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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

2014

Open to Public

Department of the Treasury Internal Revenue Service 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.

| Ā | For the 2 | 2014 cale | ndar year, or tax year beginning January 1 , 2014, and endi | ng Dece | nber 31 | , 20 14 | |
|--------------------------------|---------------|-------------|--|------------------|--|-------------------------|---------------|
| В | Check if a | pplicable | C Name of organization Action Center Inc | | D Employ | er identification n | umber |
| | Address c | hange | Doing business as | | | 30-0246999 | |
| | Name cha | ınge | Number and street (or P O box if mail is not delivered to street address) Room/s | uite | E Telepho | ne number | |
| | Initial retui | rn | 1434 Elbridge St | | | 215-743-4884 | |
| | Final return | /terminated | City or town, state or province, country, and ZIP or foreign postal code | | | | |
| | Amended | return | Philadelphia PA 19149 | | G Gross re | ecerpts \$ | 277709 |
| | Applicatio | n pending | F Name and address of principal officer Mike Ewall | H(a) Is this a d | roup return for | subordinates? Yes | |
| | | | 1434 Elbridge St, Philadelphia PA 19149 | | | s included? Tes | _ |
| $\overline{}$ | Tax-exem | pt status | ✓ 501(c)(3) | | | a list (see instruction | |
| J | Website: | | rgyjustice.net | H(c) Group | exemption | number > | |
| K | Form of or | | ✓ Corporation Trust Association Other ► L Year of forma | ation 2002 | M State | of legal domicile | PA |
| Р | art I | Summ | ary | | 1 - | | |
| _ | | | escribe the organization's mission or most significant activities: Promo | ote social & e | nvironme | ental justice & | |
| ě | 1 | | cy. Developing databases and providing educational materials to communication | | | | |
| ä | _ | | e environmental impact of energy and waste facilities. Supporting studen | | | | |
| eT | | | is box ▶☐ if the organization discontinued its operations or disposed | | | | |
| Governance | 1 | | and the second s | | I - | | 6 |
| | 1 | | of independent voting members of the governing body (Part VI, line 1b | | <u> </u> | | |
| Activities & | 1 | | nber of individuals employed in calendar year 2014 (Part V, line 2a) | | 5 | | 13 |
| ξ | I | | nber of volunteers (estimate if necessary) | | 6 | | 10 |
| Act | 1 | | elated business revenue from Part VIII, column (C), line 12 | | 7a | | 0 |
| | \$ | | ated business taxable income from Form 990-T, line 34 | | 7b | | 0 |
| 2 | | | | Prior Y | | Current Ye | |
| Revenue) 15 | 8 (| Contribut | service revenue (Part VIII, line 1h) RECEIVED | | 173222 | | 276057 |
| | 1 | | service revenue (Part VIII, line 2g) RECLIVE | | 0 | | 1498 |
| | 1 | - | nt income (Part VIII, column (A), lines 8, 4, and 7d) 2015 . 191. | | 0 | İ | 79 |
| ς Έ | | | renue (Part VIII, column (A), lines 5, 80, 8c, 19d, 5102, and 11e) . | | 354 | | 75 |
| Ĕ | 12 | Total reve | enue – add lines 8 through 11 (must equal Part VIII, column (A) Tine 12) | | 173576 | 277709 | |
| <u> </u> | 13 (| Grants ar | nd similar amounts paid (Part IX, column (A), Jines (E-8)]. | | 9660 | | 1000 |
| <u> </u> | 14 | Benefits | paid to or for members (Part IX, column (A)) line 4) | | 0 | | 0 |
| | 15 5 | Salaries, d | other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 50222 | | 86400 |
| Sexpenses | 16a F | Professio | onal fundraising fees (Part IX, column (A), Inne 11e) | | 0 | | 0 |
| ₹ | b - | Total fun | draising expenses (Part IX, column (D), line 25) ► 5371 | 18 1 | 1, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, | | 1 |
| 3 | 17 (| Other exp | penses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 133504 | | 129807 |
| | 18 | Total exp | enses. Add lines 13-17 (must equal Part IX, column (A), line 25) . | | 193386 | | 217207 |
| | 19 F | Revenue | less expenses. Subtract line 18 from line 12 | | -19810 | | 60502 |
| -0 S | | | | Beginning of C | urrent Year | End of Ye | ar |
| Net Assets or Fund Balances | 20 | Total ass | ets (Part X, line 16) | | 44380 | | 104882 |
| AB | 21 | Total Iıab | ılıtıes (Part X, line 26) | | 0 | | 0 |
| 캳 | 22 1 | Net asset | ts or fund balances. Subtract line 21 from line 20 | | 44380 | | 104882 |
| Pa | art II | Signat | ture Block | | | _ | |
| | | | ry, I declare that I have examined this return, including accompanying schedules and state | | | my knowledge and | belief, it is |
| tru | e, correct, | and compl | ete Declaration of preparer (other than officer) is based on all information of which prepare | er has any know | ledge | | |
| | : | \ | Spail as | | 15 F | mg 2015 | <u> </u> |
| Sig | | Sign | ature of officer | Da | ate | 0 | |
| He | re | \ | TREASURER | | | | |
| | | Туре | or print name and title | | | | |
| Pa | id | Print/Ty | pe preparer's name Preparer's signature C | ate | Check | ıf PTIN | |
| | eparer | | | | self-em | | |
| | e Only | | ame • | Firr | n's EIN ▶ | | |
| | | Firm's a | ddress ▶ | Pho | one no | | |
| Ma | y the IRS | S discuss | s this return with the preparer shown above? (see instructions) | · · · · · · | | · · □ Yes | |
| For | Paperwo | ork Redu | ction Act Notice, see the separate instructions. | No 11282Y | | Form S | 90 (2014) |

| Part | |
|------|---|
| 1 | Check if Schedule O contains a response or note to any line in this Part III |
| • | Describe against a maintain ann ann an t-aireann agus ann ann ann ann ann ann ann ann ann an |
| | |
| | · |
| | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? |
| | If "Yes," describe these new services on Schedule O. |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? |
| | If "Yes," describe these changes on Schedule O. |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. |
| 4a | (Code:) (Expenses \$ 137383 including grants of \$ 0) (Revenue \$ 191863) |
| | Energy Justice Network: assisted community groups fighting dirty facilities & proposals; supported anti-biomass campaigns; |
| | updated a dirty power plant database for the benefit of grassroots activists; published The Biomass Monitor and Energy |
| | Justice Now newsletters; suppored the RReNEW Collective in Virginia and its Mountain Justice Spring Break event. |
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| | |
| 4b | (Code:) (Expenses \$ 42330 including grants of \$ 0) (Revenue \$ 44588) |
| | Shale Initiative: Established activist house in Northeast PA as center for volunteers and interns to assist local people concerned |
| | about development of the shale fields and pipeline right-of-ways. Organized landowners group, held public forums and workshops. |
| | Raised funds for support of Dimock residents affected by well contamination. Produced reports on drilling companies and |
| | developed Frack University. |
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| | |
| 4c | (Code) (Expenses \$ 36354 including grants of \$ 0) (Revenue \$ 41183) |
| 40 | (Code) (Expenses \$ 36354 including grants of \$ 0) (Revenue \$ 41183) Student Environmental Action Coalition (SEAC): Coordinated Kentucky Student Environmental Coalition and West Virginia Youth |
| | Action League, organized or assisted with Spring and Fall Summits, 5 campus retreats, several days of action on environmental & |
| | democracy issues, Reality Roadshow on climate change, petitioning against pipelines and for renewable energy, Earth Day events on |
| | ten campuses, |
| | |
| | |
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| | |
| | |
| | |
| 4d | Other program services (Describe in Schedule O.) |
| | (Expenses \$ including grants of \$) (Revenue \$) |
| 4e | Total program service expenses ▶ 216067 |

