Form **991**

Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

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

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Ope lr		to F ect	Publi ion	
, 20				

OMB No. 1545-0047

<u>A</u>	For th	ne 2009 ca	alendar	year, or tax year begi	inning		na enain	كالت المجيد المتخلقات المتناولات	D Employ	er identification number
В	Check if	applicable	Please		DHIO CITIZEN A	CTION ED	UC ATIO	N FUND		1208940
	Address	cnange	use IRS label or	Doing Business As	. box if mail is not delivered to	errent address:	Room/sui	tc	E Telepho	
	vame c	nange	print or type.	614 W. SUP	. box if mail is not derivered to	Sueer address/	# 12		216	861-1989
	nitial re	turn	See Specific		country and 7IP - 4		1			·
	Termina		Instruc- tions.	Clevelar		113			G Gross re	ceipls § 245,065
		ed return	F Nan	me and address of principa	al officer. Rachael	Belz, Exi	ec Di	P. H(a) is this	a group return	ior affiliates? Yes No
□ /	Application	on pending	233	so Victory Pl	Kuy, #100, C	INCIOH "	45204	H(b) Are		ncluded? DYes DNo
$\overline{}$	Tax-ex	empt status	<u> </u>	501(c) (3) ∢ (insert no.)		527			o," attach a	list. (see instructions)
	Webs								exemption nur	
\overline{K}	Form of	organization:	Corp	oration 🗌 Trust 🔲 Associa	tion ☐ Other ►	L Year	of formation	on: 1976	M State of	legal domicile: OH 16
	t I	Summ								
	1	Briefly do	escribe	the organization's m	nission or most signif	icant activities	:			f a allowing frage as a second
Ohi	o Citi	zen Actio	on Edu	cation Fund works	to protect public he	ealth and the e	environi	ment from	threats	of pollution from many
sou	rces,	includin	g indus	strial manufacturer	s, coal-fired power	plants, and to	xic cner	nicais in pr	oducis.	The organization also
	mote	s public	access	to campaign financ	ce records. Work in	cludes resear	than 25%	of its net assi	on anu u ets	annig.
Gov	2	Check this	box ►	if the organization dis	continued its operations of	M line 1al	, 1,121,1 20 70	of its field	3	7
⋖ర	3	Number	of votir	ng members of the g ependent voting mem	bore of the governin	o body (Part V	 7 line 1h)	4	7
Activities	4	Number	ot inde	pendent voting mem f employees (Part V,	line 2al SPC So	hedule	0		5	8
ctiv	5	Total nur	nber of	f volunteers (estimate	if necessary)				6	<u> </u>
<	6	Total are	See Hore	elated business rever	nue from Part VIII. co	lumn (C), line	12		. 7a	
	b	Net unre	lated b	usiness taxable inco	me from Form 990-T	. line 34			. 7b	
							-	Prior Y		Current Year
	8	Contribu	tions a	nd grants (Part VIII, I	ine 1h)		-	707,3	318	238,246
Revenue	9	Program	service	e revenue (Part VIII, I	line 2g)		-	182		17,819
eve	10	Investme	ent inco	ome (Part VIII, columi	n (A), lines 3, 4, and	7d)	-	100	<u> </u>	-
Œ	11	Other re	venue ((Part VIII, column (A),	lines 5, 6d, 8c, 9c,	10c, and 11e)		709.1	29	356,065
				add lines 8 through 11			= 12)	10-1, 1.	51	474,040
	13	Grants a	ınd sim	nilar amounts paid (Pa	art IX, column (A), lin	es 1–3)	• • •			-
u		Benefits	paid to	o or for members (Pa	art IX, column (A), line	94)	. 10/	290,	955	287,115
nse	15	Salaries,	other c	ompensation, employe	ee benetits (Part IX, co	iumn (A), iines c)-10)	839		7733
Expenses	16a	Professi	onal fur	ndraising fees (Part IX g expenses (Part IX, co	, column (A), line (Te)	23.16	a			
m		lotalitun	iaraising	g expenses (Part IX, co s (Part IX, column (A)	\ lines 11a_11d 11f-	-24f)	•	211,9	88	280,083
	17	Other ex	(penses	s (Part IX, Column (A) s. Add lines 13-17 (m	ust equal Part IX co	Jumn (A). line 2	25).	511,	338	574,931
	18	Revenue	less ex	xpenses. Subtract line	18 from line 12		. , .	197,	801	<u> </u>
10 5		7,0,0,0,0						Beginning of C	urrent Year	End of Year
ets	20	Total as	sets (P	art X, line 16)				274,		28,117
Assets	21	Total lia	bilities	(Part X, line 26)				381	943	101,500
Ž,	22	Net ass	ets_or_f	fund balances. Subtra	act line 21 from line 2	<u> 20</u>		245;	483	< 73, 383>
	art II	Sign	nature	Block	<u></u>			dules and state	monts and t	to the best of my knowledge
		Under p	enalties o	of perjury, I declare that I have rue, correct, and complete.	ave examined this return, in Declaration of preparer (o	ncluding accompan ther than officer) is	nying sched s based on	all information	of which pr	to the best of my knowledge eparer has any knowledge.
		,	PA	charto	1 12/2-			ļ		
	gn		nature of	tofficer	1.120			Da	ite	· · · · · · · · · · · · · · · · · · ·
Н	ere			HAEL BELZ	PYFOUT	IVE DI	REC	TOR	16	1-19-10
		Tyr	3:	nt name and title	-, C ACCO	100 401	100			· · · · · · · · · · · · · · · · · · ·
-		+	<u> </u>			Date		heck if		identifying number
		Prepare signatu						elf- mployed ► 🗀	(see instruc	ctions)
_	aid		•]	
	eparer	Firms	name (or					EIN	<u> </u>	
-	se Only	address	employed s, and ZII	P+4 /				Phone	no. ► (<u>)</u>
N	lay the	e IRS dis	cuss th	nis return with the pre	eparer shown above?	(see instruction	ons) .	<u> </u>	<u> </u>	. Yes No
							_	O-+ N-	11000V	Form WWII (2000)

