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OMB No 1545 0047

Department of the Treasury

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990.

A	For the 2	013 calen	dar year, or tax year beginning , 2013, and ending		-4 V2	ALBERT CREATER IN TAIL				
В	Check if app		C	-	Employer Ident	ification Number				
		s change	CALL TO ACTION		36-3003	308				
	Name of	-	2135 W. ROSCOE STREET 1N	E	Telephone num					
	Initial r	-	CHICAGO, IL 60618	773-404-4004						
	Termin	ated			7.0 101					
	H	ed return		ا	Gross receipts	\$ 1,137,000.				
	\vdash	ition pending	F Name and address of principal officer JIM FITZGERALD		roup return for sut					
		o poog	0211 11100014100	H(b) Are all sul	oordinates include	d? Yes No				
$\overline{}$	Tax-exem	not status	X 501(c)(3) 501(c) () ✓ (insert no) 4947(a)(1) or 527	If 'No,' att	ach a list (see ins	structions)				
j	Websit	```		H(c) Group exe	mption number	•				
ĸ		rganization	X Corporation Trust Association Other ► L Year of formatio	· · · · ·		legal domicile IL				
D		Summar		13/3	III otate or	egar derinene II				
VE.C				TON FOI	<u> </u>	NSPIRES AND				
٠.	ا ء د	-	S CATHOLICS TO ACT FOR JUSTICE AND BUILD INCLU							
Governance	LE		ANTI-RACISM AND ANTI-OPPRESSION PRINCIPLES.	21.0		2 111100011 11				
Ē										
ove	2 Ch	eck this bo		re than 25%	of its net as	sets				
9	3 Nui		oting members of the governing body (Part VI, line 1a)		3	14				
S	4 Nu		dependent voting members of the governing body (Part VI, line 1b)		4	13				
Ĕ	5 Tot		r of individuals employed in calendar year 2013 (Part V, line 2a) r of volunteers (estimate if necessary)		5	13				
Activities &	7a Tot		ed business revenue from Part VIII, column (C), line 12		7 a	50				
•	1		business taxable income from Form 990-T, line 34		7 b	0.				
_				Pric	or Year	Current Year				
_	8 Coi	ntributions	and grants (Part VIII, line 1h)		782,598.	841,527.				
Revenue	9 Pro	gram serv	vice revenue (Part VIII, line 2g)		283,040.	276,859.				
e ve	10 Inv	estment ır	ncome (Part VIII, column (A), lines 3, 4, and 7d)		10,893.	16,791.				
ď			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		12,397.	1,823.				
_			e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,	088,928.	1,137,000.				
	1		imilar amounts paid (Part IX, column (A), lines 1-3)		4,809.	2,407.				
			to or for members (Part IX, column (A), line 4)							
ø	15 Sal		er compensation, employee benefits (Part IX, column (A), lines 5-10)		448,288.	470,589.				
ans.	16a Pro		fundraising fees (Part IX, column (A), line 11e)	5.60 2.57		Constitution of the second				
Expenses	b Tot		sing expenses (Part IX, column (D), line 25) ► 204,551.		" Land	Service Control				
	17 Otr	· ·	ses (Part IX, column (A), lines 11a-11d, 11f-24e)		584,777.	654,735.				
			es. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,	037,874.	1,127,731.				
1		X 2 X X	Examples Subtract line 18 from line 12		51,054.	9,269.				
100		1150			of Current Year	End of Year				
8 6	20 Tot	al assets	(Part X, line 16%)		003,445.	1,035,427.				
Net Assets of	21 8		& Bait XI 4 Ine 2001		265,587.	249,268.				
- 4	1 1 1		r fund balances Subtract line 21 from line 20		737,858.	786,159.				
187			eBlock							
Und	ler pena <u>lties (</u> iplete Declar	of perjury, Ld. ation of prepa	aclare that that the examined this return, including accompanying schedules and statements, and to the other than office on its based on all information of which preparer has any knowledge	he best of my k	nowledge and bel	ief, it is true, correct, and				
_		\overline{L}	J. J. H. J.	\	Ulsa	1,4				
Si	an	Signati	re proficer 3	Date	1/-	/ 1				
He	ere	.TTM	FITZGERALD	EXECUT	IVE DIRE	CTOR				
			print name and title		TVL DITE	01011				
	<u> </u>	Print/Type (preparer's name Preparer's signature Date	C	neck If	PTIN				
Pa	id	JOSEPI	H KNUTTE, CPA DOZIOHOKUULTUJ 4/21/	14 se	elf-employed	P01317776				
	eparer	Firm's name			-	· · · · · · · · · · · · · · · · · · ·				
	e Only	Firm's addr		Fi	rm's EIN ► 36	-3459708				
	-		DARIEN, IL 605615066		hone no (63					
Ma	y the IRS	discuss th	nis return with the preparer shown above? (see instructions)		,,,,	X Yes No				
_				A0113L 11/09	_	Form 990 (2013) I				

