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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

201

Open to Public

Department of the Treasury

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

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A	For the		endar year, or tax year beginning 7/1/2013 , and en	ndina	6/3	0/2014	1	
		pplicable	C Name of organization Family Voices	ıamış			ication number	
			Doing Business As		1,-			
<u></u>	Address c	nange	Number and street (or PO box if mail is not delivered to street address) Room/suite		85-043080	0		
	Name cha	ange	·		E Telephone		r	
П.					Liecphon	, mambe	•	
	Initial retu	irn	City or town State ZIP code Albuquerque NM 87110		505-872-47	774		
	Terminate	ed :			•			
=			Foreign country name Foreign province/state/county Foreign postal of	code			016.464	
	Amended	return			G Gross red	eipis 3	916,464	
Π.	Applicatio	n pending	F Name and address of principal officer	H(a) is ti	his a group return	for subore	dinates? Yes X No	
_			Nora Wells 3701 San Mateo Blvd. NE Suite 103, Albuquerque, NM_8711	H(b) Ar	e all subordinat	es includ	ted? Yes No	
_					"No," attach a li			
	ax-exem		X 501(c)(3) 501(c) () ◀ (Insert no) 4947(a)(1) or 527		140, 411401741	J. (300 I		
<u>J \</u>	<u>Nebsite</u>	: ► ww	w familyvoices.org	H(c) Gr	oup exemption	number	<u> </u>	
K	orm of or	rganization	X Corporation	of form	ation 1995	l M s	State of legal domicile NM	
	art I				1995	J	TAIN!	
J	_		mmary					
ø	1	-			achieve fam	illy-cen	itered care	
2			nildren and youth with special health care needs and/or disabilities. We pro					
Governance	1	families	resources and support to make informed decisions and advocate for impro	oved		- -		
Ϋ́	2	Check t	nis box 🕨 🔲 if the organization discontinued its operations or disposed o	of mor	e than 25%	of its r	net assets	
မ	3		of voting members of the governing body (Part VI, line 1a)			3	12	
ంక	4		of independent voting members of the governing body (Part VI, line 1b)			4	12	
es	5		mber of individuals employed in calendar year 2013 (Part V, line 2a)			5	15	
Activities &	6		· · · · · · · · · · · · · · · · · · ·			6		
둉	1		mber of volunteers (estimate if necessary)	•		\vdash	0	
⋖	7a		related business revenue from Part VIII, column (C), line 12		•	7a	0	
	<u> </u>	Net unre	elated business taxable income from Form 990-T, line 34.		<u> </u>	7b	0	
					Prior Year		Current Year	
ā	8		utions and grants (Part VIII, line 1h)		94	3,776	803,630	
ũ	9	Progran	n service revenue (Part VIII, line 2g)		10	6,774	103,905	
Revenue	10	Investm	ent income (Part VIII, column (A), lines 3, 4, and 7d)			0		
œ	11	Other re	evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2	0,727	8,929	
	12	Total rev	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1.07	1,277	916,464	
~~ <u>~</u>	13		and similar amounts paid (Part IX, column (A), lines 1–3)			0	0	
&'⊎ હ⊎ಟ್ಳ xpenses	14		paid to or for members (Part IX, column (A), line 4)	•		0		
3 .	15		other compensation, employee benefits (Part IX, column (A), lines 5–10).		60	5,632		
ŞĞ	16a		ional fundraising fees (Part IX, column (A), line 11e)			0,032	505,405	
\$ 5	100						<u> </u>	
	l b	Other	ndraising expenses (Part IX, column (D), line 25) 20,705					
	17		xpenses (Part IX, column (A), lines 11a-11d (f-24e)			8,635	406,013	
2	18		penses Add lines 13–17 (must equal Part IX, column (A), line 25) [0].			4,267	911,418	
<u>) —</u>	19	Revenu	e less expenses Subtract line 18 from line 12			7,010	5,046	
Assets or	<u> </u>		Si HIII	Begin	ning of Curren	t Year	End of Year	
2 ag	20		sets (Part X, line 16)		51	5,512	490,372	
35	21	Total lia	bilities (Part X, line 26)		12	4,504	114,852	
	22	Net ass	ets or fund balances. Subtract line 21 from line 20		39	1,008	375,520	
P	art II	Sic	nature Block				~	
			y, I declare that I have examined this return, including accompanying schedules and statements,	and to 1	the best of my k	nowleda		
and	belief, it i	s true, corr	ect, and complete Declaration of preparer (other than officer) is based on all information of which	prepare	er has any knov	vledge	•	
C:			Elegen Hells		4	19/20	115	
Si			Signature of officer		Date	-100		
He	ere		Éleanord Wells		24.0			
			Type or print name and title					
		Priir	nt/Type preparer's name Preparer's signature	Da	- T		DTIN	
Pa	id	''"	richaici s signature	l Da		Check	If PTIN	
		_ Kh	aryn Cover Kharin Laue	J 3		self-emp		
	epare	' [n's name ► Kharyn L Cover CPA PC	<u></u>				
US	se Onl	y —			Firm's EIN			
_			n's address ► 9636 Villa Del Rey NE, Albuquerque, NM 87111		Phone no	505-	797-0995	
Ma	y the If	RS discu	ss this return with the preparer shown above? (see instructions)				X Yes No	

orm 9	90 (2013) Family Voices	85-0430800	Page 2
Pai	Statement of Program Service Accomplishments		[
	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>	
1 ,	Briefly describe the organization's mission FV aims to achieve family-centered care for all children with special health care needs		
	and the desirity of Theory the sun publication and the state of the st		
	and support to make informed decisions, advocate for improved policies, build partnerships		
	among families and professionals, and serve as a trusted resource on health care.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	□ vaa	□ Na
	services?	. Yes	X No
4	Describe the organization's program service accomplishments for each of its three largest program services	as measured by	
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and all		
	the total expenses, and revenue, if any, for each program service reported		
4a		e\$ 103,	905)
	Provide information and education concerning the health care of children with special health needs		
			
4b	(Code.) (Expenses \$ Including grants of \$) (Revenue	\$	
	/ (Expenses + / (Nevent		-
			· · · · · · · · · · · · · · · · · · ·
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	ıe \$)
4d	Other program services. (Describe in Schedule O.)	 _	
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
4e	Total program service expenses ► 858.327	· · · · · · · · · · · · · · · · · · ·	

Part	IV Checklist 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I.	3		_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			-
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	_4	Χ	
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, 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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	-	-	~
	VII, VIII, IX, or X as applicable.		÷	
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	Х	
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 ⁹ If "Yes," complete Schedule D, Part VII	11b		Х
С	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		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		_X
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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			
4-	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	1	l	
10	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		1	1
20-	If "Yes," complete Schedule G, Part III	19		X
20a		20a	<u> </u>	X
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	l	1