	Statement of Program Service Accomplishments
1	The state of the s
sou	O Citizen Action Education Fund works to protect public health and the environment from threats of pollution from many of Citizen Action Education Fund works to protect public health and the environment from threats of pollution from many reces, including industrial manufacturers, coal-fired power plants, and toxic chemicals in products. The organization also reces, including industrial manufacturers, coal-fired power plants, and toxic chemicals in products. The organization also recess, including industrial manufacturers, coal-fired power plants, and toxic chemicals in products.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes Vesc' describe these new services on Schegule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program Services? Yes V No. 1. decay file those phanges or Schedule C.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	Code: (Expenses \$ 350,427 including grants of \$) (Revenue \$ 17,819) Environmental: Public Education and organizing on environmental, energy and public health issues including toxic Chemical exposure, air follution, scoal mining, and nuclear safety. Expenses include 3200 in donated Services of legal fees,
-	
4b	(Code:) (Expenses \$ 157,431 including grants of \$) (Revenue \$) Campaign Finance: Support for campaign finance, reform efforts, public access to Information and issues related to election procedures.
1-	(Code:) (Expenses \$including grants of \$) (Revenue \$)
70	
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 50'7, 858

Par	t IV Checklist of Required Schedules		
			Yes No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	<u>'/</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	
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? If "Yes," complete Schedule C, Part II	4	/
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	NIA
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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	V
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	- V
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10	- V
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	V
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
•	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.		
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		
12	Schedule D, Parts XI, XII, and XIII.	12	2
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	13	
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a	V
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	V
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	レ
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	i-
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	L
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	i V
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19	V
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	

	Checklist of Required Schedules (continued)	1	Van	No
e al Carte			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		<u></u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	22		<u></u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated organization's current and former officers, directors, trustees, key employees, and highest compensated organization's current and former officers, directors, trustees, key employees, and highest compensated organization or the organization of the organization of the organization of the organization of the organization or the organization of the organization o	23		L
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a 24b	N	V
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
	Did the organization mintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d	/Y	A
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction.	25a		<u></u>
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 poor E72 if "Vee " complete Schedule L. Part I	25b		L
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employed, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes " complete Schedule L. Part III	27		ν
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	28a		i,
2	A series of the series of the start of the series of key employee? If "Yes," complete Scriedule L, Fait IV	204		
	A family member of a current or former officer, director, trustee, or key employees in res, complete	28b		<u></u>
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	,	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>
29	25.14th a superingtion receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		` _
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30		<u></u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under regulations	33		<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Paris II,	34		
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	35		-
3 6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		1
38		38		
_		For	m 990	(2009)

71	Statements Regarding Other IRS Filings and Tax Compliance			
est la maior		70.6	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
þ	Enter the number of Forms W-2G included in line 1a. Enter -u- ii not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	\mathcal{N}	<u>/ 14</u>
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 15 at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	\mathcal{N}	IA
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see		-	
	instructions)			* ***
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	За		
h	If "Ves." has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	N	17
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		V
h	# "Veg." enter the name of the foreign country. ▶			
N	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			200
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		レ
h	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5c	\mathcal{N}	14
	Prohibited Tax Shelter Transaction?	6a	,,,	<u> </u>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	- Oa		
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	N	<u> 117</u>
7	Organizations that may receive deductible contributions under section 170(c).	ve.	5 4	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a	45:42 E	
	and services provided to the payor?	7b	N	119
d	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	+	
	The state of the state was received any funds, directly or indirectly, to nay premiums on a personal		e de la composición d La composición de la	
е	henefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	NI	10
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?.	79	107	<i>-</i>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	N,	<u> 1 A</u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	N	114
•	Sponsoring organizations maintaining donor advised funds.	13.4		
9	Did the organization make any taxable distributions under section 4966?	9a	1	/A
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	\mathcal{N}	LA
10	Section 501(c)(7) organizations. Enter:	7		8138
а	Initiation fees and capital contributions included on Part VIII, line 12		¥.	
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or snareholders			
b	amounts due or received from them)		٠,٠	111
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b 100 1	12a		//+

