

Form **8879-EO**

**IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2011, or fiscal year beginning 7/01 2011, and ending 6/30 20 12

2011

Department of the Treasury
Internal Revenue Service

▶ Do not send to the IRS. Keep for your records.

▶ See instructions on back.

Name of exempt organization

COMMUNITY ACTION, INC.

Employer identification number

25-1156265

Name and title of officer

**ROBERT A. CARDAMONE
EXECUTIVE DIRECTOR**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a	Form 990 check here ▶ <input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>6,547,893</u>
2a	Form 990-EZ check here ▶ <input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here ▶ <input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here ▶ <input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here ▶ <input type="checkbox"/>	b	Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2011 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize SARP & COMPANY, CPAS to enter my PIN 15601 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2011 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2011 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶

Robert A. Cardamone

Date ▶ 02/11/13

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

25231915601
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2011 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶

Date ▶

ERO Must Retain This Form—See Instructions

Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2011)

Form **990**

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 07/01/11, and ending 06/30/12

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <p style="text-align: center;">COMMUNITY ACTION, INC.</p> Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p>105 GRACE WAY</p> City or town, state or country, and ZIP + 4 <p>PUNXSUTAWNEY PA 15767-1209</p>	D Employer identification number <p style="text-align: center;">25-1156265</p> E Telephone number <p style="text-align: center;">814-938-3302</p> G Gross receipts \$ 6,574,623
F Name and address of principal officer: <p>ROBERT A. CARDAMONE 105 GRACE WAY PUNXSUTAWNEY PA 15767-1209</p>		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
J Website: ▶ WWW.JCCAP.ORG		L Year of formation: 1965
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		M State of legal domicile: PA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <p style="text-align: center;">MISSION STATEMENT - TO PROVIDE AND COORDINATE ACTIVITIES WHICH ALLEVIATE POVERTY, PROMOTE FAMILY SELF-SUFFICIENCY AND ADVANCE COMMUNITY PROSPERITY.</p> 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 18 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 18 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 72 6 Total number of volunteers (estimate if necessary) 6 563 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 176,298 7b Net unrelated business taxable income from Form 990-T, line 34 7b 94,751																		
Revenue	8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Prior Year</th> <th style="width:50%;">Current Year</th> </tr> <tr> <td style="text-align: right;">7,466,280</td> <td style="text-align: right;">6,120,396</td> </tr> <tr> <td style="text-align: right;">45,535</td> <td style="text-align: right;">165,525</td> </tr> <tr> <td style="text-align: right;">32,688</td> <td style="text-align: right;">47,097</td> </tr> <tr> <td style="text-align: right;">250,383</td> <td style="text-align: right;">214,875</td> </tr> <tr> <td style="text-align: right;">7,794,886</td> <td style="text-align: right;">6,547,893</td> </tr> </table>	Prior Year	Current Year	7,466,280	6,120,396	45,535	165,525	32,688	47,097	250,383	214,875	7,794,886	6,547,893					
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250,383	214,875																		
7,794,886	6,547,893																		
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 7,619 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Prior Year</th> <th style="width:50%;">Current Year</th> </tr> <tr> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> </tr> <tr> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> </tr> <tr> <td style="text-align: right;">2,336,653</td> <td style="text-align: right;">2,135,124</td> </tr> <tr> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> </tr> <tr> <td style="text-align: right;">5,274,034</td> <td style="text-align: right;">4,276,328</td> </tr> <tr> <td style="text-align: right;">7,610,687</td> <td style="text-align: right;">6,411,452</td> </tr> <tr> <td style="text-align: right;">184,199</td> <td style="text-align: right;">136,441</td> </tr> </table>	Prior Year	Current Year	0	0	0	0	2,336,653	2,135,124	0	0	5,274,034	4,276,328	7,610,687	6,411,452	184,199	136,441	
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Net Assets or Fund Balances	20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Beginning of Current Year</th> <th style="width:50%;">End of Year</th> </tr> <tr> <td style="text-align: right;">2,365,231</td> <td style="text-align: right;">2,136,180</td> </tr> <tr> <td style="text-align: right;">870,645</td> <td style="text-align: right;">502,885</td> </tr> <tr> <td style="text-align: right;">1,494,586</td> <td style="text-align: right;">1,633,295</td> </tr> </table>	Beginning of Current Year	End of Year	2,365,231	2,136,180	870,645	502,885	1,494,586	1,633,295									
Beginning of Current Year	End of Year																		
2,365,231	2,136,180																		
870,645	502,885																		
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Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer <p style="text-align: center;">ROBERT A. CARDAMONE <i>RACW</i></p> Type or print name and title EXECUTIVE DIRECTOR	Date <p style="text-align: center;">2/12/2013</p>
Paid Preparer Use Only	Print/Type preparer's name <p>JARED EWING</p> Preparer's signature <p>JARED EWING</p> Date <p>02/11/13</p> Check <input type="checkbox"/> if self-employed <input type="checkbox"/> if PTIN P00596532 Firm's name ▶ SARP & COMPANY, CPAS Firm's EIN ▶ 25-1479220 Firm's address ▶ 210 TOLLGATE HILL ROAD GREENSBURG, PA 15601-8718 Phone no. 724-834-2151	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

MISSION STATEMENT - TO PROVIDE AND COORDINATE ACTIVITIES WHICH ALLEVIATE POVERTY, PROMOTE FAMILY SELF-SUFFICIENCY AND ADVANCE COMMUNITY PROSPERITY.

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 No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured 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.

4a (Code:) (Expenses \$ **1,608,887** including grants of \$) (Revenue \$ **1,639,948**)

CCIS - HELPS ELIGIBLE FAMILIES PAY FOR CHILD CARE EXPENSES AT THEIR CHOSEN PROVIDER. OFFERS CHILD CARE PROVIDER LISTINGS, COMMUNITY RESOURCE AND REFERRAL SERVICES TO FAMILIES AND PROVIDES "GETTING STARTED" INFORMATION TO PERSONS INTERESTED IN OPENING A CHILD CARE FACILITY.

4b (Code:) (Expenses \$ **1,776,315** including grants of \$) (Revenue \$ **1,814,970**)

MEDICAL TRANSPORTATION - PROVIDES NON-EMERGENCY MILEAGE REIMBURSEMENT AND PARA-TRANSIT TRANSPORTAION TO COVERED SERVICES TO PERSONS WITH A VALID DEPARTMENT OF PUBLIC WELFARE PA ACCESS CARD.