Form 990 (2013) CALL TO ACTION	36-30033	80	Page 2
Partill Statement of Program Service Accomplishments			
Check if Schedule O contains a response or note to any line in this Part III			X
Briefly describe the organization's mission			
ORGANIZATION EDUCATES, INSPIRES AND ACTIVATES CATHOLICS TO ACT			
INCLUSIVE COMMUNITIES THROUGH A LENS OF ANTI-RACISM AND ANTI-OP	PRESSION PR	INCIPL	<u>ES</u>
			-
2 Did the organization undertake any significant program services during the year which were not listed on the	orior		-
Form 990 or 990-EZ?		Yes	∐ No
If 'Yes,' describe these new services on Schedule O		5	
3 Did the organization cease conducting, or make significant changes in how it conducts, any program	services?	Yes [∐ No
If 'Yes,' describe these changes on Schedule O			
4 Describe the organization's program service accomplishments for each of its three largest program services Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount others, the total expenses, and revenue, if any, for each program service reported	ervices, as measur of grants and alloc	ed by expations to	enses
4a (Code) (Expenses \$ 377,814. including grants of \$)	(Revenue \$	284,	738.)
EDUCATION, GENERAL/OTHER, NATIONAL CONFERENCE ANNUAL CONFERENCE	WITH SPEAK	ERS,	
WORKSHOPS AND LITURGY DESIGNED TO BRING THE THINKING OF CONTEMP	ORARY THEOL	OGY TO	
GRASS ROOTS CATHOLICS, SALES OF AUDIO AND VIDEO RECORDINGS FEAT	URING SPEEC	HES AN	D
WORKSHOP DISCUSSIONS FROM THE NATIONAL CONFERENCE.			
4b (Code) (Expenses \$ 167, 370. including grants of \$)	(Revenue \$	25,	854.)
EDUCATION, GENERAL/OTHER CHURCH REFORM ORGANIZING FOR CATHOLIC	INSTITUTION	AL REF	ORM
BY SHARING INFORMATION ON PRIESTHOOD AND LAY WOMENS ROLES IN TH	E CHURCH AN	D BY	
NETWORKING WITH OTHER ORGANIZATIONS.			
4c (Code) (Expenses \$ 132,114. including grants of \$)	(Revenue \$)
EDUCATION, GENERAL/OTHER PUBLICATIONS THREE QUARTERLY PUBLICATI	ONS THAT 1)	REPOR	T THE
ACTIVITIES OF THE ORGANIZATION AND EXAMINE ISSUES RELATED TO CA	THOLIC TEAC	HING 2	-
REPORT ON ISSUES RELATED TO CHURCH REFORM, AND 3) REPRINT AN ED			
SPEECH.			
4 d Other program services (Describe in Schedule O) SEE SCHEDULE O			
(Expenses \$ 182,181. including grants of \$) (Revenue	\$ 14.	145.)	
4e Total program service expenses ► 859, 479.			

Form 990 (2013) CALL TO ACTION Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
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 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	11 a	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 assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		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	11 c		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	11 d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		Х
15	Did the organization report on Part IX, column (A), line 3, more than $5,000$ of grants or other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? 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 (see instructions)	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	20		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

		-3003308	P	age 4
Po	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government 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 or other assistance to individuals in the United States IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	on Part		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's curre and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	ent 23		Х
24	a 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 25a	d 24a		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c 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		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction w disqualified person during the year? If 'Yes,' complete Schedule L, Part I	vith a 25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, ar 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	nd 25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons if so, complete Schedule L, Part II	26		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		Х
	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		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conscontributions? If 'Yes,' complete Schedule M	servation 30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, P.	art I 31		Х
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		Х
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		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, and V, line 1	IV, 34		х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a contro entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	lled 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	i 36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	t is 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 BAA

Х Form **990** (2013)

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Form 990 (2013) CALL TO ACTION	36-3003308	Page 5
Party Statements Regarding Other IRS Filings and Tax Compliance		
` Check if Schedule O contains a response or note to any line in this Part V		
		Yes No
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	33	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	*.
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable (gambling) winnings to prize winners?	gaming 1 c	X
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	13	
b If at least one is reported on line 2a, did the organization file all required federal employment tax retu		Х
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	5)	2
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b	
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority financial account in a foreign country (such as a bank account, securities account, or other financial a	y over, a account)?	Х
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 A	Accounts	
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction? 5b	Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c	
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the solicit any contributions that were not tax deductible as charitable contributions?	e organization 6 a	Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gift not tax deductible?	 	
7 Organizations that may receive deductible contributions under section 170(c).		
	e a de la cond	l de la desta
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g services provided to the payor?	goods and 7a	Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was require		
Form 82827	7 c	X
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract? 7 e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act? 7f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza Form 1098-C?	ation file a	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organisation, or a donor advised fund maintained by a sponsoring organization, have exceed holdings at any time during the year?	izations. Did the ss business	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?	9 a	
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b	
10 Section 501(c)(7) organizations. Enter		
a Initiation fees and capital contributions included on Part VIII, line 12		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	* · · · · · · · · · · · · · · · · · · ·	
11 Section 501(c)(12) organizations. Enter		
a Gross income from members or shareholders	į,	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	041? 12 a	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b		
13 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		
c Enter the amount of reserves on hand		

14a Did the organization receive any payments for indoor tanning services during the tax year?