| Part | (2014) Checklist of Required Schedules | | | Page |
|------|--|-----------|----------|-------------|
| | | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | 1 | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | 1 | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | <u> </u> | |
| | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | 1 |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> | 4 | 1 | |
| 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, | | | 1 |
| | Part III | 5 | | |
| 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 | | | 1 |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | 6 | | - |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | 1 |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | 1 |
| 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 | | 1 |
| 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 | | <u>,</u> |
| 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 | 经过艺术 |) <u></u> |
| 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 | 11b | | ▼ |
| 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 | | ▼ |
| 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 | | ▼ |
| е | Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X | 11e | | ▼ |
| 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 | | ▼ |
| 12 a | | 12a | | 1 |
| b | 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 | - | | 1 |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . | 12b 13 | | |
| 14 a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | ✓ |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, | 148 | | V |
| J | 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 | | 1 |
| 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 | | 1 |
| 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 | - | ▼ |
| 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) | | | |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | 17 | | √ |
| 19 | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 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 | 18 | | √ |

20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

19

20a

20b

| Part | V Checklist of Required Schedules (continued) | | | |
|----------|--|------------|-------------|----------|
| | | | Yes | No |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | 1 |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | 1 |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated | | | |
| | employees? If "Yes," complete Schedule J | 23 | | ✓ |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | 24a | | ✓ |
| b c | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24b 24c | | |
| d 25a | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 24d 25a | | 1 |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | √ |
| 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 "Yes," complete Schedule L, Part II | 26 | | 1 |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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 | | 1 |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | (* * · · · | |
| a b | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | √ √ |
| С | 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 | 28b 28c | | 1 |
| 29 30 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 29 30 | | √ |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | 1 |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | 1 |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | 33 | | 1 |
| 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 | | 1 |
| 35a b | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a 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 | | 1 |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, | <u> </u> | | |
| 38 | Part VI | 37 | | ✓ |
| | 19? Note. All Form 990 filers are required to complete Schedule O | 38 | ✓ | |

| Part | | | | |
|----------|---|----------|-----------|---------------|
| | Check if Schedule O contains a response or note to any line in this Part V | <u> </u> | <u>.</u> | _ 🗆 |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | | | |
| b | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and | | | |
| | reportable gaming (gambling) winnings to prize winners? | 1c | _ | |
| 2a | 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 2a 13 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . | 2b | 1 | 1 |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | 1 |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O. | 3b | | <u> </u> |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | | | |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other financial | | | |
| | account)? | 4a | | ✓ |
| b | If "Yes," enter the name of the foreign country: ▶ | - Tu | | |
| - | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts | | | |
| | (FBAR). | | | İ |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | 1 |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | <u> </u> | / |
| c | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | - | <u> </u> |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | 30 | <u> </u> | |
| - | organization solicit any contributions that were not tax deductible as charitable contributions? | 6- | į ' | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | 6a | | V |
| - | gifts were not tax deductible? | CL | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | 6b | <u> </u> | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | | į ' | |
| - | and services provided to the payor? | | | |
| L | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7a | <u> </u> | / |
| b | Did the organization roting the donor of the value of the goods of services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | 7b | - | - |
| · | required to file Form 8282? | l _ | | , |
| | · · | 7c | ļ | ✓ |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | , |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | ✓ |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | <u> </u> | √ |
| 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 | | <u> </u> |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | ļ |
| _ | sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | | | İ |
| 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: | | | |
| а | Gross income from members or shareholders | ١. ا | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources | | | |
| | against amounts due or received from them.) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| ь | 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. | | | |
| а | 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 | | | ŀ |
| | the organization is licensed to issue qualified health plans | | | |
| С | Enter the amount of reserves on hand | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | 1 |
| h | If "Ves." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schodulo O | 146 | | ı — |

| Part | response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O Check if Schedule O contains a response or note to any line in this Part VI | See in: | for a struct | ions. |
|----------------|---|------------|-----------------|------------|
| Secti | on A. Governing Body and Management | | | |
| 4. | | | Yes | No |
| 1a | 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 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | 6 | | |
| ь 2 | Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | 4 | | |
| 3 | any other officer, director, trustee, or key employee? 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? | | | √ |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 3 | | V |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | - | 1 |
| 6 | Did the organization have members or stockholders? | 6 | - | 1 |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | _ | | / |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? | , 7b | | 1 |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | ı | | |
| а | The governing body? | 8a | | ✓ |
| ь | Each committee with authority to act on behalf of the governing body? | 8b | ļ | |
| 9 Casti | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached a the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | 1 | |
| Secu | on B. Policies (This Section B requests information about policies not required by the Internal Reve | nue C | ode., | |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | res | No |
| 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? | | | \ <u>\</u> |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | | 1 |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | 4 |
| 12a b | Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12a 12b | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes, describe in Schedule O how this was done | , 12c | | 1 |
| 13 14 15 | Did the organization have a written whistleblower policy? | 13 | | √ |
| • | The organization's CEO, Executive Director, or top management official | 45- | ļ. . | |
| a b | Other officers or key employees of the organization | 15a 15b | - | √ |
| 16a | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | - |
| | with a taxable entity during the year? | 16a | | ✓ |
| | 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 take steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | | |
| | on C. Disclosure | | | |
| 17 18 | List the states with which a copy of this Form 990 is required to be filed Pennsylvania Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply. | on 501(| (c)(3)s | only) |
| 19 | ☐ Own website ☑ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of if financial statements available to the public during the tax year. | nterest | policy | /, and |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and | ecords | :▶ | |
| | Traci Confer, 1434 Elbridge St, Philadelphia PA 19149, 215-743-4884 | | | |

| | Form | 990 | (2014) | |
|--|------|-----|--------|--|
|--|------|-----|--------|--|

Part VII 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

Check this boy if pathor the organization per any related organization compensated any surrent officers