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Par				
			Yes	No
21 (Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants or 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		<u> </u>
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		_ X_
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 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	1		
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	-%	<u></u>	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	. 28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			ļ
	Schedule L, Part IV	. 28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	1		
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	·		
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31	<u> </u>	X
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	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	İ	1	1
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
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		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	İ		1
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ļ	ــــــ
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	↓	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	. 38	Ιx	1

		<u>30800</u>	P	age 5
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a `	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 2	2		
b		5		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	7	ŀ	
	gaming (gambling) winnings to prize winners?	1c	X	I
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 19	اذ		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	<u> </u>	X
b	If "Yes," enter the name of the foreign country:	1		
	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			&-
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u> </u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
_	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	l		
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	<u> </u>	<u> </u>	-, -
_	and services provided to the payor?	7a	_	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7c		X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	 70		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>	-^-
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u>		├──
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	1	<u> </u>
9	Sponsoring organizations maintaining donor advised funds.	₹	\vdash	
а	Did the organization make any taxable distributions under section 4966?	9a	T	1 3
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	
10	Section 501(c)(7) organizations. Enter	-	1	\$
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	7		Ť
11	Section 501(c)(12) organizations. Enter	7		
а	Gross income from members or shareholders		,	
b	Gross income from other sources (Do not net amounts due or paid to other sources		i	
	against amounts due or received from them)		ļ	<u></u>
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>		<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	<u> </u>
L.	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans	4		
с 14а	Enter the amount of reserves on hand	+	├ -	
14a b	Did the organization receive any payments for indoor tanning services during the tax year?	14a	_	X.
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	1	1

Part VI Governar

Governance, Management, and Disclosure For each "Yes" resp.	onse to lines 2 through 7b below, and for a "No"
response to line 8a, 8b, or 10b below, describe the circumstances,	processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response or note to any line	e in this Part VI

Sect	ion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 12							
	If there are material differences in voting rights among members of the governing body, or							
	If the governing body delegated broad authority to an executive committee or similar							
	committee, explain in Schedule O.							
b	Enter the number of voting members included in line 1a, above, who are independent							
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?							
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?							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X				
6	Did the organization have members or stockholders?	6	Х					
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		Х				
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,							
	stockholders, or persons other than the governing body?	7b		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during							
	the year by the following	-,1-	,	प				
а	The governing body?	8a	X					
b	Each committee with authority to act on behalf of the governing body?	8ь	Х					
9	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		Х				
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue (ode.)					
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a	Χ					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,							
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? .	10b	X					
11a	, in the second							
b								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	X					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	_X					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"							
	describe in Schedule O how this was done	12c	X					
13	Did the organization have a written whistleblower policy?	13	X					
14	Did the organization have a written document retention and destruction policy?	14	X					
15	Did the process for determining compensation of the following persons include a review and approval by			1				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ļ						
a	The organization's CEO, Executive Director, or top management official	15a	_X	<u> </u>				
b	Other officers or key employees of the organization	15b		X				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement							
	with a taxable entity during the year?	16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its							
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard	•,	*					
C4	the organization's exempt status with respect to such arrangements?	16b	ļ .					
	Int the states with which a copy of this Form CCC as you and to be filed.							
17 18	List the states with which a copy of this Form 990 is required to be filed NM Section 6104 requires an expansion to make the Forms 1002 (or 1004 the reliable).							
10	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3	s only	y)					
	available for public inspection. Indicate how you made these available. Check all that apply. Own website							
19								
13	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest pol financial statements available to the public during the tax year.	cy, ar	id					
20	State the name, physical address, and telephone number of the person who possesses the books and records of the							
		7.4						
	organization: Larry Leyva 505-872-477 3701 San Mateo NE, Suite 103, Albuquerque, NM 87110	4						
_								

Form 990 (2013)	. Family Voices			_	85-04308	00 Page 7				
Part VII.	Compensation of Officers, Dire	ctors, Truste	es, Key Employees, F	lighest Comp	ensated					
Employees, and Independent Contractors										
Check if Schedule O contains a response or note to any line in this Part VII										
Section A.	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
1a Complete organization's	this table for all persons required to be latex year	isted. Report co	mpensation for the calend	lar year ending v	with or within the					
of compensat List all List the who received	 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. 									
	of the organization's former officers, ke eportable compensation from the organ			mployees who r	eceived more tha	an				
	of the organization's former directors o more than \$10,000 of reportable compe					the				
•	n the following order: individual trustees employees, and former such persons	or directors; ins	stitutional trustees, officers	; key employees	s; highest					
Check thi	s box if neither the organization nor any	related organiz	ation compensated any c	urrent officer, dir	ector, or trustee.					
	(A) Name and Title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other				

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, offic	Position (do not check more than one box, unless person is both an officer and a director/trustee) Composition (do not check more than one box, unless person is both an officer and a director/trustee) Former Former Officer Individual trustee or director		(D) Reportable compensation from the organization (W-2/1099-MISC) (E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estimated amount of other compensation from the organization and related organizations			
(1) Leolinda Parlin	0.50									
Treasurer	0 00	X		X						···
(2) Marcia O'Malley	0 50									
Vice President	0 00	X		Х	_					
(3) Diane Suznovich	0 25									
Director	0.00	X	Ļ	ļ						
(4) Peter Wilson				l						
Director	0.00	X								
(5) Renee Turchi	-		1			1				
Director	0 00	X		<u>L</u>						
(6) Ruth Walden	0.25	ľ			1					
Director	0.00	X								
(7) Grace Pushparany Williams	0.50		1							
Secretary	0.00	X		X	L	<u> </u>				
(8) Molly Cole	0 50									
President	0 00	X		X						
(9) Josie Woll	0 25									
Director	0 00	X								
(10) Julie Beckett	0.25									
Director	0.00	X								
(11) Jennifer Bolden-Pitre	0.25									
Director	0.00	X					L			
(12) Andrea Roundfield	0.25			I^{-}						
Director	0.00	X	L	L	L		L			
(13) Lynn Pedraza, PhD	40.00									
Executive Director	0.00		1	X		1 '	L	45,187	1	10,035
(14) Lacey Keene	40.00		Г							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Director of Finance	0.00		L	X	L			45,204		663

