

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 Open to Public

Inspection

A	For th	e 2012 calendar year, or tax year beginning and ending	
В	Check if applicat	C Name of organization	D Employer identification number
	Addr	NATIONAL PEOPLE'S ACTION	
	Name chan	ge Doing Business As	36-2755109
Ļ	Initial returi Term	Number and street (or P.U. box if mail is not delivered to street address) Room/s	
F	—∣ated ∏Amer	OTO NORTH MIDWACKEE AVENUE	(312) 243-3035
F	retun Appli		G Gross receipts 3,610,171.
_	tion pend		H(a) Is this a group return for affiliates? Yes X No
		810 N.MILWAUKEE AVE., CHICAGO, IL 60642	H(b) Are all affiliates included? Yes No
1	Tax-ex		If "No," attach a list (see instructions)
		ite: ► HTTP://WWW.NPA-US.ORG/	H(c) Group exemption number ▶
_		· · · · · · · · · · · · · · · · · · ·	ear of formation: $1972 $ M State of legal domicile: IL
LP	art I	Summary	
9	1	Briefly describe the organization's mission or most significant activities: SEE SCHE	DULE O
Governance	2	Check this box if the organization discontinued its operations or disposed of n	ages than 250/ of the not country
Ver	3	Number of voting members of the governing body (Part VI, line 1a)	lore than 25% of its net assets.
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 10
s S	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5 23
Activities	6	Total number of volunteers (estimate if necessary)	6 30
Acti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.
	b	Net unrelated business taxable income from Form 990-T, me 34	7b 0.
		RECEIVED	Prior Year Current Year 3,089,986. 3,452,794.
ĭe	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	
Revenue	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7 pg OCT 0 4 2013	Q 110,403. 135,848. O 3,170. 1,398.
ŭ	11	Other revenue (Part VIII) column (A) lines 5 6d 8c 9c 10c and 10c	76,653. 20,131.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,280,212. 3,610,171.
_	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	672,639. 967,316.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,534,373. 1,559,001.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
Š	_b	Total fundraising expenses (Part IX, column (D), line 25) 155,592.	1 222 202 1 022 400
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,323,392. 1,032,489. 3,530,404. 3,558,806.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12	<250,192.> 51,365.
00,00	3	Provende loss expenses dubitast line to non line 12	Beginning of Current Year End of Year
Net Assets or	20	Total assets (Part X, line 16)	2,312,262. 2,390,051.
A PS	21	Total liabilities (Part X, line 26)	246,922. 273,346.
		Net assets or fund balances Subtract line 21 from line 20	2,065,340. 2,116,705.
	art II		· · · · · · · · · · · · · · · · · · ·
		alties of perjury, I declare that I have examined this return, including accompanying schedules and sta ct, and complete Deglaration of preparer (ether than officer) is based on all information of which prep	
	5, 00116	ts, and complete Devial attorn or preparer (which than unicer) is based on all information of which prep	I 9 / 27 / 3
Sig	ın	Signature of officer	Date
He	-	GEORGE GOEHL, EXECUTIVE DIRECTOR	
		Type or print name and title	-//
		Print/Type preparer's name Preparer's signature	PTIN PTIN
Pai		CAROLE A. BUDYAK WHOLE (), ANY AR	1/25/19 self-employed P00022148
	parer	Firm's name CBIZ MHM, LLC	/ / Firm's EIN ► 34-1853929
US	Only	Firm's address 225 WEST WACKER DR., STE. 2500 /	212 602 6000
<u></u>	u tha !	CHICAGO, IL 60606	Phone no. 312-602-6800 X Yes No
	<u>19 tne 1</u> 001 12-	RS discuss this return with the preparer shown above? (see instructions) 10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.	X Yes No Form 990 (2012)
-02		2. 2. 2. 3. 1 april april 10 a	1 01111 330 (2012)

Part IV	Checklist of Required Schedule	es

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	<u> </u>
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		Х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	J		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
_	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	114		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	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	11c		Х
d	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	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa		
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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, Parts II and IV	15		х
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, Parts III and IV	16		х
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		х
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		Х
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		Х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	(0010)
		Form	990 ((2012)

Part IV Checklist of Required Schedules (continued)

		1	res	l MO
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			v
00	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	_	<u> </u>
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		X
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		<u>X</u>
	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
þ	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		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			١, ,
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	_	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990 (2012)

Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V No 31 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 23 filed for the calendar year ending with or within the year covered by this return 2a X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). X a 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 b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year 7d | X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? X 9a X **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter. a Gross income from members or shareholders 11a **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a

232005 12-10-12

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2012)

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

	Check if Schedule O contains a response to any question in this Part VI						X			
Sec	tion A. Governing Body and Management									
						Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		L 0	寸					
	If there are material differences in voting rights among members of the governing body, or if the governing			\neg						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			ı	- 1	-				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	-	L 0	ı					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with an	y other				,			
	officer, director, trustee, or key employee?			2	2 1		X			
3	Did the organization delegate control over management duties customarily performed by or under the	direct s	supervision		T					
	of officers, directors, or trustees, or key employees to a management company or other person?			3	;		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was f	iled?	4	1		X			
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		_ [5	,		Х			
6	6 Did the organization have members or stockholders?									
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point on	e or							
	more members of the governing body?			7:	a		Х			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, si	ockhold	ers, or							
	persons other than the governing body?			7	Ы		Х			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the fo	ollowing:							
а	The governing body?			8	a	Х				
b	Each committee with authority to act on behalf of the governing body?			8	b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched at t	he							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9			<u> </u>			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue C	ode)		4					
					-	Yes	No			
	Did the organization have local chapters, branches, or affiliates?			10	a	X				
b	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?									
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?									
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990									
	Did the organization have a written conflict of interest policy? If "No," go to line 13		0	12	$\overline{}$	X				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12	b	^				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye	s, aesc	ribe	۱,,		x				
12	In Schedule O how this was done			12	-	^	<u>X</u>			
13 14	Did the organization have a written whistleblower policy?			1:	-		$\frac{x}{x}$			
15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approva	lbundo	pondont	<u> </u>	•					
,,,	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	i by ii lde	pendent			1				
а	The organization's CEO, Executive Director, or top management official			15	اء	х				
	Other officers or key employees of the organization			15	_	X				
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			<u> </u>	~					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements.	ent with	а							
	taxable entity during the year?		_	16	a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	e its pari	cicipation		\top					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ		-							
	exempt status with respect to such arrangements?			16	ь					
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ▶IL									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Section	501(c)(3)s onl	y) avaı	lable	9				
	for public inspection. Indicate how you made these available. Check all that apply									
	Own website Another's website X Upon request Other (explain		•							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	oflict of i	nterest policy,	and fir	nand	cial				
	statements available to the public during the tax year									
20	State the name, physical address, and telephone number of the person who possesses the books an	d record	ls of the organ	zation	•					
	MARINA SELIKHOVA - 312-676-2812									
232000	810 N. MILWAUKEE AVENUE, CHICAGO, IL 60642									
12-10-	12			Fo	rm !	990 (2012)			