14a

Form 990 (2013) CALL TO ACTION 36-3003308 Page 6 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 or note to any line in this Part VI X Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members 1 a 14 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 13 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Х 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a members of the governing body? **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8 a X b Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the

organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O							
Section B. Policies (This Section B requests information about policies not required by the Internal Re	venu						
		Yes	No				
10 a Did the organization have local chapters, branches, or affiliates?	10 a		Х				
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?	10 b						
11 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 SEE SCHEDULE O							
12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	X					
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х					
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	х					
13 Did the organization have a written whistleblower policy?	13	Х					
14 Did the organization have a written document retention and destruction policy?	14	Х					
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,		-				
a The organization's CEO, Executive Director, or top management official SEE SCHEDULE Q	15 a	Х					
b Other officers of key employees of the organization	15 b		Х				
If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)			_				
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		X				
, ,	10 a		Λ				
b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			!				
organization's exempt status with respect to such arrangements?	16 b						
Section C. Disclosure							

17 List the states with which a copy of this Form 990 is required to be filed ▶ IL

Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply

|X| Another's website X Upon request Own website Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year SEE SCHEDULE O

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

2135 W ROSCOE STREET UNIT 1N _CHICAGO IL

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1 a 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 nor any related organization compensated any current officer, director, or trustee												
				(C	;)				-			
(A) Name and Title	(B) Average hours per week (list	one bo	x. un	less p d a d	oerso	more to n is both or/trustee	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation		
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 2/1099 MISC)	(W-2/1099 MISC)	from the organization and related organizations		
(1) DEBRA NELL BRITTENUM	3											
CO-PRESIDENT	0	Х		X				0.	0.	0.		
(2) DELFIN BAUTISTA	3											
BOARD MEMBER	0	Х						0.	0.	0.		
(3) ROBERT FUNARO	3											
BOARD MEMBER	0	Х						0.	0.	0.		
(4) TAMAR BYCZEK-YAGER	3											
VICE PRESIDENT	0	Х		Х				0.	0.	0.		
(5) ALTA JACKO	3											
BOARD MEMBER	0	Х						0.	0.	0.		
(6) BARBARA ZEMAN	3	1										
BOARD MEMBER	0	X						0.	0.	0.		
(7) DAVID SAAVEDRA	3											
CO-PRESIDENT	0	Х		X				0.	0.	0.		
(8) CARLY CALLSEN	3]										
BOARD MEMBER	0	Х						0.	0.	0.		
(9) KATE WARD	3	[
BOARD MEMBER	0	X						0.	0.	0.		
(10) KATE CHILDS GRAHAM	3]										
BOARD MEMBER	0	X					L	0.	0.	0.		
(11) ROSA MANRIQUEZ	3	1										
BOARD MEMBER	0	X						0.	0.	0.		
(12) TOM O'BRIEN	3											
BOARD MEMBER	0	X						0.	0.	0.		
(13) ALFRED DABROWSKI	3_	1	ļ									
SECRETARY/TREAS	0	X		X				0.	0.	0.		
(14) JIM FITZGERALD	_ 28 _	1			1							
EXECUTIVE DIREC	0_	L	X	Х				65,083.	0.	0.		

Part VIII Section A. Officers, Directors, Trus		(ey	Em			es, a	anc	Highest Com	pensated Emp	loyees (continued)
•		B) (C) Position								
(A) Name and title	Average hours per	age (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week Land and an area				For	the organization (W 2/1099-MISC)	related organizations (W-2/1099 MISC)	compensation from the		
	hours for related	Individual trustee or director	nstitutional trustee	Officer	Key employee	hest ploye	mer			organization and related
	organiza tions	\$ 50 E	mai		ş	e comp				organizations
	dotted	stee	逐		ő	ens		:		
	line)		8			red.				
(15)										
(16)										_
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total	!				_	<u></u>	•	65,083.	0.	0.
c Total from continuation sheets to Part VII, Sectio	n A						>	0.	0.	0.
d Total (add lines 1b and 1c)	., .						<u> </u>	65,083.	0.	0.
2 Total number of individuals (including but not limited to from the organization ► 0	o those I	ısted	abo	ve) v	who	recei	ved	more than \$100,00	U of reportable com	
										Yes No
3 Did the organization list any former officer, directed on line 1a? If 'Yes,' complete Schedule J for such	or, or tru <i>individu</i>	stee. Ial	, ke	y en	nplo	yee,	or h	nighest compensa	ted employee	3 X
4 For any individual listed on line 1a, is the sum of	renortab	le co	mpe	ensa	ation	and	oth	ner compensation	from	
the organization and related organizations greater such individual	than \$1	50,0	00'?	If "	Yes'	com	plet	e Schedule J for		4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,	comper	satio	on fr	om dule	any J fo	unre	late ch p	ed organization or person	ındıvıdual	5 X
Section B. Independent Contractors										
Complete this table for your five highest compens compensation from the organization. Report compens	ated ind ation for	epen the c	iden alen	it co idar	ntra vear	ctors endi	tha ng v	at received more t with or within the or	han \$100,000 of ganization's tax vea	ır
(A) Name and business addre					<i>,</i>			Description)	(C) Compensation
								ļ		
								 		
