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if self-employed), address, and ZIP + 4

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)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements 2009, and ending December 31 , 20 09 For the 2009 calendar year, or tax year beginning January 1 D Employer identification number C Name of organization Action Center Inc. Please B Check if applicable use IRS Doing Business As 0246999 Address change label or print of Number and street (or P O box if mail is not delivered to street address) Telephone number Room/suite ☐ Name change type See Initial return (215) 743-4884 City or town, state or country, and ZIP + 4 ☐ Terminated Instruc-Philadelphia PA 19149 G Gross receipts \$ 358,515.37 Amended return Application pending F Name and address of principal officer Traci Confer. Treasurer H(a) Is this a group return for affiliates? Yes No same as C above H(b) Are all affiliates included? Yes No Tax-exempt status √ 501(c) (3)

✓ (insert no) 4947(a)(1) or If "No." attach a list (see instructions) Website: ▶ actionpa.org H(c) Group exemption number Form of organization 🗸 Corporation 🗆 Trust 🗀 Association 🗀 Other 🕨 L Year of formation: 2002 M State of legal domicile PA Part i Summary Briefly describe the organization's mission or most significant activities Promote social & environmental justice & democracy. Developing databases and providing educational materials to community activists that analyze and Governance assess the environmental impact of energy and waste facilites. Supporting student environmental networks. 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a). 4 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 0 5 Total number of employees (Part V, line 2a) 6 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII columny (E) Tine b Net unrelated business taxable income from Eorm 990-1 Tine 34 0 7a 7b 0 **Prior Year Current Year** 199,467 358,465 . JAN 0 8 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) 0 0 327 665 10 Investment income (Part VIII, column (A), Ines Other revenue (Part VIII, column (A), lines 5, 6d, 86 (D) 0 0 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 199,794 359,131 2,000 2,200 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 29,069 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,070 202,002 206,146 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 204.002 237.651 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25). Revenue less expenses Subtract line 18 from line 12 -4,208 121,480 5 Beginning of Current Year End of Year 46,366 183,375 20 Total assets (Part X, line 16) . 0 16,447 Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20 167,845 46,366 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 12-9-2010 Sign Signature of officer Here Type or print name and title Date Check if Preparer's identifying number Preparer's self-(see instructions) signature employed 🕨 🗌 Paid

Yes 🔲 No

Form **990** (2009)

Phone no ► (

Cat No 11282Y

Par	Statement of Program Service Accomplishments								
1	Briefly describe the organization's mission. Promote social & environmental justice & democracy.								
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?								
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?								
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 \$141,314 including grants of \$) (Revenue \$) Energy Justice Network: building a dirty power plant database for the benefit of grassroot activists; assisting community groups fighting dirty facilities & proposals; sponsored Power Shift conferences in Pennsylvania and in Ohio; helped coordinate Ohio Student Environmental Coalition and Keystone Environmental Youth Coalition; supported the RReNEW Collective in Virginia; supported anti-biomass campaign in Massachusetts.								
4b	Student Environmental Action Coalition: hosted Headwaters student training; sponsored Power Shift conference in West Virginia; sponsored Mountain Justice Spring Break; organized students against mountain top removal.								
4c	(Code.) (Expenses \$ 2,670 including grants of \$) (Revenue \$) ActionPA: assisted communities in fights against tire burner proposals, local pollutors and mandatory fluoridation; helped form network opposing natural gas drilling.								
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)								
4e	Total program service expenses ► 227,498								

Checklist of Required Schedules

Part IV

			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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	/	
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		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	✓	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III.	_5		
6	Did the organization maintain any donor advised funds or any similar funds or 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	6		✓
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		✓
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	9		✓_
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10		✓
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	* . 4	/
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	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.			
•	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.			
•	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X			
•	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		✓
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		-
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		✓
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.	15		1
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	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		1
<u> 20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	<u>L</u> .	1

Form	990 (2009)		P	age 4
Pai	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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	:	1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a		1
b	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		✓
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? <i>If</i> "Yes," <i>complete Schedule L, Part I</i>	24d 25a		√
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		✓
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	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		\
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):	5 %	34	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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	34		1
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	35		1
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		1
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,			