Form 990 (2012)

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

Check if Schedule O contains a response to any question in this Part VII

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
- 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, if any 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 neither the organization		orga	anıza			npe	nsat			
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check more than one			than	one	Reportable	Reportable	Estimated
	hours per		oox, unless person is both officer and a director/trust			compensation	compensation	amount of		
	week (list any	ē	ğ					from the	from related organizations	other compensation
	(list any hours for related organizations below line)	direc				5		organization	(W-2/1099-MISC)	from the
	related	tee or	ıstee			ensate	ŀ	(W-2/1099-MISC)	_	organization
	organizations	ş	institutional trustee		Key employee	Highest compensated employee				and related
	below	Ividu	ttuto	Officer	dm9/	hest (Former			organizations
/11	line)	르	E	₹	ă.	불통	횬			
(1) MARILYN EVANS TREASURER	1.00	x						0.	0.	0
(2) CALVIN BRADFORD	1.00	Δ	<u> </u>	·			_	0.	0.	0.
DIRECTOR	1.00	х						0.	0.	0.
(3) REVEREND DR. EUGENE BARNES	1.00	^					-	0.	<u></u>	0.
PRESIDENT	1.00	x						0.	0.	0.
(4) BRUCE GOTTSCHALL	1.00	^						0.	- 0.	
SECRETARY	1.00	x						0.	0.	0.
(5) JOHN MCKNIGHT	1.00	 		\vdash					<u> </u>	
DIRECTOR		х						0.	0.	0.
(6) EMIRA PALACIOS	1.00	F	\vdash	<u> </u>		 				
VICE PRESIDENT		х						0.	0.	0.
(7) ALECIAH ANTHONY	1.00			\vdash						-
DIRECTOR		Х		İ				0.	0.	0.
(8) DON ELMER	1.00									
DIRECTOR		X						0.	0.	0.
(9) HUGH ESPEY	1.00									
DIRECTOR		X						0.	0.	0.
(10) JENIFER ANCONA	1.00									
DIRECTOR		Х	L					0.	0.	0.
(11) JEE KIM	1.00		'	1					_	_
DIRECTOR		Х					<u> </u>	0.	0.	0.
(12) GEORGE GOEHL	45.00							0.4 500		
EXECUTIVE DIRECTOR	45.00		L	X		L	_	94,500.	0.	0.
(13) MARINA SELIKHOVA	45.00	ļ	l .					F.C. 0.00		
FINANCIAL DIRECTOR				Х	_	_	_	76,000.	0.	0.
		ł								
		\vdash	<u> </u>	_	├_	<u> </u>	<u> </u>			
		ł								
		 		\vdash		<u> </u>				
	———	ł		İ						
	- 	 	-	-	\vdash	-	 			
		1			l					
232007 12-10-12		Щ-					_	<u> </u>		Form 990 (2012)

232007 12-10-12

Form 990 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) Name and title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				i than is bot	one th an	(D) Reportable compensation	(E) Reportable compensation		ı	(F) stimate nount	
	week (list any hours for related organizations below line)	tee or director		Officer		Highest compensated Samployee		the	from relate organizatior (W-2/1099-MI	ons comp MISC) fro orga and		other ipensa rom the anizat d relate anizatie	e ion ed
-													
											_		
											<u> </u>		
										·			
									-				
			-										
1b Sub-total c Total from continuation sheets to Part VI	I, Section A					>		170,500.		0.			0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	ed al	bove	e) wh	no r	170,500. ecceived more than \$100	,000 of reportab	0. ole	L		0.
Did the organization list any former officer,	director, or tru	ustee	e, ke	v er	npla	vee.	. or	highest compensated e	mplovee on			Yes	No
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the su	uch ındıvıdual			•	•	•			. ,		3		_X
and related organizations greater than \$150Did any person listed on line 1a receive or a									dual for services	;	4		Х
rendered to the organization? If "Yes," com Section B. Independent Contractors											5		X
Complete this table for your five highest co the organization. Report compensation for	•	•						n the organization's tax	•	npens			
(A) Name and business	address	NC	ONI	3			-	(B) Description of s	ervices	С	(C Compe		<u>1</u>
										:	<u>. </u>		
				-			-	:					
							-						
							_						
Total number of independent contractors (i \$100,000 of compensation from the organic		ot lir	mite	d to		se lis	stec	d above) who received m	nore than				
222009	· •										Form 9	990 (2	2012)

232008 12-10-12

Page 9

L a	L VII	Check if Schedule O con		to any question	in this Part VIII			
,		Shook in Concodic C Com	tuino a reoperioc	to any quotion	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Related organizations Government grants (contribut	ots, and ove of 3 ,	452,794.	3,452,794.			
Program Service Revenue	2 a b c	AFFILIATE DUES	EES	Business Code 611710 611430	89,048. 46,800.	89,048. 46,800.		
Program Reve	e f _ g	All other program service reve	enue	•	135,848.			
	3 4 5	Investment income (including other similar amounts) Income from investment of ta Royalties		>	1,398.			1,398.
	6 a b c	Gross rents Less: rental expenses Rental income or (loss)	(i) Real	(II) Personal				, .
	7 a	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Securities	(II) Other	۵.			
evenue	d	Gain or (loss) Net gain or (loss) Gross income from fundraisin including \$ contributions reported on line	of	>				
Other Reve	С	Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ad Part IV, line 19	a b draising events	>				
	c 10 a	Less. direct expenses Net income or (loss) from gan Gross sales of inventory, less and allowances Less: cost of goods sold	b ning activities	•				
-		Miscellaneous Revenu		Business Code 900099	20,131.	20,131.		
232009 12-10-	d e 12			>	20,131. 3,610,171.	155,979.	0.	1,398. Form 990 (2012)

