Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047 2015 Open to Public Inspection

_	For the	2015.0	alendar year, or ta		7/01/15 , an	nd end	2.7.			<u> </u>			-
			C Name of organization		ACTION ASSO			, o , <u> </u>		п	Employer	r identification number	-
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<u></u> ∐ ₁	Name cha	nge	Doing business as	P O box if mail is not delivere	d to street address)				Room/suite		Celephone	354078	_
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	Final returi			province, country, and ZIP or fo	reign postal code			—l					_
닏	terminated	i [	HARRISBURG	3	PA 17101					ر ا	Gross rece	eipts\$ 952,23	6
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$\Box$	Application		SUSAN WY						H(a) is t	his a group re	eturn for su	ubordinates? Yes X N	lo
		, , ,	SAME AS						H(b) Are	all subordir	nates incli	uded2 Yes N	io
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		npt status	X 501(c)(3)	<del></del>	insert no ) 494	47(a)(1) c	or 527						
	Website		WW.THECAA		<del></del>					oup exemption			_
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<u>ග</u> නේ	3 1	Number o	of voting members of	of the governing body (I	Part VI, line 1a)						3	16	
SS	4 1	Number o	of independent votin	ng members of the gove	erning body (Part V	/I. line	1b)				4	16	
<u>_</u>	5 1		•	employed in calendar ye	• • •		,				5	5	_
7017 Activities & Governance	6 7			estimate if necessary)	· · · · · · · · · · · · · · · · · · ·	,	RECE	\/ <u>=</u> _	`		6	21	_
· `\				enue from Part VIII, col	umn (C) line 12		KECE	4 111			7a		0
	I			ole income from Form 9	` ''	ဖြစ်			S		7b		0
<u>ಎ</u> _		ACT GINE	ated business taxat	ole income from Louin s	750-1, line 5-4	<u> </u>	MAY 0 2	7017		rior Year	1 /5	Current Year	Ť
₹	8 0	Contribut	ions and grants (Pa	rt VIII. line 1h)		m	1111 U D		12		210	789,28	<del>-</del> 5
SCAININFL MAY			service revenue (Pa	•	4	اجا	000			137,		116,75	
Şٍ⊆	1	-	•	l, column (A), lines 3, 4	and 7d)	-	<u>,ಇಲ್ಲಿ ಒ</u>	₹, ₩	<del></del> .		120	30,34	_
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<b>/</b>	l .			hrough 11 (must equal			. 12)	┢		911,		952,23	
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_	l .			umn (A), lines 11a-11d		:		-					
		•		3–17 (must equal Part I		25)		-		867,		957,72	_
	19 F	Revenue	less expenses Sub	otract line 18 from line	12		<del></del>		Pogunein	g of Current	927	- 5 , 4 8 End of Year	<u></u>
Net Assets or Fund Balances	20 7	Total aca	-t- (D-+ V l 16)					-	Бейшин	901,		941,32	1
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a et	21		ilities (Part X, line 2					⊢				760,84	
		_		Subtract line 21 from	ine 20		<del></del>			760,	210	100,04	<u> </u>
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For	Paperw			e the separate instruction		·						Form <b>990</b> (20	_
DAA										κ)		•	

Form	990 (2015)	COMMUNITY AC	CTION ASSOCIA	ATION	<u> 25-1354078</u>			Page 2
Pa		Statement of Progra						<b>ত</b>
		Check if Schedule O		or note to any line i	n this Part III			X
		cribe the organization's m	ission					
5	EE SCI	TEDULE O						
2	Did the ord	ganization undertake any s	significant program service	es during the year which	were not listed on the	<del></del>		
		990 or 990-EZ?		,				es X No
	If "Yes," de	escribe these new service	s on Schedule O					<del></del>
3	Did the org	ganization cease conducti	ng, or make significant ch	nanges in how it conducts	s, any program			
	services?						Y	es X No
		escribe these changes on						
		he organization's program						
		Section 501(c)(3) and 50			ount of grants and all	ocations to othe	ers,	
	the total ex	rpenses, and revenue, if a	iny, for each program ser	vice reported				
42	(Code	) (Expenses \$	803,183	including grants of \$		) (Payanya	<u> </u>	
		ING EDUCATION			COMMINITTY	)(Revenue ACTTON		IN
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4b	(Code	) (Expenses \$	I	including grants of \$		) (Revenue	\$	)
4c	(Code	) (Expenses \$		including grants of \$		) (Revenue	\$	)
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	Oth a : - :							
40	(Expenses	ram services (Describe ir . ᢏ	·	: <b>e</b>	) (Revenue \$		1	
4e		ram service expenses ▶	including grants of 803,1		/ (Revenue \$			

	990 (2015) COMMUNITY ACTION ASSOCIATION 25-1354078		<u>P</u>	age <b>3</b>
Pa	ırt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1	\ \	
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4_	Х	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	]		
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		1	1
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	1	Ì	1
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	- }	ļ	
	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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted		ł	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		1	
	VII, 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,"		Ì	1
	complete Schedule D, Part VI	11a	X	
þ	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more		1	ŀ
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	ļ	ļ	ļ
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	<u> </u>	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ŀ		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	1		Ì
	Schedule D, Parts XI and XII	12a	X	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	1		1
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		1	1
	fundraising, business, investment, and program service activities outside the United States, or aggregate			İ
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	<b>↓</b>	X
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	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		1	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	L	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		1	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		ì	1
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	X

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

Part IV Checklist of Required Schedules (continued)

25-1354078

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	1		
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
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	1		
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			ĺ
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			ļ
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ļ
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		1	
	to defease any tax-exempt bonds?	24c	<b> </b>	
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 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	25a	<b> </b>	X
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?	1	{	{
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	1	1	1
	current or former officers, directors, trustees, key employees, highest compensated employees, or	1		١
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		1	ļ
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		1	
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<del> </del> -	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		1	
_	Schedule L, Part IV	28b	<del> </del>	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	20-	1	x
20	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	<del> </del> -	X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<del> </del>	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	20	}	x
31	·	30	<del> </del>	<del>  ^</del>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	}	x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	-31	<del> </del>	<del>                                     </del>
-	complete Schedule N, Part II	32	1	x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u>  "                                 </u>	<del> </del>	<del> </del>
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	1-30	+	
•	or IV, and Part V, line 1	34	}	х
35a		35a	1	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	1	<del> </del>	<del> </del>
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	1	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	Table	1	<b> </b>
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	į	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		T	1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	-		1
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		1	T
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	<u>L</u>
			~~	