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 no | r any relate | d org | anız | atic | n c | ompe | nsa | ited any currer | t officer, director | r, or trustee. |
|---|-----------------------------|--------------------------------|-----------------------|----------|--------------|------------------------------|----------|-----------------|----------------------------------|------------------------------|
| (C) | | | | | | | | | | |
| (A) | (B) | Position (D) | | | | | | (D) | (E) | (F) |
| Name and Title | Average | | | | | than o | | Reportable | Reportable | Estimated |
| | hours per | | | | | or/trus | | compensation | compensation from | amount of |
| | week (list any hours for | 익글 | 5 | Q | ~ | 9 ∓ | Ţ | from the | related | other |
| | related | d K | stitu | Officer | y e | ghe. | Former | organization | organizations (W-2/1099-MISC) | compensation from the |
| | organizations | cto | ş | ~ | Key employee | st c | ¥ | (W-2/1099-MISC) | | organization |
| | below dotted | ੋ <u>ਵ</u> ੰ | alt | Ì | oye |) m | | | | and related organizations |
| | , | Individual trustee or director | Institutional trustee | ŀ | · · | ens | | | | organizations |
| | | | 96 | İ | | Highest compensated employee | | | | |
| | 1 | | | | | | | 1 | | |
| (1) Frances Whittington | .3 | | | İ | | | | | | |
| Director | | ✓ | | L. | | | | 0 | 0 | 0 |
| (2) Julia Stone | .5 | | | | | | | | | |
| Director | | ✓ | | L_ | | | _ | 0 | 0 | 0 |
| (3) Mike Ewall | 23 | | | | | Ì | | | | |
| Director / top management official | | ✓ | | ✓ | | | <u> </u> | 18120 | 0 | 0 |
| (4) Traci Confer | 22 | | | ١. | | | | | | |
| Treasurer / top financial official | | ✓ | | ✓_ | | | | 17460 | 0 | 0 |
| (5) Karen Orr | 5 | | | | | | | | | |
| Chair | | <u> </u> | | ✓ | | | ļ | 0 | 0 | 0 |
| (6) Terry Nordbrock | .3 | , | | | | | | | | |
| Secretary | | ✓ | | ✓ | | | | 0 | . 0 | 0 |
| (7) | | | | | | | | | | |
| (8) | | | | | | - | | _ | | <u> </u> |
| | | | | | | | | | | |
| (9) | | | | | - | | | | | |
| | · | | | | | | | | | |
| (10) | | | | | - | | | | | |
| | Ī | | | | | | | | | |
| (11) | | | | | | | | | | |
| | | | | | | | | | | |
| (12) | | | | | | | | | | |
| | | | | | | | | | | |
| (13) | | | | | | | | | | |
| | | | Ш | | | | | | | |
| (14) | | | | | | | | | | |
| | | | | | | | | | | |

| | (A) Name and title | (B) Average hours per | box, ı | ot ch unles | s pe | ition more | than one that the that the that the that the that the that the the that the the the the the the the the the th | an | (D) Reportable compensation | (E) Reportable compensation i | | (F) Estimated amount of other | | |
|--------------|--|--|--------------------------------|-----------------------|---------|---------------|--|-----------------------|---------------------------------------|---|----------|-------------------------------|--|----------|
| | | week (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | related other compensat (W-2/1099-MISC) from the organization and relate organization | | | ensation m the nization related | 1 |
| (15) | | | | | | | | | | | | | | - |
| (16) | | | | | | | | | | | | | | |
| (17) | | | | | | | | | | | + | | | |
| (18) | | | | | | | | | | | | | | |
| (19) | | | | | | _ | | | | | \dashv | | | |
| (20) | | | | | | | | | | | | | | |
| (21) | | | | | | | | | | | \dashv | | | |
| (22) | | | | | | | | | | | | | | |
| | | | | _ | | | | _ | | | \dashv | | | |
| (23) | | | | | | | | | | | \perp | | | |
| (24) | | | | | | | | | | | \perp | | | |
| (25) | | | | | | | | | | | | | | |
| 1b c d | Sub-total | VII, Sectio | | • | | | | > > > | 35580 0 35580 | | 0 | | | 0 |
| 2 | Total number of individuals (including but reportable compensation from the organic | not limited | | | | | above | e) w | | ore than \$10 | | of | | |
| 3 | Did the organization list any former of employee on line 1a? If "Yes," complete | | | | | | | emp | oloyee, or high | est compen | sated | 3 | Yes | No |
| 4 | For any individual listed on line 1a, is the organization and related organizations individual | | | | | | | | | | | | | ✓ |
| 5 | Did any person listed on line 1a receive of for services rendered to the organization | | | | | | | | | ation or indi | vidual | | | <i>\</i> |
| | n B. Independent Contractors | | | | | | | | | | <u> </u> | | | |
| 1 | Complete this table for your five highest compensation from the organization. Repyear. | | | | | | | | | | | | | 3X |
| | (A) Name and business add | ress | | | | | | | (B) Description of s | ervices | | (C) Compens | ation | |
| | | | | | | | | - | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | _ | | | | | | |
| 2 | Total number of independent contractor received more than \$100,000 of compens | | | | | | | th | nose listed abo | ove) who | | | | |

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

| | 90 (201 | 4) | | | | | | Page 9 |
|--|------------|---|------------|-------------------|-------------------|--|---|--|
| Part | VIII | Statement of Revenue | | | | D + 1 / 111 | <u></u> | |
| | | Check if Schedule O contain | ns a res | sponse or note to | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| nts its | 1a | Federated campaigns | . 1a | 0 | | | | 0.2.011 |
| s, Grants Amounts | b | Membership dues | . 1b | 0 | | | | |
| S, G | С | Fundraising events | . 1c | 0 | | | | |
| art ar | d | Related organizations | . 1d | 0 | | | | |
| iï. | е | Government grants (contribution | | 0 | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | f | All other contributions, gifts, gran and similar amounts not included abo | ve 1f | 276057 | | | | |
| d tr | g | Noncash contributions included in line: | s 1a-1f \$ | 0 | | | | |
| | h | Total. Add lines 1a-1f . | <u></u> | <u> ▶</u> | 276057 | | | |
| Ę | _ | | | Business Code | | | | |
| eve | 2a | Permit appeal | | 541100 | 1148 | 1148 | 0 | |
| e E | b | Conference registration fees | | 900099 | 100 | 100 | 0 | 0 |
| Ž | C | Speaker honorarium | | 900099 | 250 | 250 | 0 | 0 |
| Š | d | | | | | | | - |
| Jran | e | All other program service rev | | | | | | |
| Program Service Revenue | g | Total. Add lines 2a-2f | | | 1400 | | | |
| | 3 | Investment income (includir | | | 1498 | | | |
| | | and other similar amounts) | | | 0 | o | o | 70 |
| | 4 | Income from investment of tax-e | | 1- | 0 | 0 | 0 | 79 |
| | 5 | D 11 | | · · · | 0 | 0 | 0 | 0 |
| | | - | Real | (II) Personal | | | | |
| | 6a | Gross rents | | | | | | |
| | b | Less. rental expenses | | | | | | |
| | C | Rental income or (loss) | | | | | | |
| | d | Net rental income or (loss) | <u> </u> | <u></u> | 0 | 0 | 0 | 0 |
| | 7a | Gross amount from sales of (i) Sec assets other than inventory | curities | (II) Other | | | | , |
| | b | Less. cost or other basis and sales expenses | | | | | | |
| | С | Gain or (loss) | | | | | * | |
| | d | Net gain or (loss) | | ▶ | 0 | 0 | 0 | 0 |
| Other Revenue | 8a | events (not including \$ | | | | | | |
| her Ro | | of contributions reported on line See Part IV, line 18 | · · a | | | | | |
| ŏ | | Less: direct expenses | | L | | | | |
| | | Net income or (loss) from fund Gross income from gaming ad | | events . > | 0 | | 0 | 0 |
| | 3 a | See Part IV, line 19 | · · a | | | | | |
| | b | Less: direct expenses | | Liting | | | | |
| | | Net income or (loss) from gan | | vities ▶ | 0 | 0 | 0 | 0 |
| | | Gross sales of inventory returns and allowances . | · a | | | | | |
| | b | Less: cost of goods sold . | | | · | | | |
| } | <u> </u> | Net income or (loss) from sale Miscellaneous Revenue | S OT INVE | Business Code | 0 | 0 | 0 | 0 |
| | 112 | | | | | | | |
| | 118 | Refund from PA DOS BCO | | 900099 | 75 | _0 | 0 | 0 |

d All other revenue

e Total. Add lines 11a-11d .

