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990-EZ

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-1150 2009

Department of the Treasury
Internal Revenue Service

A For the 2009 cal

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

Sponsoring organizations of donor advised funds and controlling organizations as defined in section
512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total
assets less than \$1,250,000 at the end of the year may use this form

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

Open to Public Inspection

~	r Or ule	e 2005 Calellu	ar year,	or tax year beginning , 2009, and e	naing			, 20	
В	Check if a	applicable	Please	C Name of organization		D Employe	r iden	tification number	
	Address	change	use IRS label or	NARAL Pro-Choice Ohio Foundation	l		31-	1212322	
	Name ch	hange	print or	Number and street (or P O box, if mail is not delivered to street address) Room	√surte	E Telephor	e num	iber	
닏	Initial ret		type See	12000 Shaker Blvd.			216-	283-2180	
뭐	Terminal	1	Specific	City or town, state or country, and ZIP + 4		F 0			
H	Amende		Instruc- tions.	Cleveland, OH 44120-1926		•	roup Exemption		
므	Trum's							5065	
	• Sec	ction 501(c)(3)	_			-	od: L	☐ Cash ☑ Accrual	
a completed Schedule A (Form 990 or 990-EZ). Other (specify)									
	H Check ▶ □						e org	anization is not	
1	Websi	ite: ►			require	ed to attacl	Sch	edule B (Form 990,	
J '	Tax-ex	empt status (d	check o	nly one) — 🗸 501(c) (3) ◀ (insert no.) 🗌 4947(a)(1) or 🔲 527	990-E	Z, or 990-F	F).		
K	Check	▶ ☐ if the	e organi	zation is not a section 509(a)(3) supporting organization and its gross recei	pts are n	ormally no	more	than \$25,000. A	
	Form 9			turn is not required, but if the organization chooses to file a return, be sui					
L,	Add line	es 5b, 6b, and 7	b, to line	9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of F	orm 990-	EZ ▶	\$	149,241	
	art I			enses, and Changes in Net Assets or Fund Balances (S			ons f		
	1			s, grants, and similar amounts received		[•		149,241	
	2		_	evenue including government fees and contracts			-	0	
	3	=			• •				
			•	and assessments	• •				
	4	Investment			• •	· ·	·	0	
(3)	5a			m sale of assets other than inventory					
S	b			r basis and sales expenses			-		
~	C			n sale of assets other than inventory (Subtract line 5b from line 5a				0	
Ę	6	Special events	s and act	ivities (complete applicable parts of Schedule G). If any amount is from gaming, chot including \$ of contributions	eck here	▶ □	- [
JUI Revende	а	Gross reve		-					
K	:	reported or	n line 1						
₹	b	Less: direc		- [
•	c			ss) from special events and activities (Subtract line 6b from line 6	a)	6		0	
\Box	7a			entory, less returns and allowances	•				
W	Ь								
22	C		•	ss) from sales of inventory (Subtract line 7b from line 7a)		7		0	
とこく	8	Other reve		• •		, [0	
3	9			dd lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		— ' 	-	149,241	
7	10			r amounts paid (attach schedule)		. 1	<u> </u>	0	
•	11				ור בי הר			0	
Ø,	J	•		r for members		1		0	
Se	13			and other payments to independent contractors	1	1 1		7,000	
Expenses	14							0	
Ň	15						-	4,204	
	16			ons, postage, and shipping]	· · 1	-	144,259	
	17	Total avec	nece ((Add lines 10 through 16 O.G.D.F.N. U	 		7	155,463	
_	40	Typese er	(doficit)	for the year (Subtract line 17 from line 9)	<u> </u>	1		-6,222	
Net Assets	18 19			d balances at beginning of year (from line 27, column (A)) (mus			-		
Š	.5			e reported on prior year's return)		1	.	0.504	
Ţ.	-		_	•		<u> </u>	\rightarrow	9,581	
2	20		•	net assets or fund balances (attach explanation)		_	_	0	
	<u> 21 </u>			d balances at end of year. Combine lines 18 through 20				3,359	
	Part II	Dalance	- OIIUE	ets. If Total assets on line 25, column (B) are \$1,250,000 or more, (See the instructions for Part II.)				(B) End of year	
_				,	(A) Beg	inning of yea			
2		_		vestments		39,4	65 22		
2					ļ		0 2		
						0 24			
						65 25			
2	6 T	otal liabilitie	s (desc	ribe ► Accounts payable)	ļ		34 26		
_2	<u>7 N</u>	let assets or	fund b	alances (line 27 of column (B) must agree with line 21)		9,5	31 27	3,359	