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			$\overline{}$
	Check if Schedule O contains a response or note to any line in this Part V		—-т	
_			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  1a 3	- 1	- 1	
þ	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		_	
_		1c	X	<del></del>
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 5	- 1		
b		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		- 1	
3a		3a		<u>X</u>
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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	- }	1	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		1	
	· · · · · · · · · · · · · · · · · · ·	4a		<u>X</u>
þ	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>X</u>
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	1		ı
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			i
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			ĺ
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	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			
а	Initiation fees and capital contributions included on Part VIII, line 12	- 1		1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter	- 1		
а	Gross income from members or shareholders	- 1		
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them )	- 1		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		{
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	$\overline{}$		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
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>†</b>
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans	1		
С	Enter the amount of reserves on hand	l		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<del> </del>
DAA			m 99	0 (2015)

Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and f	or a "	No"	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See	ınstrı	uction	IS.
	Check if Schedule O contains a response or note to any line in this Part VI			$\mathbf{X}$
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year   1a   16			
	If there are material differences in voting rights among members of the governing body, or			İ
	if the governing body delegated broad authority to an executive committee or similar	- 1		į
	committee, explain in Schedule O	- 1	1	ĺ
b	Enter the number of voting members included in line 1a, above, who are independent  1b 16			į
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			į
_	any other officer, director, trustee, or key employee?	2		x
2				
3	Did the organization delegate control over management duties customarily performed by or under the direct	_	l	v
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	_6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			ĺ
	one or more members of the governing body?	7a	<u> </u>	<b></b> -
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	- 1		
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			ĺ
а	The governing body?	8a	<u> </u>	L
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			l
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Cou	le.)_		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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?	10b		}
11a		11a	X	
b				
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
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	x	
13	Did the organization have a written whistleblower policy?	13	X	$\vdash$
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			<b> </b>
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	1
b	Other officers or key employees of the organization		$\frac{x}{x}$	<del> </del>
IJ	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	15b		
160				
16a		46		~
	with a taxable entity during the year?	16a		X
D	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			}
<u> </u>	organization's exempt status with respect to such arrangements?	16b		Щ_
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	SSOCIATION OFFICERS 222 PINE STREET			
_H	ARRISBURG PA 17101 717	<u>-23</u>	<u>3 - 1</u>	<u>.075</u>
				_

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

- 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	rson	than one is both an or/trustee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) RONALD STEELE									,
	1.00								
1ST VICE PRESIDENT	0.00	X		X	<u> </u>		0	0	0
(2) JANINE KENNEDY									
	1.00	l							_
2ND VICE PRESIDENT	0.00	X	_	X			0	0	0
(3) ROBERT RAIBLE	1 00			1					
DIDECTION	1.00	٦,				1		•	•
DIRECTOR (4) DARLENE BIGLER	0.00	X		-	<u> </u>	<del>                                     </del>	0	0	0
(4) DARLENE BIGLER	1 00					1			
CECDEMADY	1.00	x		x				•	0
SECRETARY (5) RICK BEATON	0.00	^		^		╁┄╴╏┄╾	0	0	0
(5) RICK BEATON	1.00	}							
BOARD CHAIR	0.00	x		x			o	0	0
(6) SAM CECCACCI	0.00	1		<u> </u>	$\vdash$	<del>  </del>	0		<u> </u>
(0) DILLI CLICCICCI	1.00	1							
DIRECTOR	0.00	x					ol	0	0
(7) JOHN LITZ	0.00	+*	$\vdash$	├			0		<u> </u>
(//00121 2212	1.00								
DIRECTOR	0.00	x					ol	0	0
(8) KEN HEILMAN	1	† <del></del>			t —				
• •	1.00								
TREASURER	0.00	x		x			l o	0	0
(9) GALE ZALAR					<u> </u>			-	
	1.00								
DIRECTOR	0.00	X		L			0	. 0	0
(10) MEGAN SHREVE									
	1.00								
DIRECTOR	0.00	X				$oxed{oxed}$	0	0	0
(11) ERIN LUKOSS									
	1.00								
DIRECTOR	0.00	X				L.I	0	0	0

