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Short Form Return of Organization Exempt From Income Tax

2010

Open to Public Inspection

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

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 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

Department of the Treasury
Internal Revenue Service

A For the 2010 calendar year, or tax year beginning Jan. 1, 2010, and ending Dec. 31, 2010

- B** Check if applicable
- Address change
 - Name change
 - Initial return
 - Terminated
 - Amended return
 - Application pending

C Name of organization <u>LEPOCO</u>		D Employer identification number <u>23 22 36 211</u>
Number and street (or P O box, if mail is not delivered to street address) Room/suite <u>313 W. 4th St.</u>		E Telephone number <u>610-691-8730</u>
City or town, state or country, and ZIP + 4 <u>Bethlehem, PA 18015-1975</u>		F Group Exemption Number ▶

G Accounting Method. Cash Accrual Other (specify) ▶ _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ _____

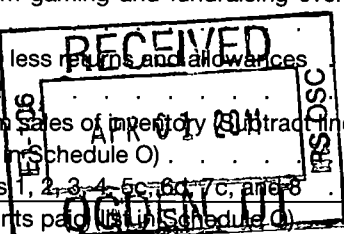
J Tax-exempt status (check only one) – 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 38942.70

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)
Check if the organization used Schedule O to respond to any question in this Part I

	Description		Amount
Revenue	1 Contributions, gifts, grants, and similar amounts received	1	<u>6209.86</u>
	2 Program service revenue including government fees and contracts	2	<u>—</u>
	3 Membership dues and assessments	3	<u>35136.15</u>
	4 Investment income	4	<u>- 2476.76</u>
	5a Gross amount from sale of assets other than inventory	5a	<u>—</u>
	b Less: cost or other basis and sales expenses	5b	<u>—</u>
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	<u>—</u>
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	<u>—</u>
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	<u>—</u>
c Less: direct expenses from gaming and fundraising events	6c	<u>—</u>	
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	<u>—</u>	
7a Gross sales of inventory, less returns and allowances	7a	<u>3842.43</u>	
b Less: cost of goods sold	7b	<u>- 2174.40</u>	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	<u>1668.03</u>	
8 Other revenue (describe in Schedule O)	8	<u>579.82</u>	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	<u>41117.10</u>	
Expenses	10 Grants and similar amounts paid (attach Schedule O)	10	<u>- 310.00</u>
	11 Benefits paid to or for members	11	<u>—</u>
	12 Salaries, other compensation, and employee benefits	12	<u>- 31042.63</u>
	13 Professional fees and other payments to independent contractors	13	<u>—</u>
	14 Occupancy, rent, utilities, and maintenance	14	<u>- 6763.18</u>
	15 Printing, publications, postage, and shipping	15	<u>- 3807.49</u>
	16 Other expenses (describe in Schedule O)	16	<u>- 5234.23</u>
17 Total expenses. Add lines 10 through 16	17	<u>- 47157.53</u>	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<u>- 6040.43</u>
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	<u>11413.35</u>
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	<u>3147.02</u>
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	<u>8519.94</u>	



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Part V Other Information (Note the statement requirements in the instructions for Part V.)

Check if the organization used Schedule O to respond to any question in this Part V. []

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 33 through 44d regarding organizational activities, financials, and reporting requirements.

		Yes	No
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?	45	<input checked="" type="checkbox"/>
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45a	<input checked="" type="checkbox"/>
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	<input checked="" type="checkbox"/>

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

		Yes	No
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	<input checked="" type="checkbox"/>
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	<input checked="" type="checkbox"/>
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	<input checked="" type="checkbox"/>
b	If "Yes," was the related organization a section 527 organization?	49b	<input checked="" type="checkbox"/>
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		

(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	(e) Expense account and other allowances
None				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

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

Sign Here

Signature of officer: *Jalena Jantack* Date: 3-28-11

Type or print name and title: CO-treasurer Julius Jantack

Paid Preparer Use Only

Print/Type preparer's name: _____ Preparer's signature: _____ Date: _____ Check if self-employed PTIN: _____

Firm's name: _____ Firm's EIN: _____

Firm's address: _____ Phone no: _____

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization LEPOCO Employer identification number 23 22 36 211

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 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)**.
- 4 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: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **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)**.
- 7 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 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 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.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Other
- e 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).
- f 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
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	<input type="checkbox"/>	<input type="checkbox"/>
(ii) A family member of a person described in (i) above?	<input type="checkbox"/>	<input type="checkbox"/>
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	<input type="checkbox"/>	<input type="checkbox"/>

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support test—2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	49554.04	51030.00	39941.46	52363.59	35136.15	228025.24
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	3798.27	3451.43	3003.54	2706.62	8712.08	21.761.94
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	53352.31	54481.43	42945.00	55070.21	43878.23	249727.18
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	—	—	—	—	—	—
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)	53352.31	54481.43	42945.00	55070.21	43878.23	249727.18