Total revenue. See instructions.

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must con

| Sectio | n 501(c)(3) and 501(c)(4) organizations must con | npiete ali columns. A | ui other organization | s must complete colu | imn (A) |
|----------|---|-----------------------|------------------------------|-------------------------------------|--------------------------------|
| | Check if Schedule O contains a respon | se or note to any lir | ne in this Part IX . | | 🗸 |
| | t include amounts reported on lines 6b, 7b, o, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | 1000 | 1000 | | |
| 2 | Grants and other assistance to domestic individuals. See Part IV, line 22 | o | 0 | | _ |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 | 0 | 0 | | |
| 4 | Benefits paid to or for members | 0 | 0 | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 35580 | 21030 | 13875 | 675 |
| 6 | Compensation not included above, to disqualified | 33360 | 21030 | 130/3 | 0/3 |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | o | o | 0 | C |
| 7 | Other salaries and wages | 42772 | 34794 | 4858 | 3120 |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | 0 | 0 | 0 | |
| 9 | Other employee benefits | 0 | 0 | 0 | 0 |
| 10 | Payroll taxes | 8048 | 5734 | 1924 | 390 |
| 11 | Fees for services (non-employees): | | | | |
| a | Management | 0 | 0 | 0 | 0 |
| b | Legal | 0 | 0 | 0 | |
| c d | Accounting | 3652 | 0 | 3652 | |
| e | Professional fundraising services. See Part IV, line 17 | 0 | | U | |
| f | Investment management fees | 0 | 0 | 0 | |
| g | Other. (If line 11g amount exceeds 10% of line 25, column | | | | |
| | (A) amount, list line 11g expenses on Schedule O.) | 72822 | 68126 | 3184 | 1513 |
| 12 | Advertising and promotion | 805 | 805 | 0 | (|
| 13 | Office expenses | 7938 | 3283 | 4171 | 484 |
| 14 | Information technology | 4600 | 4225 | 255 | 120 |
| 15 | Royalties | 0 | 0 | 0 | |
| 16 17 | Occupancy | 21041 | 0 | 21041 | (|
| 18 | Travel | 15368 | 13927 | 1441 | (|
| .0 | for any federal, state, or local public officials | o | 0 | 0 | (|
| 19 | Conferences, conventions, and meetings | 3582 | 3282 | 300 | (|
| 20 | Interest | 0 | 0 | 0 | C |
| 21 | Payments to affiliates | 0 | 0 | 0 | |
| 22 | Depreciation, depletion, and amortization . | 0 | 0 | 0 | |
| 23 | Insurance | 0 | 0 | 0 | |
| 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 O.) | | | | |
| а | | | | | |
| b | | | ··· = | | |
| С | | | | | - |
| d | | | | | |
| е | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 217207 | 157134 | 54702 | 5371 |
| 26 | 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 following SOP 98-2 (ASC 958-720) | | | | |

Part X Balance Sheet

| | | Check it Schedule O contains a response or note to any line in this Pa | | <u></u> | <u> </u> |
|-----------------------------|----------|---|--------------------------|-------------|--------------------|
| | _ | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash-non-interest-bearing | 44353 | 1 | 44776 |
| | 2 | Savings and temporary cash investments | 27 | | 60106 |
| | 3 | Pledges and grants receivable, net | 0 | 3 | 0 |
| | 4 | Accounts receivable, net | 0 | 4 | 0 |
| | 5 | Loans and other receivables from current and former officers, directors, | | | |
| | | trustees, key employees, and highest compensated employees. | | | |
| | | Complete Part II of Schedule L | 0 | 5 | 0 |
| | 6 | 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 | | | |
| S | | organizations (see instructions). Complete Part II of Schedule L | 0 | 6 | 0 |
| Assets | 7 | Notes and loans receivable, net | 0 | 7 | 0 |
| As | 8 | Inventories for sale or use | 0 | 8 | 0 |
| | 9 | Prepaid expenses and deferred charges | 0 | | 0 |
| | 10a | Land, buildings, and equipment: cost or | • | | |
| | | other basis. Complete Part VI of Schedule D 10a | | | |
| | b | Less: accumulated depreciation 10b | 0 | 10c | 0 |
| | 11 | Investments—publicly traded securities | 0 | 11 | 0 |
| | 12 | Investments—other securities. See Part IV, line 11 | 0 | 12 | 0 |
| | 13 | Investments—program-related See Part IV, line 11 | 0 | 13 | 0 |
| | 14 | Intangible assets | 0 | 14 | 0 |
| | 15 | Other assets. See Part IV, line 11 | 0 | 15 | 0 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 44380 | 16 | 104882 |
| | 17 | Accounts payable and accrued expenses | 0 | 17 | 0 |
| | 18 | Grants payable | 0 | 18 | 0 |
| | 19 | Deferred revenue | 0 | 19 | 0 |
| | 20 | Tax-exempt bond liabilities | 0 | 20 | 0 |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D . | 0 | 21 | 0 |
| es | 22 | Loans and other payables to current and former officers, directors, | * | | |
| ∄ | | trustees, key employees, highest compensated employees, and | - 3 | <u> </u> | |
| Liabilities | | disqualified persons Complete Part II of Schedule L | 0 | 22 | 0 |
| | 23 | Secured mortgages and notes payable to unrelated third parties | 0 | | 0 |
| | 24 | Unsecured notes and loans payable to unrelated third parties | 0 | 24 | 0 |
| | 25 | 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 | 0 | | 0 |
| | 26 | Total liabilities. Add lines 17 through 25 | 0 | 26 | 0 |
| Ś | | Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34. | | | |
| ဦ | | , | | | |
| 쿌 | 27 | Unrestricted net assets | 44380 | | 104882 |
| Ä | 28 29 | Temporarily restricted net assets | 0 | | 0 |
| Ĕ | 29 | Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and | 0 | 29 | 0 |
| Ē | | complete lines 30 through 34. | | | 1 |
| õ | 30 | | | 30 | |
| šet | 30 31 | Capital stock or trust principal, or current funds | 0 | _ | 0 |
| ASS | 32 | Retained earnings, endowment, accumulated income, or other funds . | 0 | | 0 |
| Net Assets or Fund Balances | 33 | Total net assets or fund balances | 44380 | | 0 104882 |
| Z | 34 | Total liabilities and net assets/fund balances | 44380 | | 104882 |
| | | Total nationed and net additional balances | 44380 | | 104882 |