2 Total number of independent contractors (including bi	ut not lim	ited t	o the	ose	liste	d abo	ve)	who received more	than	
\$100,000 of compensation from the organization	0									
RAA		TEEA						-		Form 990 (2013)

Part VIII	Statement of Revenue					
	Check if Schedule O contains a response or note to an	y line in this Part V	III			
		(A)	(B)	(C)	(D)	

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u>Ş</u> 2	1 a	Federated campaigns	1	a				
₹ ₹		Membership dues	1	_				
S S		Fundraising events	1		_			
달		Related organizations	1		_			}
S S	е	Government grants (contribution	ons) <u>1</u>	e	4			
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f	All other contributions, gifts, g similar amounts not included a	rants, and above 1	f 841,527.				
₹ Q	_	Noncash contributions included	l in lines 1a-1f	\$ <u>11,444.</u>				
ე ₹	h	Total. Add lines 1a-1f		•	841,527.			
PROGRAM SERVICE REVENUE	_			Business Code			····	ļ
Z	2 a		NCE		276,859.	276,859.		
Ä.	b							
Ž	r C			_	<u> </u>			
S	a			_				-
R	e	All other program service		_				<u> </u>
စ္က	1	Total. Add lines 2a-2f	e revenue		276 050			
			li radionam adoriradas		276,859.			
	3	Investment income (inclother similar amounts)	lualing aivider	ius, interest and	11,815.			11,815.
	4	Income from investmen	t of tax-exem	pt bond proceeds				
	5	Royalties		•	•			
			(ı) Real	(II) Personal			-	
	6 a	Gross rents.						
	b	Less rental expenses]			
	С	Rental income or (loss)						
	d	Net rental income or (lo	ss)	<u> </u>	•			<u></u>
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	4,97	6.	<u></u> ∤			
	b	Less cost or other basis and sales expenses						
	C	Gain or (loss)	4,97	6.	1			
	d	Net gain or (loss)		•	4,976.			4,976.
ÆNUE	8 a	Gross income from fund (not including \$	draising even	ts				
		of contributions reported	d on line 1c).	_				
R		See Part IV, line 18		a				
OTHER RE	b	Less direct expenses		b	1			
0	С	Net income or (loss) fro	m fundraisin	g events	•			
	9 a	Gross income from gam See Part IV, line 19	ning activities	a				
		Less direct expenses		b	1			
	c	Net income or (loss) fro	om gaming ac	tivities				
	10 a	Gross sales of inventory and allowances	y, less return	a a				
	b	Less cost of goods sold	d	b	1			
	С	Net income or (loss) fro	m sales of ir	ventory	-			
		Miscellaneous Revent	ue	Business Code				
į	11 a	MISCELLANEOUS :	INCOME	900099	1,823.	1,823.		<u> </u>
	b				 		-	
	C	. AD -15			 			ļ
		All other revenue	٠.					
		Total. Add lines 11a-11		•	1,823.	070 606		1.5.55
	12	Total revenue. See inst	ructions		1,137,000.	278,682.	0.	16,791.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX X (A) (B) (D) Do not include amounts reported on lines Total expenses Program service Management and Fundraising 6b, 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 2,407 2,407 Grants and other assistance to governments. organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 65,083 45,558 9,762 9,763. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) n 0 0 0. 7 Other salaries and wages 305,362 225,019 60,246. 20,097 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9,197 6,716 745 1,736. Other employee benefits 38,904 53,321 4,382 10,035. 10 Payroll taxes 27,474 3,049 7,103. 37,626 11 Fees for services (non-employees) a Management **b** Legal 3,910 3,358 373 179. c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amt exceeds 10% of line 25, column 63,378 49,505 6,080 7,793. (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion 9,991 15,735 71 5,673. 13 Office expenses 13,818 10,797 672 2,349. 14 Information technology 15,845. 11,886 183. 2,776. 15 Royalties Occupancy 50,065 16 48,129 581 1,355. 17 Travel Payments of travel or entertainment 18 expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 76,089 76,089 20 Interest 8,980. 8,980 21 Payments to affiliates 22 Depreciation, depletion, and amortization 13,017 9,505 1,055 2,457. 6,912 5,047 560 1,305 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 O) 93,979 76,803 3,180 13,996. a TRAVEL AND FOOD b POSTAGE AND SHIPPING 67,200 26,142 102 40,956. PRINTING AND PUBLICATIONS 65,302 40,059 462 24,781 d SUBCONTRACTORS 47,036 47,036 SEE SCH. O 2,367 e All other expenses 113,469 99,054 12,048. 25 Total functional expenses. Add lines 1 through 24e 1,127,731 859,479 63,701 204,551 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► If following SOP 98-2 (ASC 958-720).

