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Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

**2008**

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning **10/01/08**, and ending **9/30/09**

B Check if applicable:

☐ Address change☐ Name change☐ Initial return☐ Termination☐ Amended return☐ Application pending

Please use IRS label or print or type. See specific instructions.

C Name of organization **PARTNERSHIP FOR COMMUNITY ACTION, INC.**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

**815 PARK NORTH BLVD.**

Room/suite

City or town, state or country, and ZIP + 4

**CLARKSTON****GA 30021**

F Name and address of principal officer:

**MOHAMMAD SALEEM****815 PARK NORTH BLVD.****Clarkston****GA 30021**

D Employer identification number

**58-6049575**

E Telephone number

**404-929-2500**G Gross receipts \$ **26,495,372**

H(a) Is this a group return for

affiliates?

☐ Yes☒ No

H(b) Are all affiliates

included?

☐ Yes☐ No

If "No," attach a list. (see instructions)

I Tax-exempt status: ☒ 501(c) ( **3** ) (insert no.)

4847(e)(1) or

527

J Website: **WWW.PCACTION.ORG**

H(c) Group exemption number

K Type of organization: ☒ Corporation ☐ Trust ☐ Association ☐ OtherL Year of formation: **1965**M State of legal domicile: **GA****Part I Summary**

1 Briefly describe the organization's mission or most significant activities.

To work for social change through community-based partnerships and advocacy that create opportunities leading to family self-sufficiency in the diverse communities of Dekalb, Gwinnett, and Rockdale counties.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets.

3 Number of voting members of the governing body (Part VI, line 1a)

**3****21**

4 Number of independent voting members of the governing body (Part VI, line 1b)

**4****21**

6 Total number of employees (Part V, line 2a)

**6****280**

6 Total number of volunteers (estimate if necessary)

**6****1370**

7a Total gross unrelated business revenue from Part VIII, line 12, column (C)

**7a**

b Net unrelated business taxable income from Form 990-T, line 34

**7b****0**

8 Contributions and grants (Part VIII, line 1h)

**Prior Year****20,039,901****Current Year****26,369,070**

9 Program service revenue (Part VIII, line 2g)

**130,825****101,659**

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

**63,308**

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9a, 10c, and 11e)

**24,643**

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

**20,234,034****26,495,372**

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

**12,655,747**

14 Benefits paid to or for members (Part IX, column (A), line 4)

**6,146,832****7,915,234**

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

**13,292,053****5,837,694**

16a Professional fundraising fees (Part IX, column (A), line 11e)

**19,438,885****26,408,675**

b Total fundraising expenses (Part IX, column (D), line 25)

**795,149****86,697**

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)

**9,964,152****12,131,818**

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

**3,990,211****6,071,180**

19 Revenue less expenses. Subtract line 18 from line 12

**5,973,941****6,060,638**

20 Total assets (Part X, line 16)

**9,964,152****12,131,818**

21 Total liabilities (Part X, line 26)

**3,990,211****6,071,180**

22 Net assets or fund balances. Subtract line 21 from line 20

**5,973,941****6,060,638****Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

**MOHAMMAD SALEEM****PRESIDENT**

Date

**7/9/10**

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

**Danielle York, CPA**

Date

**6/03/10**Check if self-employed ☐

Preparer's identifying number (see instructions)

**P00545871**

Firm's name (or yours if self-employed), address, and ZIP + 4

**Clausell & Associates, CPA's, P.C.  
4260 Clausell Ct Ste 200  
Decatur, GA 30035**

EIN

Phone no.

**404-288-8117**

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

☐ Yes☐ No

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2008)

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PCA 06/03/2010 5:13 PM

Form 990 (2008) **PARTNERSHIP FOR COMMUNITY****58-6049575**Page **2****Part III** Statement of Program Service Accomplishments (see instructions)**1** Briefly describe the organization's mission:

To work for social change through community-based partnerships and advocacy that create opportunities leading to family self-sufficiency in the diverse communities of Dekalb, Gwinnett, and Rockdale counties.