4c (Code:) (Expenses \$ **1,026,790** including grants of \$) (Revenue \$ **1,111,393**)

ENERGY CONVERSATION & WEATHERIZATION PROJECT - INSTALLS HOUSING MATERIALS TO REDUCE ENERGY CONSUMPTION AND HEALTH AND SAFETY CONCERNS; ALSO PROVIDES ENERGY CONSERVATION EDUCATION.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ **1,275,664** including grants of \$) (Revenue \$)

4e Total program service expenses ▶ **5,687,656**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
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		X
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		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		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c 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		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 reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
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		X
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		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		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 employees? If "Yes," complete Schedule J		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		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? If "Yes," complete Schedule L, Part I		X
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
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		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
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)?		X
4b	If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	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?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

Section 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. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	1a 18		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 18		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		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	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **PA**
- 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 Upon request
- 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, physical address, and telephone number of the person who possesses the books and records of the organization: **ERNEST E. CERTO, JR.** **105 GRACE WAY**

PUNXSUTAWNEY

PA 15767-1209 814-938-3302

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAMES P MCINTYRE DIRECTOR	0.35	X					0	0	0	
(2) JOHN S HALLMAN DIRECTOR	0.20	X					0	0	0	
(3) SAMUEL H SMITH DIRECTOR	0.08	X					0	0	0	
(4) RONALD WILSHIRE VICE PRES	0.22	X		X			0	0	0	
(5) DONNA R OBERLANDER DIRECTOR	0.16	X					0	0	0	
(6) TONYA STERNER DIRECTOR	0.29	X					0	0	0	
(7) REBECCA MITCHELL DIRECTOR	0.13	X					0	0	0	
(8) DAVID GILLESPIE DIRECTOR	0.08	X					0	0	0	
(9) LEE N STEWART TREAS./SEC.	0.43	X		X			0	0	0	
(10) GRANVILLE E CARTER DIRECTOR	0.14	X					0	0	0	
(11) CLARA W BELLOIT DIRECTOR	0.22	X					0	0	0	
(12) LORI BROWN DIRECTOR	0.35	X					0	0	0	
(13) RENEE VOWINKEL DIRECTOR	0.28	X					0	0	0	
(14) STEVE J MEHOK DIRECTOR	0.29	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) PAMELA M JOHNSON ASST. SEC.	0.43	X		X				0	0	0
(16) RICHARD FETTERMAN PRESIDENT	0.92	X		X				0	0	0
(17) JUDITH GARDNER DIRECTOR	0.25	X						0	0	0
(18) G BUTCH CAMPBELL DIRECTOR	0.13	X						0	0	0
(19) ROBERT CARDAMONE EXECUTIVE DIRECTOR	50.92			X				105,956	0	9,329
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total								105,956		9,329
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								105,956		9,329

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **▶ 1**

	Yes	No
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		X
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		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
HEALTH RIDE PLUS NORTHERN CAMBRIA PA 15714	404 MAGNOLIA STREET MEDICAL TRANSP.	1,544,535
HEALTHY HOME CONSTRUCTION MERCER PA 16137	319 OLD SHARON ROAD WEATHERIZATION	204,111
ABC HEATING COOLING & PLUMBING SUMMERVILLE PA 15864	4084 HEATHVILLE OHL ROAD WEATHERIZATION	188,207
PLAYHOUSE CHILDRENS CENTER, LLC PUNXSUTAWNEY PA 15767	218 LANE AVENUE CHILDCARE PROV.	171,087
CREATIVE KIDS LEARNING CENTER CLARION PA 16214	15898 ROUTE 322 CHILDCARE PROV	135,710

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **▶ 8**

Part VIII Statement of Revenue

			(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	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	1,540				
	d Related organizations	1d					
	e Government grants (contributions)	1e	5,952,815				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	166,041				
	g Noncash contributions included in lines 1a-1f: \$		19,218				
	h Total. Add lines 1a-1f		6,120,396				
Program Service Revenue	2a COPOS	Busn. Code 541519	165,525		165,525		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		165,525				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		4,057		53	4,004	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	52,885				
		(ii) Personal					
		b Less: rental exps.					
	c Rental inc. or (loss)		52,885				
	d Net rental income or (loss)		52,885			52,885	
	7a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other		69,770			
		b Less: cost or other basis & sales exps.		26,730			
		c Gain or (loss)		43,040			
	d Net gain or (loss)		43,040	43,040			
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses					
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a	10,720					
	b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory		10,720		10,720		
Miscellaneous Revenue		Busn. Code					
11a OTHER SERVICE FEES			121,737			121,737	
b MISCELLANEOUS			29,533			29,533	
c							
d All other revenue							
e Total. Add lines 11a-11d			151,270				
12 Total revenue. See instructions.			6,547,893	43,040	176,298	208,159	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 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				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, 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)				
7 Other salaries and wages	1,677,033	1,163,818	509,860	3,355
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	27,460	16,629	10,791	40
9 Other employee benefits	304,586	253,270	50,839	477
10 Payroll taxes	126,045	87,239	38,551	255
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	28,684		28,682	2
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	109,515	98,980	9,729	806
14 Information technology				
15 Royalties				
16 Occupancy	95,506	88,656	6,695	155
17 Travel	60,367	48,014	12,322	31
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,332	1,304	1,028	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	15,889	15,889		
23 Insurance	32,261	30,689	1,544	28
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CLIENT TRAVEL AND ASSISTANCE	1,484,166	1,484,166		
b CHILD CARE FEES	1,387,424	1,387,423	1	
c WEATHERIZATION SERVICES	633,529	633,529		
d HOUSING ASSISTANCE	116,936	116,936		
e All other expenses	309,719	261,114	46,135	2,470
25 Total functional expenses. Add lines 1 through 24e	6,411,452	5,687,656	716,177	7,619
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	1,039,316	1	831,889
	2	Savings and temporary cash investments	62,150	2	62,440
	3	Pledges and grants receivable, net	534,137	3	505,886
	4	Accounts receivable, net	105,462	4	123,485
	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)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	4,453	8	14,331
	9	Prepaid expenses and deferred charges	47,751	9	52,917
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	902,808		
	b	Less: accumulated depreciation	403,827		
	11	Investments—publicly traded securities	527,980	10c	498,981
	12	Investments—other securities. See Part IV, line 11	43,982	11	46,251
	13	Investments—program-related. See Part IV, line 11		12	
	14	Intangible assets		13	
	15	Other assets. See Part IV, line 11		14	
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,365,231	15	2,136,180	
Liabilities	17	Accounts payable and accrued expenses	778,070	16	467,900
	18	Grants payable		17	
	19	Deferred revenue	92,575	18	34,985
	20	Tax-exempt bond liabilities		19	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21	
	23	Secured mortgages and notes payable to unrelated third parties		22	
	24	Unsecured notes and loans payable to unrelated third parties		23	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		24	
	26	Total liabilities. Add lines 17 through 25	870,645	25	502,885
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	1,432,106	26	1,557,979
	28	Temporarily restricted net assets	62,480	27	75,316
	29	Permanently restricted net assets		28	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		29	
	31	Paid-in or capital surplus, or land, building, or equipment fund		30	
	32	Retained earnings, endowment, accumulated income, or other funds		31	
33	Total net assets or fund balances	1,494,586	32	1,633,295	
34	Total liabilities and net assets/fund balances	2,365,231	33	2,136,180	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,547,893
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,411,452
3	Revenue less expenses. Subtract line 2 from line 1	3	136,441
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,494,586
5	Other changes in net assets or fund balances (explain in Schedule O)	5	2,268
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,633,295

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ 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?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	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?	X	
3b	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	X	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2011

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

COMMUNITY ACTION, INC.