Part X

Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 86,315 10,035. 2 Savings and temporary cash investments 95,510 127,116. 3 Pledges and grants receivable, net 3,200 3 13,750. 4 Accounts receivable, net 44,023 57,012. Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complète Part II of Schedule L 6 7 Notes and loans receivable, net Inventories for sale or use 8 9 Prepaid expenses and deferred charges 16.499 2,635 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 473,341 b Less accumulated depreciation 10b 186,607 275,650 10 c 286,734 Investments - publicly traded securities. 11 538,145. 482,248 Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) 16 1,003,445 1,035,427 Accounts payable and accrued expenses 17 17 62,787 63,540 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 202,800 185,728. 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 26 26 265,587 249,268. X and complete Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34. Unrestricted net assets 737,858 27 786,159. 28 28 Temporarily restricted net assets Permanently restricted net assets 29 R Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 737,858 33 786,159. 34 34 Total liabilities and net assets/fund balances 003,445 035,427. BAA Form 990 (2013)

Pai	t XI Reconciliation of Net Assets		_	
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,137,0	00.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,127,7	31.
3	Revenue less expenses Subtract line 2 from line 1	3	9,2	69.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	737,8	58.
5	Net unrealized gains (losses) on investments	_ 5	44,9	12.
6	Donated services and use of facilities	6		
7	Investment expenses	7	-5,8	80.
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	786,1	59.
Pái	Tinancial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			X
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		51	-
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2 :	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	<u> </u>
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviews separate basis, consolidated basis, or both	ed on a		
	Separate basis Consolidated basis Both consolidated and separate basis			
ı	Were the organization's financial statements audited by an independent accountant?		2b X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both	ate		
	X Separate basis Consolidated basis Both consolidated and separate basis		Ph. P	
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?	•	2 c X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O SEE SCHEDULE O			
3 :	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a	X
١	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit	lit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b	
BAA			Form 990 (2013)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Employer identification number

Open to Public . Inspection

		O ACTION								<u> </u>				
				(All organizations					See ir	nstructi	ions.			
The o	gan	nization is not a priva	te foundation because	e it is (For lines 1 thro	ugh 11,	check o	nly one	box)						
1	Π.	A church, convention	of churches or assoc	ation of churches desc	cribed 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	Π.	A medical research of	organization operated	in conjunction with a h	ospital o	describe	d in sec	tion 17	D(b)(1)(A)(iii) En	nter the hos	spital's		
	Ш,	name, city, and state												
5		An organization operation 170(b)(1)(A)(iv). (Col	operated for the benefit of a college or university owned or operated by a governmental unit described in section . (Complete Part II.)											
6				government or governmental unit described in section 170(b)(1)(A)(v).										
7		An organization that no notice in section 170(b)(1)(1)	ormally receives a subs A)(vi). (Complete Par	nally receives a substantial part of its support from a governmental unit or from the general public described vi). (Complete Part II)										
8	U.	A community trust de	escribed in section 17	'0(b)(1)(A)(vi). (Complet	te Part I	I)								
9	. ت	from activities related investment income a	that normally receives. (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts slated to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross of the support f											
10		An organization orga	nized and operated e	xclusively to test for pu	ıblıc safe	ety. See	section	1 509(a)	(4).					
11	لبا	An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 – Function	nally inte	grated	•	d 📗 -	Type III	– Non-fu	unctionally	ıntegra	ited	
е	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 rece check this box	eived a written determir	nation from the IRS that i	s a Type	I, Type	II or Typ	e III sup	porting o	rganızatı	ion,			
g		Since August 17, 200	06, has the organization	on accepted any gift o	r contrib	ution fro	om any	of the fo	ollowing	persons	۶۶			
								_				Yes	No	
		(i) A person who obelow, the gove	directly or indirectly co erning body of the sur	ontrols, either alone or oported organization?	together	with pe	ersons d	escribe	d in (ii)	and (III)	11 g (i)			
		(ii) A family memb	er of a person describ	oed in (i) above?							11 g (ii)			
		(iii) A 35% controlle	ed entity of a person of	described in (i) or (ii) a	bove?						11 g (iii)			
h		Provide the following	information about th	e supported organization	on(s)							Ь		
		(i) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organiz column (i your go	s the ation in) listed in verning ment?	(v) Did yo the organ column (supp	ization in	organiz colur organize	s the ration in mn (i) ed in the S ?	(vii) Amount of mone support		etary	
					Yes	No	Yes	No	Yes	No				
/ ^\	•													
<u>(A)</u>								ļ						
(B)														
(C)				_										
(D)									:					
<u> </u>					 	<u> </u>								
(E)														
Total)			İ					
BAA	For	Paperwork Reduction	on Act Notice, see the	Instructions for Form	990 or 9	990-EZ.		5	Schedule	A (Form	990 or 990	-EZ) 20	113	