` Pa	rt VII Section A. Officers, Directors, Tru	ıstees, Key Emj	oloye	es,	anc	l Hi	ghes	t Co	ompensated Em	ployees (co	ntınu	ed)		
						C)								
	(A)	(B)	(do r	not ch		ition	than o	ากค	(D)	(E)			(F)	
	Name and title	Average					is both		Reportable	Reportable		Es	imated	
		hours per week (list any hours for related organizations below dotted line) officer and a director/trustee) from the organization week (list any hours for related organizations below dotted line) officer and a director/trustee) from the organization (W-2/1099-MISC)				compensatio from related			ount of					
		hours for	Individual trustee or director	Institutional trustee	Officer	₹	흅흑	Former	the	organization			onsatio	n
		related	irec /idu	Ē	ĕ	e m	est loye	릴	organization (W-2/1099-MISC)	(W-2/1099-MIS	3C)		m the	
		organizations below dotted	or al	na	ŀ	ş	le con	l	(W-2/1099-MISC)		ŀ		inization related	
		line)	uste	trus		8	pen	1				orga	nızatıon	5
			•	e e			sate							
							ă				\perp			
(15)	Lynda Honberg	20.00												
	xecutive Director	0.00			Х	_		L	12,604					
	Cristy Marchand		l											
	xecutive Director	0 00		<u> </u>	X				11,798				5,4	104
(17)							ļ							
			<u> </u>	<u> </u>		_					\dashv			
(18)							l							
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(19)		 				ŀ								
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(20)			ļ	1		1	•							
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(21)		 												
(22)				\vdash	├-	\vdash					\dashv			—
(44)		 												
(23)			1	\vdash	-	╁		-			+	- 24		—
(23)			i											
(24)		 						\vdash			\dashv			—
.(57).		†- -												
(25)			†	1	<u> </u>	\vdash	-				\dashv			
		1	1	1										
1b	Sub-total			•	•			•	114,793		0		16.	102
С	Total from continuation sheets to Part VII, S	ection A .						•	0		0		·	0
<u>d</u>	Total (add lines 1b and 1c)							>	114,793		0		16,	102
2	Total number of individuals (including but not li	mited to those lis	sted a	abov	'e) v	vho	rece	ved	more than \$100	,000 of				_
	reportable compensation from the organization	•			0									
										- ·			Yes	No
3	Did the organization list any former officer, dire		-	•	loye	e, c	or higi	hes	t compensated			::		
	employee on line 1a? If "Yes," complete Scheo	lule J for such in	dıvıdı	ual							L	3		X
4	For any individual listed on line 1a, is the sum	of reportable cor	npen	satı	on a	ınd (other	cor	npensation from		l	: '\$		
	the organization and related organizations great	ater than \$150,0	00? <i>l</i> i	f "Ye	es, "	con	nplete	e Sc	hedule J for suc	h		5° 's	· (7)	
	ındıvıdual										L	4		Χ
5	Did any person listed on line 1a receive or acc	rue compensatio	n fro	m a	ny ι	ınre	lated	org	anızatıon or ındi	/idual			, ,	
	for services rendered to the organization? If "Y	•			•			_			. [5		X
Sect	tion B. Independent Contractors													
1	Complete this table for your five highest compe	ensated indepen	dent	con	trac	tors	that	rece	eived more than	\$100,000 of				
	compensation from the organization. Report co	ompensation for	the c	aler	ıdar	yea	ar end	dıng	with or within th	e organizatio	n's ta	эx		
	year								<u> </u>					
	(A)								(B)			(C)		
	Name and business add	iress ——————						<u> </u>	Description of sei	vices	Co	ompen	sation	
		-						1						0
		· · · · · · · · · · · · · · · · · · ·						<u> </u>						0
								 						0
								┼						0
	Total number of independent contracts (*	المادات المادات	A or a	- AL-		1	اء اء	Т.						0
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the	iding but not limi	tea to	ว เทต	se	ııste			wno received		-	2,p		*
	more than \$100,000 or compensation from the	gryanization					0						*	

85-0430800

Family Voices
Statement of Revenue

	كيلم	Check if Schedule O contains a response or r	note to any line in	this Part VIII			. []
The same of the sa				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
क क	1a	Federated campaigns 1a	1			:	
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues <u>1b</u>					
s, G	C	Fundraising events				:	
Gift	d	Related organizations 1d				:	
ns,	е	Government grants (contributions) <u>1e</u>	735,956				
utio	f	All other contributions, gifts, grants, and				,	
g ţ		similar amounts not included above . 11					
Contributions, and Other Sim	g	Noncash contributions included in lines 1a-1f. \$	0				
	<u>h</u>	Total. Add lines 1a-1f	Business Code	803,630			
Program Service Revenue	•	O and an advantage of		100.005	400.005		
eve.	2a	Contract revenue	541900	103,905	103,905		
e e	b			0	· · · · · · · · · · · · · · · · · · ·		
ž	C		<u> </u>	0			
s S	ď		-	0			
gran	e	All other program service revenue	-	0			-
č		Total. Add lines 2a–2f		103,905			
	<u>_</u>	Investment income (including dividends, interest		103,803		,	
	•	other similar amounts)		o			
	4	Income from investment of tax-exempt bond prod		0	****		
	5	Royalties		0	= -		
		(i) Real	(II) Personal	* * **	ž	7. **	* ₂
	6a	Gross rents		Ĉ.	•	, , , , ,	
	b	Less: rental expenses			. *		*
	С	Rental income or (loss)	0			a	3m 5v
	d	Net rental income or (loss)	▶	0			
	7a	Gross amount from sales of (i) Securities	(II) Other		- 7 1	. \$	∳ ?
		assets other than inventory .	0			^	. ž.
	b	Less cost or other basis		f e	·1	***	* * *
		and sales expenses		* * -	*	%w	2 4
	C	Gain or (loss)	0				
	d	Net gain or (loss)	. <u></u>	0		·	
	_				~ , -		- â
Ž	8a	Gross income from fundraising					
ve		events (not including \$ 0		^ **		* *	
Re		of contributions reported on line 1c)		~			
Other Revenue		See Part IV, line 18					
ŏ	b	Less. direct expenses b Net income or (loss) from fundraising events	<u> </u>			,	
	9a	Gross income from gaming activities	, <u> </u>	0			
	Ja	See Part IV, line 19					
	ь	Less: direct expenses b	<u> </u>				
	ŧ .	Net income or (loss) from gaming activities		0			
		Gross sales of inventory, less					
		returns and allowances	8,929				
	ь	Less: cost of goods sold b					
		Net income or (loss) from sales of inventory .		8,929	8,929		
		Miscellancous Revenue	Business Code		0,329		
	11a			0			
	b			0			
	С			0			
	d	All other revenue		0			<u> </u>
	е	Total. Add lines 11a-11d	•	0			
	12	Total revenue. See instructions		916,464	112,834	0	