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

Cat No 10642I

Form **990-EZ** (2009)





Par	Statement of Program Service Accom	plishments (See the instri	ctions for Part III	3		Expenses
	(Regu	(Required for section				
Desc	t is the organization's primary exempt purpose? cribe what was achieved in carrying out the org	d concise	501(c)	(3) and 501(c)(4)		
	ner, describe the services provided, the number of			zations and section		
	program title.				for oth	a)(1) trusts; optional ners.)
	Inform the general public about issues related to wo	men's reproductive rights Fi	ngage in issue-rela	ted.	10.0.	
20	research and publish research reports. Issue press					
	by an affiliate. Publish news letters.	releases. Contribute content	to a web site main	eu		
		!!		·····	00-	120,388
	(Grants \$) If this amount	includes foreign grants, che	eck nere	<u>. ▶ Ш</u>	28a	120,300
29						
	(Grants \$) If this amount	includes foreign grants, che	eck here	<u>. ▶ Ц</u>	29a	
30						
					l	
	(Grants \$) If this amount	includes foreign grants, che	eck here	. ▶ 🗆	30a	
31	Other program services (attach schedule)					
		includes foreign grants, che	eck here	. ▶ 🗆	31a	
32	Total program service expenses (add lines 28a t				32	120,388
	List of Officers, Directors, Trustees, and Key				ınstruc	tions for Part IV.)
		(b) Title and average	(c) Compensation	(d) Contributio	ns to	(e) Expense
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred compe	plans &	account and other allowances
Kalli	ie Copeland	devoted to position	0.1.0.1	COICH CO COMPC	10000	Oction distributions
		Executive Director, attach.	0		0	0
	Northwest Avenue, Tallmadge, OH 44278		U			
	na Johnson	President, 1			^	•
	Elmwood Road, Cleveland Heights, OH 44141		0		0	· ·
	Baskin	Vice President, 1			_	_
2332	2 Ashurst Road, University Heights, OH 44118		0		0	0
	h W. Mathews	Treasurer, 1				
2243	36 Beech Creek Trail, Strongsville, OH 44149	770000101,	0		0	0
Jane	e Larsom	Director, 1				
422	3 Tuller Ridge Drive, Dublin, OH 43017	Director, 1	0		0	0
Eric	ka Thoms	8				
245	1 Professor Ave. #3, Cleveland, OH 44113	Director, 1	0		0	0
						-
		1				
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Part	V Other Information (Note the statement requirements in the instructions for Part V.)			-3-
	- 2.1.5. Internation (1965 the statement requirements in the methodicine for 1 art 4.)	\neg	Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0	1		
b	Did the organization file Form 1120-POL for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved]		
39 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities]		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b		✓
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on	100		
J	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			ļ
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		✓
41	List the states with which a copy of this return is filed. ▶ None			
42a	The digamentation obtained in date of a state of the stat	216-28		
	Located at ► 12000 Shaker Blvd., Cleveland, OH ZIP + 4 ►	44120	-1926	
þ	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	$\overline{}$	Yes	No
	account)?	42b		_
	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.			
_	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		1
С	If "Yes," enter the name of the foreign country: ▶	720		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. '	▶ ⊔
		ļ	Yes	Na
AA	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		162	140
44	Form 990-EZ	44		✓
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		1
	r.,	m 990	_E7	เวกกด