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 I f the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support							
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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							
Sec	tion B. Total Support							
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
7	Amounts from line 4		<u> </u>					
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 activ	rities, etc (see ins	structions)			12		
13	First five years. If the Form 990 is organization, check this box and		n's fırst, second, th	nird, fourth, or fifth	tax year as a section	on 501(c)(3)	▶ 🗌	
	tion C. Computation of Pu						· · · · · · · · · · · · · · · · · · ·	
	Public support percentage for 20	•	•	ne 11, column (f)).	14	%	
	Public support percentage from	·	,			15	%	
16a 33-1/3% support test — 2013. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization								
b 33-1/3% support test − 2012. 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								
17 a	17 a 10%-facts-and-circumstances test – 2013. 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.							
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts- d-circumstances'	and-circumstance test The organiz	es' test, check this ation qualifies as	box and stop he a publicly support	re. Explain in Pai ed organization	rt IV how the	
18	Private foundation. If the organi	zation did not che	eck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see in	nstructions	
BAA					90	nedule A (Form 9	990 or 990-FZ) 2013	

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.)

Sec	tion A. Public Support								
	dar year (or fiscal yr beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
7	Gifts, grants, contributions and membership fees								
	received (Do not include any 'unusual grants ')	CC7 055	701 505	704 660	700 500	041 507	2 000 222		
2	Gross receipts from admis-	667,955.	721,585.	794,668.	782,598.	841,527.	3,808,333.		
_	sions, merchandise sold or								
	services performed, or facilities furnished in any activity that is								
	related to the organization's								
	tax-exempt purpose	303,278.	299,026.	251,908.	283,040.	276,859.	1,414,111.		
3	Gross receipts from activities that are not an unrelated trade								
	or business under section 513						0.		
4	Tax revenues levied for the								
	organization's benefit and either paid to or expended on								
_	its behalf						0.		
5	The value of services or facilities furnished by a								
	governmental unit to the								
_	organization without charge	071 000	1 000 611	1 046 576	1 065 630	1 110 200	0.		
	Total. Add lines 1 through 5 Amounts included on lines 1,	971,233.	1,020,611.	1,046,576.	1,065,638.	1,118,386.	5,222,444.		
, ,	2, and 3 received from								
-	disqualified persons	0.	0.	0.	0.	0.	0.		
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	0.	0.	0.	0.	0.	0.		
C	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.		
8	Public support (Subtract line 7c from line 6.)	7, 7,		· 文章 · 本本			F 222 444		
Sac	tion B. Total Support		5 to 10 to 10	第一种: 多一个多种	il esta state i	の場合でも、対象は	5,222,444.		
	dar year (or fiscal yr beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
	Amounts from line 6	971,233.	1,020,611.	1,046,576.		1,118,386.	5,222,444.		
_	Gross income from interest.	9/1,233.	1,020,611.	1,040,576.	1,065,636.	1,110,300.	5,222,444.		
	dividends, payments received								
	on securities loans, rents, royalties and income from								
_	sımılar sources	1,185.	11,389.	14,721.	11,640.	11,815.	50,750.		
þ	Unrelated business taxable income (less section 511								
	taxes) from businesses						_		
_	acquired after June 30, 1975	1 105	11 200	14 701	11 (40	11 015	0.		
	Add lines 10a and 10b Net income from unrelated business	1,185.	11,389.	14,721.	11,640.	11,815.	50,750.		
''	activities not included in line 10b,								
	whether or not the business is regularly carried on						0.		
12	•			 			<u> </u>		
	Other income Do not include gain or loss from the sale of capital assets (Explain in	}			1				
	capital assets (Explain in IV Part IV.) SEE PART IV			13,266.	12,397.	1,823.	27,486.		
13	Total Support. (Add Ins 9,10c, 11 and 12)	972,418.	1,032,000.	1,074,563.	1,089,675.	1,132,024.	5,300,680.		
14	First five years. If the Form 990 organization, check this box and	is for the organiza	ation's first, secoi	nd, third, fourth, c	or fifth tax year as	a section 501(c)(3) ▶ □		
Section C. Computation of Public Support Percentage									
15	Public support percentage for 20	13 (line 8, colum	n (f) divided by lii	ne 13, column (f))	<u> </u>	15	98.52 %		
16									
Sec	tion D. Computation of Inv	estment Incor	ne Percentage	e					
17	Investment income percentage f	or 2013 (line 10c,	column (f) divide	ed by line 13, colu	ımn (f))	17	0.96 %		
18	Investment income percentage f	rom 2012 Schedu	le A, Part III, Ime	17		18	0.72 %		
19 a	33-1/3% support tests - 2013. It is not more than 33-1/3%, check	the organization	did not check the	box on line 14, a	and line 15 is mor	e than 33-1/3%, a	ind line 17 ► 🔽		
	is not more than 33-1/3%, check 33-1/3% support tests — 2012. If								
	line 18 is not more than 33-1/3%	6, check this box a	and stop here. Th	ie organization qu	ialifies as a public	ly supported orga	nization -		
20	Private foundation. If the organi	zation did not che	ck a box on line	14, 19a, or 19b, c	heck this box and	see instructions			