Form 990 (2012) NATIONAL PEOP Part IX Statement of Functional Expenses

	Check if Schedule O contains a respon	(Å)	ıs Part IX (B)	(c)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	067 316	067 316	}	
	organizations in the United States. See Part IV, line 21	967,316.	967,316.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members			.ú, *	
5	Compensation of current officers, directors,	170 500	101 000	24 502	14 000
	trustees, and key employees	170,500.	121,900.	34,503.	14,097
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 064 703	016 016	F 4 0 F 2	00 454
7	Other salaries and wages	1,064,793.	916,346.	54,973.	93,474
8	Pension plan accruals and contributions (include	44 222	26 242		
	section 401(k) and 403(b) employer contributions)	44,322.	36,849. 165,109.	3,449. 4,912.	4,024 14,864
9	Other employee benefits	184,885.	165,109.	4,912.	14,864
10	Payroll taxes	94,501.	79,425.	6,847.	8,229
11	Fees for services (non-employees)				
а	Management				
b	Legal	63,725.	3,779.	59,840.	106
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0)				
12	Advertising and promotion				
13	Office expenses	24,204.	21,475.	1,226.	1,503
14	Information technology			·	
15	Royalties				
16	Occupancy	30,543.	27,531.	1,371.	1,641
17	Travel	382,052.	370,767.	6,385.	4,900
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	86,187.	84,074.	795.	1,318
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,723.		15,723.	
23	Insurance	16,202.	13,442.	1,184.	1,576
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	PROFESSIONAL SERVICES	340,520.	276,873.	58,344.	5,303
b	TELECOMMUNICATIONS	49,246.	43,076.	2,830.	3,340
C	ALL OTHER	21,226.	15,175.	4,924.	1,127
d	POSTAGE	2,861.	2,239.	532.	90
	All other expenses				<u> </u>
25	Total functional expenses Add lines 1 through 24e	3,558,806.	3,145,376.	257,838.	155,592
	Joint costs. Complete this line only if the organization	· · · · · · · · · · · · · · · · · · ·			
26				II.	
26					
26	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Form 990 (2012)
Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response to any	gues	tion in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,327,659.	1	707,306
	2	Savings and temporary cash investments			· · · · · · · · · · · · · · · · · · ·	2	, , , , , , , , , , , , , , , , , , , ,
	3	Pledges and grants receivable, net			792,000.	3	1,524,000
	4	Accounts receivable, net			37,258.	4	1,524,000 15,614
	5	Loans and other receivables from current and for	rmer (officers directors		<u> </u>	
	•	trustees, key employees, and highest compensation					
:		Part II of Schedule L		p.o,ooo oop.oo	for the same state of the	5	
	6	Loans and other receivables from other disquali	fied pe	ersons (as defined under	,	Ť	
	-	section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect		- · · · · ·	8'		•
		employees' beneficiary organizations (see instr)		` ' '		6	An /
ets	7	Notes and loans receivable, net	O0111F	NOTO T BIT II OF COIT E		7	
Assets	8	Inventories for sale or use				8	
۹.	9	Prepaid expenses and deferred charges			11,720.	9	13,307
	10a	Land, buildings, and equipment cost or other	ı		7 .	Ť	20,00,
		basis. Complete Part VI of Schedule D	10a	732.011.			
	ь	Less: accumulated depreciation	10b	732,011. 602,187.	143,625.	10c	129,824
	11	Investments - publicly traded securities		33-7-33		11	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related See Part IV, line		13	1		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equ	al line :	34)	2,312,262.	16	2,390,051
	17	Accounts payable and accrued expenses	246,922.	17	2,390,051. 273,346.		
	18	Grants payable		18	<u></u>		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities			20		
S	21	Escrow or custodial account liability Complete I	⊃art IV	of Schedule D		21	
Liabilities	22	Loans and other payables to current and former					· · · · · · · · · · · · · · · · · · ·
api		key employees, highest compensated employee					
;;		Complete Part II of Schedule L	•			22	
	23	Secured mortgages and notes payable to unrela	ited th	ird parties		23	
	24	Unsecured notes and loans payable to unrelated	d third	parties		24	
	25	Other liabilities (including federal income tax, pa	yables	to related third			
		parties, and other liabilities not included on lines	17-24). Complete Part X of			
		Schedule D				25	L
	26	Total liabilities. Add lines 17 through 25			246,922.	26	273,346.
		Organizations that follow SFAS 117 (ASC 958), che	ck here ▶ 🐰 and			
es		complete lines 27 through 29, and lines 33 an	d 34.		7		
auc	27	Unrestricted net assets			137,105.	27	34,812.
Bal	28	Temporarily restricted net assets			1,928,235.	28	2,081,893.
D	29	Permanently restricted net assets		,		29	
F.		Organizations that do not follow SFAS 117 (A	SC 95	8), check here 🕨 📖			
o or		and complete lines 30 through 34.					
sets	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come,	or other funds	0.065.343	32	0.465.55
_	33	Total net assets or fund balances			2,065,340.	33	2,116,705.
	34	Total liabilities and net assets/fund balances			2,312,262.	34	2,390,051.
							Form 990 (2012

Form 990 (2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number NATIONAL PEOPLE'S ACTION 36-2755109 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.) 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, 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives: (1) more than 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). 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 **b** Type II c Type III - Functionally integrated d Type III - Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(ı) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (vi) is the ganization in col. (iii) Type of organization (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of monetary in col. (i) listed in your organization in col. (described on lines 1-9 organization (i) organized in the support governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes Yes No No No LHA For Paperwork Reduction Act Notice, see the Instructions for Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012 NATIONAL PEOPLE'S ACTION [Part II] Support Schedule for Organizations Described in Section (Form 990 or 990-EZ) 2012 NATIONAL PEOPLE'S ACTION 36-2755109 Page 2 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)