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sect	tion A. Governing Body and Management		1	
			Yes	No
4 _	Enter the number of voting members of the governing body			
na	Enter the number of voting members that are independent			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		and the last	and the same of
2	Did any officer, director, trustee, or key employee?	2		V
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		L
	supervision of officers, directors or trustees, or key employees to a management company of other person?.	4		2
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed:			-i
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		
^	Does the organization have members or stockholders?	6		V
6	Does the organization have members, stockholders, or other persons who may elect one or more members			V
7a		7a		
	of the governing body?	7b		V
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	47-2		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	3,475		
	the year by the following:	8a	V	100 T 100 D 100 D
а	The governing body?	8b	1	
b	Each committee with authority to act on behalf of the governing body?	- 00		
9	1. there are efficient director trusted or key employee listed in Part VII. Section A, who cannot be reached		V	
	at the organization's mailing address? If "Yes." provide the names and addresses in schedule 5	9a		
Sect	tion B. Policies (This Section B requests information about policies not required by the Inte	ernai		
Reve	enue Code.)			
1000	and occas,		Yes	No
	July 10 Miliaka 2	10a		ت
10a	Does the organization have local chapters, branches, or affiliates?			
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b	NI	14
	efflicted and branches to ensure their operations are consistent with those of the organization?	.00		<u>·</u> _
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	44	v	
	form?	11	and a resident	W
4 + 6	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1,2,5		
100	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	$-\nu$	
120	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		w/	
a		12b		
	rise to conflicts?	!	1	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c	_	Ĺ
	describe in Schedule O how this is done	13	1	
13	Does the organization have a written whistleblower policy?	14	1	
14	Does the organization have a written document retention and destruction policy?		62000	
15	Did the process for determining compensation of the following persons include a review and approval by			4.
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	14.65		
3	The organization's CEO, Executive Director, or top management official	15a	V	
<u>د</u>	Other officers or key employees of the organization	15b	1	100 100 9152 644
a	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
	If "Yes" to line 108 or 100, describe the process in obligate in a joint venture or similar arrangement			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	16a		V
	with a taxable entity during the year?		1 7 7	1000
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	12818		
	its participation in joint venture arrangements under applicable rederal tax law, and taken steps to sarogadio	16b	1/	114
	the organization's exempt status with respect to such arrangements?	טטו	70	<u> </u>
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed > OHIO			
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501)	c)(3)s	only)	
18	available for public inspection. Indicate how you make these available. Check all that apply.			
	available for public inspection, indicate now you make these available. Ones and that apply the available for public inspection, indicate now you make these available. Ones and that apply the available for public inspection, indicate now you make these available. Ones and that apply the available for public inspection, indicate now you make these available.			
	Own website Another's website Upon request	of int	erest	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	J. 1111	.J. J.	
	policy, and financial statements available to the public.	ordo -	of the	
20	State the name, physical address, and telephone number of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who possesses the books and recommendation of the person who person	orus, c	ァ LINE バフィン	2
	organization: DHO CITIZEN ACTION, GIY W. SUPERIOF AVE,			:- <i>y</i>
	State the name, physical address, and telephone number of the person who possessor have organization: DHO CITIZEN ACTION, CIYW. Superior Ave, Neveland, OH 44113 216-861-5200			
		For	n 990	(2009)

