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Form **990** 

## **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

Inter		nue Service				<del></del>		copy of this				y requ	une	ments.		ispecti	011
A	For th	e 2009 c	alendar		or tax year				, 2009, :	and ending	9		_		, 20		
В	Check if a	applicable.	Please use IRS		e of organiz								P		yer idei '	ntification	
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	Initial ret	turn	See Specific		MARKE								(	330 )		453-35	24
	Terminat	ted	Instruc-	.   City	or town, sta			P + 4									
	Amende	ed return	tions	4	TON OH								G	Gross re	ceipts	<u> </u>	85,921
	Apphcatio	on pending	F Nai	me and a	address of p	orincipal offi	cer:									ites?□Ye:	
			<u> </u>					<u></u>			Н(b)	Are a	ali a	ffiliates	nclude	j? <b>□Ye</b> :	3 🗸 N
1	Tax-exe	empt statu	s. 🔲	501(c) (	5 ) ◄ (inser	tno) 🗌	4947(a)(1)	or 527	<u></u>	••		ff "N	lo," a	attach a	list (se	e instruct	ions)
	Websi					<del></del> ,					<del></del>	Group e	_	nption nut			
				poration L	Trust .	Association L	Other ▶	<u> </u>	L Yea	ar of formation	on		М	State of	f legal o	domicile	
P	art I	Sumn															
	1 1	Briefly d	escribe	the or	ganızatıo	n's missi	on or mo	ost significa	nt activities	s: TO SE	RVE A	ND	HE	LP TH	EME	MBERS	HIP.
_	١ ـ	NEEDIN	IG ASS	SISTAN	ICE,CON	TRIBUTE	TO MA	NY LOCAL	COMMUN	ITY ORG	ANIZA	TION	<u>VS,</u>	GRAI	NT		
Activities & Governance	_	SCHOL	ARSHI	PS,CO	NTRIBUT	TE TO TH	E WELF	ARE OF L	NION BRO	THERS A	AND S	ISTE	RS	<u>.</u>			
Ē	_																
8	2 (	2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net ass										ets.					
	3 (	Number	of voti	ng mer	nbers of	the gove	ming bo	dy (Part VI,	line 1a).					3			
88	1		er of voting members of the governing body (Part VI, line 1a)										4			15	
ž	1			•	_									5			1
Act	6	Total nu	mber o	of volun	iteers (est	imate if r	necessar	v)						6			50
-	1				•			rt VIII, colur						7a			0
								m 990-T, lir						7b			
											Pr	ior Ye	ar			Current Y	aar
	<b>a</b>	Contribil	rtions a	and ora	nts (Part	VIII. line	1h)						93	3,110			85,921
e	176	Pregram	servici	e rever	ue (Part	VIII. line :	2a)						ε	B,079			
₹													7	7,604			7,801
ĐŤ	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)								6,709								
(D)	12 Total Jevenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)									109,472			93,722				
OGDEN, WH	120								_	2,000			2,000				
$\overline{\mathbf{m}}$	1/02	Regrants And similar amounts paid (Part IX, column (A), lines 1–3)															
Z	157	15 Salaries of the compensation, employee benefits (Part IX, column (A), lines 5–10)										54	4,389			57,788	
چے	165	·	- 1					line 11e) .						,,,,,,			
は	1085							925) ▶									
"		Otto	uraising	y exper	IV solum	n, coluiti	11 (D), III t	3 ∠3) ►  1 d   11 € 0 / !	n				34	4,449			37,958
١.	RS-C	ogger ex	cpenses	S (Pari	IA, COIUIT	7 (~), iirk	soud Da	1d, 11f-24 art IX, colun	n (A) line	· · ·				0,938			97,746
					s. Subtrac						•			8,534			-4,028
- E	13	rieveriue	1633 CX	фензес	. Odbiido	Carle 10 i	ioni iino	<u>,, , , , , , , , , , , , , , , , , , ,</u>			Beginning	of C				End of Ye	
Assets or	-	Tatal as	aata (De	/ I.	no 16)					F	- J			5,156		1	73,690
Ass	20	Total as	•											8,534			4,0288
Net /					, line 26) lances S	ubtract li	 ne 21 fra	om line 20		· ·  -				3,960			69,662
	art II		nature			<del>abti abt ii</del>		3111 11110 20	<u> </u>	<u> </u>				<u>,,,,,,</u>			,
-	21 ( 10 )	Under o	enalties o	of penury	. I declare th	at I have ex	amined th	s return, includ	ling accompa	nvina schedi	ules and	stater	nen	ts. and t	o the b	est of my	knowledg
		and beli	ef, it is tri	ue, corre	ct, and com	plete. Decl	aration of p	oreparer (other	than officer) i	s based on	all inform	nation	of v	which of	eparer	has any k	nowledge
Sig	***	f	J	- 0	$\mathcal{I}$		_					1 7	<b>7</b> /	[ ;	10		
He	-	Sign	nature of	officer	<u> </u>	(	→—				_	Date	<u>-</u>				
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14-			, and ZIP			VERHAR		above? (se	e instructio	nnel	Jen	ione n	υ <b>,</b>		, , 		✓ No
rv1a	ıv ine I	IND GISC	uss mi	s retun	i with the	: prepare	SHOWN	above! (Se	e mstructio	JIID) .					٠ ١	Yes	A 140