Employer identification number

25-1156265

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.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 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).**
- 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.)
- 9 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 that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(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 document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2011

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5,537,960	5,907,402	6,810,730	7,466,280	6,120,396	31,842,768
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	5,537,960	5,907,402	6,810,730	7,466,280	6,120,396	31,842,768
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						31,842,768

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	5,537,960	5,907,402	6,810,730	7,466,280	6,120,396	31,842,768
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	28,094	2,681	84,393	64,005	56,889	236,062
9 Net income from unrelated business activities, whether or not the business is regularly carried on	39,531	22,030	3,945	27,113	246,021	338,640
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	183,857	222,630	120,403	174,149	156,020	857,059
11 Total support. Add lines 7 through 10						33,274,529
12 Gross receipts from related activities, etc. (see instructions)					12	

13 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 2011 (line 6, column (f) divided by line 11, column (f))	14	95.70 %
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	95.76 %

16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

b 33 1/3% support test—2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

17a 10%-facts-and-circumstances test—2011. 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—2010. 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 ▶

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 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

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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. Also complete this part for any additional information. (See instructions).

PART II, LINE 10 - OTHER INCOME DETAIL

\$ 857,059

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

Employer identification number

COMMUNITY ACTION, INC.

25-1156265

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors... Yes No, 6 Did the organization inform all grantees... Yes No.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements (checkboxes for various types), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution... 2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 8/17/06... 3 Number of conservation easements modified... 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring... Yes No, 6 Staff and volunteer hours devoted to monitoring... 7 Amount of expenses incurred in monitoring... \$, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No, 9 In Part XIV, describe how the organization reports conservation easements...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 \$, (ii) Assets included in Form 990, Part X \$, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 \$, b Assets included in Form 990, Part X \$.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment %
- b** Permanent endowment %
- c** Temporarily restricted endowment %

The percentages in lines 2a, 2b, and 2c should equal 100%.

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

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

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Yes No

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

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		34,965		34,965
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		867,843	403,827	464,016
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				498,981

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. FIN 48 (ASC 740) 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 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,547,893
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,411,452
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	136,441
4	Net unrealized gains (losses) on investments	4	2,268
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	2,268
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	138,709

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	6,576,730
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	2,268
b	Donated services and use of facilities	2b	26,569
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	28,837
3	Subtract line 2e from line 1	3	6,547,893
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6,547,893

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	6,438,021
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	26,569
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	26,569
3	Subtract line 2e from line 1	3	6,411,452
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	6,411,452

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

COMMUNITY ACTION, INC.

Employer identification number

25-1156265

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

OTHER PROGRAM SERVICES:

HOMELESS SERVICES - PROVIDES EMERGENCY SHELTER,
TRANSITIONAL HOUSING, HELP IN LOCATING A RESIDENCE, CASE
MANAGEMENT, LIMITED FINANCIAL ASSISTANCE AND ADVOCACY
SERVICES.

FAMILY / FOOD SERVICES - PROVIDES LIMITED ASSISTANCE FOR
RENT, MORTGAGE, UTILITY BILLS AND FOOD; OFFERS ASSISTANCE
IN THE COMPLETION OF FOOD STAMP APPLICATIONS.

CASE MANAGEMENT - STAFF WORK CLOSELY WITH FAMILIES TO
DEVELOP GOAL PLANS SO THEY MAY WORK TOWARDS OVERCOMING
BARRIERS AND ACHIEVE SELF-SUFFICIENCY.

HOUSING DEVELOPMENT - DEVELOPS AND MAINTAINS DECENT, SAFE
AND AFFORDABLE HOUSING.

DOMESTIC VIOLENCE INTERVENTION / PREVENTION - PROVIDES
EMERGENCY SHELTER, 24-HOUR HOTLINE, EDUCATIONAL PROGRAMS,
OPTIONS COUNSELING, LEGAL ADVOCACY AND GROUP SUPPORT TO
VICTIMS OF DOMESTIC VIOLENCE.

PARENTING SERVICES - PROVIDES EDUCATION, INFORMATION,
ADVOCACY AND SUPPORT THROUGH A FACILITATED PARENT
LEADERSHIP MODEL.

ADULT EDUCATION - PROVIDES INDIVIDUAL INSTRUCTION FOR
ADULTS VIA TUTOR OR CLASSROOM TO IMPROVE SKILLS IN
READING, MATH, JOB READINESS, COLLEGE / TECHNOLOGY
TRAINING, COMPUTER OR TO PREPARE FOR THE GENERAL EDUCATION

Name of the organization

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Employer identification number

25-1156265

DEVELOPMENT (GED) EXAM.

YOUTH OPPORTUNITIES - COMMUNITY ACTION, INC. PARTNERS WITH OTHERS TO PROVIDE YOUTH WITH MENTORING ACTIVITIES, FINANCIAL LITERACY AND WORK READINESS EDUCATION AND SKILLS.

INFORMATION TECHNOLOGY - PROVIDES TECHNOLOGY CONSULTING INCLUDING: NETWORKING; SOFTWARE DEVELOPMENT; AND THE SALE OF TECHNOLOGY HARDWARE, SOFTWARE AND ACCESSORIES. A 990 - T IS FILED FOR UNRELATED BUSINESS INCOME.

SENIOR CORPS - RSVP - UTILIZES TALENTS OF PERSONS AGES 55 AND OVER TO MEET COMMUNITY NEEDS THROUGH VOLUNTEERING AT NON-PROFIT ORGANIZATIONS.

NEW CHOICES CAREER DEVELOPMENT - PROVIDES PERSONS SKILLS AND KNOWLEDGE TO ENABLE THEM TO MAKE NEW CAREER CHOICES.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 DUE TO THE TIMING OF THE PREPARATION OF THE 990 AND THE FILING DUE DATE, THE 990 HAS BEEN REVIEWED BY MANAGEMENT. A COPY WILL BE PROVIDED TO THE AUDIT/FINANCE COMMITTEE AFTER THE FORM 990 HAS BEEN FILED FOR REVIEW PRIOR TO PROVIDING A COPY TO THE FULL BOARD.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY A CONFLICT OF INTEREST POLICY COVERING THE AGENCY'S BOARD MEMBERS IS DEFINED IN THE ORGANIZATION'S BYLAWS. ALL BOARD MEMBERS ARE REQUIRED TO ANNUALLY COMPLETE AND SIGN A CONFLICT OF INTEREST STATEMENT OR WHEN THERE IS A CHANGE IN THE BOARD MEMBER'S STATUS REGARDING A CONFLICT OF INTEREST. A WRITTEN POLICY IS CONTAINED IN THE EMPLOYEE HANDBOOK. EMPLOYEES ARE

Name of the organization

COMMUNITY ACTION, INC.

Employer identification number

25-1156265

REQUIRED TO SUPPORT THE MISSION, POLICIES, PROCEDURES AND GOALS AND CONDUCT THEMSELVES IN AN ETHICAL MANNER. EMPLOYEES ARE PERMITTED TO REQUEST PERMISSION TO PERFORM WORK PERTAINING TO OR SIMILAR TO WORK PERFORMED BY COMMUNITY ACTION, INC., BY SUBMITTING A WRITTEN REQUEST TO THEIR IMMEDIATE SUPERVISOR 30 DAYS PRIOR TO THE PROPOSED COMMENCEMENT OF THE WORK START DATE. THE EMPLOYEE'S IMMEDIATE SUPERVISOR WILL REVIEW THE REQUEST AND FORWARD IT WITH THEIR RECOMMENDATION TO THE EXECUTIVE DIRECTOR FOR FINAL DECISION MAKING AUTHORITY.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
 THE BOARD OF DIRECTORS ARE RESPONSIBLE FOR EMPLOYING AND EVALUATING THE EXECUTIVE DIRECTOR'S COMPENSATION AND PERFORMANCE. THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS IS CHARGED WITH MAKING RECOMMENDATIONS TO THE BOARD REGARDING THE HIRING AND TERMINATION OF THE EXECUTIVE DIRECTOR'S EMPLOYMENT.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
 THE HIRING OF COMMUNITY ACTION, INC. KEY EMPLOYEES IS THE RESPONSIBILITY OF THE EXECUTIVE DIRECTOR.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
 THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE, WWW.JCCAP.ORG, OR UPON REQUEST.