Se	ction A. Public Support		_				
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants.")	1,245,370.	2,808,731.	3,967,757.	3,089,986.	3,452,794.	14,564,638.
2	Tax revenues levied for the organ-				, ,		
	ızatıon'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	1,245,370.	2,808,731.	3,967,757.	3,089,986.	3,452,794.	14,564,638.
5	The portion of total contributions						
	by each person (other than a			,	-		
	governmental unit or publicly						
	supported organization) included		•		<u>گ</u> ار		
	on line 1 that exceeds 2% of the				<i>(</i> *)		
	amount shown on line 11,						
	column (f)		ļ				7,864,977.
	Public support. Subtract line 5 from line 4						6,699,661.
Se	ction B. Total Support				**************************************		
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	1,245,370.	2,808,731.	3,967,757.	3,089,986.	3,452,794.	14,564,638.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	35,908.	14,164.	4,317.	3,170.	1,398.	58,957.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carned 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						14,623,595.
	Gross receipts from related activities,		•			12	612,966.
13	First five years. If the Form 990 is for		first, second, third	d, fourth, or fifth ta	ix year as a sectio	n 501(c)(3)	
Sec	organization, check this box and stor		rcentage				<u> </u>
14	Public support percentage for 2012 (line 6, column (f) di	vided by line 11, c	olumn (f))		14	45.81 %
	Public support percentage from 2011		-			15	64.29 %
	33 1/3% support test - 2012. If the	· ·	•	line 13, and line	14 is 33 1/3% or n		
	stop here. The organization qualifies	-		,		,	$\triangleright X$
b	33 1/3% support test - 2011. If the		-	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	•
	and stop here. The organization qual	-		-		•	
17a	10% -facts-and-circumstances tes				e 13, 16a, or 16b. a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"		·	•	•	g	
b	10% -facts-and-circumstances tes	=			•	17a, and line 15 is	10% or
	more, and if the organization meets the	_					
	organization meets the "facts-and-circ				•		ightharpoons
18	Private foundation. If the organization			•			s •
				-		dule A (Form 990	

Schedule A (Form 990 or 990 EZ) 2012 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

Sec	ction A. Public Support	lelow, please com	piete Part II.)				
_	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012-	(f) Total
	Gifts, grants, contributions, and	(4) 2000	(5) 2000	(0) 2010	(0) 2011	(6) 2012	(i) rotal
•	membership fees received (Do not						
	include any "unusual grants.")	1				1	<u> </u>
2	Gross receipts from admissions,		-			 	
_	merchandise sold or services per-		}				
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose		İ				
3	Gross receipts from activities that					 	
٠	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-	-				 	
_	ization's benefit and either paid to						
	or expended on its behalf	i					
_	•					 	
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge		 		ļ <u> </u>		
	Total. Add lines 1 through 5						
7 8	Amounts included on lines 1, 2, and						
	3 received from disqualified persons Amounts included on lines 2 and 3 received				<u> </u>	 	
L	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year			-			
	Add lines 7a and 7b	7	, .				
	Public support (Subtract line 7c from line 6) etion B. Total Support	,	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	,	<u> </u>	* * /	
		(-) 2000	#1.0000	() 2040	()) 0044	1 () 00 (0	40 =
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6 Gross income from interest,					 	
IUa	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
D	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975				1		
	,	<u> </u>			_		
	Add lines 10a and 10b Net income from unrelated business						<u> </u>
٠.	activities not included in line 10b,						
	whether or not the business is	į					
40	regularly carried on						
12	Other income Do not include gain or loss from the sale of capital	1					
	assets (Explain in Part IV)					_	
	Total support. (Add lines 9, 10c, 11, and 12)		L		ļ		·
14	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a secti	on 501(c)(3) organız	ation,
~	check this box and stop here	- 0					<u> </u>
	ction C. Computation of Publ					 	
	Public support percentage for 2012 (=	olumn (f))		15	%
	Public support percentage from 2011			·		16	%
	ction D. Computation of Inves	-		10 1 (0)		1.=1	
17	Investment income percentage for 20	•	``	e 13, column (f))		17	
18	Investment income percentage from					[18]	%
19a	33 1/3% support tests - 2012. If the						7 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2011. If the	=				•	and _ r
	line 18 is not more than 33 1/3%, che		•	•		•	
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see in	structions	

232023 12-04-12

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

See separate instructions.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

 Section 501(c)(4), (5), or (6) organiza 	tions Complete Part III			
Name of organization			Emp	loyer identification number
	L PEOPLE'S ACTIO			36-2755109
Part I-A Complete if the or	ganization is exempt und	ler section 501(c	c) or is a section 527 of	organization.
 Provide a description of the organi Political expenditures Volunteer hours 	zation's direct and indirect politic	al campaign activitie	s in Part IV. ▶ s	.
Part I-B Complete if the ord	ganization is exempt und	ler section 501(c	:)(3)	
1 Enter the amount of any excise tax	· · · · · · · · · · · · · · · · · · ·	······································	<i>y</i> ,(<i>o</i>).	
2 Enter the amount of any excise tax	,		55	
3 If the organization incurred a section	, ,			Yes No
4a Was a correction made?	,	•		Yes No
b If "Yes," describe in Part IV				
Part I-C Complete if the or	ganization is exempt und	er section 501(c), except section 501	(c)(3).
1 Enter the amount directly expende	d by the filing organization for se	ction 527 exempt fun	oction activities	\$
2 Enter the amount of the filing organ	nization's funds contributed to ot	her organizations for	section 527	
exempt function activities			▶ 9	.
3 Total exempt function expenditure	s Add lines 1 and 2 Enter here a	and on Form 1120-PC		
line 17b			▶ 9	
4 Did the filing organization file Form	1120-POL for this year?			L Yes L No
5 Enter the names, addresses and enter made payments. For each organization contributions received that were propolitical action committee (PAC). If	ation listed, enter the amount pai romptly and directly delivered to	d from the filing orgar a separate political oi	nization's funds Also enter t rganization, such as a separa	he amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2012