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

Form **990** (2009)

Cat No. 11282Y

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Par	Statement of Program Service	Accomplishments									
1	Briefly describe the organization's missio TO SERVE AND HELP ALL MEMBERS OF THE WORKSITE AND DEVELOP NEW MEMBERS OF THE WORKSI	OF THIS COUNCIL.REPRESENT TH		PROBLEMS AT							
2	Did the organization undertake any signif the prior Form 990 or 990-EZ?			☐ Yes ☐ No							
3	Did the organization cease conducting, or	or make significant changes in how it	conducts, any program	☐ Yes ☐ No							
	services?	edule O.	• • • • • • • • •								
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.										
4a	(Code:) (Expenses \$										
4b	(Code: ) (Expenses \$										
4c	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	)							
	······										
	Other program services. (Describe in Sch	edule O.)									
4e	(Expenses \$ including gi Total program service expenses ▶		e \$)								

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		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_		1
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		1
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, IX, or X as applicable	11		1
•	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		<u> </u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	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	_	✓
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		✓
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	i	

Pa	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		✓
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
	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		1
d	to detease any tax-exempt bonds?	24d	-	1
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
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		1
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		1
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
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		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	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		✓
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		✓.
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-chantable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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,	27		
38	Part VI	37		<b>✓</b>
<del></del>	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	990	<b>✓</b>
		C		10000

Par	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		
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	_	1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	L	1
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶		Ì	] ;
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			ر ا
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>/</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		<b>✓</b>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5c		/
•	Prohibited Tax Shelter Transaction?	6a		1
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	Va		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		1
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		1
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b>√</b>
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		<b>V</b>
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		1
9	Sponsoring organizations maintaining donor advised funds.	9a		1
	Did the organization make any taxable distributions under section 4966?	9a	<del>                                     </del>	1
	Did the organization make a distribution to a donor, donor advisor, or related person?	30		<del>  •</del>
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12		ŀ	
	Section 501(c)(12) organizations. Enter:			
11	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against		l	
	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		<b>-</b>

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.