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

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. Use Schedule J-2 if additional space is needed.
- 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. 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 the organization did not co	mpensate	any c	curre	ent	offic	cer, d	irec	tor, or trustee.		
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	Positi	on (c	check	c all	that ap	ply)	Reportable	Reportable	Estimated
	hours per							compensation from	compensation from related	amount of other
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	nple ghe	Former	the	organizations	compensation
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		일	la l		oy	" ö		(W-2/1099-MISC)		organization and related
		l iste	trus		ñ	per				organizations
		Ō	tee			Highest compensated employee				
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Name and title Position (check all that apply) Position (check all that apply Position (check all that a	PartVIII	Section A. Officers, Directors, Tru	istees, Key	Emp	loye	ees,	an	d Hig	nesi	Compensater	/E/	(5)
Name and title Approximate N. A. S.					(0	2)			(12)	(-)	",	
Total To		Name and title	hours per					$\overline{}$		compensation	compensatio	n amount of
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization \(\rightarrow \) \(\rightarrow \rightarrow \) \(\rightarrow \) \(\rightarrow \) \(\rightarrow \rightarrow \) \(\rightarrow \rightarrow \) \(\rightarrow \rightarrow \rightarrow \rightarrow \) \(\rightarrow			Week	director		ficer	y employee	ghest compensated ployee	rmer	the organization		SC) from the organization
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Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual. 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) Name and business address (C) Compensation	1b Total						·	·		20,623	0 -0 -	
Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual. Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) Name and business address Did the organization from the organization for such individual (B) Description of services Compensation	2 Total	number of individuals (including but	not limited	to th	iose	list	ed	abov	e) w	nho received m	ore than \$10	JU,UUU IN
employee on line 1a? If "Yes," complete Schedule J for such Individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual. Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) Name and business address Description of services Compensation	repor	table compensation from the organiz	ation >	<u>O</u>								Yes I
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Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	the c	organization and related organizations	sum of rep greater th	oortat an \$1	50,	000	per ? If	"Yes, 	" cc	mplete Sched	ule J for suc	h 4
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) Name and business address (B) Description of services Compensation	5 Did servi	any person listed on line 1a receive ces rendered to the organization? If	e or accrue "Yes," coπ	e con	nper Sci	nsat hed	ion ule	from <i>J for</i>	any suc	y unrelated or h person .	ganization fo	or 5
compensation from the organization. (A) Name and business address (B) Description of services Compensation	Cartina	B. Indonondont Contractors									ed more that	n \$100.000 of
Name and business address Description of services Compensation	1 Com	plete this table for your five highest pensation from the organization.	compensat	ea in	оер ——	ena 	еп.		acı			
NIA		(A) Name and business a	ddress							Description of	services	
NI'			1 A						+			
		`	} 1\						+-			
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Part			venue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513. or 514
Contributions, gifts, grants and other similar amounts	b c d e	Related organizations Government grants (contrib All other contributions, gifts, g and similar amounts not include Noncash contributions included	outions). 1e rants, ded above 1f	16,503 221,743	338,24 <i>6</i>			
Program Service Revenue	2a b c d e f	Contract Se publication		Business Code 9000 99 9000 99	1.7,597	17,597 aaa		
Prog	g	. –		🔈	17,819			
	3 4 5	Investment income (incl other similar amounts) Income from investment of Royalties	tax-exempt bond	🏲				
	b	Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (loss)						
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
į		Less: cost or other basis and sales expenses			The August Property of August Pr			
Revenue	8a	Gross income from events (not including \$ of contributions reported See Part IV, line 18	d on line 1c).					
Other Re	b	Less: direct expenses Net income or (loss) fro	b m fundraising e	events ►				
		Gross income from gam See Part IV, line 19	, а					
	b	Less: direct expenses. Net income or (loss) fro	b om gaming activ	vities ▶				8.09 _m
	ь	Gross sales of inverteurns and allowances Less: cost of goods so Net income or (loss) from	, a ld b		to all the control of	a and supplied the supplied of		
	11a	Miscellaneous Reve	enue	Business Code			Persea Ask Policy (Consultation)	
	b				_			
		Total. Add lines 11a-1	1d		256,065	17,819		

Statement of Functional Expenses

fundraising solicitation . . .

THE IX Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (C) Management and (D) Fundraising (B) Program service Do not include amounts reported on lines 6b, Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 20,623 20,623 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) . . . 96,278 15,436 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . Other employee benefits 9 Payroll taxes 10 44,371 11 Fees for services (non-employees): 44,371 a Management Financial . . . 20,000 20,000 9733 c Accounting d Lobbying 7733 e Professional fundraising services. See Part IV, line 17 f Investment management fees 120,000 000 g Other Contract Services. 145 145 Advertising and promotion 12 8601 8601 13 Office expenses 1083 14 Information technology 15 54,95 54.951 16 6055 6055 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 80 1180 Conferences, conventions, and meetings . 19 36 36 Payments to affiliates 21 4600 600 Depreciation, depletion, and amortization. 22 401 401 Other expenses. Itemize expenses not 24 covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) Bank Charges Membership dues fermits / Fees 615 615 820 1820 *950* 250 С 142 142 Research f All other expenses 574,931 Total functional expenses. Add lines 1 through 24f Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and

	i XX	Balance Sheet			ı
			(A) Beginning of year		(B) End of year
П	1	Cashnon-interest-bearing	42,934	_ 1	3325
	2	Savings and temporary cash investments	17.42	2	10 500
	3	Pledges and grants receivable, net	195,900	3	10,388
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	The second secon	6	
23	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	2116
ă	9	Prepaid expenses and deferred charges	7/9	9	3/15
	10a	Land, buildings, and equipment: cost or 10a 35, 907			
	ام ام	Less: accumulated depreciation 10b 24,///	14,833	10c	11,289
	u 11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	274,446	16	28,117
_	17	Accounts payable and accrued expenses	8111	17	91,550
ı	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	102 Maria (102 Maria (
Liabilities	22	Pavables to current and former officers, directors, trustees, key			
ap		employees, highest compensated employees, and disqualified			
		persons. Complete Part II of Schedule L		22	
1	23	Secured mortgages and notes payable to unrelated third parties	20 803		9950
	24	Unsecured notes and loans payable to unrelated third parties	20,857	24 25	9950
	25	Other liabilities. Complete Part X of Schedule D	28,963	25 26	101.500
_	26	Total liabilities. Add lines 17 through 25	38,963	26	107,500
Sect		complete lines 27 through 29, and lines 33 and 34.	2160 7101	27	Z206,728°
lar	27	Unrestricted net assets	4/05 00	28	133 345
ã	28	Temporarily restricted net assets	703,001	29	155,575
밀	29	Permanently restricted net assets		23	
Net Assets or Fund Balance		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
۲	32	Retained earnings, endowment, accumulated income, or other funds	7115 11842	32	<73,383
S S	33	Total net assets or fund balances	245,483	33	70 117
	34	Total liabilities and net assets/fund balances	12/7/7/6	34	Form 990 (2009)