**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 ☒ 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 services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code. ) (Expenses \$ **9,113,970** including grants of \$ **80,266** ) (Revenue \$ )  
 Head Start provides an educational and social experience for children with disabilities funded by the U.S. Department of Health and Human Services. Clients served totaled 1163.

4b (Code. ) (Expenses \$ **1,978,211** including grants of \$ **510,594** ) (Revenue \$ )  
 The Community Services Block Grant provides services to assist low-income persons in attaining self-sufficiency and provides them with immediate life necessities such as food, shelter, and healthcare needs. Funded by the U.S. Department of Health and Human Services.

4c (Code. ) (Expenses \$ **12,266,304** including grants of \$ **11,304,398** ) (Revenue \$ )  
 The Low-Income Home Energy Assistance Program assists low-income households that expend a high proportion of their income for home energy, primarily meeting their immediate home energy needs. Funded by the U.S. Department of Health and Human Services.

**4d** Other program services. (Describe in Schedule O.)

(Expenses \$ **3,243,763** including grants of \$ **760,489** ) (Revenue \$ )

**4e** Total program service expenses ▶ \$ **26,602,248** (Must equal Part IX, Line 25, column (B).)

Form **990** (2008)

PCA 08/03/2010 5:13 PM

Form 990 (2008) **PARTNERSHIP FOR COMMUNITY****58-6049575**

Page 3

**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	<b>X</b>	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	<b>X</b>	
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		<b>X</b>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		<b>X</b>
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 8033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any accounts where 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		<b>X</b>
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		<b>X</b>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<b>X</b>
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		<b>X</b>
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		<b>X</b>
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	<b>X</b>	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	<b>X</b>	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<b>X</b>
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		<b>X</b>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I		<b>X</b>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		<b>X</b>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		<b>X</b>
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I		<b>X</b>
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		<b>X</b>
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		<b>X</b>
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		<b>X</b>
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		<b>X</b>
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<b>X</b>	
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 6? If "Yes," complete Schedule J		<b>X</b>
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 questions 24b-24d and complete Schedule K. If "No," go to question 25.		<b>X</b>
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		<b>X</b>
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I		<b>X</b>
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		<b>X</b>
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		<b>X</b>

Form 990 (2008)

PCA 08/03/2010 5 13 PM

Form 990 (2008) **PARTNERSHIP FOR COMMUNITY****58-6049575**Page **4****Part IV Checklist of Required Schedules (continued)**

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV		X
b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV		X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		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		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
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		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X

Form **990** (2008)

PCA 06/03/2010 6 13 PM

Form 990 (2008) **PARTNERSHIP FOR COMMUNITY****58-6049575**Page **5****Part III** Statements Regarding Other IRS Filings and Tax Compliance

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1099, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	<b>1a</b> 42	
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<b>1b</b> 0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>	X
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 280	
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	<b>2b</b> X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	<b>3a</b>	X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<b>3b</b>	
<b>4a</b> 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)?	<b>4a</b>	X
<b>b</b> 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		
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	X
<b>c</b> If "Yes," to question 5a or 5b, did the organization file Form 8888-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	<b>5c</b>	
<b>6a</b> Did the organization solicit any contributions that were not tax deductible?	<b>6a</b>	X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>	
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b> Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	<b>7a</b>	X
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>	X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>	
<b>e</b> Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>	X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>	X
<b>g</b> For all contributions of qualified intellectual property, did the organization file Form 8898 as required?	<b>7g</b>	X
<b>h</b> For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1088-C as required?	<b>7h</b>	X
<b>8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>8</b>	X
<b>9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b> Did the organization make any taxable distributions under section 4966?	<b>9a</b>	X
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>	X
<b>10 Section 501(c)(7) organizations.</b> Enter:		
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11 Section 501(c)(12) organizations.</b> Enter:		
<b>a</b> Gross income from members or shareholders	<b>11a</b>	
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	<b>11b</b>	
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	

Form **990** (2008)