LHA

01-07-13

Schedule C (Form 990 or 990-EZ) 2012	NATIONAL	PEOPLE'S ACTI	ON	36-2	755109 Page 2				
Part II-A Complete if the org	ganization is e	exempt under section	on 501(c)(3) and fi	led Form 5768					
(election under sec	ction 501(h)).			<u> </u>					
		n affiliated group (and list i	n Part IV each affiliated	group member's nam	e, address, EIN,				
expenses, and sha	•	• • •							
B Check ► ☐ If the filing organiza	ation checked box	A and "limited control" pr	ovisions apply.						
Lim	its on Lobbying E	xpenditures		(a) Filing organization's	(b) Affiliated group totals				
(The term "expen	ditures" means a	mounts paid or incurred	.)	totals	totals				
1a Total lobbying expenditures to infl	luence public opin	on (grass roots lobbying)		35,359.					
b Total lobbying expenditures to infl	• •			1,900.					
c Total lobbying expenditures (add l	•	, (,9,		37,259.					
d Other exempt purpose expenditur	•			3,521,547.					
e Total exempt purpose expenditure		3,558,806.	-						
f Lobbying nontaxable amount Ent	th columns	327,940.							
If the amount on line 1e, column (a)	or (b) is: The	lobbying nontaxable am	ount is:	*	>				
Not over \$500,000	20%	6 of the amount on line 1e							
Over \$500,000 but not over \$1,00	cess over \$500,000.	-2 -							
Over \$1,000,000 but not over \$1,5	· · ·								
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.									
Over \$17,000,000	\$1,0	000,000							
				01 005					
g Grassroots nontaxable amount (er				81,985.					
h Subtract line 1g from line 1a. If zei	•			0.					
i Subtract line 1f from line 1c. If zero	· ·			<u> </u>					
j If there is an amount other than ze		n or line 11, did the organiz	ation file Form 4/20	٦	¬v ¬v				
reporting section 4911 tax for this		Averaging Period Under	Section 501(h)	<u> </u>	Yes No				
(Some organiz		a section 501(h) election	, ,	plete all of the five					
· · · · · · · · · · · · · · · · · · ·		e the instructions for line	· ·						
	Lobbying E	xpenditures During 4-Ye	ar Averaging Period						
Calendar year	(=) 2000	(h) 2010	(=) 0011	(4) 0010	(-) T-4-1				
(or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total				
									
2a Lobbying nontaxable amount	265,80	6. 313,154.	326,520.	327,940.	1,233,420.				
b Lobbying ceiling amount									
(150% of line 2a, column(e))					1,850,130.				
		0 0011	0 000	35 353	F / 000				
c Total lobbying expenditures	5,85	0. 2,914.	8,809.	37,259.	54,832.				
d Grassroots nontaxable amount	66,45	2. 78,289.	81,630.	81,985.	308,356.				
e Grassroots ceiling amount		,		,					
(150% of line 2d, column (e))					462,534.				
			4 0 5 5	0.5.0.5.					
f Grassroots lobbying expenditures	2,08	7. 229.	1,368.	35,359.	39,043.				

1,368. 35,359. 39,043. Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 NATIONAL PEOPLE'S ACTION 36-2755109 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	1 (a)	(t	b)
	e lobbying activity.	Yes	No		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:				
а	Volunteers?		Ì	İ	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?	<u> </u>	<u> </u>		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
-	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
i	Total. Add lines 1c through 1i				
, 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				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	ction	
	(-)(-)			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over 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) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."		R (b) Par		ne 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures).	icai			
_	expenses for which the section 527(f) tax was paid).		0-		
	Current year		2a		·
	Carryover from last year		2b		
_	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
_	expenditure next year?		4	-	
Par	Taxable amount of lobbying and political expenditures (see instructions)		5		
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, F	art II-A (affili	ated group	list); Part II	-A, line 2,
and I	Part II-B, line 1 Also, complete this part for any additional information				
					
					
					

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	NATIONAL PEOPLE'S ACTION	36-2755109
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts.Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	-
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fu	nds
	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
•	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confe	•
	impermissible private benefit?	Yes No
Pai		
1	Purpose(s) of conservation easements held by the organization (check all that apply)	, inte /
•		ally a series and a series at a series at
	Preservation of land for public use (e.g., recreation or education)	
	Protection of natural habitat Preservation of a certified h	nistoric structure
_	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution in the form of a conservation contribution contribution in the form of a conservation contribution conservation easement on the last	
	day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the orga	nization during the tax
	year >	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
_	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the y	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(··· — —
_	and section 170(h)(4)(B)(ii)?	└── Yes
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization assessments.	rganization's accounting for
Par	conservation easements. † III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets
1 4	Complete if the organization answered "Yes" to Form 990, Part IV, line 8	Olifiliai Assets.
Ia	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a historical treasures, or other similar assets held for public exhibition, education, or research in furtherance or	
		i public service, provide, in Part XIII,
.	the text of the footnote to its financial statements that describes these items	hatana ahan da da da da da da da da da da da da da
D	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and it	,
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public se	ervice, provide the following amounts
	relating to these items	
	(i) Revenues included in Form 990, Part VIII, line 1	► \$ ► \$
_	(ii) Assets included in Form 990, Part X	> \$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain,	, provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
a	Revenues included in Form 990, Part VIII, line 1	► \$ ► \$
þ	Assets included in Form 990, Part X	> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