| orm | 990 | (2014) | |
|-----|-----|--------|--|
| | | | |

Page **12**

| Part | XI Reconciliation of Net Assets | | | | | |
|------|--|----------|-----------|-------|-----|------------|
| | Check if Schedule O contains a response or note to any line in this Part XI | | <u></u> . | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | | 27 | 77709 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | 21 | 17207 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | | | 50502 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | | | 44380 |
| 5 | Net unrealized gains (losses) on investments | 5 | | | | 0 |
| 6 | Donated services and use of facilities | 6 | | | | 0 |
| 7 | Investment expenses | 7_ | | | | . 0 |
| 8 | Prior period adjustments | 8 | | | | 0 |
| 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 | | | 10 | 04882 |
| Part | XII Financial Statements and Reporting | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | <u>.</u> | | | | |
| | | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990. ✓ Cash ☐ Accrual ☐ Other | | _ | | | ı |
| | If the organization changed its method of accounting from a prior year or checked "Other," ex | olaın | ın | | | ! |
| | Schedule O. | | | _ _ | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | . 2 | a | ✓ | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were comp | olled (| or | | | 1 |
| | reviewed on a separate basis, consolidated basis, or both | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | . 2 | b | | ✓_ |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited | d on | a | | , | |
| | separate basis, consolidated basis, or both: | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over the country of the coun | ersig | . ! | | - 1 | |
| | of the audit, review, or compilation of its financial statements and selection of an independent accounts the audit and accounts the audit and accounts the audit and accounts the audit and accounts the audit and accounts the audit and accounts the audit and accounts the audit and accounts the audit and accounts the audit and accounts the audit and accounts the audit accounts the audit and accounts the audit and accounts the audit accounts the aud | | , | C | | <u>√</u> , |
| | If the organization changed either its oversight process or selection process during the tax year, ex Schedule O. | plain | ın 🖟 | | | 1 |
| 0- | | | ~ | -4- | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133? | torth | | | | |
| | • | | 3 | a | | ✓_ |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a | | | | | |
| | required addition additis, explain why in ochequie of and describe any steps taken to undergo such a | Jaits. | 31 | | 200 | |
| | | | F | orm ' | 990 | (2014) |

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No 1545-0047

2014

Open to Public Inspection

| Name | of the organization | | | | | Employer identification | number |
|--------|---|--|--|---|------------------------------------|---|---|
| | Center Inc | | | | | | 46999 |
| Par | | | | | | | ons. |
| ine c | rganization is not a private found: | | | | | | |
| 2 | A school described in section | | | ibea in s e | ection 17 | υ(b)(1)(A)(I). | |
| | A hospital or a cooperative ho | | | n section | 170(6)/- | (\/A\/;;;\ | |
| 4 | A medical research organization hospital's name, city, and state | on operated in c | | | | | (iii). Enter the |
| 5 | An organization operated for section 170(b)(1)(A)(iv). (Com | the benefit of a | college or university | owned o | r operate | ed by a government | al unit described in |
| 6 7 | ☐ A federal, state, or local gover ☐ An organization that normally described in section 170(b)(1 | receives a subs | stantial part of its sup | | | | n the general public |
| 8 | ☐ A community trust described | in section 170(b |)(1)(A)(vi). (Complete | Part II.) | | | |
| | An organization that normally receipts from activities relate support from gross investme acquired by the organization a | d to its exempt ent income and after June 30, 19 | functions—subject to unrelated business 75. See section 509 (a | certain taxable ii a)(2). (Cor | exception ncome (I mplete Pa | ns, and (2) no more ess section 511 ta art III.) | than 331/3% of its |
| | ☐ An organization organized and ☐ An organization organized and one or more publicly supported the box in lines 11a through 11 | operated exclusions of organizations of the contractions of the co | ively for the benefit of, lescribed in section 5 | to perfor 09(a)(1) o | m the fun r section | ctions of, or to carry 509(a)(2). See sect | i on 509(a)(3). Check |
| а | ☐ Type I. A supporting organize the supported organization(sorganization. You must contains the support of the | zation operated, s) the power to re | supervised, or controlegularly appoint or ele | led by its | supporte | ed organization(s), ty | pically by giving |
| b | ☐ Type II. A supporting organic control or management of the organization(s). You must c | ne supporting org | ganızation vested ın th | | | | |
| С | ☐ Type III functionally integrated its supported organization(s) | | | | | | y integrated with, |
| d | ☐ Type III non-functionally in that is not functionally integr requirement (see instruction | ated. The organi | zation generally must | satisfy a | distributi | on requirement and | |
| е | Check this box if the organize functionally integrated, or Ty | ation received a | written determination | from the | IRS that | ıt ıs a Type I, Type I | II, Type III |
| f | Enter the number of supported | | | | | | |
| g | Provide the following informatio | | | | | | · · L |
| | (i) Name of supported organization | (iı) EIN | (iii) Type of organization (described on lines 1–9 above or IRC section (see instructions)) | (IV) Is the o listed in you docur | ır governing | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
| | | | (See mandenoris) | Yes | No | | |
| (A) | | | | | | | |
| (B) | | | | | | | |
| (C) | | | | | | | |
| (D) | | | | | | - | |
| (E) | | | | | | | |
| Total | | | | | | | |

