Subtract line 1f from line 1c. If zero or le	ss, enter -0	0	
j		on either line 1h or line 1i, did the organization	file Form 4720	Yes No
		ar Averaging Period Under Section 501(h) de a section 501(h) election do not have to com	olete all of the five	

columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbyi	ng Expenditures	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	22,452	21,056	19,041	21,019	83,568
b	Lobbying ceiling amount (150% of line 2a, column (e))					125,352
c	Total lobbying expenditures	390	1,215	600	1,880	4,085
d	Grassroots nontaxable amount	5,613	5,264	4,760	5,255	20,892
е	Grassroots ceiling amount (150% of line 2d, column (e))					31,338
f	Grassroots lobbying expenditures	270	1,080	200	1,720	3,270

Schedule C (Form 990 or 990-EZ) 2013

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fi (election under section 501(h)).	led I	Form	5768		
For a	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a	1)		(b)	
	option of the lobbying activity.	Yes	No	Aı	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				•	
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?			· · · · · · · · · · · · · · · · · · ·		
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .					
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .					
b	If "Yes," enter the amount of any tax incurred under section 4912	1				
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5). c	or se	ction		
	501(c)(6).	• ,,				
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .			3		
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," OF answered "Yes."				line	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of	-			
а	Current year	ľ	2a			
b	Carryover from last year	. [2b			
С	Total	Ì	2c	_		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	İ	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby.					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
	IV Supplemental Information					
Part II	le the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou-B, line 1. Also, complete this part for any additional information.					
				·		
				·		
				·		
				·		
	•••••••••••••••••••••••••••••••••••••••			· 		

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.

OMB No 1545-0047

	nent of the Treasury Revenue Service	▶ Information at		ttach to Form		990-EZ. Instructions is at ww	w.irs.gov/form990.	Open to Public Inspection
	of the organization				<u> ,</u>			fication number
Frien	ds for a Non-Viole			_				1-1403496
Par						vered "Yes" to F	orm 990, Part IV	, line 17.
	Form 990)-EZ filers are r					 	
1			on raised funds t				heck all that apply	
a	Mail solicita			e L		ion of non-govern	-	
b	☐ Phone solici	email solicitatio	ris	7 L		ion of governmen fundraising events		
c d	☐ In-person so			g L] Special i	iunuraising event	•	
2a			ten or oral agre	ement with	anv individ	dual (including off	ficers, directors, tru	ıstees
							fundraising services	
b		ten highest paid t least \$5,000 by			draisers) pi	ursuant to agreen	nents under which	the fundraiser is to be
	(i) Name and address or entity (fund		(II) Activity	custody c	ndraiser have or control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
				Yes	No			
1				103	110	-		
2								
3							<u></u>	
4								
5								
6								
7		· · · · · · · · · · · · · · · · · · ·						
8								
9								
10								
			l	1	<u> </u>			
Total 3			nization is rogis	torod or lia	oneod to c	olicit contribution	o or has been not	fied it is exempt fron
3	registration or li		riization is regis	tered or no	ensed to s	Once Contribution	is of flas been floti	ned it is exempt from
							·	
								

		gross receipts greater that	ın \$5,000.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Holiday Fair			(add col (a) through col (c))
Revenue			(event type)	(event type)	(total number)	
	1	Gross receipts	19,206			19,206
	2	Less Contributions Gross income (line 1 minus	о			0
		line 2)	19,206			19,206
	4	Cash prizes	0			0
	5	Noncash prizes	0			0
enses	6	Rent/facility costs	0			0
Direct Expenses	7	Food and beverages .	81		0	81
Dire	8	Entertainment	0		0	0
	9	Other direct expenses .	8,098			8,098
	10 11	Direct expense summary. Ac Net income summary. Subtra	act line 10 from line 3, co	olumn (d)		8,179 11,027
Pa	rt III	Gaming. Complete if the than \$15,000 on Form 9		ed "Yes" to Form 99	00, Part IV, line 19, or r	eported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Re	1_	Gross revenue				
Ses	2	Cash prizes				<u>-</u> -
zxben	3	Name and a single				
ш		Noncash prizes				
Direct Expenses	4	Rent/facility costs				
Direct E	4 5	·				
Direct E		Rent/facility costs	☐ Yes% ☐ No	☐ Yes% ☐ No	☐ Yes%	
Direct E	5	Rent/facility costs Other direct expenses	□ No	□ No	🖰 ' ' ' ' '	
Direct E	5 6	Rent/facility costs Other direct expenses Volunteer labor	No No dd lines 2 through 5 in co	No No	🖰 ' ' ' ' '	
9	5 6 7 8 En	Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Active the gaming income summare the state(s) in which the orthe organization licensed to orthogonal transfer in the organization licensed to organization licensed transfer in the organization licensed transfer i	No dd lines 2 through 5 in co y. Subtract line 7 from lin ganization operates gan perate gaming activities	No Plumn (d)	□ No ▶	
9	5 6 7 8 En a Is b If '	Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Active the gaming income summare the state(s) in which the orthe organization licensed to orthogonal transfer in the organization licensed to organization licensed transfer in the organization licensed transfer i	No dd lines 2 through 5 in co y. Subtract line 7 from lin ganization operates gan perate gaming activities	No	□ No	