Sche	dule D (Form 990) 2012 NATIONA	L PEOPLE'S	ACT	ION				36-27	755109	Page 2
Pai	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures,	or Othe	er Simil	ar Asse	e ts (contin	ued)
3	Using the organization's acquisition, access	on, and other record	ds, chec	k any of the	following the	at are a s	ignificant	use of its	collection	items
	(check all that apply).									
а	Public exhibition	C	ı 🗀	Loan or exc	hange progr	ams				
b	Scholarly research	•	, 🗀	Other						
С	Preservation for future generations							•	_	
4	Provide a description of the organization's co	ollections and expla	ın how tl	hev further t	he organizat	ion's exe	mpt purpa	ose in Pa	rt XIII.	
5	During the year, did the organization solicit of	•		•	-					
	to be sold to raise funds rather than to be m								Yes	☐ No
Pai	t IV Escrow and Custodial Arran					"Yes" to	Form 990	, Part IV.		
	reported an amount on Form 990, Pa			J						
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	ns or other as	sets not	ıncluded			
	on Form 990, Part X?		,						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table:						
-		and complete and it	,				Γ Ι		Amount	
С	Beginning balance						1c		Amount	
d	Additions during the year						1d			
	Distributions during the year						1e			
•	Ending balance						1f			
20	-	orm 000 Part V line	212				[11]		Yes	No
	Did the organization include an amount on F If "Yes," explain the arrangement in Part XIII			an haa haan	arounded in	Dest VIII		<u> </u>	⊔ ves	⊢ No
Par							0	_		
		(a) Current year			(c) Two yea		(d) Three y	eare hack	(a) Four	years back
10	Beginning of year balance	(a) Current year	(6) [Prior year	(C) TWO YEA	13 Dack	(u) Thice y	cars back	(e) i oui	years back
1a b	Contributions	· · · · · · · · · · · · · · · · · · ·	 							
_	Net investment earnings, gains, and losses				 			<u> </u>	 	
G									 	
d	Grants or scholarships		 						1	
C	Other expenditures for facilities		İ							
	and programs		 							
'	Administrative expenses		 		 				 	
g	End of year balance		// 1		\\				.L	
2	Provide the estimated percentage of the cur	rent year end balant	•	g, column (a	a)) neid as:					
a	Board designated or quasi-endowment ▶ Permanent endowment ▶	%	_%							
b	Temporarily restricted endowment									
С	· · · · ·	%								
2-	The percentages in lines 2a, 2b, and 2c should be there and autment funds not in the peace.	•					h			
Sa	Are there endowment funds not in the posse	ssion of the organiz	auon m	at are neio a	ina auministe	erea for ti	ne organiz	zation	Г	Vaa Na
	by (i) uprelated organizations								_	Yes No
	(i) unrelated organizations(ii) related organizations								3a(ı)	
L		a linkad on roominad a	an Caba	dula DO					3a(II)	
4	If "Yes" to 3a(ii), are the related organizations. Describe in Part XIII the intended uses of the	•							3b	
_	t VI Land, Buildings, and Equipm									
1 41	Description of property				or other	(=) ()			(d) Doole	
	Description of property	(a) Cost or o			or other (other)		ccumulate preciation	ea	(d) Book	value
	Land	Dasis (investi	- Inerity	1	5,000.	aet	Jieciation		65	,000.
	Land				0,000.		60,0	00	0.5	0.
b	Buildings				1,933.		325,5		3.6	,414.
ت ب	Leasehold improvements				5,668.		L60,8			,817.
d	Equipment Other				9,410.		55,8			,593.
	. Add lines 1a through 1e. (Column (d) must e	gual Form 900 Part	X colu	•			55,0.	<u> </u>		,824.
	The most real and a second for the second se	un	, 50101	<u>, , , , , , , , , , , , , , , , , ,</u>	-12//					,

Schedule D (Form 990) 2012

232053 12-10-12

Schedule D (Form 990) 2012

Employer identification number 36-2755109 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any EE ATTACHED 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (d) Amount of cash grant 967,316, (c) IRC section if applicable NATIONAL PEOPLE'S ACTION General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government SEE ATTACHED STATEMENT Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part I Part II

ê [

3

A		able	3 Enter total number of other organizations listed in the line 1 table HA For Panarwork Reduction Act Notice see the Instructions for Form 900	3 Enter total number of other organizations listed in the line 1 table	3 Enter
•		2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(c)(3) and government orgar	r total number of section 501	2 Enter
		;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;			

28

36-2755109

Page 2

Schedule I (Form 990) (2012) NATIONAL PEOPLE'S ACTION

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

			n (b), and any other additional information	TIAL	SPECIFIC CRITERIA	ALS AGAINST	DECISIONS ARE MADE TO	SENT TO	A SIGNED	E DISBURSED.	STIPULATIONS IN		Schedule I (Form 990) (2012
			required in Part I, line 2, Part III, colun	SOLICITED FROM POTENTIAL	ORGANIZATION CREATES SPECIF	ION EVALUATES PROPOSALS	EXEMPT STATUS). DECISIONS	AND CONTRACT IS	THE CONTRACT. WHEN A	RM, GRANT DOLLARS ARE	ACCORDANCE WITH STIF		29
			ide the information	LS ARE	~	ORGANIZATION	- 1	AWARD LETTER	SUBMIT	THE W-9 FORM,	NI		
			Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information	SCHEDULE I, PART I, LINE 2: PROPOSA	SUB-GRANTEES. FOR EACH GRANT, THE	THAT DETERMINES REGRANTING. THE	THE SET CRITERIA (THIS INCLUDES TAX	WHOM REGRANTS WILL BE MADE. AN AV	SUBGRANTEES. SUBGRANTEES SIGN AND	CONTRACT IS RECEIVED ALONG WITH TH	REPORTS ARE SUBMITTED FROM SUBGRANTEES	THE SIGNED CONTRACT.	232102 12-18-12

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

NATIONAL PEOPLE'S ACTION

Employer identification number 36-2755109

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: NATIONAL PEOPLE'S ACTION IS A NATIONAL ORGANIZING, POLICY, RESEARCH, AND TRAINING CENTER FOR GRASSROOTS ORGANIZATIONS. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: IT'S CORE PURPOSE IS TO CREATE A SOCIETY IN WHICH RACIAL AND ECONOMIC JUSTICE ARE REALIZED IN ALL ASPECTS OF SOCIETY, RESULTING IN MORE EQUITY IN WORK, HOUSING, HEALTH, EDUCATION, FINANCE, AND OTHER SYSTEMS CENTRAL TO OUR WELL-BEING. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: COMMUNICATIONS EXPENSES \$ 169,972. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. HOUSING JUSTICE EXPENSES \$ 733. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. IMMIGRANT AND WORKERS JUSTICE EXPENSES \$ 110,212. INCLUDING GRANTS OF \$ REVENUE \$ 0. 0. DIRECT LOBBYING EXPENSES \$ 1,900. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. INDIRECT LOBBYING EXPENSES \$ 35,359. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