Part VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	and Highest Compensated	Employees (continued)			
(A) Name and title	(B)	}			C)			(D)	(E)	ł	(F)	
name and title	Average hours per			check		than o		Reportable compensation	Reportable compensation from		Estimated amount of	
	week (list any			•		s both r/truste		from the	related organizations	co	other impensation	n
	hours for related	오콩	l ä	₽	\$	랿	-Fo	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from the rganization	1
	organizations	direct	i tr	Officer	) eg	hest o	Former	,		a	and related	
	below dotted line)	Individual trustee or director	nal tr		Key employee	eomp	ı				garnzanori	3
		stee	Institutional trustee		*	Highest compensated employee						
(12) DAVID MROZOWS	177	<u> </u>	ļ. <u> </u>		<u> </u>	8.		<del> </del>		<b></b>		
(12) DAVID MROZOWS	1.00	ļ			}							
DIRECTOR	0.00	x		]	}			0	0			0
(13) TAY WALTENBAU		<u> </u>	_									<u>-</u> _
	1.00	ļ			}	ļ		,				
PAST PRESIDENT	0.00	X	ļ					0	0	<b></b>		0
(14) WENDY MELIUS	1 00	l			}							
DIRECTOR	1.00	X						o	o	ĺ		0
(15) MITCH LITTLE	0.00	⇡	$\vdash$	<del>                                     </del>			_		<u> </u>	<del> </del>		
(10)	1.00	[	[			( '						
DIRECTOR	0.00	X						0	0			0
(16) JEN WINTERMY	R											
	1.00	l	Ì		1				_	ĺ		_
DIRECTOR	0.00	X	<u> </u>	<del> </del>	<u> </u>	-	_	<u> </u>	0	<del> </del>		0
(17) SUSAN WYCHUL		1	1							l		
CEO	40.00	1	{	x	}	}		108,051	o	{	15	,823
(18) JANE KNOTT	0.00	╁	$\vdash$	<u> </u>	$\vdash$		-	100,031	<u>_</u>			,023
(10) 021112 141011	20.00			Ì		[ ]				1		
CFO	0.00			x	ļ			38,196	0		3	,676
	]		]	}		}				}		
-,,,	L	<u> </u>		<u>L</u>	<u> </u>	<u>L</u>	Ļ.	146 247		<del> </del>		400
1b Sub-total c Total from continuation she	oto to Bort VIII	Saat	ion					146,247		<del> </del>		,499
d Total (add lines 1b and 1c)	ets to Fait VII,	Seci	1011 /	•			<b>&gt;</b>	146,247		<del> </del>	19	,499
2 Total number of individuals (in	cluding but not	limite	d to	thos	se lis	ted a	bov			<u> </u>		
reportable compensation from	the organization	<u> </u>	1_									es No
3 Did the organization list any fo	ormer officer du	ecto	r or	trus	te <b>e</b>	kev e	mn	Novee or highest compens	ated	Γ		65 110
employee on line 1a? If "Yes,"	' complete Sche	dule	J for	suc	h in	Jividu	ıal			ļ	3	X
4 For any individual listed on lin												
organization and related organization	nizations greater	tnar	1 \$1:	50,00	JU / 1	ir re	S,	complete Schedule 1 for su	Cfi	[	4	x
5 Did any person listed on line 1									r individual			
for services rendered to the or		<u>(es,"</u>	con	plet	e Sc	hedu	ile J	I for such person	<del></del>		5	X
Section B. Independent Contractor  1 Complete this table for your fire		ens	ated	ınde	nend	lent (	-On	tractors that received more	than \$100,000 of			
compensation from the organ	zation Report c							ndar year ending with or with	nin the organization's tax y	ear		
Name and	(A) business address						L		(B) otion of services		Comp	C) ensation
										į		
							<del> </del>					
										į		
							╁					
							1			+		
							1			}		
							Γ					
							_					
2 Total number of independent received more than \$100,000	contractors (incl	uding	g bui	t not	limil	ed to	the	ose listed above) who	^			
DAA	or compensatio	1110	<u>(1)</u>	e 010	101 II	auul			0		Form	990 (2015)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax (A) Total revenue (C) Unrelated (B) Related or exempt function business revenue under sections 512-514 revenue 1a Federated campaigns 1a 135,600 b Membership dues 1b c Fundraising events 1c d Related organizations 1d Program Service Revenue Contributions, and Other Simi 653,685 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 789,285 Busn Code 900099 2a CONFERENCE & WORKSHOPS 116,759 116,759 b f All other program service revenue g Total. Add lines 2a-2f 116,759 Investment income (including dividends, interest, and other similar amounts) 30,342 30,342 Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6a Gross rents **b** Less rental exps c Rental inc or (loss) d Net rental income or (loss)  $\triangleright$ 7a Gross amount from (i) Securities (II) Other sales of assets other than inventory **b** Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn, Code 11a MISCELLANEOUS 900099 15,850 15,850 b С d All other revenue e Total. Add lines 11a-11d 15,850 Total revenue. See instructions 952,236 132,609 ol 30,342

Statement of Functional Expenses Part IX

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX X (D) Fundraising (B) Program service (C) Management and Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 165,746 135,911 29,835 trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 211,535 173,458 38,077 Other salaries and wages Pension plan accruals and contributions (include 2,220 12,337 10,117 section 401(k) and 403(b) employer contributions) 68,011 55,770 12,241 Other employee benefits 22,784 26,878 4,094 10 Payroll taxes Fees for services (non-employees) a Management b Legal 9,040 3,565 5,475 c Accounting d Lobbying Professional fundraising services See Part IV, line 17 f Investment management fees Other (If line 11g amount exceeds 10% of line 25, column 281,230 10,670 270,560 (A) amount, list line 11g expenses on Schedule O) 375 363 12 Advertising and promotion 34,165 25,550 8,615 13 Office expenses Information technology 14 Royalties 15 10,495 7,339 3,156 16 Occupancy 28,305 25,342 2,963 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 23,609 28,578 4,969 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 25,250 25,250 22 Depreciation, depletion, and amortization 3,339 2,437 902 23 Insurance 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) 16,375 STIPENDS 16,375 13,262 DUES & MEMBERSHIP FEES 14,792 1,530 b 7,100 SPEAKERS & FACILITATORS 7,100 c EQUIPMENT RENTAL/MAINT 5,999 3,498 2,501 6,494 8,173 1,679 All other expenses е 957,723 154,540 803,183 0 Total functional expenses. Add lines 1 through 24e 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 if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 1 Cash-non-interest bearing 126,111 84,497 2 Savings and temporary cash investments 2 186,435 114,939 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L 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 6 organizations (see instructions) Complete Part II of Schedule L 7 7 Notes and loans receivable, net 8 8 Inventories for sale or use 19,088 18,131 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 316,045 other basis Complete Part VI of Schedule D 10a 203,838 137,456 112,207 10b 10c b Less accumulated depreciation 503,826 540,051 11 11 Investments—publicly traded securities 12 12 Investments—other securities See Part IV, line 11 13 Investments—program-related See Part IV, line 11 13 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 941,321 901,420 16 Total assets. Add lines 1 through 15 (must equal line 34) 109,813 83,014 17 17 Accounts payable and accrued expenses 18 Grants payable 18 40,820 48,125 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 17,370 22,536 of Schedule D 141,204 26 Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 760,216 760,847 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 760,216 760,847

33

901,420

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

orm	1990 (2015) COMMUNITY ACTION ASSOCIATION 25-1354078				Pag	<sub>je</sub> 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					$oldsymbol{\Box}$
1	Total revenue (must equal Part VIII, column (A), line 12)	1		95	2,2	236
2	Total expenses (must equal Part IX, column (A), line 25)	2		95	7,7	723
3	Revenue less expenses Subtract line 2 from line 1	3			5,4	<del>18</del> 7
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		76	0,2	216
5	Net unrealized gains (losses) on investments	5			6,3	118
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		76	50,8	847
Рa	nt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		Ĺ	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both		- 1			
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		L	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		- 1			
	separate basis, consolidated basis, or both		1			
	Separate basis Consolidated basis Both consolidated and separate basis		1			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			l	ļ	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		Ļ	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O		1	- 1		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		1	}		
	the Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			1		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		- 1	36	1	l

Form **990** (2015)

# 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.

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

COMMUNITY ACTION ASSOCIATION

Employer identification number 25-1354078

OF PENNSYLVANIA Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ) ) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II ) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (r) Name of supported (a) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of organization (described on lines 1-9 listed in your governing other support (see above (see instructions)) document? instructions) instructions) (A) (B) (C) (D) (E)

Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

tion A. Public Support							
dar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	$\Box$	(f) Total
Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	907,091	644,674	569,061	726,210	789,2	85	3,636,321
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
The value of services or facilities furnished by a governmental unit to the organization without charge							
Total. Add lines 1 through 3	907,091	644,674	569,061	726,210	789,2	85	3,636,321
The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
Public support. Subtract line 5 from line 4							3,636,321
tion B. Total Support							
dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	$\Box$	(f) Total
Amounts from line 4	907,091	644,674	569,061	726,210	789,2	85	3,636,321
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9,502	13,591	13,506	28,120	30,3	142	95,061
Net income from unrelated business activities, whether or not the business is regularly carried on							
Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	627	7,267	16,847	19,631	15,8	50	60,222
Total support. Add lines 7 through 10							3,791,604
•	(see instructions)				1	2	1,101,946
· · · · · · · · · · · · · · · · · · ·	•	second, third, fou	rth, or fifth tax yea	r as a section 501(			
		, , ,	,	,	,(-,		▶ [
tion C. Computation of Public Su	pport Percent	age					
Public support percentage for 2015 (line 6	, column (f) divided	by line 11, columi	n (f))		1	4	95.90%
Public support percentage from 2014 Scho	edule A, Part II, line	14			[]	5	97.77%
33 1/3% support test-2015. If the organ	zation did not chec	k the box on line 1	3, and line 14 is 3	3 1/3% or more, ct	neck this		
box and stop here. The organization qual-	fies as a publicly s	upported organizat	non				► X
33 1/3% support test-2014. If the organ	zation did not ched	k a box on line 13	or 16a, and line 19	5 is 33 1/3% or mo	re,		
check this box and stop here. The organiz	zation qualifies as a	a publicly supporte	d organization				▶ [
Part VI how the organization meets the "fa organization	cts-and-circumstar	nces" test. The org	anızatıon qualıfies	as a publicly supp	orted		<b>&gt;</b> [
15 is 10% or more, and if the organization Explain in Part VI how the organization me	meets the "facts-a	nd-circumstances"	test, check this be	ox and stop here.			▶ [
,,,	i not check a box o	n line 13, 16a, 16t	o, 17a, or 17b, che	ck this box and se	e		<b>▶</b> [
	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4  tion B. Total Support  Indar year (or fiscal year beginning in) ▶  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income Do not include gain or loss from the sale of capital assets  (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc  First five years. If the Form 990 is for the organization, check this box and stop here.  The organization quality support test—2015. If the organization quality support test—2015. If the organization check this box and stop here. The organization quality support test—2014. If the organization was support test—2014. If the organization more, and if the organization meets the "fa organization more, and if the organization meets the "fa organization in Part VI how the organization meets the "fa organization in Part VI how the organization meets the "fa organization in Part VI how the organization meets the "fa organization in Part VI how the organization meets the "fa organization in Part VI how the organization meets the "fa organization in Part VI how the organization meets upported organization  Private foundation. If the organization did supported organization.	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4  tion B. Total Support  dar year (or fiscal year beginning in)   Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income Do not include gain or loss from the sale of capital assets  (Explain in Part VI)  Gross receipts from related activities, etc. (see instructions)  First five years. If the Form 990 is for the organization's first organization, check this box and stop here  tion C. Computation of Public Support Percent  Public support percentage for 2015 (line 6, column (f) divided Public support percentage form 2014 Schedule A, Part II, line 33 1/3% support test—2015. If the organization did not check this box and stop here. The organization qualifies as a publicly single single percentage form 2014 Schedule A, Part II, line 33 1/3% support test—2014. If the organization did not check this box and stop here. The organization meets the "facts-and-circumstances test—2015. If the organization organization  10%-facts-and-circumstances test—2015. If the organization organization  10%-facts-and-circumstances test—2014. If the organization organization  10%-facts-and-circumstances test—2014. If the organization meets the "facts-and-supported organization. Private foundation. If the organization did not check a box of the foundation. If the organization	dar year (or fiscal year beginning in) ▶  Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4  tion B. Total Support  dar year (or fiscal year beginning in) ▶  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalities and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income Do not include gain or loss from the sale of capital assets  (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc. (see instructions)  First five years. If the Form 990 is for the organization's first, second, third, fou organization, check this box and stop here  tition C. Computation of Public Support Percentage  Public support percentage from 2014 Schedule A, Part II, line 14  33 1/3% support test—2015. If the organization did not check the box on line 13  scheck this box and stop here. The organization did not check a box on line 13  check this box and stop here. The organization qualifies as a publicly supported organization or more, and if the organization meets the "facts-and-circumstances" test, 2014. If the organization did not check a box on line 13  check this box and stop here. The organization meets the "facts-and-circumstances" test, 2014 or more, and if the organization meets the "facts-and-circumstances" test, 2014 or more, and if the organization meets the "facts-and-circumstances" test, 2014 or more, and if the organi	Gross protocologo and a comparison of the amount shown on line 1 that exceeds 2% of the amount shown on line 11 that exceeds 2% of the amount shown on line 11 that exceeds 2% of the amount shown on line 11 that exceeds 2% of the amount shown on line 13, 569, 061  Amounts from line 4  Gross income from unrelated business activities, myether or not the business is regularly carried on the business is regularly carried on the thing business activities, whether or not the business is regularly carried on the Captalla assets (Explain in Part VI)  Total support Add lines 7 through 10% for organization, check this box and stop here. The organization of meals the forganization of the corganization and the corganization of the corganization of the corganization did not check the box on line 13, and line 14 is 33 1/3% support test—2015. (If the organization did not check the box on line 13 or 6a, and line 14 is 30 that organization and of the corganization qualifies as a publicly supported organization of 10%-facts-and-circumstances test—2014. If the organization did not check the box on line 13, and line 14 is 30 that organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and provided from the corganization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this	Giffs, grants, contributions, and membership fees received (Do not include any "unusual grants")  Tax revenues leved for the organizations benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organizations benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  907,091  644,674  569,061  726,210  Total. Add lines 1 through 3  907,091  644,674  569,061  726,210  Total. Add lines 1 through 3  907,091  644,674  569,061  726,210  Total. Add lines 1 through 3  907,091  644,674  569,061  726,210  Total. Add lines 11, column (f)  Public support. Subtract line 5 from line 4  100n B. Total Support  4  907,091  644,674  569,061  726,210  726	dar year (or fiscal year beginning in) ▶  (a) 2011  (b) 2012  (c) 2013  (d) 2014  (e) 2015  Ciffs, grants, contributions, and membership fees received (Do not include any "unusual grants")  Tax revenues levels for the organization's benefit and either paid to or expended on its behalf  The value of services or facitities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf  The value of services or facitities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  The portion of fotal contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support 1, column (f)  Public support 1, column (f)  Amounts from line 4  Amounts from line 4  Amounts from line 4  Amounts from line 4  Net income from unrelated business activities, whether or not the business is regularly carried on  Cher mosme Do not include gain or loss from the sale of capital assets is regularly carried on  Cher mosme Do not include gain or loss from the sale of capital assets is regularly carried on  Cher mosme Do not include gain or loss from the sale of capital assets is regularly carried on  Cher mosme Do not include gain or loss from the sale of capital assets is separated on or Public Support Percentage  Flushic support percentage for 2015 (line 6, column (f) audied by line 11, column (f))  Total support test—2015. If the organization did not check to box on line 13 and line 15 is 33 1/3% or more, check this box and stop here  Iton C. Computation of Public Support Percentage  13 1/3% support test—2014. If the organization did not check to box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the	dar year (or fiscal year beginning in) ▶  (a) 2011  (b) 2012  (c) 2013  (d) 2014  (e) 2015  Ciffs, grants, contributions, and membership fees received (Do not include any "unusual grants")  726,210  789,285  726,210  789,285  726,210  789,285  Tax revenues leved for the organization behalf I have been behalf I have behalf I have behalf I have behalf I have behalf I have behalf I have behalf I have behalf I have been behalf I have behalf I have been behalf I have been behalf I have behalf I have been behalf I have been behalf I have been behalf I have been behalf I have been behalf I have been behalf I have behalf I have been behalf I have been behalf I have been behalf I have been behalf I have been behalf I have been behalf I have been behalf I have been behalf I have been behalf I have been behalf I have been behalf I have been behalf I have been been behalf I have been been behalf I have been been behalf I have been been behalf I have been been been behalf I have been been been behalf I have been been been behalf I have been been been been behalf I have been been been been been been been be