Form 990-E	EZ (2009)					P	age 4
Part VI	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	ection 4947(a)(1) nor 7(a)(1) nonexempt cha d 51.	nexempt charitat aritable trusts mus	ole trusts only. Ast answer question	ll séc ns 40	tion 6-491	> 0
	id the organization engage in direct or indirect					Yes	No
	andidates for public office? If "Yes," complete S	•			46		✓_
	d the organization engage in lobbying activities	· · · · · · · · · · · · · · · · · · ·			47	✓	
	the organization a school as described in section				48		V
	id the organization make any transfers to an ex-	•	-		49a 49b		
	If "Yes," was the related organization a section 527 organization?						
	mployees) who each received more than \$100,0						
(a	a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	ac	Exper count a r allowa	ınd
None							
				-			
f To	i otal number of other employees paid over \$100	.000			<u> </u>		
	100,000 of compensation from the organization (a) Name and address of each independent contractor	·	,	pe of service	(c) Co	mpens	ation
None							
		····					
d Te	otal number of other independent contractors e	each receiving over \$100	,000▶				
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete Declaration	ed this return, including accomp of preparer (other than officer)	panying schedules and st is based on all information	atements, and to the be in of which preparer has	st of m any kn	y know owledg	ledge je
Sign Here	Jeit W. Mate	teurs]	Juno 2	7 .	20	10
	Signature of officer Keith W. Mathews, Treasurer			Date			
 Paid	Type or print name and title Preparer's	Date	Check if self-	Preparer's identifying nu	mber (S	 ee instru	ctions)
Preparer			employed ▶ L]			
Use Only	yours if self-employed), address, and ZIP + 4			hone no ▶			
May the	IRS discuss this return with the preparer shown	above? See instruction	ns		Yes		No (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.

4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

NARAL Pro-Choice Ohio Foundation

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

Pa	Ш	Reason	tor Public Ch	arity Status (All org	ganizatio	ns musi	comple	te this	<u> 52π.)</u>	e instruc	tions.	
Γhe	orga	nization is no	t a private foun	dation because it is: ((For lines	1 throug	h 11, che	eck only	one box)		
1			-	rches, or association		_						
2		•		n 170(b)(1)(A)(ii). (Att								
3				ospital service organi			n sectio i	n 170(b)(1)(A)(iii).			
4				tion operated in conju						170(b)(1)	(A)(iii). Ente	r the
			me, city, and sta	-			` 					
5	\Box	An organizat	on operated for	the benefit of a collect	ge or univ	ersity ow	ned or o	perated	by a gove	emmental	unit describ	ed ın
_			b)(1)(A)(iv). (Cor		•	•		•				
6	П			ernment or governme	ntal unit	described	d in secti	on 170(t)(1)(A)(v)			
7	$\overline{\Box}$	•		•				-			he general p	ublic
•	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.)											
8				in section 170(b)(1)		omplete	Part II.)					
9 An organization that normally receives: (1) more than 331/4 % of its support from contributions, membership fees, and gro							ross					
		receipts from	activities relate	d to its exempt funct	ions-sul	bject to d	ertain ex	ceptions	, and (2)	no more	than 331/3 %	of its
				ent income and unrel						511 tax)	from busine	esses
		acquired by	the organization	after June 30, 1975.	See sec 1	tion 509(a)(2). (Co	mplete F	Part III.)			
10		An organizat	ion organized ar	nd operated exclusive	ly to test	for publi	c safety.	See sec	tion 509((a)(4).		
11		An organizat	ion organized a	nd operated exclusiv	ely for th	ne benefit	t of, to p	erform ti	he function	ons of, o	r to carry ou	it the
		purposes of	one or more put	olicly supported organ	nizations	described	d in secti	on 509(a)	(1) or sec	tion 509(a)(2) See se e	ction
		509(a)(3). Ch	eck the box tha	t describes the type	of suppo	rting orga	ınızation	and com	plete line	s 11e thr	ough 11h	
		a 🗌 Type			🗌 Тур						Type III-Ot	
е		By checking	this box, I cert	ify that the organizat	ion is no	t controll	ed direc	tly or inc	lirectly by	one or	more disqua	lified
				n managers and other	r than one	or more	publicly	supporte	d organız	ations de	scribed in se	ction
		509(a)(1) or s	section 509(a)(2)									
f		If the organi	zation received	a written determinati	on from	the IRS t	that it is	a Type I	, Type II,	, or Type	III supportin	ng _
			check this box									
g				the organization acce	pted any	gift or c	ontributio	n from a	ny of the	!		
		following per									Yes	No
				indirectly controls, e				h persor	s descrit	ped in (ii)		
		, ,	-	ning body of the supp		ganizatio	n'?				11g(i) 11g(ii)	
				rson described in (i) a							11g(iii)	
				of a person described				-			[119(11)]	
h				ation about the suppo				ou notify	6.0.1	s the	(vii) Amount	of
(1)		e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization sted in your		ization in	organizat		support	. 01
	Ì		i	above or IRC section (see instructions))	governing	document?		of your ort?		zed in the S?		
				(see insulacions))	Yes	No	Yes	No	Yes	No		
					103	110						
					1					} _		
					[