	Financial Statements and Reporting			
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in		Yes	No
2a	Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? Were the organization's financial statements audited by an independent accountant?	2a 2b	ν	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review or compilation of its financial statements and selection of an independent accountant?	2c	v	
d	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:		100 May 100 Ma	
	Separate basis Consolidated basis Both consolidated and separate basis As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	dE	N_{j}	14

Form 990 (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

2009

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Employer identification number

Nam		the organization	CITIZEN	ACTION E	DUC	ATIO	NFO	MD	34	1208	394	
Pa	t I	Reason	for Public Ch	arity Status (All ord	<u>anizatio</u>	ns must	comple	ete this p	art.) See	e instruc	tions.	
The		anization is no A church, co	ot a private found invention of chur	dation because it is: (ches, or association o	For lines of church	1 through es descri	h 11, che	eck only d	one box.)			
2		A school des	cribed in section	n 170(b)(1)(A)(ii). (Atta	ach Sche	dule ±.)						
3		A hospital or	a cooperative h	ospital service organi	ization de	scribed I	n section	n 170(D)(D(A)(III).	170/h\/1\	A VIIII - F	Enter the
4		haspitalia pa	mo city and eta	tion operated in conju ate:								 -
5		section 170/	h)(1)(A)(iv), (Cor	the benefit of a collect mplete Part II.)							unit des	scribed ii
6		A federal, sta	ate, or local gove	ernment or governme	ntal unit d	described	in secti	on 170(b)(1)(A)(v).			1 15 . 15 .
7	×	An organization that normally receives a substantial part of its support from a governmental unit or from the described in section 170(b)(1)(A)(vi). (Complete Part II.)					ne gene	rai public				
8		A namounit	trust described	l in section 170(h)(1)(' A)/vi). (Co	omplete l	Part II.)				_ f	
9		A community flust described in section. The large states and gross and organization that normally receives: (1) more than 33½ % 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 33½ % 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.)										
 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 							ajizj. Oci	h.				
€		persons other	this box, I cert er than foundatio section 509(a)(2)	ify that the organizat n managers and other	ion is no than one	t controll or more	ed direc publicly	supporte:	irectly by d organiz	one or ations de	more dis	squalified in section
f		organization	check this box	a written determination								oring [
Ī		following pe	rsons?								Γ.	Yes No
		(i) A persor	n who directly or	r indirectly controls, e	either alor	ne or tog	ether wi	th person	is descrit	pea in (ii)	11g(i)	1.00
				ning body of the supp							11g(ii)	
		(ii) A family	member of a pe	erson described in (i) a	above?						11g(iii)	
		(iii) A 35% d	controlled entity	of a person described	d in (i) or	(II) above	(c)				[313]	
	1	Provide the		ation about the support			(2).	ou notify	(vi) l	s the	(vii) Ar	mount of
(ne of supported rganization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing accument?		the orga col. (i)	nization in of your port?	organızat (i) organı	ion in col. zed in the S.?	sur	oport
					Yes	No	Yes	No	Yes	No		
_												
-	. <u> </u>											
_			52.853 F 60.852							to Say		

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Partill (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (f) Total (d) 2008 (e) 2009 (c) 2007 (b) 2006 (a) 2005 Calendar year (or fiscal year beginning in) 238246 2,225,830 391,810 | 694,922 | 193,534 | 707,318 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 second second second The value of services or facilities furnished by a governmental unit to the organization without charge 707,318 238,246 2,325,830 391,810 694,922 193,534 Total. Add lines 1 through 3 . . . The portion of total contributions by each 1,103,128 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. Section B. Total Support (e) 2009 (f) Total (d) 2008 (c) 2007 (b) 2006 (a) 2005 Calendar year (or fiscal year beginning in) > 707,318 238,246 2,225,830 193,534 391,810 694,923 Amounts from line 4 . . Gross income from interest, dividends, 18,231 10,303 6107 payments received on securities loans, 1821 rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is 25,866 17,819 Other income. Do not include gain or 5000 3047 loss from the sale of capital assets 12,269,927 (Explain in Part IV.) Total support. Add lines 7 through 10 . 11 81 23 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 331/2 % support test - 2009. If the organization did not check the box on line 13, and line 14 is 331/2 % or more, check this box 15 33% % support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33% % or more, check this 17a 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . ▶ □ b 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a. and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ □

Page 3 Schedule A (Form 990 or 990-EZ) 2009 Support Schedule for Organizations Described in Section 509(a)(2) Parell (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (e) 2009 (f) Total (d) 2008 (c) 2007 (a) 2005 (b) 2006 Calendar year (or fiscal year beginning in) > Gifts. grants, contributions, membership fees received. (Do not include any "unusual grants.") 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. Gross receipts from activities that are not an unrelated trade or business under section 513 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 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 Public support (Subtract line 7c from line 6.) Section B. Total Support (f) Total (c) 2007 (d) 2008 (e) 2009 (a) 2005 (b) 2006 Calendar year (or fiscal year beginning in) > Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . c Add lines 10a and 10b . . Net income from unrelated business activities not included in line 10b, 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 IV.) Total support. (Add lines 9, 10c, 11, First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) . . . 15 % Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage % 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) .