| OCHEGO | C A (1 0111 330 01 330-LZ) 2014 | | | | | | Page ∠ |
|--------|---|-------------------------|-----------------|-------------------|------------------|------------------|-------------|
| Part | | | | | | | |
| | (Complete only if you checked the | | | | | | alify under |
| | Part III. If the organization fails to | qualify unde | r the tests lis | ted below, pl | ease comple | te Part III.) | |
| | on A. Public Support | | | | | | |
| Calen | dar year (or fiscal year beginning in) ▶ | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | 120690 | 76950 | 114988 | 173222 | 276057 | 761907 |
| 2 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either paid | | | | | | |
| | to or expended on its behalf | 0 | 0 | 0 | 0 | . 0 | 0 |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the | | | | | | |
| | organization without charge | 0 | 0 | 0 | 0 | 0 | 0 |
| 4 | Total. Add lines 1 through 3 | 120690 | 76950 | 114988 | 173222 | 276057 | 761907 |
| 5 | The portion of total contributions by | | | | | | |
| | each person (other than a | | | | į | | |
| | governmental unit or publicly | | | | - | | |
| | supported organization) included on | | | | | | |
| | line 1 that exceeds 2% of the amount | | | | ĺ | | |
| • | shown on line 11, column (f) | | | | | | 188500 |
| 6 | Public support. Subtract line 5 from line 4. | l ! | | | | | 573407 |
| | on B. Total Support | 4) 2040 | # 1 0044 T | () 0040 | (D 00 (0) | () 0044 | <u> </u> |
| | dar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 7 | Amounts from line 4 | 120690 | 76950 | 114988 | 173222 | 276057 | 761907 |
| 8 | Gross income from interest, dividends, | | | | | ľ | |
| | payments received on securities loans, rents, royalties and income from similar | | | | | | |
| | sources | | 407 | | | | |
| 9 | Net income from unrelated business | 284 | 137 | 0 | 0 | 79 | 500 |
| 9 | activities, whether or not the business | | | | | | |
| | is regularly carried on | اه | o | | ام | 0 | 0 |
| 10 | Other income. Do not include gain or | | - U | 0 | 0 | 0 | 0 |
| | loss from the sale of capital assets | | | | | | |
| | (Explain in Part VI.) | اها | o | 0 | 119 | 75 | 194 |
| 11 | Total support. Add lines 7 through 10 | <u> </u> | | | | 75 | 762601 |
| 12 | Gross receipts from related activities, etc | . (see instruction | ns) | | | 12 | 1498 |
| 13 | First five years. If the Form 990 is for the | | | d, third, fourth, | or fifth tax ye | | |
| | organization, check this box and stop he | _ | | | - | | |
| Secti | on C. Computation of Public Suppor | | | | | | |
| 14 | Public support percentage for 2014 (line 6 | 6, column (f) di | rided by line 1 | 1, column (f)) | | 14 | 75 % |
| 15 | Public support percentage from 2013 Sch | nedule A, Part I | l, line 14 . | | | 15 | 96 % |
| 16a | 331/3% support test - 2014. If the organize | zation did not d | heck the box | on line 13, and | l line 14 is 33½ | 3% or more, ch | neck this |
| | box and stop here. The organization qua | lıfıes as a publı | cly supported | organization | | | . 🕨 🗸 |
| b | 331/3% support test-2013. If the organ | | | | | 15 is 331/3% | or more, |
| | check this box and stop here. The organ | ization qualifies | as a publicly | supported org | anızatıon . | | . ▶ 🛚 |
| 17a | 10%-facts-and-circumstances test - 20 | 014. If the orga | nization did no | t check a box | on line 13, 16a | a, or 16b, and I | ine 14 is |
| | 10% or more, and if the organization me | | | | | | |
| | Part VI how the organization meets the "f | | | • | • | | pported |
| | organization | | | | | | . ▶ 🗆 |
| b | 10%-facts-and-circumstances test - 20 | | | | | | |
| | 15 is 10% or more, and if the organizat | | | | | | |
| | Explain in Part VI how the organization m | | | | • | • | publicly |
| | supported organization | | | | | | . ▶ 🗆 |
| 18 | Private foundation. If the organization di | d not check a b | oox on line 13, | 16a, 16b, 17a | , or 17b, check | this box and | see |

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.)

| Secti | on A. Public Support | 320. 11.0 10 | oto motou bon | ow, piedeo ec | inploto r urt | , | |
|------------|--|------------------|-----------------|-------------------|---|-----------------|---------------------------------------|
| | dar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees | | 1-1 | | | | (., |
| | received. (Do not include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, merchandise | | | - | | | |
| | sold or services performed, or facilities furnished in any activity that is related to the | | | | | | |
| | organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an | | | | | | |
| _ | unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the | | | | | | |
| • | organization's benefit and either paid | | | | | | |
| | to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities | | | - | | | |
| 3 | furnished by a governmental unit to the | | | | , | | |
| | organization without charge | | | | | | |
| 6 | * | | | | | | |
| 6 7a | Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 | | | | | | |
| <i>1</i> a | received from disqualified persons . | | | | | | |
| | | | | | | | |
| b | Amounts included on lines 2 and 3 | | | | | | |
| | received from other than disqualified | | | | | | |
| | persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| _ | - I | | | | | | |
| C | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line 7c from | | | , , | 3 | | |
| Cooti | line 6) | ` | * | * (5 | | ð | · · · · · · · · · · · · · · · · · · · |
| | on B. Total Support | 4) 0010 | 4 > 22 + 4 | | | | |
| | dar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, | | | | | | |
| | payments received on securities loans, rents, royalties and income from similar sources. | | | i | | | |
| _ | • | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| b | Unrelated business taxable income (less | | | | | | |
| | section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | |
| | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business | | | | | | |
| | activities not included in line 10b, whether | | | | | | |
| | or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or | | | | | | |
| | loss from the sale of capital assets | | | | | | |
| 4.5 | (Explain in Part VI.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, | ŀ | | | | | |
| 4.4 | and 12.) | | | | | | |
| 14 | First five years. If the Form 990 is for the | | | | | | |
| | organization, check this box and stop her | | · · · · · | | · · · · · | | ▶ □ |
| | on C. Computation of Public Suppor | | | | | | |
| 15 | Public support percentage for 2014 (line 8 | | | | | | % |
| 16 | Public support percentage from 2013 Sch | iedule A, Part I | II, line 15 . | <u></u> | · · · · | 16 | <u>%</u> |
| | on D. Computation of Investment Inc | | | 1 16 . | <u> </u> | TT | |
| 17 | Investment income percentage for 2014 (I | | | | | | <u> </u> |
| 18 | Investment income percentage from 2013 | | | | | 18 | % |
| 19a | 331/3% support tests—2014. If the organi | | | | | | · |
| | 17 is not more than 331/3%, check this box a | | | | | | |
| b | 331/3% support tests—2013. If the organiz | ation did not cl | neck a box on | line 14 or line 1 | 9a, and line 16 | is more than 3 | 3 ¹ /3%, and |
| | line 18 is not more than 331/3%, check this b | | | | | | |
| 20 | Private foundation. If the organization did | d not check a l | oox on line 14, | . 19a, or 19b, c | heck this box. | and see instruc | ctions ► □ |

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

| Section A. A | All Suppo | orting Org | anizations |
|--------------|-----------|------------|------------|
|--------------|-----------|------------|------------|

| ecti | on A. All Supporting Organizations | | | |
|------|---|----|---------------------------------------|----|
| | | | Yes | No |
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation If historic and continuing relationship, explain. | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). | 2 | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. | 3a | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. | 3b | | |
| С | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use | 3c | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. | 4b | | |
| С | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes | 4c | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document). | 5a | | ^ |
| b | designated in the organization's organizing document? | 5b | | |
| C | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990). | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990). | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI . | 9a | · · · · · · · · · · · · · · · · · · · | |
| b | Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which | Ja | | |
| | the supporting organization had an interest? If "Yes," provide detail in Part VI. | 9b | | |
| С | Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI . | 9c | | |

10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

organizations)? If "Yes," answer (b) below.

determine whether the organization had excess business holdings.)