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Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			-
_			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable	.		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		✓
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 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see		٠.	
	instructions)	₹ .	· ~	,
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	-		
	this return?	3a		✓
	If "Yes," has it filed a Form 990-T for this year? If "No," 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	ļ		
	account)?	4a		1
h	If "Yes," enter the name of the foreign country: ▶	1.4		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	* -	1	
	and Financial Accounts	*	## ·	N
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a	<u> </u>	1
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	۱		
_	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 and services provided to the payor?	7a		1
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
C	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year		-	1
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	٠ , ۵, ۰	£ 7	, (si
	benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	✓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7 <u>g</u>		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
_	required?,	7h	-	-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	 	
۵		۳	 	
9 a	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a	1	1
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12] '		1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]	1	1
11	Section 501(c)(12) organizations. Enter:].	
а	Gross income from members or shareholders		1	l'
b	Gross income from other sources (Do not net amounts due or paid to other sources against	,	,]
	amounts due or received from them.)	 	 	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	12a	├	
IJ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	1	i	1

Part VI Governance, Management, and Disclosure For each "Yes" response 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.

Sec	tion A. Governing Body and Management			
	, ,		Yes	No
1a	Enter the number of voting members of the governing body	(K	* {	1
b	Enter the number of voting members that are independent	· .	* ' ',- '	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	*		<u> </u>
	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			1
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		√
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		√
6	Does the organization have members or stockholders?	6		~
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	7.		1
	of the governing body?	7a_		V
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	· · · · · · · · · · · · · · · · · · ·	-
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	*	- 🕷	
•	the year by the following. The governing body?	8a	1	<u> </u>
		8b	1	$\overline{}$
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	9a	1	
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte-	ernal		
Rev	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		✓
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?	10b		├
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	l		,
	form?	11	, ,	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		7	3
	Does the organization have a written conflict of interest policy? If "No," go to line 13 : .	12a	✓	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		✓
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	ļ	<u> </u>
13	Does the organization have a written whistleblower policy?	13	-	1
14	Does the organization have a written document retention and destruction policy?	14	ļ	1
15	Did the process for determining compensation of the following persons include a review and approval by	, ±24	1,	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45		
	The organization's CEO, Executive Director, or top management official	15a	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
D	Other officers or key employees of the organization	15b	7-1-0	×
160	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	\$?? • ,		3.0
104	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		1
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	: 3 ° °	7	7.2
ь	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	300,000	i nata	ļ ·
	the organization's exempt status with respect to such arrangements?	16b		***************************************
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ Pennsylvania			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(cr	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 int	erest	
	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 reconganization. ► Traci Confer, 1434 Elbridge St, Philadelphia PA 19149, 215-743-4884	ords c	of the	

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 co	mpensate	any c	curre	ent (offic	er, d	irec	tor, or trustee		
(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	_	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Carlo Baca Director	1	1						0	0	0
Frances Whittington Director	1	1						0	0	0
Mike Ewall Director (top management official)	10	1		✓				12,750	0	0
Traci Confer Treasurer (top financial official)	5	√		✓				16,319	0	0
Terry Nordbrock Secretary	1	✓		1				0	0	0
Karen Orr Chair	1	1		1				0	0	0
		Î					Γ			

Par	t VII Section A. Officers, Directors, Tru	stees, Key	Emp	loy	ees,	, an	d Hig	hes	t Compensate	d Employees (c	ontinued)
	(A)	(B) Average	(C)						(D)	(E)	(F)
	Name and title		กต่างเสนล์ trustee or director	nstitutional trustee	Officer	র Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
					ļ.						
<i></i>											
,											
	`										
1b	Total		1		1	Ц_		┢	29,069		0 0
2	Total number of individuals (including but reportable compensation from the organization)		to th	ose	list	ed .	above	e) w	ho received m	ore than \$100,	Yes No
3	Did the organization list any former office employee on line 1a? If "Yes," complete S							oye	e, or highest o	compensated	3 🗸
4	For any individual listed on line 1a, is the state organization and related organizations individual										4
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," com	com plete	per Scl	sati nedi	ion ule .	from J for	any suci	unrelated org	ganization for	5 🗸
Se	ction B. Independent Contractors										
1	Complete this table for your five highest compensation from the organization.	ompensate	ed inc	lepe	end	ent	contr	acto	ors that receive	ed more than \$	100,000 of
	(A) Name and business ad	dress							(B) Description of	services	(C) Compensation
_								\perp			
								+			
2	Total number of independent contractors (d to	those	e lis	ted above) who	received	Y. S. J. J. S.