	(Form 990 or 990-EZ) 2013	CALL TO ACTION	36-3003308	Page 4
Part IV	Supplemental Informati or 17b; and Part III, line (See instructions).	ion. Provide the explanations required by Part 12. Also complete this part for any additional	II, line 10; Part II, line 17a information.	
	·			

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization CALL TO ACTION 36-3003308 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 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? No Yes Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2 a **b** Total acreage restricted by conservation easements 2 b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, Yes No and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 ÞŚ (ii) Assets included in Form 990, Part X **►** \$ 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 **⊳**\$ b Assets included in Form 990, Part X ▶\$

BAA

Schedule **D** (Form 990) 2013

Pant III Organizations Mainta	ining Collection	s of Art, Histo	orical Treasures, or	Other Similar Ass	ets (co	ntinu	ed)
Using the organization's acquisition items (check all that apply)	, accession, and othe	r records, check a	ny of the following that are	e a significant use of its o	collection		
a Public exhibition		d Loan (or exchange programs				
b Scholarly research		e U Other	-				
c Preservation for future gener		d avalera barr than	further the argonization's	overnet nurness in			
4 Provide a description of the organiz Part XIII			-				
5 During the year, did the organiza to be sold to raise funds rather t	ition solicit or receivi han to be maintaine	e donations of ar d as part of the o	t, historical treasures, or rganization's collection?	other similar assets	Yes		No
Part M Escrow and Custodia line 9, or reported an	l Arrangements.	. Complete if t	he organization ans		m 990,	Part	īv,
1a Is the organization an agent, true on Form 990, Part X?				er assets not included	Yes		No
b If 'Yes,' explain the arrangement	in Part Alli and cor	npiete the followi	ng table		Amount		
c Beginning balance				1 c	Amount		
d Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				1f			
2 a Did the organization include an a		•			Yes		No
b If 'Yes,' explain the arrangement	in Part XIII. Check	here if the explar	ntion has been provided	ın Part XIII		L	<u> </u>
Pant V Endowment Funds. C	•	rganization an		m 990, Part IV, lin	e 10.		
4. B	(a) Current year	(b) Prior year	r (c) Two years back	(d) Three years back	(e) Fo	our years	s back
1 a Beginning of year balance		+					
b Contributions		+					
c Net investment earnings, gains, and losses							
d Grants or scholarships							
 Other expenditures for facilities and programs 							
f Administrative expenses							
g End of year balance		1					
2 Provide the estimated percentag	-	r end balance (lin	ne 1g, column (a)) held a	is			
a Board designated or quasi-endown		⁶					
b Permanent endowment	%	o,					
c Temporarily restricted endowmer The percentages in lines 2a, 2b,		% %					
3a Are there endowment funds not in to organization by	the possession of the	organization that a	are held and administered	for the	Г	Yes	No
(i) unrelated organizations					3a(i)		_
(ii) related organizations					3a(ii)		
b If 'Yes' to 3a(II), are the related	organizations listed	as required on So	chedule R?		3b		,
4 Describe in Part XIII the intende	d uses of the organi	zation's endowme	ent funds		<u> </u>		
Pad Wi Land, Buildings, and	Equipment.						
Complete if the organ	ization answered	d 'Yes' to Form	n 990, Part IV, line	11a. See Form 990), Part	X, lın	ie 10.
Description of property		st or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) B	ook va	lue
1 a Land							
b Buildings			375,282.	119,420.		255.	,862.
c Leasehold improvements.							
d Equipment							
e Other			98,059.	67,187.			<u>,872.</u>
Total, Add lines 1a through 1e (Colum	nn (d) must equal Fo	orm 990. Part X.	column (B), line 10(c))	▶1		286	731

Part VII Investments — Other Securities.	» =	N/A	
· Complete if the organization answered			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			·
(1)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)			
Part VIII Investments – Program Related. Complete if the organization answered	'Yes' to Form 990	N/A Part IV line 11c See Form 9	90 Part Y line 13
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end	
(1)	(b) Book value	(c) We find of Valuation Cost of Cha	or year market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	······································		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)			
Part IX Other Assets.	N/A		
Complete if the organization answered		, Part IV, line 11d. See Form 9	
	cription		(b) Book value
(1)			
(2) (3)			
(4)			
(5)			
(6)	<u></u>		
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (E	3), line 15)	<u> </u>	
Part X Other Liabilities.	000 5		
Complete if the organization answered 'Yes' to Fo		e or 111. See Form 990, Part X, line 25	
(a) Description of liability (1) Federal income taxes	(b) Book value		
(2)			
(3)		- 	
(4)		 	
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	•		

2. Liability for uncertain tax positions in Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

SEE PART XIII [X]