PCA 08/03/2010 5:13 PM

Form 990 (2008) **PARTNERSHIP FOR COMMUNITY****58-6049575**

Page 6

**Part VII Governance, Management, and Disclosure** (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section A. Governing Body and Management**

	Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		
1a Enter the number of voting members of the governing body	1a	21
b Enter the number of voting members that are independent	1b	21
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6 Does the organization have members or stockholders?	6	X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9a Does the organization have local chapters, branches, or affiliates?	9a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	X

**Section B. Policies**

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X
13 Does the organization have a written whistleblower policy?	13	X
14 Does 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 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a The organization's CEO, Executive Director, or top management official?	15a	X
b Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	15b	X
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," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **GA**
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  
☐ Own website ☐ Another's website ☒ Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **PARTNERSHIP FOR COMMUNITY ACTION 815 PARK NORTH BLVD.**

**CLARKSTON****GA 30021****404-929-2500**

Form 990 (2008)

PCA 08/07/2010 3:53 PM

Form 990 (2008) **PARTNERSHIP FOR COMMUNITY****58-6049575**

Page 7

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors****Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: Individual trustees or directors; Institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KIMBERLEY ALEXANDER BOARD CHAIR	2	X		X				0	0	0
LIZIA AUGER BOARD MEMBER	2	X						0	0	0
ANN BROWN BOARD MEMBER	2	X						0	0	0
LYDIA WHITEHEAD BOARD MEMBER	2	X						0	0	0
GARRY GUAN SECRETARY	2	X		X				0	0	0
ANTHONY GUTHRIE BOARD MEMBER	2	X						0	0	0
SARAH HURD BOARD MEMBER	2	X						0	0	0
ABDULLAH KAPIC VICE-CHAIR	2	X		X				0	0	0
GARY LESHAW BOARD MEMBER	2	X						0	0	0
CHARLES A. LINGO JR. BOARD MEMBER	2	X						0	0	0
JOSEPH LITTLE TREASURER	2	X		X				0	0	0
WENDY LIPSHUTZ BOARD MEMBER	2	X						0	0	0
MARILU MONTALVO BOARD MEMBER	2	X						0	0	0
BRENDA STRICKLAND BOARD MEMBER	2	X						0	0	0
WILLIE L. GOOLSBY BOARD MEMBER	2	X						0	0	0
PEDRO MARIN BOARD MEMBER	2	X						0	0	0
DR. MYRIAM MIRAS BOARD MEMBER	2	X						0	0	0

Form 990 (2008)



PCA 08/03/2010 5:13 PM

Form 990 (2008) **PARTNERSHIP FOR COMMUNITY****58-6049575**Page **9****Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 614	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	26,314,482				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	54,588				
	g Noncash contributions included in lines 1a-1f: \$		696,183				
	h Total. Add lines 1a-1f		26,369,070				
Program Service Revenue	2a Day Care	Buon. Code	101,659			101,659	
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		101,659				
	3 Investment income (including dividends, interest, and other similar amounts)						
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
Other Revenue	6a Gross Rents	(j) Real (i) Personal					
	b Less: rental exps.						
	c Rental inc. or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(l) Securities (li) Other					
	b Less: cost or other basis & sales exps.						
	c Gain or (loss)						
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
	Miscellaneous Revenue		Buon. Code				
	11a Other Revenue		24,643			24,643	
	b						
c							
d All other revenue							
e Total. Add lines 11a-11d		24,643					
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		26,495,372	0	0	126,302		

Form 990 (2008)



PCA 08/03/2010 5:13 PM

Form 990 (2008)

PARTNERSHIP FOR COMMUNITY

58-6049575

Page 10

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	12,655,747	12,655,747		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	123,699		123,699	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	6,290,618	5,623,664	666,954	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	1,500,917	1,339,173	161,744	
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	4,156	1,034	3,122	
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	281,211	271,363	9,848	
17 Travel	78,144	33,027	45,117	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	389,251	254,330	134,921	
23 Insurance	87,614	65,750	21,864	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a CONTRACTUAL SERVICES	1,613,533	1,436,240	177,293	
b MATERIALS AND SUPPLIES	695,740	637,936	57,804	
c CASUAL LABOR	626,312	624,314	1,998	
d FOOD	553,155	541,423	11,732	
e UTILITIES	360,713	331,875	28,838	
f All other expenses	1,147,865	2,786,372	-1,638,507	
25 Total functional expenses. Add lines 1 through 24f	26,408,675	26,602,248	-193,573	
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