Part	VII	Statement of Re	venue									
						Tot	(A) al revenue	(B) Related exem functi reven	d or pt on	(C) Unrelated business revenue	exclu- und	(D) Revenue ided from tax der sections 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns		1a	0							
gra		Membership dues		1b	0	1						
s, g		Fundraising events .		1c	0	1						
grft lar		Related organizations	• •	1d	0	1						
S, E		Government grants (contri	 ibutione)	1e	0	1						İ
r Si	f						<u></u>					
the E	•	All other contributions, gifts, g and similar amounts not inclu		1f	358465		All from				ľ	>
ntri d o	_	Noncash contributions include			330403	1			:			
an Co		Total. Add lines 1a-1f	ed in lines ra-	II. Þ		 	358465					
		TOTALITY TOTALITY	•	· 	Business Code	 	730403	<i>i</i> ,	,	4	令 '	
Program Service Revenue				ŀ		ļ						
eve	2a					├					├──	
В	b	***************************************				<u> </u>						
Σį	С					ļ					<u> </u>	
Se	d			}							Щ	
an	е					ļ					<u> </u>	
ıgo.	f	All other program servi	ce revenue	• . [
	g	Total. Add lines 2a-2f	•		<u> ▶</u>				, %s.,4 8	¥**	**************************************	* ***
	3	Investment income (incother similar amounts)	_	dends 			665					665
	4	Income from investment of	of tax-exemp	ot bond	proceeds >							
	5	Royalties			<u>, , , </u>							
			(i) Real		(II) Personal].		1100 g	, , , , , , , , , , , , , , , , , , ,	,		384
	6a	Gross Rents					· Hiji is and		44			v. 06 (1)
	ь	Less ⁻ rental expenses				\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			1			
		Rental income or (loss)				1				â	267	2 × ×
		Net rental income or (lo	oss) , ,								7886-7	ا ــــــــــــــــــــــــــــــــــــ
	70	Gross amount from sales of	(i) Securitie	es	(ii) Other	788832.73 3008	21.2 della		1	(1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		200 g (Ar
	/a	assets other than inventory				1	n n		***	*f ? "	, o	
	_	•	·			† .	* 1	y *	۵>۰			-
	Ь	Less, cost or other basis				**	40.0	ricalit.	4	N 2432.34	~ ~	
		and sales expenses .				∤ , <u>«</u>	-12:-5° 1:-		\`.30"	⊸ 4 2, ∔	r.,	
		Gain or (loss) Net gain or (loss)	t									
4.		. ,		٠ . ا	<u>-</u>	-		286	-	<u>*</u>	 	7.62
evenue	8a	Gross income from events (not including \$						1) (8 ***	7.0	٠.		
Re		of contributions reported					,				L	
<u>-</u>		See Part IV, line 18 .		· a		1		, est	w. ` 1	\$\$\$ er	22	
Other		Less: direct expenses		b			1,7,7,25	-	**************************************	* , '	35.4	
0	C	Net income or (loss) from	om fundrais	sing e	vents ▶			-				
	9a	Gross income from gam See Part IV, line 19	ning activitie	es. a			r@		~	•4	è	₩.
	ь	Less direct expenses.		b]					"	
		Net income or (loss) fro			ties ▶							
	10a	Gross sales of inve	entory lo	ee [· · · · · · · · · · · · · · · · · · ·		
		returns and allowances		ີ a∣								
	h	Less: cost of goods so				1					1	
		Net income or (loss) from			orv •	 				<u> </u>	 	
	٣	Miscellaneous Rev		1	Business Code	+		•				
	44-					 						
	1.					1				-	├	
	b	•••••				+			-		├—	
	C				-	↓					↓	
		All other revenue				ļ .					<u> </u>	
	е	Total. Add lines 11a-1	1d , ,		🕨			_			<u> </u>	
	12	Total revenue. See ins	structions.			1	359131]	665