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	53352.31	54481.43	42945.00	55070.21	43878.23	249727.18
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	173.46	236.65	52.87	171.21	75.42	709.61
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	—	—	—	—	—	—
c Add lines 10a and 10b	173.46	236.65	52.87	171.21	75.42	709.61
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.)	53525.77	54718.08	42997.87	55241.42	43953.65	250436.79
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	99.72	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	99.74	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	0.28	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	0.27	%

- 19a 33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . ▶
- b 33 1/3% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Year to Date Summary Report
1/1/10 Through 12/31/10

Category Description	1/1/10- 12/31/10	
INCOME		
Copier Donations	9 72	
Dividend Income	75.42	
Fundraising Events:		
Annual Dinner		
Annual Dinner Admissions	4,132.00	- A - III - Z
TOTAL Annual Dinner	4,132 00	
Art Raffle Income	821.00	
Bike/Walk-a-Thon	1,098.57	
Misc. Fundraisers	62 29	
Yard Sale	96.00	
TOTAL Fundraising Events	6,209.86	
Gift Received:		
Dues and Donations	8,543.55	
Fund Appeal Donations	5,540.00	
Phonathon Donations	12,130.15	
Pledges Received	8,922.45	
TOTAL Gift Received	35,136 15	- A - III - I
Program and Event Net Inc:		
Chorus Concert	200.00	
Miscellaneous Programs	315 10	
Potluck & Politics	197.55	
Speaker Fees	50.00	
Video Rentals	5.00	
TOTAL Program and Event Net Inc	767.65	- A - III - Z
Sales:		
Boutique Sales	2,716 45	
Misc. Sales	0.94	
Serrv Craft -Non Taxable	772.54	
Serrv Craft Sales-Taxable	352.50	
TOTAL Sales	3,842.43	- A - III - Z
Realized Gain/Loss	447.82	
TOTAL INCOME	46,489 05	
EXPENSES		
Annual Dinner Food	853.96	
Oth. Annual Dinner Expens	1,092 97	
Bike-Walkathon Expenses	38 14	
Boutique Costs	1,522.09	
Chorus Expenses	62.96	
Computer Access & Domain Fees	741.43	
Fund Appeal Expenses	513.46	
Charitable Donations.		
Cash Contributions	210 00	
Peace Pilgrimage Contrib	100 00	
TOTAL Charitable Donations	310 00	
Insurance (not health)		
Fire Insurance	185.00	
Liability Insurance	822 00	
Workers Comp. Insurance	240 00	
TOTAL Insurance (not health)	1,247 00	

Year to Date Summary Report

1/1/10 Through 12/31/10

Category Description	1/1/10- 12/31/10
Lehigh Valley Peace Coalition Contrib.	11.84
Late Payment Fees	62.22
LEPOCO Mailings:	
Miscellaneous Mailing Exp	414.34
Newsletter Mailings	1,531.86
TOTAL LEPOCO Mailings	1,946.20
Miscellaneous	32.48
Misc. Prog & Event Expenses	42.49
OfficeExpense(non supply)	135.60
QuickPayroll	28,002.28
Programs:	
Charlie King Concert	-353.70
Misc. Fairs & Festivals	125.00
Martin Luther King Program	67.74
Potluck & Politics Prog.	82.79
Pride Festival, Allentown	25.00
Tax Day Expenses	108.00
TOTAL Programs	54.83
Rent Paid	4,875.00
Repairs.	
Copier Repairs	873.18
Other Equipment Repairs	144.16
TOTAL Repairs	1,017.34
Servv Costs	652.31
Office Supplies.	
Office Supplies	360.75
Paper Supplies	543.51
Printer Supplies	300.44
TOTAL Office Supplies	1,204.70
Telephone Expense	1,300.49
Electric	587.69
Working Group Expenses:	
Amer Solidanty Group	5.60
Anti-Death Penalty Group	15.16
Disarmament Working Groups	31.08
TOTAL Working Group Expenses	51.84
TOTAL EXPENSES	46,359.32
TOTAL INCOME - EXPENSES	129.73

Account Balances Report

(Includes unrealized gains)

As of 12/31/10

Acct	12/31/10 Balance
ASSETS	
Cash and Bank Accounts	
CASH	125 00
Summit Bank Acct	10,582.11
WTR Life Fund Account	1,080 28
TOTAL Cash and Bank Accounts	11,787 39
Investments	
Pax World Management	3,665 37
TOTAL Investments	3,665 37
TOTAL ASSETS	15,452.76
LIABILITIES	
Other Liabilities	
Barbara Lloyd Memorial Fund	1,596.81
Bike/Walk-a-Thon Gift	1.50
Monies simply passing through LEPOCO	0 00
Payroll Liabilities	955 49
Peace Camp Account	3,093.91
Sales Tax Owed	215 17
Special Acct for JS Memorial	876.33
Y & M/AJ Muste Grant	193.61
TOTAL Other Liabilities	6,932 82
TOTAL LIABILITIES	6,932 82
OVERALL TOTAL	8,519.94