PCA 06/03/2010 5:13 PM

Form 990 (2008)

PARTNERSHIP FOR COMMUNITY

58-6049575

Page 11

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash—non-interest bearing	421,780	1	2,418,524
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	872,638	3	911,760
	4 Accounts receivable, net	31,707	4	7,428
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(o)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	2,890	7	996
	8 Inventories for sale or use	1,129	8	
	9 Prepaid expenses and deferred charges	130,226	9	78,598
	10a Land, buildings, and equipment, cost basis	11,127,693		
	10b Loss: accumulated depreciation. Complete Part VI of Schedule D	2,746,914		
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	115,433	15	333,733
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	9,964,152	16	12,131,818	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	957,017	17	913,489
	18 Grants payable	80,846	18	1,779,826
	19 Deferred revenue	37,952	19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 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	2,810,434	23	3,094,038
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	103,962	25	283,827
	26 <b>Total liabilities.</b> Add lines 17 through 25	3,990,211	26	6,071,180
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,459,982	27	1,685,482
	28 Temporarily restricted net assets	4,513,959	28	4,375,156
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	5,973,941	33	6,060,638
	34 <b>Total liabilities and net assets/fund balances</b>	9,964,152	34	12,131,818

**Part X Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b Were the organization's financial statements audited by an independent accountant?	2b	X
c If "Yes" to lines 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
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b If "Yes," did the organization undergo the required audit or audits?	3b	X

Form 990 (2008)



PCA 06/03/2010 5.13 PM

Schedule A (Form 990 or 990-EZ) 2008 **PARTNERSHIP FOR COMMUNITY**

58-6049575

Page 2

**Part II** Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	15,509,173	18,486,926	17,490,366	20,039,901	26,369,070	97,895,436
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1-3	15,509,173	18,486,926	17,490,366	20,039,901	26,369,070	97,895,436
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						97,895,436

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	15,509,173	18,486,926	17,490,366	20,039,901	26,369,070	97,895,436
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,661			63,308		65,969
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					24,643	24,643
11 Total support. Add lines 7 through 10						97,986,048
12 Gross receipts from related activities, etc. (see instructions)					12	488,946
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) organization, check this box and stop here ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	99.9075 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	99.2196 %
16a 33 1/3 % support test—2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 33 1/3 % support test—2007. 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 ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2008. 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 organization ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2007. 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 ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2008

PCA 06/03/2010 5:13 PM

Schedule A (Form 990 or 990-EZ) 2008 **PARTNERSHIP FOR COMMUNITY**

58-6049575

Page 3

**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.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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						
6 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1-5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	16	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	18	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ☐

b 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ☐

PCA 06/03/2010 5:13 PM

Schedule A (Form 990 or 990-EZ) 2008

PARTNERSHIP FOR COMMUNITY

58-6049575

Page 4

**Part III** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

**Part II, Line 10 - Other Income Detail**

\$ 24,643



PCA 06/03/2010 5:13 PM

**SCHEDULE D**  
(Form 990)Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**▶ Attach to Form 990. To be completed by organizations that  
answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

**2008**Open to Public  
Inspection

Name of the organization

**PARTNERSHIP FOR COMMUNITY  
ACTION, INC.**

Employer identification number

**58-6049575****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if  
the organization answered "Yes" to Form 990, Part IV, line 6.

- 1 Total number at end of year .....
- 2 Aggregate contributions to (during year) .....
- 3 Aggregate grants from (during year) .....
- 4 Aggregate value at end of year .....