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).										
	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 U.S. See Part IV, line 21	2,200	2,200								
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22			"							
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	29,069	22,069	3,000	4,000						
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										
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)										
9	Other employee benefits										
10	Payroll taxes										
11	Fees for services (non-employees)			ľ							
	Management										
	Legal	2,100	· · · · · · · · · · · · · · · · · · ·	2,100	····						
	Accounting	6,330	6,330	2,100							
	Lobbying	3,330									
	Professional fundraising services See Part IV, line 17										
	Investment management fees Other										
12	Advertising and promotion	120		120							
13	Office expenses	5,933	5,040	863	30						
14	Information technology	1,292	1,292								
15	Royalties										
16	Occupancy	4,724	4,684		40						
17	Travel	3,031	3,031								
18	Payments of travel or entertainment expenses										
40	for any federal, state, or local public officials Conferences, conventions, and meetings.	44,067	44,067								
19 20	Interest	44,001	11,007								
21	Decrease to the affiliation				· · · · · · · · · · · · · · · · · · ·						
22	Depreciation, depletion, and amortization.										
23	Insurance										
		<i>}</i> #	§ 34 k	42	× · · · · · · · · · · · · · · · · · · ·						
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)										
а	FIELD ORGANIZERS	101,312	101,312								
b	RESEARCH	23,724	23,724								
c	DATABASE CONTRACT SERVICE	12,778	12,778								
d	MISCELLANEOUS	971	971								
е											
f 25	All other expenses	237,651	227,498	6,083	4,070						
26	Joint costs. Check here ▶ ☐ 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										

Par	t X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	46,366	1	141,853
1	2	Savings and temporary cash investments	0	2	25,993
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key			*:
	•	employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	0	- - 6	0
នុ	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	0	8	0
ا≽	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		188 188	
	b	Less accumulated depreciation	0	10c	0
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities See Part IV, line 11	0	12	0
ł	13	Investments—program-related See Part IV, line 11	0	13	0
- 1	14	Intangible assets	0		0
- 1	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	46,366		167,845
	17	Accounts payable and accrued expenses	0		0
	18	Grants payable	0	18	0
- 1	19	Deferred revenue	0	19	0
- 1	20	Tax-exempt bond liabilities	0	_	0
ဖွ	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	-	0
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
3		persons Complete Part II of Schedule L	0	22	0
- 1	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
ļ	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
-	25	Other liabilities Complete Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	0	26	0
ces		Organizations that follow SFAS 117, check here ▶		A1886	44 184 184
a	27	Unrestricted net assets	46,366		167,845
Bal	28	Temporarily restricted net assets	0		0
اع	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balance		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.		W,	* *
2	30	Capital stock or trust principal, or current funds		30	
ig	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
๏	33	Total net assets or fund balances	46,366		167,845
z	34	Total liabilities and net assets/fund balances	46,366		167,845
					Form 990 (2009

Par	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990	**************************************		,
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	✓	
b	Were the organization's financial statements audited by an independent accountant?	2b	✓	
C	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		✓_
	If the organization changed either its oversight process or selection process during the tax year, explain in	100	W. ~.	
	Schedule O.		pl.Com Rip Vic	,
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	Spills		1,00
	issued on a consolidated basis, separate basis, or both:			
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	<u> </u>	1000	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		<u> </u>	l
	the Single Audit Act and OMB Circular A-133?	3a		✓
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		

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

20**09**Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Action Center Inc. 0246999 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated **b** ☐ Type II d ☐ Type III-Other e \square By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes Nο (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (III) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? |11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (ii) EIN (iii) Type of organization (iv) Is the organization (i) Name of supported (v) Did you notify (vii) Amount of (vi) Is the (described on lines 1-9 organization in col (i) listed in your the organization in organization in col support above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? US? Yes No Yes Nο Yes No