Schedule O (Form 990 or 990-EZ) (2012)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 01-04-13

Schedule O (Form 990 or 990-EZ) (2012) Page 2 Employer identification number Name of the organization NATIONAL PEOPLE'S ACTION 36-2755109 CONSULTING EXPENSES \$ 296,556. INCLUDING GRANTS OF \$ 210,000. REVENUE \$ 1,903. RACIAL JUSTICE EXPENSES \$ 155,095. INCLUDING GRANTS OF \$ 0. REVENUE \$ 675. POLICY EXPENSES \$ 63,524. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. REVENUE EXPENSES \$ 1,879. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 WAS PREPARED BY AN OUTSIDE ACCOUNTANT AND WAS REVIEWED BY THE EXECUTIVE DIRECTOR AND FINANCIAL DIRECTOR. THE FORM 990 WAS THEN PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW BEFORE FILING. FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REQUIRES BOARD MEMBERS REMIT ANNUAL CONFLICT OF INTEREST CONFIRMATIONS DISCLOSING ANY POTENTIAL INTEREST THAT COULD GIVE RISE TO CONFLICT. FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE DIRECTOR RECEIVES AN ANNUAL PERFORMANCE REVIEW LED BY THE PERSONNEL COMMITTEE OF THE BOARD OF THE PROCESS INCLUDES INTERVIEWS WITH MEMBERS OF THE BOARD OF DIRECTORS. DIRECTORS, MEMBERS OF THE STAFF TEAM, AND OTHER AFFILIATES AND PARTNERS OF THE ORGANIZATION. THE EXECUTIVE DIRECTOR ALSO ENGAGES IN A SELF-EVALUATION

THAT COMPARES ACTUAL PERFORMANCE AGAINST THE JOB DESCRIPTION AND STRATEGIC

232212 01-04-13

PLAN OF THE ORGANIZATION.

ALL OTHER EMPLOYEES UNDERGO AN ANNUAL EVALUATION

Schedule O (Form 990 or 990-EZ) (2012)

•Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization NATIONAL PEOPLE'S ACTION	Employer identification number 36-2755109
THAT INCLUDES A SELF-ASSESSMENT AND A REVIEW LED BY THEIR	DIRECT
SUPERVISOR. EACH STAFF ALSO HAS A SIX MONTH EVALUATION C	HECK-IN WITH THEIR
DIRECT SUPERVISOR.	
FORM 990, PART VI, SECTION C, LINE 19: FINANCIAL STATEMEN	TS ARE AVAILABLE
UPON REQUEST.	
FORM 990, PART XII, LINE 2C, FINANCIAL STATEMENT AND REPO	RTING:
THE ORGANIZATION HAS NOT CHANGED EITHER ITS OVERSIGHT PRO	CESS OR
SELECTION PROCESS DURING THE CURRENT YEAR.	
	
	· · · · · · · · · · · · · · · · · · ·
	
·	

National People's Action

_ / \$. Q* ◆

36-2755109

Form 990, Schedule I, Part II, Line 1

Grants and Other Assistance to Governments and Organizations in the United States