BAA

Schedule **D** (Form 990) 2013

* * 1 * **3**

Part XIII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	1,181,912.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a Net unrealized gains on investments 2a 44, 912	2.	
b Donated services and use of facilities 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	44,912.
3 Subtract line 2e from line 1	3	1,137,000.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b.		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,137,000.
Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	er Return	1,127,731.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		1,12,,,01.
a Donated services and use of facilities 2a	į.	
b Prior year adjustments		
c Other losses 2c		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	1,127,731.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	r ;	•
a Investment expenses not included on Form 990, Part VIII, line 7b.		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4 c	4 405 504
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,127,731.
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, F line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide a	Part V, any additio	nal information
THE_ORGANIZATION_FILES_ITS_TAX_RETURN_WITH_THE_U.SFEDERAL_AND_VAR	IOUS S	TATE AND
LOCAL TAX JURISDICTIONS. WITH FEW EXCEPTIONS, THE ORGANIZATION IS	NO LON	GER SUBJECT
TO EXAMINATIONS BY MAJOR TAX JURISDICTIONS FOR THE YEARS PRIOR TO 2	010.	THE
ORGANIZATION HAD NO INCOME TAX EXPENSE FOR THE YEARS ENDED DECEMBER	31, 2	013 AND
2012. THE ORGANIZATION INCLUDES ACCRUED INTEREST AND PENALTIES REL	ATED T	9
UNRECOGNIZED TAX BENEFITS IN OPERATING EXPENSES. THE EXPENSE FOR I	NTERES	I_AND
PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS AMOUNTS TO \$0 FOR THE		S ENDED le D (Form 990) 2013
DMM	Scriedu	C • (FUIIII 330) 2013

Schedule D (Form 990) 2013 CALL TO ACTION	36-3003308	Page 5
Pant XIII Supplemental Information (continued)		
PART X - FIN 48 FOOTNOTE (CONTINUED)		
DECEMBER 31, 2013 AND 2012.		
		
		- -

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 olldy? or nego noticegen

Employer identification number

CALL TO ACTION 36-3003308
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION
EDUCATION, GENERAL/OTHER REGIONAL ORGANIZING ASSISTING THE DEVELOPMENT OF LOCAL
CHAPTERS, LEADERSHIP, AND PROGRAMMING AROUND ISSUES OF CATHOLIC INSTITUTIONAL REFORM
PRESENTLY. CALL TO ACTION HAS 53 LOCAL CHAPTERS IN THE UNITED STATES.
EDUCATION, GENERAL/OTHER OUTREACH/SPECIAL PROJECTS 20/30, SOCIAL JUSTICE, AND
DIVERSITY OUTREACH/ANTI-RACISM ACTIVITY EXPENSES.
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS
BOARD OF DIRECTORS DELEGATES APPROVAL AUTHORITY TO FINANCE/AUDIT COMMITTEE FOR
ORGANIZATIONAL AUDIT. FINANCE/AUDIT APPROVED AUDIT DRAFT IS SENT ON TO THE BOARD OF
DIRECTORS.
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO, TOP MANAGEMENT
MEMBERS ON THE BOARD OF DIRECTORS GATHER COMPARATIVE COMPENSATION FOR EXECUTIVE
DIRECTOR AND TOP MANAGEMENT OFFICIALS TO JUSTIFY COMPENSATION GIVEN.
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO
THE PUBLIC UPON WRITTEN REQUEST.
FORM 990, PART XII, LINE 2 - CHANGE OF OVERSIGHT OR SELECTION PROCESS
THE BOARD OF DIRECTORS RECEIVES A DRAFT COPY OF THE AUDIT REPORT IN ADVANCE OF A
BOARD MEETING FOR DISCUSSION AND APPROVAL AT THE MEETING.

2013	3	SCHEDULE A	PART IV -	SUPPLEMENTAL	INFORMATION	PAGE 5
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36-3003308

NATURE AND SOURCE	2013	2012	2011	2010	2009
MISCELLANEOUS INCOME TOTAL	\$ 1,823. \$ 1,823.	\$ 12,397. \$ 12,397.	\$ 13,266. \$ 13,266.	\$ 0.	\$ 0.

2013

SCHEDULE O - SUPPLEMENTAL INFORMATION

PAGE 2

CALL TO ACTION

36-3003308

FORM 990, PART IX, LINE 24E OTHER EXPENSES

		(A)	(B) PROGRAM	(C) MANAGEMENT	(D)
	_	TOTAL	SERVICES	_ & GENERAL	FUNDRAISING
EQUIPMENT RENTAL		39,596.	39,596.		
MEMBERSHIP FOR DATABASE		44,359.	33,200.	3,352.	7,807.
MISCELLANEOUS		4,085.	6,636.	-2,729.	178.
SERVICE CHARGES		21,178.	15,464.	1,716.	3,998.
TUITION AND TRAINING		4,251.	4,158.	28.	<u>65.</u>
	TOTAL \$	113,469.	\$ 99,054.	\$ 2,367.	\$ 12,048.