Investment income percentage from 2008 Schedule A, Part III, line 17

19a 33⅓ % support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33⅓ %, and line 17 is not more than 33⅓ %, check this box and stop here. The organization qualifies as a publicly supported organization ▶ □

b 33⅓ % support tests – 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓ %, and line 18 is not more than 33⅓ %, check this box and stop here. The organization qualifies as a publicly supported organization ▶ □

18

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
PART II, LINE 10:
, , , , , , , , , , , , , , , , , , ,
Of the combined total of 25,866,
Of the combined total of 25,866, 23,597 is from contract services to provide
public education, information rorganizing on environmental Hor campaign finance issues; 2047 is forgiveness of vendor debt; 222 is from publication sales.
environmental Hor campaign finance issues;
2047 is forgiveness of vendor debt;
222 is from publication sales.

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

► Complete if the organization is described below.

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

OMB No. 1545-0047

2009

Open to Public

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. Section 527 organizations: Complete Part I-A only. If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Employer identification number Name of organization CITIZEN ACTION EDUCATION FUND 34 1208940 DHIO Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. Volunteer hours . . . Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 . . . Enter the amount of any excise tax incurred by organization managers under section 4955. If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function and the second of the second o Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 」Yes No 4 Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (d) Amount paid from (e) Amount of political (c) EIN (b) Address (a) Name contributions received and filing organization's funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-.

P	Complete if the organizar under section 501(h)).	tion is exempt under section 501(c)(3) and	filed Form 5768	3 (election
A	Check ► ☐ if the filing organization	belongs to an affiliated group.		
В	Check ► ☐ if the filing organization	checked box A and "limited control" provisi	ons apply.	
		bying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1:		e public opinion (grass roots lobbying)	-0-	
16		ce a legislative body (direct lobbying)	2500	
	- 1112		2500	
			572,431	
		dd lines 1c and 1d)	574,931	
4		e amount from the following table in both	111 7110	
١	columns.	e amount from the following table in both	111,240	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500.000	20% of the amount on line 1e.	"	1000
	Over \$500,000 but not over \$1,000,000	\$100.000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.	NEW THE MARKS CO.	
-	Grassroots nontaxable amount (enter 2	25% of line 1f)	27,810	
ŀ	Subtract line 1g from line 1a. If zero or		0	
i	Subtract line 1f from line 1c. If zero or		O	
j	If there is an amount other than zero on	either line 1h or line 1i, did the organization file Fo		☐ Yes ☐ No
	account for the care for time your.		· · · · · · · · · · · · · · · · · · ·	

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total				
2a Lobbying nontaxable amount	100,763	92,564	101,701	111,240	406,268				
b Lobbying ceiling amount (150% of line 2a, column (e))					609,402				
c Total lobbying expenditures	~0-	-0-	-0-	2500	2500				
d Grassroots nontaxable amount	23,141	25,191	25,425	27,810	101,567				
e Grassroots ceiling amount (150% of line 2d. column (e))					152,350				
f Grassroots lobbying expenditures	-0-	-0-	-0-	-0-	-0-				

Schedule C (Form 990 or 990-EZ) 2009

	(election under section 501(h)).	(2	a)	(b)		
	NIA	Yes	No	Aı	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a b	Volunteers?					
c d	Media advertisements?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV	. 5300-4	-64			
j	Total, Add lines 1c through 1i	dia				
2a b	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912			oddol iw Lodd ditt		NO475-8063
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .			4 Full-Hill (\$54.05)		Stall J
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1(c)(5). o	r secti	on	en.04948
-11	501(c)(6).	• (0)(- , -		···	
				<u></u>	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			2		-
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?		:	3		
Par	Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5), o	secti	on	
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III- "Yes."	-A, II	ne 3	is ans	wer	ed
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ical				
	expenses for which the section 527(f) tax was paid).		2a			
a	Current year	•	2b			
b	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of	the				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year?	ying	4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
	Supplemental Information					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, li	ne 5;	and	Part II-I	3, line	∋ 1i.
Also	, complete this part for any additional information.					

Schedule C (Fo	rm 990 or 990-EZ) 2009	Page 4
Part IV	Supplemental Information (continued)	
	•	
	a*	
	••••••••••••••••••••••••••••••	

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

Employer identification number

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization 1208 FUND OHIO CITIZEN ACTION EDUCATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year . . . 1 Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . <u>. . .</u> . . <u>.</u> . . <u>. .</u> . Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of a certified historic structure ☐ Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements 2с c Number of conservation easements on a certified historic structure included in (a) . . . 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X . . .