(a) Donor advised funds

(b) Funds and other accounts

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No
- 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☐ Yes ☐ No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (e.g., recreation or pleasure) ☐ Preservation of an historically important land area
- ☐ Protection of natural habitat ☐ Preservation of certified historic structure
- ☐ Preservation of open space

- 2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

- a Total number of conservation easements .....
- b Total acreage restricted by conservation easements .....
- c Number of conservation easements on a certified historic structure included in (a) .....
- d Number of conservation easements included in (c) acquired after 8/17/06 .....

	Held at the End of the Year
2a	
2b	
2c	
2d	

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No
- 6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ .....
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ .....
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No
- 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(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 assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 .....

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

FCA 06/03/2010 5 13 PM

Schedule D (Form 990) 2008

PARTNERSHIP FOR COMMUNITY

58-6049575

Page 2

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition  
 b ☐ Scholarly research  
 c ☐ Preservation for future generations  
 d ☐ Loan or exchange programs  
 e ☐ Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No**Part IV Trust, Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table.

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ☐ %  
 b Permanent endowment ☐ %  
 c Term endowment ☐ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations  
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Investments—Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		1,022,800		1,022,800
b Buildings		8,997,924	1,937,389	7,060,535
c Leasehold improvements				
d Equipment		1,106,969	809,525	297,444
e Other				
Total. Add lines 1a–1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				8,380,779

Schedule D (Form 990) 2008

PCA 08/03/2010 5:13 PM

Schedule D (Form 990) 2008 **PARTNERSHIP FOR COMMUNITY**

58-6049575

Page 3

**Part VII** Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (Including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
Financial derivatives and other financial products .....		
Closely-held equity interests .....		
Other .....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
Total. (Column (b) should equal Form 980, Part X, col. (B) line 12.) ▶		

**Part VII Investments—Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col. (E) line 13.) ▶		

**Part IX** Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
<b>ASSETS HELD FOR RESALE</b>	<b>331,000</b>
<b>EMPLOYEE RECEIVABLE</b>	<b>2,733</b>
<b>OTHER</b>	
<b>Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.)</b>	<b>333,733</b>

**Part X** **Other Liabilities.** See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
<b>ADVANCES</b>	<b>118,899</b>
<b>DUE TO GRANTOR</b>	<b>100,309</b>
<b>CUSTODIAL ACCOUNT</b>	<b>44,887</b>
<b>MICRO LOANS PAYABLE</b>	<b>19,732</b>
<b>Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.)</b>	<b>283,827</b>

In Part XIV, 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

PCA 08/03/2010 5:12 PM

Schedule D (Form 990) 2008

PARTNERSHIP FOR COMMUNITY

58-6049575

Page 4

**Part IX Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	26,495,372
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	26,408,675
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	86,697
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	86,697

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	27,727,923
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	1,232,551
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	1,232,551
3	Subtract line 2e from line 1	3	26,495,372
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	26,495,372

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	27,641,226
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,232,551
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	1,232,551
3	Subtract line 2e from line 1	3	26,408,675
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	26,408,675

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 8; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

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Schedule D (Form 990) 2008 **PARTNERSHIP FOR COMMUNITY**

**58-6049575**

Page 6

**Part IV** Supplemental Information (continued)

Area with horizontal dashed lines for supplemental information.



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Schedule I (Form 990) 2008 **PARTNERSHIP FOR COMMUNITY**

58-6049575

Page 2

**Part I** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
<b>Health Services</b>	1163	80,266			
<b>Energy Assistance</b>	34532	11,304,398			
<b>Employment Training</b>	970	39,893			
<b>Emergency Food Services</b>	4929	24,413	696,183	FMV	<b>Food Commodities</b>
<b>Emergency Services</b>	1879	510,594			
<b>Part II</b> Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.					

DAA

Schedule I (Form 990) 2008

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**SCHEDULE M**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**NonCash Contributions**▶ To be completed by organizations that answered "Yes"  
on Form 990, Part IV, lines 29 or 30.

▶ Attach to Form 990.