FORM 990, PART XI, LINE 5 - OTHER CHANGES IN NET ASSETS EXPLANATION
 CONSISTS OF THE UNREALIZED HOLDING GAIN ON THE MARKETABLE EQUITY SECURITIES

Name of the organization

COMMUNITY ACTION, INC.

Employer identification number

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**HELD BY THE ORGANIZATION, WHICH IS RECOGNIZED FOR FINANCIAL STATEMENT
REPORTING PURPOSES, BUT NOT ON THE FORM 990 UNTIL AN ACTUAL GAIN OR LOSS IS
REALIZED.**

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Other Depreciation:									
1	Shelter Building	9/01/90	23,000			23,000	35 MO S/L	13,690	658
2	Land - 500W	9/01/90	2,000			2,000	0 -- Land	0	0
3	Land - 114 N	1/01/92	1,100			1,100	0 -- Land	0	0
	Sold/Scrapped: 4/20/12								
4	Building - 114	1/01/92	9,900			9,900	30 MO S/L	6,783	275
	Sold/Scrapped: 4/20/12								
8	Land - 112 Bey	1/01/92	750			750	0 -- Land	0	0
9	Buildings - 11	1/01/92	6,750			6,750	30 MO S/L	4,625	225
11	4 Unit Apartment	10/14/93	15,000			15,000	30 MO S/L	8,875	417
	Sold/Scrapped: 4/20/12								
12	Building Imp	6/15/95	4,334			4,334	40 MO S/L	1,742	109
13	Renovations	6/28/96	2,722			2,722	40 MO S/L	1,021	68
15	Renovations	5/01/96	973			973	40 MO S/L	369	24
16	Renovations	3/01/96	973			973	40 MO S/L	373	24
17	Furnace - (Mar	5/01/96	298			298	15 MO S/L	298	0
18	Furnace - (Mar	3/01/96	298			298	15 MO S/L	298	0
19	Renovations	1/01/96	8,729			8,729	40 MO S/L	3,382	219
20	Renovations	12/28/95	3,898			3,898	40 MO S/L	1,510	98
21	Marble, PA Property	5/01/96	5,500			5,500	40 MO S/L	2,085	138
22	Marble, PA Property	3/01/96	5,500			5,500	40 MO S/L	2,108	138
23	Harmony House Property	6/30/96	16,500			16,500	40 MO S/L	6,188	412
24	Remove Water Line - (Harmony)	9/18/96	990			990	40 MO S/L	365	25
25	Harmony Renovations	9/30/96	2,231			2,231	40 MO S/L	822	56
26	Findley Park Improvements	9/30/96	1,732			1,732	40 MO S/L	639	36
	Sold/Scrapped: 4/20/12								
27	Marble Renovations	9/30/96	2,098			2,098	40 MO S/L	774	52
29	Grace Way (Transferred from CAM Enterpr	12/18/97	131,642			131,642	40 MO S/L	44,429	3,291
30	Grace Way Land	12/18/97	9,015			9,015	0 -- Land	0	0
32	Land - Greenview	7/07/98	4,500			4,500	0 -- Land	0	0
33	Building - Sykesville Property	6/30/99	10,800			10,800	40 MO S/L	3,263	270
34	Grace Way B	12/18/97	36,093			36,093	40 MO S/L	36,093	0
35	Grace Way F	8/15/99	39,300			39,300	40 MO S/L	11,708	983
36	Land - Sykesville	6/30/99	1,200			1,200	0 -- Land	0	0
37	Improvements	8/31/99	4,800			4,800	40 MO S/L	1,430	120
38	Flood Wall - Drains	8/31/99	1,000			1,000	40 MO S/L	298	25
39	Removal/Disp	8/31/99	2,600			2,600	40 MO S/L	775	65
40	Plumbing - Heating - Sykes	11/30/99	894			894	20 MO S/L	522	44
41	Land - 228 N. M	5/11/00	15,000			15,000	0 -- Land	0	0
42	Excavating - Land Improvements - Sykesvil	5/25/00	805			805	40 MO S/L	225	20
49	Siding - Parad - Sykesville	4/01/01	5,000			5,000	40 MO S/L	1,281	125
50	Sewer - Sykesville	6/01/01	900			900	40 MO S/L	227	22
55	Windows - Marble (9)	6/30/97	1,328			1,328	40 MO S/L	465	33
56	Roof - Findley Street	10/31/97	10,523			10,523	20 MO S/L	7,191	438
	Sold/Scrapped: 4/20/12								
57	Furnace - Findley Street	8/01/97	1,154			1,154	15 MO S/L	1,070	65
	Sold/Scrapped: 4/20/12								
58	Replacement - Findley Street	10/16/97	940			940	20 MO S/L	642	39
	Sold/Scrapped: 4/20/12								
60	Graceway - Roof Replacement	10/02/98	9,330			9,330	20 MO S/L	5,948	466
61	Sewer Line In - Harmony	4/29/99	743			743	40 MO S/L	227	19
62	Mahoning - Basement Election	6/28/99	780			780	40 MO S/L	236	19
64	Fire Door Installation - Dubois	11/30/99	850			850	10 MO S/L	850	0
	Sold/Scrapped: 6/30/12								
67	Furniture	7/01/85	4,040			4,040	5 MO S/L	4,040	0
68	Office Equipment	9/01/90	5,735			5,735	10 MO S/L	5,735	0
69	Other Equipment	10/21/87	73,732			73,732	7 MO S/L	73,732	0
95	MIP Software	5/26/98	5,850			5,850	3 MO S/L	5,850	0
97	CD-Recordable	6/15/99	505			505	5 MO S/L	505	0
	Sold/Scrapped: 1/15/12								
98	Upgrade - MIP	10/01/99	500			500	1 MO S/L	500	0
99	Clarion Office	11/15/99	816			816	5 MO S/L	816	0
103	Sewer (Forming)	5/19/00	993			993	3 MO S/L	993	0
105	Samsung Dc Telephone System	11/01/00	16,225			16,225	10 MO S/L	16,225	0
106	Buildings - 4 Houses	1/01/92	15,750			15,750	30 MO S/L	10,792	0
	Sold/Scrapped: 7/01/11								
107	Land - 201 Gre	1/01/92	1,400			1,400	0 -- Land	0	0
109	Building - 228 N Main Street	12/01/01	281,183			281,183	40 MO S/L	67,367	7,029
110	Additional R - Handrails - 228 N Main	12/31/01	2,417			2,417	40 MO S/L	574	61