Total

Par	(Complete only if you chec					and 170(b)(1)(A)(vi) _,	
Sec	tion A. Public Support							
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	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 through 3	ļ		 		ļ	+	
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). Public support. Subtract line 5 from line 4.							
6		l	<u> </u>	l	l	<u> </u>	·	
	tion B. Total Support lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
7	Amounts from line 4	,, ,						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
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)					1		
11	Total support. Add lines 7 through 10 .					ļ _[
12	Gross receipts from related activities, etc.					12		
13	First five years. If the Form 990 is for organization, check this box and stop he							
Sec	tion C. Computation of Public Su							
14	Public support percentage for 2009 (line			1, column (f))		14	%	
15	Public support percentage from 2008 Sc	hedule A, Part	II, line 14 .			15	<u>%</u>	
16a	a 33% % support test—2009. If the organization did not check the box on line 13, and line 14 is 33% % or more, check this box and stop here. The organization qualifies as a publicly supported organization							
	33% % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33% % or more, check this box and stop here. The organization qualifies as a publicly supported organization							
	a 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 organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization □							
b	10%-facts-and-circumstances test – 200 more, and if the organization meets the "organization meets the "facts-and-circumst	facts-and-circui ances" test. The	mstances" test, e organization qu	check this box ialifies as a publi	and stop here. cly supported o	Explain in Part rganization .	t IV how the	
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 ▶ □							

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.)

Sec	tion A. Public Support		· · · · · · · · · · · · · · · · · · ·	·						
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")	117,122	91,378	128,150	164,397	149,241	650,288			
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.	0	0	0	0	0	0			
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0			
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0			
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0	01 279	0	0	0 149,241	0			
6	Total. Add lines 1 through 5	117,122	91,378	128,150	164,397	149,241	650,288			
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	10,800	10,000	320	5,612	2,035	28,767			
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	0	0	0	0	O	0			
_	amount on line 13 for the year	10,800	10,000	320	5,612	2,035	28,767			
8 8	Add lines 7a and 7b	10,000	10,000	020	5,5.12	2,000	621,521			
Sec	tion B. Total Support									
	llendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
9	Amounts from line 6	117,122	91,378	128,150	164,397	149,241	650,288			
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0	0	0	0	0	0			
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	00			
С	Add lines 10a and 10b	0	0	0	0	0	0			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0			
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0	0	o	0	0			
13	Total support. (Add lines 9, 10c, 11, and 12)	117,122	91,378	128,150	164,397	149,241	650,288			
14	First five years. If the Form 990 is for torganization, check this box and stop	here		nd, third, fourth	n, or fifth tax y	ear as a section	on 501(c)(3) ▶ □			
Sec	tion C. Computation of Public Su					r				
15	Public support percentage for 2009 (lin		•	ne 13, column	(f))	15	96 %			
16	Public support percentage from 2008 Strong D. Computation of Investment				· · · · ·	16	95 %			
	ection D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . 17 0 9						0 %			
17 18	Investment income percentage for 200				Sidiffit (1)) .	18 0 %				
19a		anization did n	ot check the b	ox on line 14, a	and line 15 is n as a publicly s	nore than 33/3	%, and line			
b	33\% % support tests - 2008. If the organ line 18 is not more than 33\% %, check this	ization did not	check a box or	line 14 or line	19a, and line 1	6 is more than	33/3 %, and			
20	Private foundation. If the organization									

Part IV	Supplemental Information. Complete this part to provide the explanations re Part II, line 17a or 17b; and Part III, line 12. Provide any other additional informations.	equired by Part IF, line 10; nation. See instructions.