Form 990 (2013) Family Voices

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response or note	to any line in this Pa	<u>rt IX.....</u>		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	.0			
2	Grants and other assistance to individuals in the			1	
	United States. See Part IV, line 22	0			
3	Grants and other assistance to governments,			+	
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	101,364	91,040	10,324	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	ol	;		
7	Other salaries and wages	322,031	321,245	207	579
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	11,972	11,972		
9	Other employee benefits	36,359	33,317	2,959	83
10	Payroll taxes	33,679	32,814	823	42
11	Fees for services (non-employees).				
а	Management	l ol			
b	Legal	0			
С	Accounting	11,879	10,982	897	<u> </u>
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17.	0	Y* .		•
f	Investment management fees	0			<u> </u>
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	214,889	209,710	5,381	-202
12	Advertising and promotion	0	200,110	0,001	
13	Office expenses	61,542	47,906	6,396	7,240
14	Information technology	19,324	15,604	2,438	1,282
15	Royalties	0			1,202
16	Occupancy	22,983	22,679	304	
17	Travel	31,120	25,263	672	5,185
18	Payments of travel or entertainment expenses	5.,.20	20,200		0,100
	for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings	26,985	21,036		5,949
20	Interest	0		-	
21	Payments to affiliates	0	-		 -
22	Depreciation, depletion, and amortization	1,901	0	1,901	
23	Insurance	2,268		2,268	
24	Other expenses. Itemize expenses not covered			2,200	
	above (List miscellaneous expenses in line 24e If	-			***
	line 24e amount exceeds 10% of line 25, column		1		
	(A) amount, list line 24e expenses on Schedule O.)				
а	Indirect expenses	0	14,671	-14,671	
b	Miscellaneous	13,122	88	12,487	547
С		0	- 00	12,407	
ď		0			
е	All other expenses	0	·		
25	Total functional expenses. Add lines 1 through 24e	911,418	858,327	32,386	20,705
26	Joint costs. Complete this line only if the	311,410	000,027	32,300	20,705
	organization reported in column (B) joint costs				
	from a combined educational campaign and			1	
	fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)				

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 378,094 1 1 261.206 2 2 Savings and temporary cash investments . . . 129,062 227.982 3 Pledges and grants receivable, net . . . 3 4 4 Loans and other receivables from current and former officers, directors. 5 trustees, key employees, and highest compensated employees. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges . . . 6.455 9 1,184 Land, buildings, and equipment: cost or 10a other basis Complete Part VI of Schedule D 10a 15.829 Less accumulated depreciation 15.829 1.901 10c b 11 Investments—publicly traded securities 0 11 0 12 Investments-other securities See Part IV, line 11. ol 12 0 13 Investments—program-related. See Part IV, line 11 ol 13 0 14 Intangible assets ol 14 0 Other assets See Part IV, line 11 . . 15 ol 15 0 16 Total assets. Add lines 1 through 15 (must equal line 34) 515,512 16 490,372 Accounts payable and accrued expenses 17 102,535 17 84,041 18 18 19 21,969 19 30,811 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, # # trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 22 23 Secured mortgages and notes payable to unrelated third parties . ol 23 24 Unsecured notes and loans payable to unrelated third parties . . . ol 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 0 25 Total liabilities. Add lines 17 through 25 124,504 26 114,852 Organizations that follow SFAS 117 (ASC 958), check here | X | and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 359,652 325,704 28 Temporarily restricted net assets . . 31,356 28 49,816 Permanently restricted net assets . . . 29 Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund . 31 31 32 Retained earnings, endowment, accumulated income, or other funds . . . 32 33 391,008 33 Total liabilities and net assets/fund balances 515,512 34 490,372

Form	990 (2013) Family Voices	<u>8</u>	<u>5-0430800</u>	Pag	_{le} 12
Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		916	,464
2	Total expenses (must equal Part IX, column (A), line 25)	2		911	,418
3	Revenue less expenses. Subtract line 2 from line 1	3		5	,046
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		391	,008
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8		-20	,534
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		375	,520
Par	XII Financial Statements and Reporting			r	
	Check if Schedule O contains a response or note to any line in this Part XII			. [
				Yes	No
1	Accounting method used to prepare the Form 990:			.: 3	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1.7	74	
	Schedule O.		v . * *	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		\$ x**	A	J.
	reviewed on a separate basis, consolidated basis, or both:		**		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		43.7	17.50	*.
	separate basis, consolidated basis, or both.		2.34.3	er gerin Egypte	# ~
	X Separate basis		2786		· 77,
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
_	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in	• •	3, 3	\$ \$ 5.00 \$ 5.00	
	Schedule O		• `]	Ž4	
За	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?		3a	х	ı
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			^	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	x	i
			Form		(2013)
			. 5.111	(0.0)

SCHEDULE A (Form 990 or 990-EZ)

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.

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

2013

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Fam	ıly Vo	ices								85-04	30800		
Par	t I	Reason	for Public Ch	arity Status (All org	anizatio	ns must (complete	this par	t.) See ir	structio	ns.		
The	o <u>rga</u> n	nization is not	a private foundat	tion because it is: (For	lines 1 thi	rough 11,	check onl	y one box)				
1		A church, cor	ention of churc	hes, or association of	churches	described	in sectio	n 170(b)(1)(A)(i).				
2		A school desc	cribed in <mark>sectior</mark>	170(b)(1)(A)(ii). (Atta	ch Sched	ule E.)							
3		A hospital or	a cooperative ho	spital service organiza	ation desc	ribed in s e	ection 170	D(b)(1)(A)	(iii).				
4			search organizat me, city, and stat	on operated in conjuncte:	ction with	a hospital	describe	d in sectio	on 170(b)((1)(A)(iii).	Enter th	ne	
5		An organizati	on operated for	the benefit of a college Complete Part II.)	or univer	sity owned	d or opera	ited by a (governmer	ntal unit d	escribe	d	
6		A federal, sta	te, or local gove	rnment or government	al unit des	cribed in	section 1	70(b)(1)(A	۸)(v).				
7	X	-	-	receives a substantial	-	support f	rom a gov	ernmenta	d unit or fr	om the ge	eneral p	ublic	
8		A community	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)										
9		An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross 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 organizati	ion organized an	d operated exclusively	to test for	r public sa	ıfety. See	section 5	i09(a)(4).				
11 e		purposes of c 509(a)(3). Ch a Type By checking persons other	one or more pub neck the box that l b Ty this box, I certify	that the organization in managers and other	ations des supporting III–Funct s not cont	scribed in g organizationally inte trolled dire	section 50 ation and o egrated ectly or inc	09(a)(1) o complete d	r section 5 lines 11e t Type III–No one or mo	509(a)(2) hrough 1 on-functio ore disqua	See se 1h nally int alified	egrate	d
f				written determination	from the I	RS that it	ıs a Type	I, Type II,	or Type III	l supporti	ng		
		-	check this box							•			
g				he organization accept	ted any git	tt or contri	bution fro	m any of t	he				
		following per (i) A pers		or indirectly controls, e	ither alone	or togeth	or with n	areone do	scribad in	(n)		Yes	Ma
				erning body of the sup		•	•	ersoris de	scribed iii	(11)	11g(ı)	105	No
				person described in (i)							11g(ii)		<u> </u>
				of a person described		ıı) above?					11g(iii)		
h		Provide the f	ollowing informa	tion about the supporte	ed organiz	ation(s).							
(i		e of supported anization	(II) EIN	(III) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	the orga	ou notify nization in of your port?	organizat (i) organi	s the non in col zed in the S ?	(vii) Am	ount of me support	onetary
					Yes	No	Yes	No	Yes	No	<u> </u>		
(A)													
(B)					 	 	-	 	 		-		
(C)													
(D)		· · · - <u>- · · · · · · · · · · · · · · ·</u>											
(E)													
Tota	ıl		1				,						