Total

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) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not 1,135 109,241 75,783 199,467 358,465 744,091 include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on 0 0 0 0 0 0 its behalf The value of services or facilities furnished by a governmental unit to the 0 0 0 0 0 organization without charge 358,465 1,135 109,241 75,783 199,467 744,091 Total. Add lines 1 through 3 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 48,055 shown on line 11, column (f) 696.036 Public support. Subtract line 5 from line 4 Section B. Total Support (c) 2007 (d) 2008 (a) 2005 **(b)** 2006 (e) 2009 Calendar year (or fiscal year beginning in) ▶ (f) Total 109,241 75,783 1,135 199,467 358,465 744,091 Amounts from line 4 . . . Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 0 0 0 327 665 922 sources . . . Net income from unrelated business activities, whether or not the business is 0 0 0 0 0 0 regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets 0 0 (Explain in Part IV.) 745.083 11 Total support. Add lines 7 through 10 . 12 12 Gross receipts from related activities, etc. (see instructions) 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 Section C. Computation of Public Support Percentage 93 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) _15 99 Public support percentage from 2008 Schedule A, Part II, line 14 15 16a 33½ % support test - 2009. If the organization did not check the box on line 13, and line 14 is 33½ % or more, check this box and stop here. The organization qualifies as a publicly supported organization▶ ☑ b 331/3 % support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2009. 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 b 10%-facts-and-circumstances test - 2008. 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 instructions 🕨 🔲 Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part 1)

<u>C</u>	(Complete only if you checke	d the box of	ille 9 OI Fa	rt 1.)			
	tion A. Public Support	(-) 0005	/h) 0000	(-) 0007	(1) 0000	() 2020	<u> </u>
Ca	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	,					
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						·
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 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 \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)	The same of the sa					
	tion B. Total Support	· · · · · · · · · · · · · · · · · · ·				<u>-</u>	
Ca	llendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
	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 organization, check this box and stop	here .		nd, third, fourt	h, or fifth tax y		n 501(c)(3) ► □
Sec	tion C. Computation of Public Su				·····		
15	Public support percentage for 2009 (lir			ne 13, column	(f))	15	%_
16	Public support percentage from 2008				<u> </u>	16	%_
	tion D. Computation of Investmen					T I	
17	Investment income percentage for 200		•	•		17	
18	Investment income percentage from 20					18	<u> </u>
19a	33\% % support tests - 2009. If the org 17 is not more than 33\% %, check this b						
b	33% % support tests – 2008. If the organ line 18 is not more than 33% %, check this	nization did not	check a box or	n line 14 or line	19a, and line 1	6 is more than :	331/3 %. and
20	Private foundation. If the organization						

chedule A (F	orm 990 or 990-EZ) 20	09					Page 4
Part IV	Supplemental Part II, line 17a	Information. a or 17b; and	Complete this Part III, line 12	s part to pro 2. Provide an	vide the expl y other addit	anations required ional information	by Part II, line 10; . See instructions.
	•						
							
			·			<i>,</i> 	
						•	·
 -							
		••••		•			
	·····						
- -							
							
							

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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. If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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), then • Section 501(c)(4), (5), or (6) organizations. Complete Part III Name of organization Employer identification number **Action Center Inc.** Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Volunteer hours . . Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 . > If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . 4a Was a correction made? . b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2 Enter here and on Form 1120-POL, . . . 📙 Yes 🔲 No Did the filing organization file Form 1120-POL for this year? . . . Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and funds If none, enter -0promptly and directly delivered to a separate political organization. If none, enter -0-