10a

| Part | IV Supporting Organizations (continued) | | | <u> </u> |
|------------------|--|-----|-----|----------|
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | , |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? | 11a | | - |
| | A family member of a person described in (a) above? | 11b | | |
| c | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. | 11c | | |
| Secti | on B. Type I Supporting Organizations | | | |
| 4 | Did the directors trivetoes or manch eaching of one as more expended associations have the second | | Yes | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization | 2 | ~ | |
| Secti | on C. Type II Supporting Organizations | | L | |
| | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | 1 | | |
| Secti | on D. All Type III Supporting Organizations | | · | |
| | | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. | 3 | | |
| Secti | on E. Type III Functionally-Integrated Supporting Organizations | | | |
| 1 a b c | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in the organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in the content of the conten | | | |
| 2 | Activities Test. Answer (a) and (b) below. | | Yes | No |
| а | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | 2a | | |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. | 2b | | |
| 3 a | Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i> | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | 3b | | |

| Type III Non-Functionally Integrated 509(a)(3) Supporting Oi | <u> </u> | | |
|--|--------------|-------------------------|--------------------------------|
| 1 Check here if the organization satisfied the Integral Part Test as a qualifying | ng trust | on Nov. 20, 1970. See | instructions. All |
| other Type III non-functionally integrated supporting organizations must contain the supporting organizations of the supporting organizations of the supporting organizations of the supporting organizations of the support | omplete I | e Sections A through E | |
| Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 Net short-term capital gain | 1 | | |
| 2 Recoveries of prior-year distributions | 2 | | |
| 3 Other gross income (see instructions) | 3 | | |
| 4 Add lines 1 through 3 | 4 | | |
| 5 Depreciation and depletion | 5 | | |
| 6 Portion of operating expenses paid or incurred for production or | | | |
| collection of gross income or for management, conservation, or | | | |
| maintenance of property held for production of income (see instructions) | 6 | | |
| 7 Other expenses (see instructions) | 7 | | _ |
| 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |
| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 Aggregate fair market value of all non-exempt-use assets (see | | | |
| instructions for short tax year or assets held for part of year): | | | |
| a Average monthly value of securities | 1a | | |
| b Average monthly cash balances | 1b | | - |
| c Fair market value of other non-exempt-use assets | 1c | | |
| d Total (add lines 1a, 1b, and 1c) | 1d | | |
| e Discount claimed for blockage or other | | | |
| factors (explain in detail in Part VI). | | | |
| 2 Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 Subtract line 2 from line 1d | 3 | | |
| 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount | | | |
| see instructions). | ' 4 | | |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | 100 | |
| 6 Multiply line 5 by .035 | 6 | | |
| 7 Recoveries of prior-year distributions | 7 | | |
| 8 Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Section C - Distributable Amount | | | Current Year |
| 1 Adjusted net income for prior year (from Section A, line 8, Column A) | 11 | | |
| 2 Enter 85% of line 1 | 2 | | |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | |
| 4 Enter greater of line 2 or line 3 | 4 | | - |
| 5 Income tax imposed in prior year | 5 | | |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to | 11 | | |
| emergency temporary reduction (see instructions) | 6 | | |
| 7 Check here if the current year is the organization's first as a non-functional | ılly-ınte | grated Type III support | ing organization (see |
| instructions). | , | 5 | 5 5.95 |

| _ | Type III Non-Functionally Integrated 509(a)(3 | s) Supporting Organi | zations (continued) | |
|--|---|-----------------------------|--|---|
| | on D - Distributions | | | Current Year |
| 1_ | Amounts paid to supported organizations to accomplish | | | |
| 2 | Amounts paid to perform activity that directly furthers exe | empt purposes of suppo | orted | |
| | organizations, in excess of income from activity | | | |
| 3_ | Administrative expenses paid to accomplish exempt purp | oses of supported orga | nizations | |
| | Amounts paid to acquire exempt-use assets | | <u> </u> | |
| 5_ | Qualified set-aside amounts (prior IRS approval required) | | | |
| <u> 6 </u> | Other distributions (describe in Part VI). See instructions. | | | |
| | Total annual distributions. Add lines 1 through 6. | | | |
| 8 | Distributions to attentive supported organizations to which | h the organization is res | sponsive | |
| | (provide details in Part VI). See instructions. | | | |
| 9 | Distributable amount for 2014 from Section C, line 6 | | | |
| 10 | Line 8 amount divided by Line 9 amount | <u> </u> | C | (iii) |
| | ection E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2014 | (iii) Distributable Amount for 2014 |
| _1_ | Distributable amount for 2014 from Section C, line 6 | | | |
| 2 | Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) | | | |
| 3 | Excess distributions carryover, if any, to 2014: | | | |
| <u>`</u> a | Live State Country of the Live Country of the | | | |
| b | | | | |
| C | | | | |
| d | | | | |
| е | From 2013 | | | |
| f | Total of lines 3a through e | | | |
| g | Applied to underdistributions of prior years | | | |
| h | Applied to 2014 distributable amount | | | |
| i | Carryover from 2009 not applied (see instructions) | ,, , | | , |
| j | Remainder. Subtract lines 3g, 3h, and 3i from 3f | | | |
| 4 | Distributions for 2014 from Section D, line 7: \$ | , < 4 | *** | - |
| а | Applied to underdistributions of prior years | , | | |
| b_ | Applied to 2014 distributable amount | | | |
| С_ | Remainder. Subtract lines 4a and 4b from 4. | | | |
| 5 | Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions). | | | |
| 6 | Remaining underdistributions for 2014. Subtract lines 3h | | | |
| | and 4b from line 1 (if amount greater than zero, see instructions). | | | |
| 7 | Excess distributions carryover to 2015. Add lines 3j and 4c. | | | |
| _8_ | Breakdown of line 7. | | | |
| а | | | | · · · · · · · · · · · · · · · · · · · |
| b | | | | |
| c | | | | |
| d | Excess from 2013 | | | |
| е | Excess from 2014 | | | |

| SCHEQUIE A (E | onii 990 di 990-22/2014 Page o |
|---|---|
| Part VI | Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.) |
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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

20**14**

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

| • S | ection 501(c)(4), (5), or (6) orga | anizations: Complete Part III | | | |
|-----------|---|--|----------------------|--|--|
| Name | of organization | | | Employer idea | ntification number |
| Action | Center Inc | | | | 30-0246999 |
| Part | | e organization is exempt und | | | organization. |
| 1 | Provide a description of t | the organization's direct and indire | ct political campa | • | |
| 2 | • | | | | |
| 3 | Volunteer hours | | • • • • | | |
| Part | | e organization is exempt und | | | |
| 1 | | excise tax incurred by the organiza | | | , |
| 2 | | excise tax incurred by organization | | | |
| 3 | • | ed a section 4955 tax, did it file For | • | ear? | Yes No |
| 4a | Was a correction made? | | | | . LYes LNo |
| b Dost | If "Yes," describe in Part Complete if the | e organization is exempt und | or postion FO1/s | a) except section FO1 | 1/2/(2) |
| 1 | | ly expended by the filing organize | | | (0)(3). |
| • | | · · · · · · · · · · · · · · · · · · · | | • | • |
| 2 | | filing organization's funds contrib | | | , |
| _ | | vities | | | |
| 3 | | expenditures. Add lines 1 and 2. | | | *************************************** |
| | | · | | | • |
| 4 | Did the filing organization | n file Form 1120-POL for this year | ? | | Yes No |
| 5 | Enter the names, address | ses and employer identification nur | mber (EIN) of all se | ection 527 political organi | zations to which the filing |
| | | ents. For each organization listed, | | | |
| | | ontributions received that were pro | | | |
| | as a separate segregated | fund or a political action committe | ee (PAC). If additio | nal space is needed, prov | ride information in Part IV. |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from | (e) Amount of political |
| | | | | filing organization's funds If none, enter -0- | contributions received and promptly and directly |
| | | | | idido il fiorio, ordor o | delivered to a separate |
| | | | | | political organization If none, enter -0- |
| | | | | | <u> </u> |
| (1) | | | | | |
| | | | | | - |
| (2) | | | | | |
| (3) | | | | | |
| (U) | | | | | |
| (4) | | | | | |
| | | | | | |
| (5) | | ļ | | | |
| · · · | | | | | |
| (6) | | } - | | b | |