	1 1		Yes	No
1a	Enter the number of voting members of the governing body			
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		_	
	any other officer, director, trustee, or key employee?	2_	✓_	L
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	_3_	✓	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		1
6	Does the organization have members or stockholders?	_6		✓
7a				
	of the governing body?	7a		1
b	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:			
а	The governing body?	8a	✓	
	Each committee with authority to act on behalf of the governing body?	8b	✓	
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		
	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		1
	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	1	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
••	form?	11		✓
11Δ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		1
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		1
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		1
13	Does the organization have a written whistleblower policy?	13		<b>1</b>
	Does the organization have a written document retention and destruction policy?	14		1
14	Did the process for determining compensation of the following persons include a review and approval by			
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
•	The organization's CEO, Executive Director, or top management official	15a		1
		15b		1
D	Other officers or key employees of the organization			<u> </u>
46-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
10a		16a		1
	with a taxable entity during the year?			
Ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		1
800	tion C. Disclosure			
	<u>, , , , , , , , , , , , , , , , , , , </u>			
17	List the states with which a copy of this Form 990 is required to be filed ► OHIO			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c	)(J)S	orliy)	
	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	ot inte	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 recoorganization: MELISSA SCIURY 1329 MARKET AVE N CANTON OHIO 44714	ras o	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 compensate any current officer, director, or trustee.										
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average				k all	that ap		Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
SEE ATTACHED SHEET OF ALL OFFICERS										
& BOARD MEMBERS AND THERE eEXP.				L		L				

Part VII Section A. Officers, Directors, Tru	ıstees, Key	/ Emp	loy	ees,	, an	d Hig	hest	Compensate	d Employees (co	ontinued)	<u> </u>
(A)	(B)	_		•	C)			(D)	(E)		(F)
Name and title	Average hours per week	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amo of compe fror orgar and	mated punt of ther ensation m the nization related nizations
				-						-	
		-						<del></del>			
									,		
						-					
1b Total						•	•			<u> </u>	
2 Total number of individuals (including but in reportable compensation from the organization)		to the	ose	liste	ed a	above	) wh	no received mo	ore than \$100,0	00 ın	
										Y	'es No
3 Did the organization list any former office employee on line 1a? If "Yes," complete S										3	1
4 For any individual listed on line 1a, is the s											
the organization and related organizations individual.	greater tha	ın \$15	50,0	00?	If "	'Yes,"	cor	nplete Schedu	le J for such	4	1
5 Did any person listed on line 1a receive services rendered to the organization? If "	or accrue	comp	oen:	satio	on 1	from a	any	unrelated org	anization for	5	1
Section B. Independent Contractors											
<ol> <li>Complete this table for your five highest compensation from the organization.</li> </ol>	ompensate	d ind	epe	nde	ent o	contra	cto	s that receive	d more than \$1	00,000	of
(A) Name and business add	tress							(B) Description of s	ervices	(C) Compens	ation
NONE											
							-	<del></del>			
						<del></del>	+				-
2 Total number of independent contractors (in more than \$100,000 in compensation from					to	those	liste	ed above) who	received		

Pari	VII	Statement of Re	venue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contri All other contributions, gifts, g and similar amounts not include Noncash contributions include Total. Add lines 1a–1f	butions). 1e grants, ded above drin lines 1a-1f: \$	77,738 6,651 1,532	85,921			,
<u> </u>				Business Code				
Program Service Revenue	2a b c d e f	All other program servi						
F.	g	Total. Add lines 2a-2f		🕨				
	3 4 5	Investment income (inc other similar amounts) Income from investment o	f tax-exempt bon	▶ d proceeds ▶	7,801			
	6a b	Less: rental expenses						
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				1
		Less: cost or other basis and sales expenses . Gain or (loss) . Net gain or (loss)		<b>&gt;</b>	<u>-</u>	_		-
. Revenue	8a	Gross income from events (not including \$ of contributions reported See Part IV, line 18	d on line 1c).					
Other		Less: direct expenses Net income or (loss) fro	b	events ►				
		Gross income from gam See Part IV, line 19	a					1
	С	Less: direct expenses. Net income or (loss) fro	om gaming activ					
	ь	Gross sales of inverteurns and allowances Less: cost of goods so Net income or (loss) from	ld b n sales of invent					
		Miscellaneous Reve	enue	Business Code				
	11a							
	ь							
	С							
	ď	All other revenue		L				
		Total. Add lines 11a-1						
	12	Total revenue. See ins	tructions	<u> </u>	93,722			