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
113	4-24 Button P	9/13/01	996			996	2 MO S/L	996	0
117	Server Moun	4/23/03	869			869	3 MO S/L	869	0
119	Smart UPS	4/30/03	1,110			1,110	3 MO S/L	1,110	0
	Sold/Scrapped: 11/15/11								
121	Poweredge 2	5/29/03	2,225			2,225	3 MO S/L	2,225	0
	Sold/Scrapped: 10/15/11								
122	(4) Sets Server	5/29/03	800			800	3 MO S/L	800	0
124	(2) Poweredg	5/29/03	4,568			4,568	3 MO S/L	4,568	0
	Sold/Scrapped: 11/15/11								
126	Computer Room Air Conditioner	6/24/03	4,800			4,800	10 MO S/L	3,840	480
127	Dell Power	6/24/03	656			656	1 MO S/L	656	0
	Sold/Scrapped: 5/15/12								
130	Gutters & Downspouts - Harmony Gutters	10/21/05	1,000			1,000	39 MO S/L	146	26
131	Roof - Harmony - Front Section	10/21/05	1,600			1,600	39 MO S/L	234	41
132	Electrical Entry - Harmony	11/16/05	1,190			1,190	39 MO S/L	172	30
133	Holmes House Attic Furnace	2/01/07	2,556			2,556	15 MO S/L	753	170
134	Sykes Roof Replacement	10/10/06	5,200			5,200	20 MO S/L	1,235	260
136	Beyer Down Furnace	11/08/06	2,000			2,000	15 MO S/L	622	134
137	Grace Way drains/upflush toilet	10/12/06	2,800			2,800	40 MO S/L	333	70
138	(2) Halotron Fire Extinguishers	4/01/07	800			800	10 MO S/L	340	80
145	Powervault Tape Drive	6/01/07	1,319			1,319	3 MO S/L	1,319	0
147	Fire Alarm System Upgrade	7/11/07	1,280			1,280	10 MO S/L	512	128
148	Trilogy exit lock and software	9/01/07	631			631	3 MO S/L	631	0
149	Back-up Exec Software	3/01/08	890			890	3 MO S/L	890	0
150	(4) Cisco 24 port switch + access point	3/05/08	1,112			1,112	5 MO S/L	741	223
151	Sheridan Road Agency Sign	5/16/08	885			885	5 MO S/L	546	177
152	MIP Software Allocation Module	6/20/08	2,495			2,495	3 MO S/L	2,495	0
185	Omni Form V5.0 Govt & Filter	7/01/08	2,203			2,203	3 MO S/L	2,203	0
186	Toshiba Copier w/ Large Capacity Tray	10/10/08	6,218			6,218	5 MO S/L	3,316	1,244
187	Toshiba Copier	10/10/08	5,988			5,988	5 MO S/L	3,194	1,197
188	103 Park Ave Gas Furnace	12/01/08	2,400			2,400	15 MO S/L	414	133
	Sold/Scrapped: 4/20/12								
189	Office Pro, Visio Pro, Exchange Server	12/01/08	1,340			1,340	3 MO S/L	1,154	186
190	Viewpoint Network Pro 2040 & TZ-170	12/01/08	591			591	3 MO S/L	411	0
	Out Of Service: 1/15/11								
191	Sentry Fire/Water Resistant Safe 200 E. Mal	12/01/08	579			579	10 MO S/L	150	57
192	Sentry Fire/Water Resistant Safe 105 Grace	12/01/08	579			579	10 MO S/L	150	57
193	Seagate Black Armourn Staorage Server	6/01/09	1,000			1,000	3 MO S/L	694	306
194	Sykesville Carpeting	9/01/09	975			975	3 MO S/L	596	325
195	Fellows Powershred Shredder	5/10/10	1,446			1,446	3 MO S/L	522	482
196	Dell Computer	3/01/10	940			940	3 MO S/L	418	313
197	Dell Computer	3/01/10	940			940	3 MO S/L	418	313
198	HP LaserJet M3035XS Printer	7/06/09	1,822			1,822	5 MO S/L	729	364
199	HP LaserJet P015TN Printer	9/01/09	1,449			1,449	5 MO S/L	531	290
200	HP LaserJet M3035XS Printer	7/06/09	1,822			1,822	5 MO S/L	729	364
201	Sonicwall NSA 2400 Router Server Romm	3/01/10	1,741			1,741	5 MO S/L	464	348
202	Office Professional Plus 2010 (50) Licenses	9/01/10	1,550			1,550	3 MO S/L	431	516
203	Suncast Storage Shed	10/21/10	710			710	3 MO S/L	158	236
204	R710 Server Storage & Memory Upgrades	4/01/11	1,072			1,072	3 MO S/L	89	358
205	STORECENTER Grace Way	5/01/11	678			678	3 MO S/L	38	226
206	STORECENTER 200 E. Mahoning	5/01/11	678			678	3 MO S/L	38	226
207	Symantec Backup Agen S/N# M564596053	6/13/11	645			645	3 MO S/L	18	215
208	(2) Attic Ventilators + Installation	6/22/11	700			700	10 MO S/L	0	70
209	Sonic Wall TX 170	11/21/06	511			511	3 MO S/L	170	341
210	Spam Firewall	5/30/07	2,149			2,149	3 MO S/L	716	1,433
211	TX 170 Wireless Router	7/01/07	542			542	3 MO S/L	181	361
212	(41) Microsoft Office Pro	6/22/11	31,365			31,365	3 MO S/L	0	10,455
213	(2) MS Server w/SQL	6/22/11	1,514			1,514	3 MO S/L	0	505
214	(2) Compass Donated Notebooks	9/28/10	3,139			3,139	3 MO S/L	785	1,046
215	Beyer Ave. Partial Roof Replacement	1/01/12	3,460			3,460	20 MO S/L	0	87
216	(50) Sharepoint User Licenses Microsoft Dc	8/15/11	19,771			19,771	3 MO S/L	0	6,041
217	4 To Ducane Air Conditioner Grace Way	5/10/12	2,085			2,085	15 MO S/L	0	23
218	3.5 Ton Ducane Air Conditioner Grace Wa	7/21/11	4,825			4,825	15 MO S/L	0	295
219	5 Ton Ducane Air Conditioner Grace Way	7/21/11	7,425			7,425	15 MO S/L	0	454
220	Clean Mail Server Software 100 recipients	5/15/12	974			974	3 MO S/L	0	54
	Total Other Depreciation		<u>971,227</u>			<u>971,227</u>		<u>404,706</u>	<u>46,848</u>
	Total ACRS and Other Depreciation		<u>971,227</u>			<u>971,227</u>		<u>404,706</u>	<u>46,848</u>

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
	Grand Totals		971,227			971,227		404,706	46,848
	Less: Dispositions and Transfers		68,413			68,413		46,320	1,403
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>902,814</u>			<u>902,814</u>		<u>358,386</u>	<u>45,445</u>