schedu	ile G (Form 990 or 990-E2) 2013	Page 3
11 12	Does the organization operate gaming activities with nonmembers?	☐ Yes ☐ No
40	formed to administer chantable gaming?	☐ Yes ☐ No
13 a	Indicate the percentage of gaming activity operated in: The organization's facility	%
b	An outside facility	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records.	
	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 ▶ \$	
	Name ▶	
	Address►	
16	Gaming manager information	
	Name ►	
	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	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$	
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) a Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide additional information (see instructions).	ind (v), and de any
-		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 2013

Inspection

2013 Open to Public

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number Friends for a Non-Violent World Inc 41-1403496 Form 990-EZ, Part I, Line 10 - Scholarships provided for our People Camp program = \$381

Form 990-EZ

Page 1

Line Number Part I Line 8

Friends for a Non-Violent World Inc 41-1403496

Other Revenue Structured Explanation

Description	Amount
Honorarium	150
AVP rent	2,400
Admin fees from fiscally-sponsored projects	650
Total:	3,200

Form 990-EZ

Page 1.

Line Number Part I Line 16

Friends for a Non-Violent World Inc 41-1403496

Other Expenses Structured Explanation

Description	Amount
Travel	7,372
ІТ	6,625
Food and Refreshments	3,537
Liability Insurance	2,408
Bank Charges	1,293
Supplies and Materials	950
Project Admin Fees	649
Equipment	300
Dues and Memberships	175
Misc Expenses	143
Total·	23.452

Form 990-EZ

Page 2

Line Number Part II Line 24

Friends for a Non-Violent World Inc 41-1403496

Other Assets Structured Explanation

Description	EOY Amount
Accounts Receivable	263
Pledges Receivable	57
Prepaid Expenses	1,076
Security Deposit	3,000
Total:	4,396

Form 990-EZ

Page 2,

Line Number Part II Line 26

Friends for a Non-Violent World inc 41-1403496

Other Liabilities Structured Explanation

Description '	EOY Amount		
Accounts Payable	3,921		
Payroll Liabilities	102		
Total:	4.023		

Form 990-EZ

Page 2 Line Number Part III Line 28 Friends for a Non-Violent World Inc 41-1403496

First Program Service Accomplishments Description

Description

compassionate communication. In 2013, 3185 volunteer hours made possible 35 workshops at 6 prisons, and 3 community centers. 641 inmates. participated

Form 990-EZ Page 2.

Line Number Part III Line 29

Friends for a Non-Violent World Inc 41-1403496

Second Program Service Accomplishments Description

Description

1420 volunteer hours made the experience possible for 102 campers of many ages. They attended workshops about gardening, cooking with local foods and Tai Chi

Form 990-EZ

Page 2

Line Number Part III Line 30

Friends for a Non-Violent World Inc 41-1403496

Third Program Service Accomplishments Description

Description

peace and justice. In 2013, 690 volunteer hours produced position papers, articles for a weekly eblast, phone banking, and speaker events related to Syria, Minnesota Arms Spending Alternatives Project, Minnesotans United for All Families and other pertinent issues reaching over 2500 people. A special project included 10 oral interviews of Minnesota peacemakers archived in the MN Historical Society. The Book Club served 9 people.

Form 990-EZ

Page 2

Line Number Part III Line 31

Friends for a Non-Violent World Inc 41-1403496

Other Program Service Accomplishments

Description	Grants And Allocations	Includes Foreign Grants	Program Service Expenses
SPONSORED PROJECTS In 2013, FNVW acted as fiscal sponsor for two peace-related organizations the Minnesota Peace Project (\$11,339 in expenses) and Minnesota Peace Teams (\$834 in expenses)	0		12,173
PATHWAYS TO PEACE provides personal transformation through mediations, creative visualization and intention to nourish nonviolence in ourselves and in our world. In 2013, 132 volunteer hours provided 11 sessions for 4 people	0		415
Total:			12,588