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2009 (c) 2011 (d) 2012 (e) 2013 **(b)** 2010 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . 975,385 989,994 1,018,139 943,776 803,630 4,730,924 Tax revenues levied for the organization's benefit and either paid to or expended on 0 rts behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 975,385 989,994 1,018,139 943,776 803,630 4,730,924 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, 4,730,924 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total 7 Amounts from line 4 975,385 989,994 1,018,139 943,776 803,630 4,730,924 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 216 26 242 Net income from unrelated business activities, whether or not the business is regularly carried on 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 60,831 61,830 112,834 497,760 11 Total support. Add lines 7 through 10 76 5,228,926 Gross receipts from related activities, etc. (see instructions). 12 497,760 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 90.48% 15 90.61% 33 1/3% support test-2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box 16a 33 1/3% support test-2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly 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 Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below please complete Part II.)

Sec	tion A. Public Support	ilder tile teste	noted below,	picase comp	note i ait ii.j		
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
Calc	indar year (or necar year beginning in)	(a) 2009	(0) 2010	(0) 2011	(u) 2012	(e) 2013	(i) iolai
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants ")				<u> </u>	_	0
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.						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	ıts behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0
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					:	0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from		. ,	,	, **		<u> </u>
•	line 6)	****	i	å , 💲 *	. *	*	0
Sec	tion B. Total Support	·					<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	/f) Total
Ou.u	maar year (or needs year beginning my	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(f) Total
9	Amounts from line 6	0	. 0	0	0	0	0
10a	Gross income from interest, dividends,	1					
	payments received on securities loans,						
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses			1			
	acquired after June 30, 1975						0
C	Add lines 10a and 10b .	0	0	0	0	0	0
11	Net income from unrelated business	<u> </u>					
	activities not included in line 10b, whether						
	or not the business is regularly carried on						0
12	Other income Do not include gain or			-			
	loss from the sale of capital assets						
	(Explain in Part IV)						О
13	Total support. (Add lines 9, 10c, 11,		 				
	and 12.)	0	l o	0	О	o	o
14	First five years. If the Form 990 is for the organization			<u>_</u>			
• •	organization, check this box and stop here		no, uma, iourui,	•	s a section son	C)(3)	
			· · ·			 	·
	tion C. Computation of Public Support						
15	Public support percentage for 2013 (line 8, column		e 13, column (f))			15	0.00%
16_	Public support percentage from 2012 Schedule A,			<u> </u>		16	0 00%
	tion D. Computation of Investment Inco						
17	Investment income percentage for 2013 (line 10c,			umn (f))		17	0 00%
18	Investment income percentage from 2012 Schedu					18	0.00%
19a	33 1/3% support tests—2013. If the organization	did not check th	e box on line 14,	, and line 15 is m	ore than 33 1/3%	6, and line 17 is	
	not more than 33 1/3%, check this box and stop h	ere. The organiz	ation qualifies as	s a publicly suppo	orted organizatio	n	▶□
b	33 1/3% support tests—2012. If the organization	did not check a	box on line 14 or	r line 19a, and lin	e 16 is more tha	n 33 1/3%, and	<u></u>
	line 18 is not more than 33 1/3%, check this box as	nd stop here. Th	ne organization q	jualifies as a publ	icly supported or	rganization .	▶ _
20	Private foundation. If the organization did not che					_	, F

Schedule A (F	orm 990 or 990-EZ) 2013	Family Voices		85-0430800	Page 4
Part IV				t II, line 10; Part II, line 17a or 1	7b;
	and Part III, line	e 12. Also complete this p	part for any additional informati	on. (See instructions).	
Part II Line	10 Contract income, f	undraising income and sale	of inventory.		
 -					
					
		•			
					
	·				
	•				

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

201

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

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

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

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

Nam	e of organization				Employer	identification	number
Fam	ıly Voices					85-0430800	
Par		he organization is exempt und				rganization.	
1	•	ne organization's direct and indirect p	olitical campaign a	activities in Part IV	•		
2	Political expenditures				. ▶ \$		
3	Volunteer hours						
Pai	t I-B Complete if t	he organization is exempt und	ler section 501(c)(3).			
1		excise tax incurred by the organization			. ▶ \$		
2	Enter the amount of any	excise tax incurred by organization m	anagers under sed	ction 4955			
3	If the organization incurre	ed a section 4955 tax, did it file Form	4720 for this year?			. Yes	
4a	Was a correction made?					Yes	No
b	If "Yes," describe in Part I	V.				_	_
Pai	t I-C Complete if t	he organization is exempt und	ler section 501	c), except sect	ion 501(c)(3).	
1	Enter the amount directly	expended by the filing organization f	or section 527 exe	mpt function			
					. ▶ \$		
2		iling organization's funds contributed	•	ons			
	for section 527 exempt fu				▶ \$ _		·
3		penditures Add lines 1 and 2 Enter h	ere and on Form 1		▶ \$		0
4		file Form 1120-POL for this year?				Yes	·
5		ses and employer identification numb	er (EIN) of all sect	ion 527 political o	rganization		
	organization made payme	ents. For each organization listed, en	ter the amount par	d from the filing or	ganızatıor	s's funds Also	enter
	the amount of political co	ntributions received that were prompt	tly and directly deli	vered to a separa	te political	organization,	such
	as a separate segregated	fund or a political action committee	(PAC). If additiona	space is needed	provide ir	nformation in F	'art IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid		(e) Amount	
				filing organizati funds If none, en	on's ter -0-	contributions r promptly ar	
						delivered to	a separate
						political orga none, en	
(1)							
(2)							
(2)							
(3)					}		
							