Part IX Statement of Functional Expenses

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

	All other organizations must complete col	umn (A) but are not	t required to com	plete 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	Grants and other assistance to individuals in the U.S. See Part IV, line 22	2,000			
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		<del></del>	<del> </del>	
5	Compensation of current officers, directors, trustees, and key employees	3,785			
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 salanes and wages	31,588			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	5,400			
10	Payroll taxes	17,015			
11	Fees for services (non-employees).				
	Management	İ			
b	Legal				
		200			
	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	1,038			
12	Advertising and promotion	9,566			
13	Office expenses	3,000		· w	
14	Information technology			•	
15	Royalties	5,400			
16	Occupancy	807		<del></del>	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials			<del></del>	
19	Conferences, conventions, and meetings .	639		· · · · · · · · · · · · · · · · · · ·	
20	Interest				
21	Payments to affiliates	<del>_</del>			<del></del>
22	Depreciation, depletion, and amortization.	0.407			
23	Insurance	8,427			
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					
b	CONTRIBUTIONS	4,079			
C	DINNERS	3,956			
d	DUES	1,004			
e	MISC.	2,842			
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f				
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	97,746			

Par	LA	Balance Sneet		—-	<del></del>
			(A) Beginning of year		(B) End of year
$\top$	1	Cash—non-interest-bearing	94,614	1	91,450
	2	Savings and temporary cash investments	100,000	2	100,000
- 1	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of	_		
		Schedule L		5	<del> </del>
	6	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
र्घ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ř	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D			
	b	106		10c	-
	11	Investments—publicly traded securities	·	11	
- 1	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
ı	14	Intangible assets	•	14	
- 1	15	Other assets. See Part IV, line 11		15	
$\rightarrow$	16	Total assets. Add lines 1 through 15 (must equal line 34)	196,614		191,450
]	17	Accounts payable and accrued expenses		17	
- 1	18	Grants payable		18	
	19	Deferred revenue	22,924		21,788
	20	Tax-exempt bond liabilities	<del></del>	20	
ië	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		-	
-1		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	<del></del> .	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
$\rightarrow$	26	Total liabilities. Add lines 17 through 25	22,924	26	21,788
alances		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
曺	27	Unrestricted net assets		27	
αĭ	28	Temporarily restricted net assets		28	
밀	29	Permanently restricted net assets		29	
or Fund		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
8	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
۲	32	Retained earnings, endowment, accumulated income, or other funds		32	
2	33	Total net assets or fund balances	173,690		169,662
$\perp$	34	Total liabilities and net assets/fund balances	196,614	34	191,450

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🗌 Accrual 🔲 Other			
	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?			
b				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		<b>√</b>	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		<b>✓</b>
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)

## **OFFICERS**

Daniel F. Sciury	President	\$1.200.00
James Bonsky	Secretary-Treasurer	\$550.00
Joe Carbenia	First Vice President (now decease	ed) \$175.00
Peggy Griffith	First Vice President	\$75.00
Mike McElfresh	Second Vice President	\$180.00
Mike McNichol	Recording-Secretary	\$600.00
Steve Pickard	Sergeant-at-Arms	\$180.00
Jim Davidson	Trustee	\$15.00
Dave Kirven	Trustee	\$15.00
Ron Vrabel	Trustee	\$60.00
Robert Thompson	Trustee	\$15.00
John Negulis	Trustee	\$60.00
Rollie Dreussi	Trustee	\$45.00
Tim Lunkwitz	Trustee	\$15.00
* Paul Stevens	Cook	\$600.00
TOTAL		\$3,785.00
Melissa Baker	Secretary/Office Manager \$4	5,000.61 (Gross)

# DISBURSEMENTS & ACCOUNTS YEAR 2009

NO.	NAME OF ACCT	CHECK NO.	CHECK DA	TTO WHOM	AMOUNT		FOR
35 35	SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP	5219 5220	6-15-09 6-15-09	EMILY LUNKWITZ AARON SWEENEY KASSANDRA BONSKY NICOLETTE SHERER	\$500.00 \$500.00 \$500.00 \$500.00 \$2,000.00	2009 2009	SCHOLARSHIP WINNER SCHOLARSHIP WINNER SCHOLARSHIP WINNER CHECK-2009 SCHOLARSHIP