Pa	art II-A Complete if the organization under section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768	(election
A B	Check ► ☐ if the filing organization to Check ► ☐ if the filing organization or Check ► ☐ if the filing organization or Check ► ☐ if the filing organization or Check ► ☐ if the filing organization to Check ► ☐ if the	pelongs to an affiliated group. Checked box A and "limited control" provise	ons apply.	
		ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1:	a Total lobbying expenditures to influence	public opinion (grass roots lobbying)	6,330	
	b Total lobbying expenditures to influence	0		
	c Total lobbying expenditures (add lines 1	a and 1b)	6,330	
	d Other exempt purpose expenditures		231,321	·····
	e Total exempt purpose expenditures (ad	d lines 1c and 1d)	237,651	
	f Lobbying nontaxable amount. Enter the columns.	47,530		
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e		i i
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	·	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	£.,	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	ing a significant	and the same of th
_	Over \$17,000,000	\$1,000,000		
	g Grassroots nontaxable amount (enter 2	5% of line 1f)	11,883	
	h Subtract line 1g from line 1a. If zero or	less, enter -0	0	
	i Subtract line 1f from line 1c. If zero or		0	
	conting 4011 tay for this year?	either line 1h or line 1i, did the organization file Fo	orm 4720 reporting	☐ Yes ☐ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lot	bying Expenditure	s During 4-Year	Averaging Period			
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total	
2a Lobbying nontaxable amount	4,130	21,676	40,800	47,530	114,136	
b Lobbying ceiling amount (150% of line 2a, column (e))	4	4 4			171,204	
C Total lobbying expenditures	0	0	0	6,330	6,330	
d Grassroots nontaxable amount	1,032	5,419	10,200	11,883	28,534	
e Grassroots ceiling amount (150% of line 2d, column (e))	j.			CW.	42,801	
f Grassroots lobbying expenditures	0	0	0	6,330	6,33	

Schedule C (Form 990 or 990-EZ) 2009

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	OT f	led F	orm :	5768	
	-			(b)		
		Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .			* *	71	
С	Media advertisements?					
d	Mailings to members, legislators, or the public?	<u> </u>		L		
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .					
i	Other activities? If "Yes," describe in Part IV					
j	Total Add lines 1c through 1i		多差			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .					7
	If "Yes," enter the amount of any tax incurred under section 4912		fer.			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.		Maria de la compansión			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					計画
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 50501(c)(6).	01(c)	(5), o	r sect	ion	
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	·		2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 50501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II "Yes."	U1(C) I-A, I	ine 3	is an	swer	ed
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poli expenses for which the section 527(f) tax was paid).	tical				
а	Current year		2a			
b	Carryover from last year		2b	<u> </u>		
C			2c	<u> </u>		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3	ļ		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	yıng				
5	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)		4	 		
		•	5	<u> </u>		
	rt IV Supplemental Information nplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C,	line 5	; and	Part II	-B, lın	e 1ı
Also	o, complete this part for any additional information.					
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ichedule C (For	rm 990 or 990-EZ) 2009	Page 🔫
Part IV	Supplemental Information (continued)	

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SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Inspection Employer identification number

Name of the organization	Employer identification number					
Action Center Inc.	30	0246999				
Part VI Line 11 :						
Carlo Baca, 306 Newport Ave, Attleboro MA 02703	Carlo Baca, 306 Newport Ave, Attleboro MA 02703					
Frances Whittington, 1401 Kerlin St #2, Chester PA 19013						
Terry Nordbrock, 2602 E Helen St, Tucson AZ 85716						
Karen Orr, 715 NE 2nd St, Gainesville FL 32601						
Part VI Line 19: No documents available to the public.						
Part VI Line 15a & b. Mike Ewall (top management official) contracts with Action Center to	do res	search, associated data				
interface programming and other tasks as an independent contractor. Traci Confer (top f	inancia	al official) contracts with				
Action Center to do research, associated data entry and other tasks as an independent co	ontract	or. The board consulted				
two websites offering wage and salary estimates for similar work, and proposed compens	ation	in the low-to-medium				
range. Neither Mike nor Traci were present during discussion or voting on the proposal.						
AMENDED						
Part IX Line 29: Corrected error.						
Part X(B) Lines 1,3,16,17,26: Amounts moved to different categories on recommendation	of aud	iting accountant.				
Part XI Line 1 & 3a: Corrected error. Lines 2a-d: Updated to reflect accounting audit.						