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

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

Sec	tion A. Public Support	quality under a	no tooto notoa c	olow, ploudo c	ompioto i dicii	<del>/</del>	
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees 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 furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)				‡ ‡ ‡		
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6		<b>↓</b>			<b></b>	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b				<b> </b>		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the	organization's firs	st, second, third, fo	urth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop here				<del> </del>	····	<b>&gt;</b>
	tion C. Computation of Public Su						
15	Public support percentage for 2015 (line 8		-	າກ (f))		15	<u>%</u>
16 Sec	Public support percentage from 2014 School D. Computation of Investme				<del></del>	16	%_
17	Investment income percentage for 2015 (li			) column (f)	<del></del>	1 47 1	
18	Investment income percentage for 2015 (in	· ·	•	, coluinn (1))		17	<u>%</u> %
19a	33 1/3% support tests—2015. If the organ			e 14, and line 15 is	s more than 33 1/3	· · · · · · · · · · · · · · · · · · ·	
	17 is not more than 33 1/3%, check this be						▶ □
b	33 1/3% support tests—2014. If the orga						
	line 18 is not more than 33 1/3%, check th	nis box and <b>stop</b> h	nere. The organizat	tion qualifies as a	publicly supported	organization	▶ [
20	Private foundation. If the organization did	d not check a box	on line 14, 19a, or	19b, check this be	ox and see instruc	tions	

# Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on 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.)

	Sec	tion	A.	All	Supporting	Organizations
--	-----	------	----	-----	------------	---------------

CCI	on A. An 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		1	
	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		
C	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		
þ	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			ļ
	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	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		ļ
С	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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (III) 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		<b> </b>
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			1
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		<b></b>
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			1
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		<b></b>
þ	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	١		1
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b_		<del> </del>
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
10-	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		<del>                                     </del>
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	10-		Ì
j.	supporting organizations)? If "Yes," answer 10b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	104	1	1

Par	t IV Supporting Organizations (continued)			
			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)		1	
	below, the governing body of a supported organization?	11a	{	
b	A family member of a person described in (a) above?	11b		
<u>c</u>	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		
Sect	ion B. Type I Supporting Organizations			
			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		- 1	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Cast	supervised, or controlled the supporting organization	2		
Sect	ion C. Type II Supporting Organizations			
		۲	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		- 1	
Sect	the supported organization(s) ion D. All Type III Supporting Organizations			
OCC	on b. All Type III Supporting Organizations			<del></del> -
1	Did the exceptation provide to each of the companied assessments but the last day of the SSE and the		Yes	No
•	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		- 1	
2	organization's governing documents in effect on the date of notification, to the extent not previously provided?  Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1		
-	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	1		
•	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	1	
Secti	on E. Type III Functionally-Integrated Supporting Organizations	1		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test Complete line 2 below			
þ	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruct	ions)		
	, , , , , , , , , , , , , , , , , , , ,	•		
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		
þ	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	Parent of Supported Organizations Answer (a) and (b) below.			
а	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? Provide details in Part VI.	3a		
Ь	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		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations				
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov			 	
other Type III non-functionally integrated supporting organizations must complete Section				
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		ļ	
6 Portion of operating expenses paid or incurred for production or				
collection of gross income or for management, conservation, or	1 1		į	
maintenance of property held for production of income (see instructions)	6		<u> </u>	
7 Other expenses (see instructions)	7		<u> </u>	
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)	
Aggregate fair market value of all non-exempt-use assets (see				
instructions for short tax year or assets held for part of year)	<u> </u>			
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)	1		l	
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			
6 Multiply line 5 by 035	6		1	
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)	1			
2 Enter 85% of line 1	2			
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		1	
4 Enter greater of line 2 or line 3	4	<del></del>		
5 Income tax imposed in prior year	5	······································	<b>†</b>	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	1		<u> </u>	
emergency temporary reduction (see instructions)	6			
7 Check here if the current year is the organization's first as a non-functionally-integrated	<del></del>	II supporting organization	(see	
instructions)	· > F - '	FF 3 3	X	