(4)			<u> </u>				
(5)							
· <i>'</i> _							

Family Voices
Schedule C (Form 990 or 990-EZ) 2013

Р	art II-A Complete if the organizati	ion is exempt (under section 50)1(c)(3) and filed	l Form 5768 (elec	tion
	under section 501(h)).					
Α	Check ▶ if the filing organization	_				ıp member's
_	name, address, EIN, ex					
В	Check ▶ if the filing organization			or provisions ap	piy.	
	Limits on Lo (The term "expenditures"	bbying Expendit means amounts			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence p	ublic opinion (gra	ss roots lobbying)		3,099	0
b	Total lobbying expenditures to influence a		direct lobbying) .		13,482	0
C	Total lobbying expenditures (add lines 1a	and 1b)			16,581	0
d	Other exempt purpose expenditures .				841,746	0
e	Total exempt purpose expenditures (add I		858,327	0		
f	Lobbying nontaxable amount Enter the a)	150 740	•		
	columns	-4 io.	153,749	0		
	If the amount on line 1e, column (a) or (b) is Not over \$500,000	nt is:				
	Over \$500,000 but not over \$1,000,000		mount on line 1e is 15% of the excess	over \$500 000		
	Over \$1,000,000 but not over \$1,500,000		is 10% of the excess			
	Over \$1,500,000 but not over \$17,000,000	•	is 5% of the excess o			
	Over \$17,000,000	\$1,000,000			, and the second	
g	Grassroots nontaxable amount (enter 25%	6 of line 1f).			38,437	0
h	Subtract line 1g from line 1a. If zero or les				0	0
	Subtract line 1f from line 1c. If zero or less	ol	0			
				· · · · · · · · · · · · · · · · · · ·		<u> </u>
j	If there is an amount other than zero on e	ither line 1h or lin	e 1ı, dıd the organiz	ation file Form 472		
, j —		ither line 1h or lin		ation file Form 472		Yes No
; —	If there is an amount other than zero on e section 4911 tax for this year?	Ither line 1h or lin	e 1ı, dıd the organiz Period Under Sec 501(h) election do uctions for lines 2a	tion 501(h) not have to comp a through 2f on pa	O reporting	
; —	If there is an amount other than zero on e section 4911 tax for this year?	Ither line 1h or lin	e 1ı, dıd the organiz Period Under Sec 501(h) election do	tion 501(h) not have to comp a through 2f on pa	O reporting	
; 	If there is an amount other than zero on e section 4911 tax for this year?	Ither line 1h or lin	e 1ı, dıd the organiz Period Under Sec 501(h) election do uctions for lines 2a	tion 501(h) not have to comp a through 2f on pa	O reporting	
	If there is an amount other than zero on e section 4911 tax for this year?	Ither line 1h or lin	e 1ı, dıd the organiz Period Under Sec 501(h) election do uctions for lines 2a	tion 501(h) not have to comp a through 2f on pa veraging Period	oreporting lete all of the five ge 4.)	Yes No
	(Some organizations that columns below the deginning in) Lobbying nontaxable amount Lobbying ceiling amount	Ither line 1h or lin	e 1, did the organiz Period Under Sec 501(h) election do uctions for lines 2a es During 4-Year A (b) 2011	tion 501(h) not have to comp through 2f on pa	lete all of the five ge 4.)	Yes No
	(Some organizations that columns below Lobby Calendar year (or fiscal year beginning in)	Ither line 1h or lin	e 1, did the organiz Period Under Sec 501(h) election do uctions for lines 2a es During 4-Year A (b) 2011	tion 501(h) not have to comp through 2f on pa	lete all of the five ge 4.)	Yes No
	(Some organizations that columns below the deginning in) Lobbying nontaxable amount Lobbying ceiling amount	Ither line 1h or lin	e 1, did the organize 1, d	tion 501(h) not have to comp through 2f on pa	lete all of the five ge 4.)	Yes No (e) Total 688,615
b	(Some organizations that columns below the columns below to be col	I-Year Averaging made a section ow. See the instruction (a) 2010 174,979 10,799	e 1ı, did the organiz Period Under Sec 501(h) election do uctions for lines 2a es During 4-Year A (b) 2011	tion 501(h) not have to comp a through 2f on pa veraging Period (c) 2012	(d) 2013	Yes No (e) Total 688,615 1,032,923
b	(Some organizations that columns below the colum	I-Year Averaging made a section w. See the instruction (a) 2010	e 1ı, did the organiz Period Under Sec 501(h) election do uctions for lines 2a es During 4-Year A (b) 2011	tion 501(h) not have to comparthrough 2f on parthrough 2f on parthrough (c) 2012 176,908	(d) 2013	Yes No (e) Total 688,615 1,032,923 53,075

Schedule C (Form 990 or 990-EZ) 2013

39,593

	h IIVon II roomana ta linea da through di halew provide in Bert IIV a datailed description	(ē	1)		(b)	
<i>,,</i> ,,,,,	h "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description bbbying activity.	Yes	No	A	mount	
	uring the year, did the filing organization attempt to influence foreign, national, state or local					
	gislation, including any attempt to influence public opinion on a legislative matter or					į
	ferendum, through the use of:					
	plunteers?			ļ		
	aid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	edia advertisements?			<u> </u>		
	ailings to members, legislators, or the public?			l		
	rants to other organizations for lobbying purposes?					
	rect contact with legislators, their staffs, government officials, or a legislative body?				-	
_	allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	ther activities?					
	otal. Add lines 1c through 1i				_	0
-	d the activities in line 1 cause the organization to be not described in section 501(c)(3)?		***************************************	<u> </u>		
b If '	"Yes," enter the amount of any tax incurred under section 4912		. ,			
c If	"Yes," enter the amount of any tax incurred by organization managers under section 4912.					
d 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(501(c)(6).	(c)(5)	or s	ection		
	301(0)(0).				Yes	No
1 W	ere substantially all (90% or more) dues received nondeductible by members?			1		
2 Di	d the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Dı	d the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Part III		(c)(5)	or s	ection	I	
Part III	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."	(c)(5) OR (t) Pa	ection rt III-A	line	3, is
1 Di	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." ues, assessments and similar amounts from members	(c)(5) OR (t	or so) Pa	ection rt III-A	line	3, is
1 Di 2 Se	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." ues, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of	(c)(5) OR (t) Pa	ection rt III-A	line	3, is
1 Di 2 Se po	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." ues, assessments and similar amounts from members	(c)(5) OR (t) Pa	ection rt III-A	line	3, is
1 Di 2 Se po a Ci	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." ues, assessments and similar amounts from members	(c)(5) OR (t) Pa 1 2a	ection rt III-A	, line	3, is
1 Du 2 Se po a Cu b Ca c To	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." ues, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). urrent year arryover from last year	(c)(5) OR (t) Pa	ection rt III-A	line	
1 Du 2 Se po a Cu b Ca c To	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." ues, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). urrent year arryover from last year	(c)(5) OR (t) Pa 1 2a 2b	ection rt III-A	, line	
1 Du 2 Se po a Cu b Ca c To 3 Ag 4 If i	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." ues, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). urrent year arryover from last year oranged amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues and notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	(c)(5), OR (t) Pa 1 2a 2b 2c	ection rt III-A	, line	
1 Du 2 Se po a Cu b Ca c To 3 Aq 4 lift	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Lest assessments and similar amounts from members	(c)(5), OR (t) Pa 1 2a 2b 2c	ection rt III-A	line	
1 Du 2 Se po a Cu b Ca c To 3 Ag 4 If a	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Les, assessments and similar amounts from members Lection 162(e) nondeductible lobbying and political expenditures (do not include amounts of colitical expenses for which the section 527(f) tax was paid). Lurrent year Larryover from last year Larryover from last year Larryover from last year Larryover sent amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues Larryover sent and the amount on line 2c exceeds the amount on line 3, what portion of the secess does the organization agree to carryover to the reasonable estimate of nondeductible bying and political expenditure next year?	(c)(5), OR (t) Pa 1 2a 2b 2c	ection rt III-A	line	3, is
1 Du 2 Se po a Cu b Ca c To 3 Ag 4 If a	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Les, assessments and similar amounts from members Lection 162(e) nondeductible lobbying and political expenditures (do not include amounts of colitical expenses for which the section 527(f) tax was paid). Lurrent year Larryover from last year Larryover from last year Larryover from last year Larryover sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible bying and political expenditure next year? Larryover instructions)	(c)(5), OR (t) Pa 1 2a 2b 2c 3	ection rt III-A	line	
1 Du 2 Se po a Cu b Ca c To 3 Ag 4 If a	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Les, assessments and similar amounts from members Lection 162(e) nondeductible lobbying and political expenditures (do not include amounts of colitical expenses for which the section 527(f) tax was paid). Lurrent year Larryover from last year Larryover from last year Larryover from last year Larryover sent amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues Larryover sent and the amount on line 2c exceeds the amount on line 3, what portion of the secess does the organization agree to carryover to the reasonable estimate of nondeductible bying and political expenditure next year?	(c)(5) OR (t) Pa 1 2a 2b 2c 3	ection rt III-A	line	3,