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below.

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

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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 **NARAL Pro-Choice Ohio Foundation** 1212322 Part I-A 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. 3 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. Yes If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? · · · 🔲 Yes **b** If "Yes," describe in Part IV. Part I-C 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. (d) Amount paid from (a) Name (b) Address (c) EIN (e) Amount of political contributions received and filing organization's funds If none, enter -0promptly and directly delivered to a separate political organization If none, enter -0-

Pa	rt II-A Complete if the organizat under section 501(h)).	ion is exempt under section 501(c)(3) and	filed Form 5768	(election ;					
	Check ► ☐ if the filing organization belongs to an affiliated group. Check ► ☐ if the filing organization checked box A and "limited control" provisions apply.								
		bying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals					
1a	Total lobbying expenditures to influence	e public opinion (grass roots lobbying)	5,491						
b	Total lobbying expenditures to influence	6,193							
C	Total lobbying expenditures (add lines	1a and 1b)	11,684						
d	Other exempt purpose expenditures		143,779						
е	Total exempt purpose expenditures (ac		155,463	<u>-</u>					
f	Lobbying nontaxable amount Enter th columns.	e amount from the following table in both	31,093						
	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		1					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	1	1					
	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.	i i						
	Over \$17,000,000	\$1,000,000							
g	Grassroots nontaxable amount (enter	25% of line 1f)	7,773						
ĥ	Subtract line 1g from line 1a If zero o	r less, enter -0-	0						
į	Subtract line 1f from line 1c. If zero or		0						
j 	., ., .,	n either line 1h or line 1i, did the organization file Fo		☐ 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.)

Lobi	Lobbying Expenditures 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	20,351	24,324	33,593	31,093	109,361			
b Lobbying ceiling amount (150% of line 2a, column (e))					164,041			
c Total lobbying expenditures	9,041	7,293	10,044	11,684	38,062			
d Grassroots nontaxable amount	5,088	6,081	8,398	7,773	27,340			
e Grassroots ceiling amount (150% of line 2d, column (e))					41,010			
f Grassroots lobbying expenditures	0	962	3,512	5,491	9,965			

Schedule C (Form 990 or 990-EZ) 2009

Pa	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	fi!	ed F	orm 57	68	
		(a)	(b)	
	Ye	es	No	Am	ount	
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 Volunteers?					
a b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?	4				
d	Mailings to members, legislators, or the public?	-				
е	Publications, or published or broadcast statements?	-+	\dashv			
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	\dashv	\dashv			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-+	-			
!	Other activities? If "Yes," describe in Part IV		-		—	
J	Total. Add lines 1c through 1i	- 1	ł			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912	-+	\dashv			
D	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	- 1	İ			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	t	ŀ			
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), o	sectio	n	
	501(c)(6).			1	'es	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		
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A "Yes."					ed
1	Dues, assessments and similar amounts from members	.				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	ai	_			
а	Current year	-	2a			
b	Carryover from last year	}	2b			
С		ŀ	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	- 1	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
_	and political expenditure next year?	- 1	4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
<u> P</u> a	rt IV Supplemental Information					
	replete 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,	line	11.
AISC	o, complete this part for any additional information					
						
						

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Part IV	Supplemental Information (continued)	•
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Statement

Form 990-EZ	2009
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NARAL Pro-Choice Ohio Foundation	31-1212322
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Part I, Line 16, Other expenses

Management fees paid to NARAL Pro-Choice Ohio, a 501c4 affiliate	
Staff services, at cost, based on staff time reports	116,692
Office expenses, at cost, allocated on the basis of staff time reports	17,152
Total management fees	133,844
Miscellaneous	10,415
Total other expenses	144,259

Part IV, Key Employee

The 501c4 affiliate referred to above pays all of the Executive Director's compensation.