_	0
Paoe	_

	Organizations Maintainin	g Collections	of Art, Hi	storic	al Treasures	, or C	ther Similar	Assets (continued)
3	Using the organization's acquisition, a collection items (check all that apply)	accession, and	other reco					
а	Public exhibition Scholarly research	718	k d		Loan or excha			
b	Preservation for future generation	ne	C		01101 1111111			
с 4	Provide a description of the organizar Part XIV.	tion's collections	s and exp	lain ho	w they further	the o	rganization's e	xempt purpose in
5	During the year, did the organization so assets to be sold to raise funds rather	than to be mainta	ained as pa	art of th	ne organization	's coll	ection?	. Yes No
Pal	Escrow and Custodial Ar IV, line 9, or reported an ar	r <mark>angements.</mark> C mount on Form	omplete 990, Par	if the c	organization a e 21.	inswe	red "Yes" to F	orm 990, Part
	Is the organization an agent, trustee, included on Form 990, Part X?					ons or	other assets r	not Yes No
b	If "Yes," explain the arrangement in F	Part XIV and con	nplete the	follow	ing table:			Amount
						10		Amount
С	Beginning balance							·····
d	Additions during the year							
e	Distributions during the year					1f		
f	Ending balance							Yes No
	If "Yes," explain the arrangement in F	Part XIV.						
	Endowment Funds. Com	(a) Current year	(b) Prio		(c) Two years		(d) Three years ba	ick (e) Four years back
	NIA	(a) Current year	(6) 1 110	your	(6) / / / / / /		1	
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses						· · · · · · · · · · · · · · · · · · ·	
d	Grants or scholarships						<u> </u>	
е	Other expenditures for facilities and programs				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	in in the second		
f g	Administrative expenses End of year balance							
2	Provide the estimated percentage of			d as:				
а	Board designated or quasi-endowme	nt ▶	%					
b	Permanent endowment ►	%						
С	Term endowment ▶%							
3а	Are there endowment funds not in the organization by:	possession of the	ne organiz	ation th	nat are held an	id adm	inistered for the	Yes No
	(i) unrelated organizations							. 3a(i)
	(ii) related organizations							. 3a(ii)
	If "Yes" to 3a(ii), are the related organ Describe in Part XIV the intended use	nizations listed a	is required	on So	onequie R?			. 3b
4						art X	line 10	
	to the same of the				ost or other		Accumulated	(d) Book value
	Description of investment	(a) Cost or o (investin			sis (other)		epreciation	(d) Dook Value
1a b	Land							
c	Leasehold improvements							
d	Equipment			35	,401	<u></u>	7,112	<u> 11,289</u>
е	Other	.						11 258
Tota	al. Add lines 1a through 1e. (Column (d) m	oust equal Form 9	90, Part X,	colum	n (B), line 10(c)	.) .		11, 281

Schedule D (Form 990) 2009			, age t
Par VIII Investments—Other Securities	s. See Form 990, Part X.	line 12.	
	(b) Book value	(c) Method of val	luation:
(a) Description of security or category $oldsymbol{eta}$ (including name of security)	(b) Book value	Cost or end-of-year m	
Financial derivatives			
Closely-held equity interests			
Other			
••••••			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		Straine Committee and the second	
	1 0 - 5 200 Dt V		3
Investments—Program Relate	a. See Form 990, Part A,		· · · · · · · · · · · · · · · · · · ·
(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year n	luation:
IV I N		Cost or end-oi-year n	narket value
	>*		
Total. (Column (b) must equal Form 990. Part X. col. (B) line 13.)			and the second second
Other Assets. See Form 990, Pa	rt X, line 15.		
	(a) Description		(b) Book value
Total. (Column (b) must equal Form 990, Part X. col.	(R) line 15.)		
		\(\frac{1}{2}\)	
Other Liabilities. See Form 990,			+ · · · · · · · · · · · · · · · · · · ·
1. (a) Description of liability	(b) Amount		
Federal income taxes			
			되는 경기에 살아가 되었다.
			antona kata pada 2007 ka 22 Tanggaran
	-		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)			

2. FIN 48 Footnote. In Part XIV, 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.

Sche	dule D (Form 990) 2009		
	Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	tatem	ients
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	296,065
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	574, 931
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3_	(318,866)
4	Net unrealized gains (losses) on investments	4	<u>'</u>
5	Donated services and use of facilities	5	3 <u>aoo</u>
6	Investment expenses	6	
7	Prior period adjustments	7	
	Other (Describe in Part XIV.)	8	<u> </u>
8	Total adjustments (net). Add lines 4 through 8	9	
9 10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	2318,866
	Reconciliation of Revenue per Audited Financial Statements With Revenu	e per	Return
1	Total revenue, gains, and other support per audited financial statements	1	359,265
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Not uproplized gains on investments 2a		**
	Donated services and use of facilities		
b	Recoveries of prior year grants		
C	Other (Describe in Part XIV.)		
d	Add lines 2a through 2d	2e	3200
e	Subtract line 2e from line 1	3	256,065
3	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
4		100	
а	Investment expenses not included on Form 990, Part VIII, line 76 .	7.3	** ***
b	Other (Describe in Part XIV.)	40	w8
c	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	256,065
5	The state of the s	ses p	
		1	578,131
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated Services and use of facilities	-	
Ь	Prior year adjustments	\dashv	
С	Other losses	٦.	*
d	Other (Describe in Part XIV.)	26	3200
е	Add lines 2a through 2d	3	1 1 1 1 1 1
3	Subtract line 2e from line 1	"	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		6
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	\dashv	
b	Other (Describe in Part XIV.)	\dashv	.0
С	Add lines 4a and 4b	5	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		1 2111
	Supplemental Information		Dort IV lines 1b
Cor	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	nu 4, nd 45	Also complete
and	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII. lines 2d a	nu 4b	. Also complete
this	part to provide any additional information.		
f	ART XI, XII, XIII;		
			VCO
	Donated Services + Corresponding exp) \subseteq V	156 al
	eflected in audited statements + not on Fo	5 M	190,
	These donated services were legal. The	<u> </u>	rendor
	agreed to cap the fee paid, but invo fees. Difference was donated services	ICE	ed total
	0 \overline{D} 0 0 0 0 0 0 0 0 0 0	ار ہ	on the or more
	tees. Ditterence was gonated services		o me org.