AMT Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Other Depreciation:								
1	Shelter Building	9/01/90	0		0	0 HY	0	0
2	Land - 500W	9/01/90	0		0	0 HY	0	0
3	Land - 114 N	1/01/92	0		0	0 HY	0	0
	Sold/Scrapped: 4/20/12							
4	Building - 114	1/01/92	0		0	0 HY	0	0
	Sold/Scrapped: 4/20/12							
8	Land - 112 Bey	1/01/92	0		0	0 HY	0	0
9	Buildings - 11	1/01/92	0		0	0 HY	0	0
11	4 Unit Apartment	10/14/93	0		0	0 HY	0	0
	Sold/Scrapped: 4/20/12							
12	Building Imp	6/15/95	0		0	0 HY	0	0
13	Renovations	6/28/96	0		0	0 HY	0	0
15	Renovations	5/01/96	0		0	0 HY	0	0
16	Renovations	3/01/96	0		0	0 HY	0	0
17	Furnace - (Mar	5/01/96	0		0	0 HY	0	0
18	Furnace - (Mar	3/01/96	0		0	0 HY	0	0
19	Renovations	1/01/96	0		0	0 HY	0	0
20	Renovations	12/28/95	0		0	0 HY	0	0
21	Marble, PA Property	5/01/96	0		0	0 HY	0	0
22	Marble, PA Property	3/01/96	0		0	0 HY	0	0
23	Harmony House Property	6/30/96	0		0	0 HY	0	0
24	Remove Water Line - (Harmony)	9/18/96	0		0	0 HY	0	0
25	Harmony Renovations	9/30/96	0		0	0 HY	0	0
26	Findley Park Improvements	9/30/96	0		0	0 HY	0	0
	Sold/Scrapped: 4/20/12							
27	Marble Renovations	9/30/96	0		0	0 HY	0	0
29	Grace Way (Transferred from CAM Enterpr	12/18/97	0		0	0 HY	0	0
30	Grace Way Land	12/18/97	0		0	0 HY	0	0
32	Land - Greenview	7/07/98	0		0	0 HY	0	0
33	Building - Sykesville Property	6/30/99	0		0	0 HY	0	0
34	Grace Way B	12/18/97	0		0	0 HY	0	0
35	Grace Way F	8/15/99	0		0	0 HY	0	0
36	Land - Sykesville	6/30/99	0		0	0 HY	0	0
37	Improvements	8/31/99	0		0	0 HY	0	0
38	Flood Wall - Drains	8/31/99	0		0	0 HY	0	0
39	Removal/Disp	8/31/99	0		0	0 HY	0	0
40	Plumbing - Heating - Sykes	11/30/99	0		0	0 HY	0	0
41	Land - 228 N. M	5/11/00	0		0	0 HY	0	0
42	Excavating - Land Improvements - Sykesvil	5/25/00	0		0	0 HY	0	0
49	Siding - Parad - Sykesville	4/01/01	0		0	0 HY	0	0
50	Sewer - Sykesville	6/01/01	0		0	0 HY	0	0
55	Windows - Marble (9)	6/30/97	0		0	0 HY	0	0
56	Roof - Findley Street	10/31/97	0		0	0 HY	0	0
	Sold/Scrapped: 4/20/12							
57	Furnace - Findley Street	8/01/97	0		0	0 HY	0	0
	Sold/Scrapped: 4/20/12							
58	Replacement - Findley Street	10/16/97	0		0	0 HY	0	0
	Sold/Scrapped: 4/20/12							
60	Graceway - Roof Replacement	10/02/98	0		0	0 HY	0	0
61	Sewer Line In - Harmony	4/29/99	0		0	0 HY	0	0
62	Mahoning - Basement Election	6/28/99	0		0	0 HY	0	0
64	Fire Door Installation - Dubois	11/30/99	0		0	0 HY	0	0
	Sold/Scrapped: 6/30/12							
67	Furniture	7/01/85	0		0	0 HY	0	0
68	Office Equipment	9/01/90	0		0	0 HY	0	0
69	Other Equipment	10/21/87	0		0	0 HY	0	0
95	MIP Software	5/26/98	0		0	0 HY	0	0
97	CD-Recordable	6/15/99	0		0	0 HY	0	0
	Sold/Scrapped: 1/15/12							
98	Upgrade - MIP	10/01/99	0		0	0 HY	0	0
99	Clarion Office	11/15/99	0		0	0 HY	0	0
103	Sewer (Forming)	5/19/00	0		0	0 HY	0	0
105	Samsung Dc Telephone System	11/01/00	0		0	0 HY	0	0
106	Buildings - 4 Houses	1/01/92	0		0	0 HY	0	0
	Sold/Scrapped: 7/01/11							
107	Land - 201 Gre	1/01/92	0		0	0 HY	0	0
109	Building - 228 N Main Street	12/01/01	0		0	0 HY	0	0
110	Additional R - Handrails - 228 N Main	12/31/01	0		0	0 HY	0	0