Family Voices Schedule C (Form 990 or 990-EZ) 2013 85-0430800 Page 4 Supplemental Information (continued) Part IV

SCHEDULE D (Form 990)

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. ► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

	of the organization	1	employer identification number
	y Voices		85-0430800
Part	Organizations Maintaining Donor Advised Funds or Other Similar		or Accounts.
	Complete if the organization answered "Yes" to Form 990, Part IV, line	∋ 6.	
	(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)		
	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that the assets hel	ld in don	or advised
	funds are the organization's property, subject to the organization's exclusive legal cont		. Yes Mo
	Did the organization inform all grantees, donors, and donor advisors in writing that gra		
	used only for charitable purposes and not for the benefit of the donor or donor advisor,		
	purpose conferring impermissible private benefit?		Yes . No
Part	II Conservation Easements.		
	Complete if the organization answered "Yes" to Form 990, Part IV, line	e <u>7. </u>	
1	Purpose(s) of conservation easements held by the organization (check all that apply).		
[Preservation of land for public use (e.g., recreation or education) Preservat	tion of an	historically important land area
ĺ	Protection of natural habitat	tion of a	certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conservation contribu	ition in th	o form of a concentation
2	easement on the last day of the tax year	1001111111	
а	Total number of conservation easements		2a Held at the End of the Tax Year
b	Total acreage restricted by conservation easements	•	2b
	Number of conservation easements on a certified historic structure included in (a)	•	2c
	Number of conservation easements included in (c) acquired after 8/17/06, and not on	а	20
_	historic structure listed in the National Register	~	2d
3	Number of conservation easements modified, transferred, released, extinguished, or to	erminate	d by the organization
	during the tax year		,
4	Number of states where property subject to conservation easement is located	•	
5	Does the organization have a written policy regarding the periodic monitoring, inspecti	ion, hand	dling of
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation	on easen	nents during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ea	asements	during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirement		
•	470/E\/4\/F\/\\ ================================	its of sec	
9	In Part XIII, describe how the organization reports conservation easements in its rever	nuo and	Yes No
•	balance sheet, and include, if applicable, the text of the footnote to the organization's	financial	expense statement, and
	the organization's accounting for conservation easements.	manciai	statements that describes
Part		s. or O	ther Similar Assets
	Complete if the organization answered "Yes" to Form 990, Part IV, line	e 8	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in it		to statement and helenes should
	works of art, historical treasures, or other similar assets held for public exhibition, educ	ication o	r research in furtherance
	of public service, provide, in Part XIII, the text of the footnote to its financial statement	te that do	secribae thaca itame
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re	wenne et	stement and halance cheet
	works of art, historical treasures, or other similar assets held for public exhibition, edu-	retion o	r research in furthers as
	of public service, provide the following amounts relating to these items	cauon, 0	i research in furtherance
	(i) Revenues included in Form 990, Part VIII, line 1		▶ ¢
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures, or other similar a		
-	following amounts required to be reported under SFAS 116 (ASC 958) relating to thes	101 se iteme:	ilianciai gairi, provide the
а	Develope and add to Ferri coop D. 13700 P. 1	se items.	• •
h	Assets included in Form 990, Part Y		• • • · · · · · · · · · · · · · · · · ·

Sched	ile D (Form 990) 2013 Family Voices				85-04	130800	Р	age 2
Part		lections of Art. I	Historical Tr	easures, or				
3	Using the organization's acquisition, access							
	use of its collection items (check all that app	oly).	_					
а	Public exhibition	d	Loan	or exchange p	programs			
b	Scholarly research	е	Other					
С	Preservation for future generations					•		
4	Provide a description of the organization's c	ollections and expla	ain how they fu	urther the orga	ınızation's exempt ou	rpose in		
-	Part XIII.	•	•	9	, .			
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t					Ye:	s 🔲	No
Part	Complete if the organization ansi 990, Part X, line 21.		orm 990, Par	t IV, line 9, o	or reported an amo	unt on For	m	
1a	Is the organization an agent, trustee, custod included on Form 990. Part X?	lian or other interme			her assets not	Ye	. 	No
b	If "Yes," explain the arrangement in Part XIII						_ `	
	3		J			Amount		
C	Beginning balance .				1c			0
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			0
2a	Did the organization include an amount on F	Form 990, Part X, III	ne 21? .			Ye:	s X	No
b	If "Yes," explain the arrangement in Part XIII	. Check here if the	explanation ha	as been provid	ded in Part XIII .			
Part	V Endowment Funds.							
	Complete if the organization ans	wered "Yes" to Fo	orm 990, Par	rt IV, line 10.				
		Current year (b) Prior year	(c) Two years	back (d) Three years b	ack (e) Fou	ır years	back
1a	Beginning of year balance	0	0		0	0		0
b	Contributions							
С	Net investment earnings, gains,							
	and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
f	and programs					- 		
g	End of year balance	0	0		0	0		
2	Provide the estimated percentage of the cui					<u></u>		0
a	Board designated or quasi-endowment	▶ 9		sidiliii (d)) iicii	u us.			
ь	Permanent endowment	%	Ξ.					
C	Temporarily restricted endowment	%						
	The percentages in lines 2a, 2b, and 2c sho							
3a	Are there endowment funds not in the posse	ession of the organ	zation that are	e held and adr	ninistered for the	_		
	organization by						Yes	No
	(i) unrelated organizations					3a(i)		
	(ii) related organizations			•		3a(ii)		
b 1	If "Yes" to 3a(ii), are the related organization	•				_3b		
4 Pari	Describe in Part XIII the intended uses of the		aowment tund	<u>s</u>				
ा-दार	Land, Buildings, and Equipme Complete if the organization ans		orm 000 Ba	rt IV/ lung 44:	. Soo Earm 000 F) n # V I	10	
	Description of property	1	_					
	Description of property	(a) Cost or other ba (investment)	, , ,	ost or other us (other)	(c) Accumulated depreciation	(d) Bo	ok value	•
1a	Land	<u> </u>	0	0				0
b	Buildings		ol	0				0
c	Leasehold improvements		0	0				
d	Equipment		0	15,829	15,829	+	-	0
e_	Other		0	0	(-	0
Tota	. Add lines 1a through 1e (Column (d) must	equal Form 990, Pa	art X, column (B), line 10(c)) ▶			0