OMB No 1545-0047

**2008**Open to Public  
Inspection

Name of the organization

**PARTNERSHIP FOR COMMUNITY  
ACTION, INC.**

Employer identification number

**58-6049575****Part I** Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art .....				
2 Art—Historical treasures .....				
3 Art—Fractional interests .....				
4 Books and publications .....				
5 Clothing and household goods .....				
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities—Publicly traded .....				
10 Securities—Closely held stock .....				
11 Securities—Partnership, LLC, or trust interests .....				
12 Securities—Miscellaneous .....				
13 Qualified conservation contribution (historic structures) .....				
14 Qualified conservation contribution (other) .....				
15 Real estate—Residential .....				
16 Real estate—Commercial .....				
17 Real estate—Other .....				
18 Collectibles .....				
19 Food inventory .....	<b>X</b>	<b>1</b>	<b>696,183</b>	<b>FAIR MARKET VALUE</b>
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ▶ ( .....				
26 Other ▶ ( .....				
27 Other ▶ ( .....				
28 Other ▶ ( .....				

29 Number of Forms 8283 received by the organization during the tax year for contributions for  
which the organization completed Form 8283, Part IV, Donee Acknowledgement .....

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that  
it must hold for at least three years from the date of the initial contribution, and which is not required to be  
used for exempt purposes for the entire holding period? .....

	Yes	No
30a		<b>X</b>
31		<b>X</b>
32a		<b>X</b>

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard  
contributions? .....32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash  
contributions? .....

b If "Yes," describe in Part II.

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,  
describe in Part II.



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Schedule M (Form 990) 2008

PARTNERSHIP FOR COMMUNITY

58-6049575

Page 2

**Part II****Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

PCA 08/03/2010 5:13 PM

**SCHEDULE O**

(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Supplemental Information to Form 990**▶ Attach to Form 990. To be completed by organizations to provide  
additional information for responses to specific questions for the  
Form 990 or to provide any additional information.

OMB No. 1545-0047

**2008**Open to Public  
Inspection**PARTNERSHIP FOR COMMUNITY  
ACTION, INC.**Employer identification number  
**58-6049575****Form 990, Part I, Line 6**

Volunteers provide various services for the Head Start and TEFAP programs  
and to the administration of the Agency. The services provided are both  
professional and non-professional in nature.

**Form 990, Part III, Line 4d - All Other Achievements**

The Organization has other programs such as  
Weatherization, Georgia Pre-K, Extended Day Care, and  
Housing programs which provide educational services for  
children and parents as well as emergency assistance with  
utilities, repairs, and rent to low-income individuals.

**Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990**

A copy of the Form 990 and related schedules is provided to the Governing  
Board prior to filing.

**Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy**

Members of the Board shall not engage in business with the corporation.  
Additionally, employees of the Corporation or of grantees or delegate  
agencies, or members of such employees' immediate families, shall not  
accept gifts in whatever form from persons receiving benefits under  
programs, performing services under contracts, or who are otherwise in a  
position to benefit from the actions of any employee or Board member.

**Form 990, Part VI, Line 15a - Compensation Process for Top Official**

PCA 03/03/2010 6:13 PM

Schedule O (Form 990) 2008

Page 2

Name of the organization

PARTNERSHIP FOR COMMUNITY

Employer identification number

58-6049575

Compensation is reviewed and approved by the Board.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Compensation is based on a pay scale established by the Board based on prevailing wage rates.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Copies of the governing documents may be requested from the Administrative office.

Form 990, Part XI, Line 3b - Reason for Not Undergoing Required Audit

The Organization underwent the required Single Audit.

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Form **4562**Department of the Treasury  
Internal Revenue Service

(99)

**Depreciation and Amortization**  
(Including Information on Listed Property)

OMB No. 1545-0172

**2008**Attachment  
Sequence No. **67**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return **PARTNERSHIP FOR COMMUNITY  
ACTION, INC.**Identifying number  
**58-6049575**

Business or activity to which this form relates

**Indirect Depreciation****Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

(a) Description of property	(b) Cost (business use only)	(c) Elected cost	
6			
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	389,251

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

**Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return, Partnerships and S corporations—see instr.	22	389,251
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 283A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2008)

DAA

There are no amounts for Page 2