AMT Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
113	4-24 Button P	9/13/01	0			0	0	HY	0	0
117	Server Moun	4/23/03	0			0	0	HY	0	0
119	Smart UPS	4/30/03	0			0	0	HY	0	0
	Sold/Scrapped: 11/15/11									
121	Poweredge 2	5/29/03	0			0	0	HY	0	0
	Sold/Scrapped: 10/15/11									
122	(4) Sets Server	5/29/03	0			0	0	HY	0	0
124	(2) Poweredg	5/29/03	0			0	0	HY	0	0
	Sold/Scrapped: 11/15/11									
126	Computer Room Air Conditioner	6/24/03	0			0	0	HY	0	0
127	Dell Power	6/24/03	0			0	0	HY	0	0
	Sold/Scrapped: 5/15/12									
130	Gutters & Downspouts - Harmony Gutters	10/21/05	0			0	0	HY	0	0
131	Roof - Harmony - Front Section	10/21/05	0			0	0	HY	0	0
132	Electrical Entry - Harmony	11/16/05	0			0	0	HY	0	0
133	Holmes House Attic Furnace	2/01/07	0			0	0	HY	0	0
134	Sykes Roof Replacement	10/10/06	0			0	0	HY	0	0
136	Beyer Down Furnace	11/08/06	0			0	0	HY	0	0
137	Grace Way drains/upflush toilet	10/12/06	0			0	0	HY	0	0
138	(2) Halotron Fire Extinguishers	4/01/07	0			0	0	HY	0	0
145	Powervault Tape Drive	6/01/07	0			0	0	HY	0	0
147	Fire Alarm System Upgrade	7/11/07	0			0	0	HY	0	0
148	Trilogy exit lock and software	9/01/07	0			0	0	HY	0	0
149	Back-up Exec Software	3/01/08	0			0	0	HY	0	0
150	(4) Cisco 24 port switch + access point	3/05/08	0			0	0	HY	0	0
151	Sheridan Road Agency Sign	5/16/08	0			0	0	HY	0	0
152	MIP Software Allocation Module	6/20/08	0			0	0	HY	0	0
185	Omni Form V5.0 Govt & Filter	7/01/08	0			0	0	HY	0	0
186	Toshiba Copier w/ Large Capacity Tray	10/10/08	0			0	0	HY	0	0
187	Toshiba Copier	10/10/08	0			0	0	HY	0	0
188	103 Park Ave Gas Furnace	12/01/08	0			0	0	HY	0	0
	Sold/Scrapped: 4/20/12									
189	Office Pro, Visio Pro, Exchange Server	12/01/08	0			0	0	HY	0	0
190	Viewpoint Network Pro 2040 & TZ-170	12/01/08	0			0	0	HY	0	0
	Out Of Service: 1/15/11									
191	Sentry Fire/Water Resistant Safe 200 E. Ma	12/01/08	0			0	0	HY	0	0
192	Sentry Fire/Water Resistant Safe 105 Grace	12/01/08	0			0	0	HY	0	0
193	Seagate Black Armounr Staorage Server	6/01/09	0			0	0	HY	0	0
194	Sykesville Carpeting	9/01/09	975			975	3	MO S/L	596	325
195	Fellows Powershred Shredder	5/10/10	1,446			1,446	3	MO S/L	522	482
196	Dell Computer	3/01/10	940			940	3	MO S/L	418	313
197	Dell Computer	3/01/10	940			940	3	MO S/L	418	313
198	HP LaserJet M3035XS Printer	7/06/09	0			0	0	HY	0	0
199	HP LaserJet P015TN Printer	9/01/09	0			0	0	HY	0	0
200	HP LaserJet M3035XS Printer	7/06/09	1,822			1,822	5	MO S/L	729	364
201	Sonicwall NSA 2400 Router Server Romm	3/01/10	1,741			1,741	5	MO S/L	464	348
202	Office Professional Plus 2010 (50) Licenses	9/01/10	0			0	0	HY	0	0
203	Suncast Storage Shed	10/21/10	0			0	0	HY	0	0
204	R710 Server Storage & Memory Upgrades	4/01/11	0			0	0	HY	0	0
205	STORECENTER Grace Way	5/01/11	0			0	0	HY	0	0
206	STORECENTER 200 E. Mahoning	5/01/11	0			0	0	HY	0	0
207	Symantec Backup Agen S/N# M564596053	6/13/11	0			0	0	HY	0	0
208	(2) Attic Ventilators + Installation	6/22/11	0			0	0	HY	0	0
209	Sonic Wall TX 170	11/21/06	0			0	0	IY	0	0
210	Spam Firewall	5/30/07	0			0	0	HY	0	0
211	TX 170 Wireless Router	7/01/07	0			0	0	HY	0	0
212	(41) Microsoft Office Pro	6/22/11	0			0	0	HY	0	0
213	(2) MS Server w/SQL	6/22/11	0			0	0	HY	0	0
214	(2) Compass Donated Notebooks	9/28/10	0			0	0	HY	0	0
215	Beyer Ave. Partial Roof Replacement	1/01/12	0			0	0	HY	0	0
216	(50) Sharepoint User Licenses Microsoft Dc	8/15/11	0			0	0	IY	0	0
217	4 To Ducane Air Conditioner Grace Way	5/10/12	0			0	0	HY	0	0
218	3.5 Ton Ducane Air Conditioner Grace Wa	7/21/11	0			0	0	HY	0	0
219	5 Ton Ducane Air Conditioner Grace Way	7/21/11	0			0	0	HY	0	0
220	Clean Mail Server Software 100 recipients	5/15/12	0			0	0	HY	0	0
	Total Other Depreciation		<u>7,864</u>			<u>7,864</u>			<u>3,147</u>	<u>2,145</u>
	Total ACRS and Other Depreciation		<u>7,864</u>			<u>7,864</u>			<u>3,147</u>	<u>2,145</u>

AMT Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
	Grand Totals		7,864		7,864		3,147	2,145
	Less: Dispositions and Transfers		<u>0</u>		<u>0</u>		<u>0</u>	<u>0</u>
	Net Grand Totals		<u>7,864</u>		<u>7,864</u>		<u>3,147</u>	<u>2,145</u>

Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
There are no assets that meet the criteria of this report						

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
1	Shelter Building	9/01/90	23,000	657	0
2	Land - 500W	9/01/90	2,000	0	0
8	Land - 112 Bey	1/01/92	750	0	0
9	Buildings - 11	1/01/92	6,750	225	0
12	Building Imp	6/15/95	4,334	108	0
13	Renovations	6/28/96	2,722	68	0
15	Renovations	5/01/96	973	24	0
16	Renovations	3/01/96	973	25	0
17	Furnace - (Mar	5/01/96	298	0	0
18	Furnace - (Mar	3/01/96	298	0	0
19	Renovations	1/01/96	8,729	218	0
20	Renovations	12/28/95	3,898	97	0
21	Marble, PA Property	5/01/96	5,500	137	0
22	Marble, PA Property	3/01/96	5,500	137	0
23	Harmony House Property	6/30/96	16,500	413	0
24	Remove Water Line - (Harmony)	9/18/96	990	25	0
25	Harmony Renovations	9/30/96	2,231	56	0
27	Marble Renovations	9/30/96	2,098	53	0
29	Grace Way (Transferred from CAM Enterprises)	12/18/97	131,642	3,291	0
30	Grace Way Land	12/18/97	9,015	0	0
32	Land - Greenview	7/07/98	4,500	0	0
33	Building - Sykesville Property	6/30/99	10,800	270	0
34	Grace Way B	12/18/97	36,093	0	0
35	Grace Way F	8/15/99	39,300	982	0
36	Land - Sykesville	6/30/99	1,200	0	0
37	Improvements	8/31/99	4,800	120	0
38	Flood Wall - Drains	8/31/99	1,000	25	0
39	Removal/Disp	8/31/99	2,600	65	0
40	Plumbing - Heating - Sykes	11/30/99	894	45	0
41	Land - 228 N. M	5/11/00	15,000	0	0
42	Excavating - Land Improvements - Sykesville	5/25/00	805	20	0
49	Siding - Parad - Sykesville	4/01/01	5,000	125	0
50	Sewer - Sykesville	6/01/01	900	23	0
55	Windows - Marble (9)	6/30/97	1,328	33	0
60	Graceway - Roof Replacement	10/02/98	9,330	467	0
61	Sewer Line In - Harmony	4/29/99	743	18	0
62	Mahoning - Basement Election	6/28/99	780	20	0
67	Furniture	7/01/85	4,040	0	0
68	Office Equipment	9/01/90	5,735	0	0
69	Other Equipment	10/21/87	73,732	0	0
95	MIP Software	5/26/98	5,850	0	0
98	Upgrade - MIP	10/01/99	500	0	0
99	Clarion Office	11/15/99	816	0	0
103	Sewer (Forming)	5/19/00	993	0	0
105	Samsung Dc Telephone System	11/01/00	16,225	0	0
107	Land - 201 Gre	1/01/92	1,400	0	0
109	Building - 228 N Main Street	12/01/01	281,183	7,030	0
110	Additional R - Handrails - 228 N Main	12/31/01	2,417	60	0
113	4-24 Button P	9/13/01	996	0	0
117	Server Moun	4/23/03	869	0	0
122	(4) Sets Server	5/29/03	800	0	0
126	Computer Room Air Conditioner	6/24/03	4,800	480	0
130	Gutters & Downspouts - Harmony Gutters	10/21/05	1,000	26	0
131	Roof - Harmony - Front Section	10/21/05	1,600	41	0
132	Electrical Entry - Harmony	11/16/05	1,190	31	0
133	Holmes House Attic Furnace	2/01/07	2,556	170	0
134	Sykes Roof Replacement	10/10/06	5,200	260	0
136	Beyer Down Furnace	11/08/06	2,000	133	0
137	Grace Way drains/upflush toilet	10/12/06	2,800	70	0
138	(2) Halotron Fire Extinguishers	4/01/07	800	80	0
145	Powervault Tape Drive	6/01/07	1,319	0	0
147	Fire Alarm System Upgrade	7/11/07	1,280	128	0
148	Trilogy exit lock and software	9/01/07	631	0	0
149	Back-up Exec Software	3/01/08	890	0	0
150	(4) Cisco 24 port switch + access point	3/05/08	1,112	148	0
151	Sheridan Road Agency Sign	5/16/08	885	162	0
152	MIP Software Allocation Module	6/20/08	2,495	0	0