Schedule A (Form 990 or 990-EZ) 2015

	ule A (Form 990 or 990-EZ) 2015 COMMUNITY ACTION A		25-1354	078 Page 7
Pari	V Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organization	tions (continued)	
Secti	on D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exempt purpos	ses		<del></del>
2	Amounts paid to perform activity that directly furthers exempt purposes	of supported	Í	
	organizations, in excess of income from activity	· · · · · · · · · · · · · · · · · · ·		
3	Administrative expenses paid to accomplish exempt purposes of suppo	orted organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions	<del></del>		
	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organiza	tion is responsive		
	(provide details in Part VI) See instructions			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	<del></del>		
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
_1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
_3_	Excess distributions carryover, if any, to 2015			
a				
<u>b</u>				
<u>c</u>				
	From 2013			
	From 2014	1		
	Total of lines 3a through e			
	Applied to underdistributions of prior years		<del></del>	
	Applied to 2015 distributable amount			······································
<del>!</del> -	Carryover from 2010 not applied (see instructions)			
4	Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2015 from Section			
4	D, line 7 \$			
a	Applied to underdistributions of prior years			
	Applied to 2015 distributions of prior years  Applied to 2015 distributable amount			
	Remainder Subtract lines 4a and 4b from 4	<u> </u>		
<u>-</u> -	Remaining underdistributions for years prior to 2015, if			
-	any Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)			
6	Remaining underdistributions for 2015 Subtract lines 3h			<del></del>
-	and 4b from line 1 (if amount greater than zero, see			
	instructions)			
7	Excess distributions carryover to 2016. Add lines 3j	***************************************		
	and 4c			
8	Breakdown of line 7			
а				
b				
С	Excess from 2013			
d	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2015

e Excess from 2015

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1, Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PART II, LINE 10 - OTHER INCOME DETAIL

**MISCELLANEOUS** 

\$

60,222

# SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

**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," on 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," on 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-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," on 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

• •	Section 501(c)(4), (5), or (6) organizations Complete Part III				
	e of organization COMMUNITY ACTION ASS	COLTALION		Employer ident	ification number
14.11	OF PENNSYLVANIA	OCTATION		25-13540	
Pai	t I-A Complete if the organization is exem	nt under section 501/c	or is a section		
1	Provide a description of the organization's direct and indirect		<del></del>	ii ozi organizatio	····
2	Political expenditures	ct political campaign activities	III Falt IV	<b>▶</b> \$	
3	Volunteer hours			•	
,	Volunteer nours				
Pa	t I-B Complete if the organization is exem	pt under section 501(c	)(3).		
1	Enter the amount of any excise tax incurred by the organization	ation under section 4955		<b>▶</b> \$	
2	Enter the amount of any excise tax incurred by organization	n managers under section 495	5	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Fo	rm 4720 for this year?			Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV				
Pa	rt I-C Complete if the organization is exem	pt under section 501(c	), except secti	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	on for section 527 exempt fund	tion		
	activities			▶ \$	
2	Enter the amount of the filing organization's funds contribut	ted to other organizations for s	ection		
	527 exempt function activities			▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 Ent	er here and on Form 1120-PO	L,		
	line 17b			▶ \$	
4	Did the filing organization file Form 1120-POL for this year	?			Yes No
5	Enter the names, addresses and employer identification nu	ımber (EIN) of all section 527 p	oolitical organizatio	ons to which the filing	
	organization made payments. For each organization listed,	enter the amount paid from th	e filing organizatio	n's funds Also enter	
	the amount of political contributions received that were pro-	mptly and directly delivered to	a separate politica	l organization, such	
	as a separate segregated fund or a political action committee	ee (PAC) If additional space is	s needed, provide	information in Part IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds if none, enter -0-	promptly and directly delivered to a separate
					political organization If
					none, enter -0-
1)					
2)					
3)			<del></del>	<del> </del>	
4)					
5)					<del></del>
6)					

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

Schedule C (Form 990 or 990-EZ) 2015

		MITY ACTI	ON ASSOCIAT	ION	25-1354078	Page 2
P	art II-A Complete if the organi	zation is exem	pt under section 5	01(c)(3) and	filed Form 5768 (ele	ection under
	section 501(h)).					
Α	Check ▶ ☐ if the filing organization	on belongs to ar	n affiliated group (a	nd list in Par	t IV each affiliated gro	up member's
	name, address, EIN,	•		, , ,		
В	Check ▶ ☐ if the filing organization	on checked box	: A and "limited con	trol" provisioi	ns apply.	
	Limits on Lol	bying Expend	itures		(a) Filing	(b) Affiliated
	(The term "expenditures"	means amounts	paid or incurred.)		organization's totals	group totals
1	1a Total lobbying expenditures to influence p	ublic opinion (grass	roots lobbying)			
	<b>b</b> Total lobbying expenditures to influence a	legislative body (dii	rect lobbying)			
	c Total lobbying expenditures (add lines 1a	and 1b)				
	d Other exempt purpose expenditures			<u> </u>		
	e Total exempt purpose expenditures (add I	nes 1c and 1d)				
	f Lobbying nontaxable amount Enter the ar	nount from the follo	owing table in both	}		
	columns	<del></del>				· · · · · · · · · · · · · · · · · · ·
	If the amount on line 1e, column (a) or (b) is	: The lobbying n	ontaxable amount is:		ŀ	
	Not over \$500,000	20% of the amou	unt on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 1	5% of the excess over \$50	0,000	ŀ	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10	0% of the excess over \$1,	000,000	1	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5	% of the excess over \$1,50	00,000		
	Over \$17,000,000	\$1,000,000				
	g Grassroots nontaxable amount (enter 25%			1		·
	h Subtract line 1g from line 1a If zero or les	·		ļ		
	i Subtract line 1f from line 1c If zero or less	•		Į		
	j If there is an amount other than zero on e	ther line 1h or line 1	1i, did the organization f	ile Form 4720		
	reporting section 4911 tax for this year?					Yes No
			ging Period Under s			
	(Some organizations that mad	e a section 501(	(h) election do not h	ave to compl	ete all of the five colu	mns below.
	\$	ee the separate	instructions for line	es 2a through	1 2f.)	
		hhuing Evnandi	ituras During 4 Vac	A		
	<u>L(</u>	bbying Expendi	itures During 4-Year	Averaging P	erioa	<del></del>
	Calendar year (or fiscal year	(~) 2012	(b) 2042	(=) 004.4	(4) 2045	(a) ± a4=1
	beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
			<del>-}</del> -	<del> </del>		
2	2a Lobbying nontaxable amount					
	b Lobbying ceiling amount					
_	(150% of line 2a, column(e))					
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount					
	(150% of line 2d, column (e))		<del></del>			
	f Grassroots lobbying expenditures					,

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Form 990 or 990-EZ) 2015	COMMUNITY	ACTION	ASSOCIATION