Schedule D (Form 990) 2013 Family Voices				85-0430800	Page 3
Part VII Investments—Other S	Securities.			-	
Complete if the organiz	ation answered "Yes" to I	Form 990, Par	rt IV, line 11b. See Form	990, Part X,	line 12.
(a) Description of security or category (including name of security)	(b) Book value	9	(c) Method of val Cost or end-of-year m		
(1) Financial derivatives		0			
(2) Closely-held equity interests .		0			
(3) Other					
(A)					
(B)					
(C)					
(D)			 		
(E)				-	
(F)					
(G)					
(H)					
Total (Column (b) must equal Form 990, Part X, col (B) line	·	0			
Part VIII Investments—Progra					
Complete if the organiz	ration answered "Yes" to	Form 990, Par	t IV, line 11c. See Form	<u>990, Part X, </u>	<u>line 13.</u>
(a) Description of investment	(b) Book value	e	(c) Method of val Cost or end-of-year m		
			Cost of end-of-year if	larket value	-
(1)					
(2)					
(3)					
(4) (5)					
(6)					
(7)					
(8)					
(9)				·	•
Total (Column (b) must equal Form 990, Part X, col (B) line	13)	0	* * *	- · · · · · · · · · · · · · · · · · · ·	
Part IX Other Assets.	<u> </u>				
	zation answered "Yes" to	Form 990. Pai	rt IV. line 11d. See Form	990. Part X.	line 15
	(a) Description			(b) Book v	
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)			· · · · · · · · · · · · · · · · · · ·		
(9)					
Total. (Column (b) must equal Form 990, I	art X, col. (B) line 15)	<u> </u>	<u></u>		
Part X Other Liabilities.	-1'- 1024 114			_	
	zation answered "Yes" to	Form 990, Pai	rt IV, line 11e or 11f. See	e Form 990, F	art X,
line 25.					
1. (a) Description of liability	(b) Book value				,
(1) Federal income taxes		0			
(2)					
(5)					
(6)	 		_		~
(7)				_	
(8)					
(9)					
Total (Column (b) must equal Form 990, Part X, col (B) line 25)	•				

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

	Complete if the organization answered "Yes" to Form 990, Pa	art IV. lii	ne 12a.		•
1	Total revenue, gains, and other support per audited financial statements.			1	923,170
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			
d	Other (Describe in Part XIII.)	2d	6,70	6	
е	Add lines 2a through 2d			2e	6,706
3	Subtract line 2e from line 1			3	916,464
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b.	4a			
b	Other (Describe in Part XIII.)	4b		4 2 6 4 7	
С	Add lines 4a and 4b			4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	_• .	<u> </u>	5	916,464
Par	XII Reconciliation of Expenses per Audited Financial Statem		•	per Retu	irn
	Complete if the organization answered "Yes" to Form 990, Pa	<u>ırt IV, liı</u>	ne 12a.		
1	Total expenses and losses per audited financial statements	•		1	918,124
2	Amounts 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			
С	Other losses	2c			
ď	Other (Describe in Part XIII.)	2d	6,70)6	
е	Add lines 2a through 2d			2e	6,706
3	Subtract line 2e from line 1	i 1		3	911,418
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			- 3 %	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b			4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		· · · · · · ·	5	911,418
	Supplemental Information				
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P				4, Part X, line
	rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to pro		•	mation	
Part	XI Line 2d Refunds received in FYE 2014 from expenses incurred in previous year	ars were) 		
	and an annual familia for an included and the latest and the lates				
treate	ed as revenue for the financial statements but were offsetting expenses for the 99	30			
Part	XII Line 2d Refunds received in EVE 2014 from expanses incurred in provious vo	ore			
ı aıı	XII Line 2d Refunds received in FYE 2014 from expenses incurred in previous year	ais			
were	treated as revenue for the financial statements but were offsetting expenses for t	the			
	the state of the s	<u> </u>			
990					
					

Schedule D (Form 9	990) 2013	Family Voices				85-0430800	Page 5
Part XIII	Supple	mental Informa	ation (continue	ed)			
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SCHEDULE 0 (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.

► 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.

OMB No 1545-0047 Open to Public Inspection

85-0430800

Department of the Treasury Internal Revenue Service Name of the organization

Family Voices

Employer identification number

Form 990, Part VI, Section A, Line 6 During FYE 6-30-09, Family Voices launched a membership
program to eventually include membership levels for State Affiliate Organizations (SAOs),
other organizations and individuals. A very small number of individual memberships were
received since implementing this program. Members pay a membership fee and receive associated
benefits
Form 990, Part VI, Section B, Line 11b: The Family Voices Board of Directors reviews the 990
annually prior to its submission to the IRS. A draft of the 990 is prepared by the external
CPA. It is reviewed by the Director of Finance, and the Executive Director. The revised draft
is sent via email to all board members for their review. After review and comment from the
board of directors and any necessary changes made, the 990 is submitted to the IRS
Form 990, Part VI, Section B, Line 12c: Monitoring and enforcement of the conflict of interest
policy includes a written document that is signed on an annual basis by incoming members of
the board of directors.
Form 990, Part VI, Section B, Line 15. Determining the compensation of the Executive Director
includes the use of comparable organizations' Form 990s, review of compensation surveys
compiled by national nonprofit organizations, and approval of the board
Form 990, Part VI, Section C, Line 19 Governing documents, conflict of interest policy, and
financial statements are available to the public upon request. Partial financial statements
are included in the Annual Report, which is sent to constituents and is available on the
Family Voices website.
Form 990, Part IX, Line 11g ⁻ Project consultant to review materials, organize focus groups,
meetings, and provide training and technical assistance - \$110,528, Policy consultants -
\$63,129, Data consultants - \$27,256, Other consultants - \$13,976

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization	Employer identification number
Family Voices	85-0430800
Turning Total	
•	