| Sched | dule C.(Form 990 or 990-EZ) 2014 | | | | | Page 2 |
|------------|---|--------------------|---|-------------------|-----------------------|----------------|
| Par | t II-A Complete if the organizati section 501(h)). | on is exempt u | nder section 50 |)1(c)(3) and file | d Form 5768 (ele | |
| A | Check ▶ ☐ if the filing organization b | elongs to an aff | ıliated group (ar | d list in Part IV | each affiliated gro | oup member's |
| | name, address, EIN, expe | enses, and shar | e of excess lobb | yıng expenditur | es). | |
| B (| Check 🕨 🗌 if the filing organization c | hecked box A a | nd "limited cont | rol" provisions a | ipply. | |
| | | bying Expenditu | | | (a) Filing | (b) Affiliated |
| | (The term "expenditures" r | means amounts | paid or incurred. | <u> </u> | organization's totals | group totals |
| 1a | Total lobbying expenditures to influence | e public opinion (| grass roots lobby | ıng) | 0 | |
| ŧ | Total lobbying expenditures to influence a legislative body (direct lobbying) | | | 275 | | |
| C | Total lobbying expenditures (add lines 1a and 1b) | | | 275 | | |
| C | Other exempt purpose expenditures | | | | 216932 | |
| € | Total exempt purpose expenditures (add lines 1c and 1d) | | | | 217207 | |
| f | Lobbying nontaxable amount. Enter | the amount fro | om the following | table in both | | |
| | columns | | | | 43441 | |
| | If the amount on line 1e, column (a) or (b) | s: The lobbying r | nontaxable amount | is: | | |
| | Not over \$500,000 | 20% of the am | ount on line 1e | | | |
| | Over \$500,000 but not over \$1,000,000 | \$100,000 plus | 15% of the excess | over \$500,000 | | |
| | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus | 10% of the excess | over \$1,000,000 | | ļ |
| | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus | 5% of the excess o | ver \$1,500,000 | | į |
| | Over \$17,000,000 | \$1,000,000 | | | | |
| g | Grassroots nontaxable amount (enter 2 | 25% of line 1f) . | | | 10860 | |
| ŀ | • • • • • | | | | 0 | |
| i | Subtract line 1f from line 1c. If zero or I | | | | 0 | |
| j | If there is an amount other than zero | | | | file Form 4720 | |
| | reporting section 4911 tax for this yea | r? | | | | Yes No |
| | (Some organizations that made a se | ection 501(h) ele | eriod Under sec ction do not have uctions for lines | e to complete all | of the five colum | ns below. |
| | Lobbyin | g Expenditures | During 4-Year Av | eraging Period | | |
| | Calendar year (or fiscal year beginning in) | (a) 2011 | (b) 2012 | (c) 2013 | (d) 2014 | (e) Total |
| 2 a | Lobbying nontaxable amount | 20609 | 19389 | 38677 | 43441 | 122116 |
| b | Lobbying ceiling amount (150% of line 2a, column (e)) | | | | | 183175 |
| c | Total lobbying expenditures | 0 | 0 | 124 | 275 | 399 |
| d | | 5152 | 4847 | 9669 | 10860 | 30528 |
| е | Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 45793 |
| f | Grassroots lobbying expenditures | | | | | |

Schedule C (Form 990 or 990-EZ) 2014

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| Part | II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)). | filed | Form | 5768 | | |
|-------|--|----------|---------|------------|---------|-------|
| For e | each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed | (á | 9) | | (b) | |
| | ription of the lobbying activity. | Yes | No | Ar | nount | : |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or local | | | | <u></u> | |
| | legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: | | | | | |
| а | Volunteers? | | | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | | |
| С | Media advertisements? | | | | | |
| d | Mailings to members, legislators, or the public? | | | | | |
| e | Publications, or published or broadcast statements? | | | _ | | |
| f | Grants to other organizations for lobbying purposes? | | | | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | | |
| i | Other activities? | | | | | |
| j | 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)? | | | | | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | 1 | | | | |
| C | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . | | | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | <u> </u> | | | | |
| Part | III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). | ;)(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 | | l |
| | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes." | | | | line (| 3, is |
| 1 | Dues, assessments and similar amounts from members | | 1 | | | |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). | s of | | | | |
| а | Current year | | 2a | | | |
| b | Carryover from last year | | 2b | | | |
| С | 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 o excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb | | | | | |
| | and political expenditure next year? | • | 4 | | | |
| 5 | Taxable amount of lobbying and political expenditures (see instructions) | | 5 | | | |
| Part | | | | | | |
| | de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information. | oup lis | t); Par | t II-A, lı | nes 1 | and |
| | | | | | | |
| | | | | | | |
| | | ***** | | | | |
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| Schedule G (For | m 990 or 990-EZ) 2014 | Page 4 |
|-----------------|---|---------------|
| Part IV | Supplemental Information (continued) | |
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SCHEDULE O (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

2014

Open to Public Inspection

Employer identification number

| Action Center Inc | 30-0246999 |
|---|--|
| Part VI Section A Line 9 Names & Addresses of board members who cannot be reached at organization | n's mailing address |
| Frances Whittington, 713B E 24th St, Chester PA 19013 | |
| Julia Stone, 916 S 46th St, Philadelphia PA 19143 | · |
| Terry Nordbrock, 2602 E Helen St, Tucson AZ 85716 | |
| Karen Orr, 2546 SW 14th Drive, Gainesville, FL 32608 | |
| | |
| Part VI Section A Line 11b describe the process, if any, used by the organization to review this Form 9 | 90. |
| When a draft of the 990 is done, it is forwarded to the board members for review. If any corrections or | modifications are suggested after |
| the 990 is filed, then an amendment is filed, along with corrections provided by the accountant | |
| ····· | |
| Part VI Section C Line 19 Describe in Schedule O whether (and if so, how) the organization made its go | overning documents, conflict of interest |
| policy, and financial statements available to the public during the tax year. | |
| Records are available for viewing at the office upon request or can be emailed to the requestor. | |
| | |
| Part IX 11g Expenses | |
| Field organizers - 30003 (26819 Program; 3184 Management & General) | |
| Research - 14743 (14160 Program; 583 Fundraising) | |
| Newsletter - 15263 (Program) | |
| Database - 11464 (Program) | |
| Expert hydrogeologist witness - 1350 (Program) | |
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