Sahadula D (For	rm 9901 2009	Page 5
Schedule D (i oi	rm 990) 2009 Supplemental Information (continued)	
	Supplemental information (commons)	
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	»'	
		· · · · · · · · · · · · · · · · · · ·

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

► Attach to Form 990.

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

OHIO CITIZEN ACTION EDUCATION FUND 341 1208940

PART I, LINE 5:

Ohio Citizen Action Education Fund (OCA EDF) has a common paymaster agreement with Ohio Citizen Action (OCA), whereby one paycheck is issued from Ohio Citizen Action. They share employees on a reimbursement basis. OCA files all payroll withholding, employment taxes and W2 forms for the total amount paid to the employees from both organizations. OCA charges back to OCA EDF the corresponding salary, taxes, and other related expenses. OCA EDF's financial statements and IRS Form 990 reflect all of these expenses. OCA is a 501 C (4), social welfare organization.

Part VI, line 9:

2009 Ohio Citizen Action Education Fund - Board of Directors

Willa Bronston 841 Creekside Dayton, OH 45427

Florence Beidler 105 Nolan Circle Marietta, OH 45750

Hal Madorsky, Secretary/Treasurer 16500 Shaker Blvd. Cleveland, OH 44120

David Raack 447 Maranatha Dr Marysville, OH 43040 Anne Wise, M.D. 3273 Clarendon Road Cleveland Heights, OH 44118

Thomas Trimble, *President* 4190 Maystar Way Hilliard, OH 43026

Dick Wittberg 211 6th St Parkersburg, WA 26101

Schedule O (Form 990) 2009					Page 2
Name of the organization OHIO CITIZEN ACTION EDUCATION FO	ONO		r identificat		
					.
					
PART VI, LINE 11A:					
Policy for Board Distribution and Review of	of IRS	Form	990		
Ohio Citizen Action Education	Fund				
The Financial Director shall prepare the annual IRS Form 990 Financial Director shall review the Form 990 with the Execut	0. Upon tive Direc	its con	pletion	, the	
Once reviewed and approved by the Executive Director, the I distribute a copy of the IRS Form 990 to each member of the review. The Audit Committee shall meet and document their questions by way of Committee minutes. The Audit Committee phone, or by email.	Board A approva	audit Co al or fur	ommitte ther	ee for	
Upon approval of the Board Audit Committee, the Financial I the full Board a copy of the Form 990 for their review.	Director	shall d	istribute	e to	
The Form 990 shall not be filed with the IRS until the full Bo to review it.	oard has l	had an	opportu	nity	
PARTVI, line 12 abc:					
Process for monitoring and complying with con	ıflict of	intere	est pol	icy	
Annually, board members, officers and key employees are required interest policy, and to sign a document affirming that they have represented the must indicate if any conflict of interest exists, and fully desorable are also required to promptly bring to the Board's attention arise in the future.	ead and uscribe suc	underst h confl	and the ict of ir	policy. nterest.	
					

Page	<u></u>

Name of the organization

OHIO CITIZEN ACTION EDUCATION FUND 34:12.08940

PART VI, LINE 15ab :

Process for Determining Compensation of Key Employees

Ohio Citizen Action Education Fund

When filling an open position of a key employee, such as the Executive Director, Financial Director, Organizing Director, or other management level positions, a review will be done using comparative data of equal positions within comparable organizations. Experience and seniority will be a factor of consideration.

Independent opinions will be sought, whenever possible, to substantiate the decision.

The current policy regarding compensation increases is to provide an annual salary increase on April-1 of each year, in an amount equal to the annual cost of living percentage increase as determined by the Department of Social Security.

Exceptions may be made to this policy based on exceptional merit, but within the comparative norm.

The Board approves the annual increase for the Executive Director.

Comparative data is obtained from interviews with other non-profits we work along with, as well as publications that gather such information.

PARTII, LINE 19%

Process for making certain documents available to the public.

As noted previously, the IRS Form 990 is made public upon request, on Ohio Citizen Action's website, and also through Guidestar, another website.

Other documents are available upon request, including audited financial statements, articles of incorporation, by-laws, and conflict of interest policy.

These additional documents are under consideration to be added to the public portion of our website.

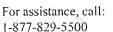
Department of the Treasury

Internal Revenue Service Ogden UT 84201

29404-219-62900-0 341208940

A0128158

211A 3



Notice Number: CP211A Date: September 13, 2010

Taxpayer Identification Number:

34-1208940 Tax Form: 990

Tax Period: December 31, 2009

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OHIO CITIZEN ACTION EDUCATION FUND 614 W SUPERIOR AVE STE 1200 CLEVELAND OH 44113-1386009



071356

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is November 15, 2010.

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at www.irs.gov/eo. This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.