25-1354078

age 3

or a	(election under section 501(h)). each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(	a)	(b	)	
	ription of the lobbying activity	Yes	No	Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local			<del></del>		
	legislation, including any attempt to influence public opinion on a legislative matter or					
_	referendum, through the use of					
	Volunteers?		X			
0	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?	-	X			
d		-	X			
٥	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?	<b> </b>	$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$			
	Grants to other organizations for lobbying purposes?	<b>}</b>	$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$			
,	Direct contact with legislators, their staffs, government officials, or a legislative body?	}	$\frac{\Lambda}{X}$			
9 h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<del> </del>	X	<del></del>		
··	Other activities?	X			6 (	000
•	Total Add lines 1c through 1i					000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		x		<u> </u>	<u> </u>
	If "Yes," enter the amount of any tax incurred under section 4912					
	•	į.	}			
	If "Yes " enter the amount of any tax incurred by organization managers under section 4012	į.	1 1			
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912  If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
c d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	501(c)(5),	or se	ection		
c d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	501(c)(5),	or se	ction		
c d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  t III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(5),	or se	ection	Yes	No
c d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?	501(c)(5),	or se	ection	Yes	No
c d Pai	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5),	or se		Yes	No
d Pai	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?			1 2 3	Yes	No
d Pai	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section	ı 501(c)(5),	or se	1 2 3 ection		No
d Pai	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I	ı 501(c)(5),	or se	1 2 3 ection		No
Pai	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."	ı 501(c)(5),	or se	1 2 3 ection		No
Par 1 2 3 Par	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members	ı 501(c)(5),	or se	1 2 3 ection		No
Par 1 2 3 Par	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	ı 501(c)(5),	or se	1 2 3 ection		No
Pai 1 2 3 Pai	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	ı 501(c)(5),	or se	1 2 3 ection		No
1 2 3 Par	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	ı 501(c)(5),	or se ) Pari	1 2 3 ection		No
1 2 3 Pal 1 2 a b	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	ı 501(c)(5),	or se ) Pari	1 2 3 ection		No
Pai 1 2 3 Pai 1 2 a b c	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	ı 501(c)(5),	or se ) Pari	1 2 3 ection		No
Pai 1 2 3 Pai 1 2 a b c 3	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "lanswered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ı 501(c)(5),	or se ) Pari	1 2 3 ection		No
Pai 1 2 3 Pai 1 2 a b c	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  IIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	ı 501(c)(5),	or se ) Pari	1 2 3 ection		No
Pai 1 2 3 Pai 1 2 a b c 3	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  IIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	ı 501(c)(5),	or se ) Pari 1 2a 2b 2c 3	1 2 3 ection		No
Pai 1 2 3 Pai 1 2 a b c 3	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  IIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	ı 501(c)(5),	or se ) Pari	1 2 3 ection		No

SCHEDULE C, PART II-B, LINE 1

DAA

VARIOUS MEETINGS WITH LEGISLATORS TO DISCUSS CSBG GRANT FUNDING CONTINUATION. VARIOUS REVIEW OF CURRENT LEGISLATION AFFECTING FUNDING FOR CAAP PROGRAMS.

25-1354078

Page 4

Part IV Supplemental Information (continued)

# SCHEDULE D (Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

	or the organization		Employer identification number
	OMMUNITY ACTION ASSOCIATION		
	F PENNSYLVANIA		25-1354078
Pa	Organizations Maintaining Donor Advised Fu	inds or Other Similar Funds or A	Accounts.
	Complete if the organization answered "Yes" on	Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing the		
	funds are the organization's property, subject to the organization's exc		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in		
	only for charitable purposes and not for the benefit of the donor or dor	nor advisor, or for any other purpose	<b>ا</b> س ا
	conferring impermissible private benefit?		Yes No
P	ort II Conservation Easements.	F- 000 B (IV) 7	
	Complete if the organization answered "Yes" on	<del></del>	
1	Purpose(s) of conservation easements held by the organization (chec		
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically imp	
	Protection of natural habitat	Preservation of a certified histori	c structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified cons	ervation contribution in the form of a conse	ervation
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structure in	• •	2c
d	(-,,,,,,,,,,	7/06, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, e	xtinguished, or terminated by the organiza	ition during the
	tax year >		
4	Number of states where property subject to conservation easement is		
5	Does the organization have a written policy regarding the periodic mo	nitoring, inspection, handling of	М., М.,
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	of violations, and enforcing conservation e	easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, handling of vi	plations, and enforcing conservation ease	ments during the year
_	<b>&gt;</b> \$		
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)(	, — — —
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation easer		
	balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements	e organization's financial statements that t	describes the
D	art III Organizations Maintaining Collections of Art	Historical Transuras or Other	Similar Accete
1 4	Complete if the organization answered "Yes" on		Jilliai Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958),		halance sheet
	works of art, historical treasures, or other similar assets held for public		
	public service, provide, in Part XIII, the text of the footnote to its finance		
ь	If the organization elected, as permitted under SFAS 116 (ASC 958),		
-	works of art, historical treasures, or other similar assets held for public		
	public service, provide the following amounts relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical treasures, or	or other similar assets for financial dain, or	•
-	following amounts required to be reported under SFAS 116 (ASC 958		orido dio
а	Revenue included on Form 990, Part VIII, line 1	, reading to these items	<b>&gt;</b> \$
•			F 4

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

	Yes	No
3a(i)		
3a(ii)		
3b		

#### Part VI Land, Buildings, and Equipment.

1 4414 63	ti tuna, bananga, ana Equipment:						
	Complete if the organiz	ation answered "Yes" on Fo	orm 990, Part IV, line 1	11a. See Form 990, Pa	rt X, line 10.		
	Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value		
		(investment)	(other)	depreciation			
1a Land			50,000		50,000		
<b>b</b> Building	gs		175,264	121,057	54,207		
c Leaseh	old improvements						
<b>d</b> Equipm	nent		90,781	82,781	8,000		
e Other							
Total. Add lin	es 1a through 1e (Column (d) r	nust equal Form 990, Part X, colu	ımn (B), line 10c )	<b>&gt;</b>	112,207		