Name	EIN	Address	Status Amount	Amo	Į
A Just Harvest	36-4381962	36-4381962 P.O. Box 608033, Chicago, IL 60626	501c3	\$	1,470
Alliance for a Just Society	91-1635554	91-1635554 3518 S. Edmunds St., Seattle, WA 98118-1727	501c3	\$	374,319
Alliance to Develop Power	04-3098406	04-3098406 130 Union Street, Springfield, MA 01105	501c3	\$	17,500
Birmingham Faith in Action	20-1667945	20-1667945 2100 4th Avenue, North Birmingham, AL 35203	501c3	\$	12,500
Central Illinois Organizing Project/Illinois Peopl'e Action	37-1371446	37-1371446 510 E. Washington St, Ste 309, Bloomington, IL 61701	501c3	\$	15,441
Center for Community Change	52-0888113	52-0888113 1536 U Street NW, Washington, DC 20009	501c3	\$	5,000
Community Creating Opportunity	43-1127845	43-1127845 5814 Euclid Ave., Kansas City, MO 64130	501c3	\$	35,000
Community Voices Heard	13-3901997	13-3901997 115 East 106th St., 3rd Fl, New York, NY 10029	501c3	\$	25,441
Community United for Action	31-1429740	31-1429740 1814 Dreman, Cincinnati, OH 45223	501c3	\$	4,441
Fuerza Laboral	20-5428607	20-5428607 P.O. Box 202, 127 Clay Street, Central Falls, RI 02863	501c3	ş	10,000
Good Old Lower East Side	13-2915659	13-2915659 169 Avenue B, New York, NY 10009	501c3	ν	5,441
GRO - Grass Roots Organizing	43-1907795	43-1907795 304 E. Breckenridge, Mexico, MO 65265	501c3	\$	37,941
Idaho Community Action	82-0357348	82-0357348 3450 Hill Road, Boise, ID 83703	501c3	\$	20,000
lowa Citizens for Community Improvement	42-1110721	42-1110721 2001 Forest Avenue, Des Moines, IA 50311	501c3	\$	55,441
Jobs with Justice Education Fund	52-1865575	52-1865575 1616 P St., NW STE 150, Washington, DC 20036	501c3	\$	19,500
Lakeview Action Coalition	36-3804319	36-3804319 3225 N. Sheffield, Chicago, IL 60657	501c3	\$	42,971
Maine People's Alliance	01-0383494	01-0383494 145 Lisbon St. Suite 200, Lewiston, ME 04240	501c3	\$	20,000
Maine People's Resource Center	22-2586108	22-2586108 565 Congress St., Suite 200, Portland, ME 04101	501c3	\$	5,441
Mary Mitchell Family and Youth, Inc.	13-3385032	13-3385032 2007 Mapes Ave., Bronx, NY 10460	501c3	\$	2,941
Mahoning Valley Organizing Collaborative	26-2142466	26-2142466 201 E. Commerce St, Ste 137, Youngston, OH 44503	501c3	\$	2,500
Michigan Organizing Project	38-3058190	38-3058190 930 Lake Street, Kalamazoo, MI 49001	501c3	\$	17,941
Northwest Bronx Community & Clergy Coalition	13-2806160	13-2806160 103 East 196th Street, Bronx, NY 10468	501c3	s	2,500
Northwest Indiana Federation of Interfaith Organizations, Inc.	35-2041877	35-2041877 5246 Hohman Avenue, Hammond, IN 46320	501c3	\$	10,000
Ohio Organizing Collarborative	26-1601472	26-1601472 201 E. Commerce St, Ste 137, Youngston, OH 44503	501c3	\$	10,000
People Organized for Westside Renewal	65-1208274	65-1208274 235 Hill Street, Santa Monica, CA 90405	501c3	\$	4,941
PICO National Network	94-2206497	94-2206497 171 Santa Rose Avenue, Oakland, CA 94610	501c3	\$	15,000
Push Buffalo	20-3558447	20-3558447 271 Grant Street, Buffalo, NY 14213	501c3	\$	5,441
Southsiders Organized for Unity & Liberation	36-4174590	36-4174590 6400 S. Kimbark, Chicago, IL 60637	501c3	\$	50,941
Sunflower Community Action	48-1126805	48-1126805 15280 N. Broadway, Suite 103, Wichita, KS 67214	501c3	\$	35,441
Syracuse United Neighbors	51-0244102	51-0244102 1504 S. Salina Street, Syracuse, NY 13205	501c3	\$	2,941
Take Action Minnesota Education Fund	41-1635130	41-1635130 1821 University Avenue West, Saint Paul, MN 55104	501c3	\$	26,941
The Seed House/La Casa De La Semilla, Inc.	45-3090036	45-3090036 1440 Park Place, Wichita, KS 67203	501c3	\$	10,000
The Amos Project	31-1222998	31-1222998 3060 Durrell St., Cincinnati, OH 45207	501c3	\$	12,500
Vocal New York	13-4094385	13-4094385 80-A Fourth Avenue, Brooklyn, NY 11217	501c3	\$	39,441
Voces de la Frontera	39-2010107	39-2010107 1027 S. 5th St., Milwaukee, WI 53204	501c3	\$	10,000

Form 88€	68 (Rev. 1·2013)					Page 2
	are filing for an Additional (Not Automatic) 3-Month Ex	ctension,	complete only Part II and check this	box		► X
	ly complete Part II if you have already been granted an				8868	•
	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I (on page 1)			
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies nee	ded).
						see instructions
Type or	Name of exempt organization or other filer, see instru	ictions				on number (EIN) or
print				, ,		, ,
File by the	NATIONAL PEOPLE'S ACTION				36-27	55109
due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	curity numb	er (SSN)
filing your return See	810 NORTH MILWAUKEE AVENUE					(,
instructions	City, town or post office, state, and ZIP code. For a fe	oreign add	dress, see instructions			
	CHICAGO, IL 60642-4103	J	,			
	<u> </u>	*				
Enter the	Return code for the return that this application is for (file	e a senara	te application for each return)			01
2,110, 1.10	The tall the application to the terms of the	c a sopaio	to application for each retain,			الشالثا
Applicati	On	Return	Application	-		Return
Is For		Code	Is For			
_	or Form 990-EZ	01	131 07			Code
Form 990		02	Form 1041-A			
	0 (individual)	03	Form 4720			08
Form 990		03	Form 5227			09
		05	Form 6069			10
	-T (sec 401(a) or 408(a) trust)	06			 -	11
	T (trust other than above)		Form 8870			12
310P: DC	o not complete Part II if you were not already granted MARINA SELIKHON		natic 3-month extension on a prev	iousiy file	ed Form 880	58.
• The be	ooks are in the care of ► 810 N. MILWAUKI		PMIR - CHTCACO TI	6061	2	
Talant	sone No \triangleright 312-676-2812	E AV.		0004		
		Al 11	FAX No			
	organization does not have an office or place of business					P
- 1	s for a Group Return, enter the organization's four digit					
box L	☐ If it is for part of the group, check this box ▶	and atta	BER 15, 2013	all memb	ers the exte	nsion is for
		NO A PINI				
	calendar year 2012, or other tax year beginning		, and ending		<u> </u>	·
6 If th	ne tax year entered in line 5 is for less than 12 months, c	neck reas	on L Initial return L	⊥ Fınalı	eturn	
-	Change in accounting period					
	te in detail why you need the extension DITIONAL TIME IS NEEDED IN (ORDER	TO GATHER THE INFO	7DM7	TONT NITE	CESSARY
	PREPARE A COMPLETE AND ACCU			JKMAT	TON NE	CESSARI
10	FREFARE A COMPUEIE AND ACC	JKAIE	KEIUKN.			
0- 1645						
	as application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any			0
_	refundable credits. See instructions.			8a	\$	0.
	is application is for Form 990-PF, 990-T, 4720, or 6069,	•		i		
	payments made Include any prior year overpayment all	lowed as a	a credit and any amount paid			•
	eviously with Form 8868.			8b	\$	<u> </u>
	ance due. Subtract line 8b from line 8a Include your pa		h this form, if required, by using			•
EFT	PS (Electronic Federal Tax Payment System) See instru			8c	\$	0.
			st be completed for Part II o	-		
Under pena	alties of perjury, I declare that I have examined this form, includi prrect, and complete, and that I am authorized to prepare this fo	ing accomp	anying schedules and statements, and to	the best o	f my knowled	ge and belief,
•			TILL DIDECTOR			
Signature		EXECU'	TIVE DIRECTOR	Date	<u> </u>	
					Form 8	868 (Rev 1-2013)