	Form 990) 2015 COMMUNITY ACTION ASSO	CLATION	25-1354078	Page (
Part VII	Investments—Other Securities.	Farm 000 Daw IV II	11h Con Farm 000 D	ort V. June 12
	Complete if the organization answered "Yes" on		(c) Method of	
	(a) Description of security or category (including name of security)	(b) Book value	Cost or end-of-yea	
(1) Financial		+		
		<del> </del>		<del></del>
(2) Closely-In (3) Other	eld equity interests	<del> </del>		
(A)				
(A) (B)		<u> </u>		
(C)		<b> </b>		
(O) (D)		<b></b>	<del></del>	
(E)				
(F)		<del> </del>		
(· / (G)		<del></del>		
(H)		\		
	nn (b) must equal Form 990, Part X, col_(B) line 12 ) ▶			<del></del>
Part VIII	Investments—Program Related.		<del></del>	<del></del>
,.	Complete if the organization answered "Yes" on	Form 990, Part IV, line	e 11c. See Form 990, P	art X, line 13
	(a) Description of investment	(b) Book value	(c) Method of	
			Cost or end-of-year	ar market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	e 11d. See Form 990, F	Part X, line 15.
	(a) Description			(b) Book value
_(1)				
(2)				
(3)				<del></del>
(4)				
(5)				<del></del>
(6)				<del></del>
(7)				<del></del>
(8)		<del></del>		
(9)	(h) much a much Farm 2000 Part V and (P) line 45 )			
Part X	on (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities.			L
rantA	Complete if the organization answered "Yes" or line 25.	n Form 990, Part IV, line	e 11e or 11f See Form	990, Part X,
1.	(a) Description of liability	(b) Book value		
	I income taxes		1	
	UED PAYROLL & PAYROLL TAX LIABIL	22,536	1	
(3)		<del></del>	1	
(4)		1		
(5)			}	
	<del> </del>	1	ī	

· · · · · · · · · · · · · · · · · · ·	
(1) Federal income taxes	
(2) ACCRUED PAYROLL & PAYROLL TAX LIABIL	22,536
(3)	
(4)	
(5)	
(6)	
_(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25 ) ▶	22,536
2. Lightly for uncodes by postions, in Bort VIII, provide the toy of the fe	notnote to the organization's f

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

4c

957,723

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.									
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a									
1	Total revenue, gains, and other support per audited financial statements	1	958,354						
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12								
а	Net unrealized gains (losses) on investments	2a 6,118							
b	Donated services and use of facilities	2b	]						
С	Recoveries of prior year grants	]							
d	Other (Describe in Part XIII )	}							
е	Add lines 2a through 2d	2e	6,118						
3	Subtract line 2e from line 1	3	952,236						
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	(		1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	]						
b	Other (Describe in Part XIII )	4b	]						
С	Add lines 4a and 4b	4c							
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	952,236						
Pŧ	at XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses per	Retur	'n.					
	Complete if the organization answered "Yes" on Form 990, Pa	rt IV, line 12a.							
1	Total expenses and losses per audited financial statements		1	957,723					
2	Amounts included on line 1 but not on Form 990, Part IX, line 25								
а	Donated services and use of facilities	2a							
b	Prior year adjustments	2b	] }						
C	Other losses	2c	] '						
d	Other (Describe in Part XIII )		<u> </u>						
е	Add lines 2a through 2d	2e							
3	Subtract line 2e from line 1	3	957,723						
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	[ [							

Part XIII Supplemental Information.

b Other (Describe in Part XIII )c Add lines 4a and 4b

a Investment expenses not included on Form 990. Part VIII. line 7b

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

PART X - FIN 48 FOOTNOTE

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE ASSOCIATION.

MANAGEMENT EVALUATED THE TAX POSITIONS TAKEN AND CONCLUDED THAT THE ASSOCIATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. NO PROVISION OR BENEFIT FOR INCOME TAXES HAS BEEN INCLUDED IN THESE FINANCIAL STATEMENTS. WITH FEW EXCEPTIONS, THE ASSOCIATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE JUNE 30, 2013.

Part XIII Supplemental Information (continued)

#### SCHEDULE O

(Form 990 or 990-EZ)

# 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.

OMB No 1545-0047 2015

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

COMMUNITY ACTION ASSOCIATION OF PENNSYLVANIA

Employer identification number 25 – 1354078

FORM 990 - ORGANIZATION'S MISSION

THE COMMUNITY ACTION ASSOCIATION OF PENNSYLVANIA (CAAP) IS A STATEWIDE ASSOCIATION REPRESENTING AND ASSISTING THE 43 COMMUNITY ACTION AGENCIES IN PA AS THEY WORK TO EMPOWER FAMILIES AND INDIVIDUALS, GIVING THEM THE OPPORTUNITY TO GAIN THE SKILLS AND CONFIDENCE THEY NEED TO SUCCEED. CAAP ACTS AS A STATEWIDE VOICE FOR LOCAL COMMUNITY ACTION AGENCIES AND LOW-INCOME CITIZENS, ADDRESSING POLICY ISSUES OF IMPORTANCE TO THEM.

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS

THE COMMUNITY ACTION ASSOCIATION OF PENNSYLVANIA (CAAP) IS A STATEWIDE

ASSOCIATION REPRESENTING 43 COMMUNITY ACTION AGENCIES. THESE 43 AGENCIES

REPRESENT THE MEMBERSHIP OF CAAP.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS MEMBERS ELECT THE GOVERNING BODY.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 REVIEWED BY CFO, CEO AND PRESENTED TO BOARD AT THE BOARD MEETING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE ORGANIZATION REQUIRES ANYONE WHO MAY HAVE A CONFLICT AND PARTICIPATES

WITH THE ORGANIZATION TO COMPLETE A FORM STATING WHETHER OR NOT THERE IS A

CONFLICT OF INTEREST AND WHAT THE NATURE OF THE CONFLICT IS. THEY ARE

REVIEWED AT THE BOARD MEETINGS.

#### COMMUNITY ACTION ASSOCIATION

25-1354078

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL ON AN ANNUAL BASIS THE BOARD OF DIRECTORS REVIEWS THE SALARY FOR THE CHIEF EXECUTIVE OFFICER BASED ON A PRIOR STUDY PERFORMED BY AN INDEPENDENT CONSULTANT AND COMPARABILITY DATA.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

ON AN ANNUAL BASIS THE BOARD OF DIRECTORS REVIEWS THE SALARY FOR KEY

EMPLOYEES BASED ON A PRIOR STUDY PERFORMED BY AN INDEPENDENT CONSULTANT AND

COMPARABILITY DATA.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION DOCUMENTS MADE AVAILABLE UPON REQUEST

FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES

DESCRIPTION

	PROGRAM	SERVICE	MGT	&	GENERAL	FUNDRAIS	SING
CONSULTING							
	\$	270,560	\$		10,670	\$	0