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
185	Omni Form V5.0 Govt & Filter	7/01/08	2,203	0	0
186	Toshiba Copier w/ Large Capacity Tray	10/10/08	6,218	1,244	0
187	Toshiba Copier	10/10/08	5,988	1,198	0
189	Office Pro. Visio Pro. Exchange Server	12/01/08	1,340	0	0
190	Viewpoint Network Pro 2040 & TZ-170	12/01/08	591	0	0
191	Sentry Fire/Water Resistant Safe 200 E. Mah	12/01/08	579	58	0
192	Sentry Fire/Water Resistant Safe 105 Grace	12/01/08	579	58	0
193	Seagate Black Armounr Staorage Server	6/01/09	1,000	0	0
194	Sykesville Carpeting	9/01/09	975	54	54
195	Fellows Powershred Shredder	5/10/10	1,446	442	442
196	Dell Computer	3/01/10	940	209	209
197	Dell Computer	3/01/10	940	209	209
198	HP LaserJet M3035XS Printer	7/06/09	1,822	365	0
199	HP LaserJet P015TN Printer	9/01/09	1,449	290	0
200	HP LaserJet M3035XS Printer	7/06/09	1,822	365	365
201	Sonicwall NSA 2400 Router Server Romm	3/01/10	1,741	348	348
202	Office Professional Plus 2010 (50) Licenses	9/01/10	1,550	517	0
203	Suncast Storage Shed	10/21/10	710	237	0
204	R710 Server Storage & Memory Upgrades	4/01/11	1,072	357	0
205	STORECENTER Grace Way	5/01/11	678	225	0
206	STORECENTER 200 E. Mahoning	5/01/11	678	225	0
207	Symantec Backup Agen S/N# M5645960537	6/13/11	645	215	0
208	(2) Attic Ventilators + Installation	6/22/11	700	70	0
209	Sonic Wall TX 170	11/21/06	511	0	0
210	Spam Firewall	5/30/07	2,149	0	0
211	TX 170 Wireless Router	7/01/07	542	0	0
212	(41) Microsoft Office Pro	6/22/11	31,365	10,455	0
213	(2) MS Server w/SQL	6/22/11	1,514	504	0
214	(2) Compass Donated Notebooks	9/28/10	3,139	1,046	0
215	Beyer Ave. Partial Roof Replacement	1/01/12	3,460	173	0
216	(50) Sharepoint User Licenses Microsoft Don.	8/15/11	19,771	6,590	0
217	4 To Ducane Air Conditioner Grace Way	5/10/12	2,085	139	0
218	3.5 Ton Ducane Air Conditioner Grace Way	7/21/11	4,825	322	0
219	5 Ton Ducane Air Conditioner Grace Way	7/21/11	7,425	495	0
220	Clean Mail Server Software 100 recipients	5/15/12	974	325	0
	Total Other Depreciation		<u>902,814</u>	<u>43,301</u>	<u>1,627</u>
	Total ACRS and Other Depreciation		<u>902,814</u>	<u>43,301</u>	<u>1,627</u>
	Grand Totals		<u>902,814</u>	<u>43,301</u>	<u>1,627</u>

Federal Statements**Taxable Interest on Investments**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST INCOME	\$ 2,927			14	PA	
INTEREST INCOME	53	541519			PA	
TOTAL	<u>\$ 2,980</u>					

Taxable Dividends from Securities

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
DIVIDEND INCOME	\$ 1,077			14	PA	
TOTAL	<u>\$ 1,077</u>					

Federal Statements

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONTRACTED SERVICES	\$ 43,634	\$ 43,634		
INFORMATION TECHNOLOGY	36,129	5,818		
SMALL EQUIPMENT AND TOOLS UTILITIES	30,519	30,519	30,174	137
UNRELATED BUSINESS INC TAX	26,089	26,089		
FOOD AND MEALS-C. ASSIST.	20,466	20,466		
IN-KIND MATERIALS & SUPPL	20,216	20,216		
AUTO EXPENSES	19,218	19,218		
FUNDS RETURNED	17,972	17,972		
ADVERTISING AND PUBLICATI	17,448	17,448		
OTHER CONSUMER SUPPORT	11,682	11,072	610	
VOLUNTEER RECOGNITION	11,437	11,437		
HUMAN RESOURCES SERVICES	8,447	8,447		
ADMINISTRATIVE FEES	8,381		8,326	55
REGISTRATION AND MEMBERSH	5,988	5,988		
LOSS ON DISPOSAL	5,765	3,163	2,602	
FISCAL SERVICES	4,778	4,778		
LICENSES AND REGISTRATION	4,454			
BUILDING REPAIRS AND MAIN	3,693	1,655		
TRAINING AND TECHNICAL AS	3,625	3,625		
PROPERTY TAXES	3,313	3,313		
MISCELLANEOUS	2,876	2,876		
FOOD AND MEALS	2,204	2,016	188	
SNOW REMOVAL	1,040	1,039	1	
BAD DEBT EXPENSE	355	355		
SOFTWARE	270	270		
DEPRECIATION ADJUSTMENT	20		20	
TOTAL	\$ 309,719	\$ 261,114	\$ 46,135	\$ 2,470

Federal Statements

Schedule A, Part II, Line 1(e)

Description	Amount
SPECIAL EVENTS	\$ 1,540
CONTRIBUTED SUPPORT	5,952,815
CASH CONTRIBUTIONS	146,823
NON-CASH CONTRIBUTIONS	19,218
TOTAL	<u>\$ 6,120,396</u>

Schedule A, Part II, Line 8(e)

Description	Amount
INTEREST INCOME	\$ 2,927
DIVIDEND INCOME	1,077
RESIDENTIAL-PUNXSUTAWNEY, PA	52,885
TOTAL	<u>\$ 56,889</u>

Schedule A, Part II, Line 9(e)

Description	Amount
INTEREST INCOME	\$ 53
MISCELLANEOUS	29,533
OTHER SERVICE FEES	121,737
INFORMATION TECHNOLOGY	10,720
COPOS	165,525
LESS: DEDUCTIONS	-81,547
TOTAL	<u>\$ 246,021</u>

Form 990-T - Other Deductions Not Taken Elsewhere

<u>Description</u>	<u>Amount</u>
LOCAL TRAVEL	\$ 1,927
OFFICE SPACE	1,578
TELEPHONE	1,512
POSTAGE	13
PRINTING/COPIES	63
INSURANCE/BOND	353
INFO TECH EXPENSE	2,025
FISCAL SERVICES	5,296
HUMAN RESOURCE SERVICES	722
PROFESSIONAL SERVICES	1,183
MISCELLANEOUS	438
SUPPLIES	48
REG/MEMBERSHIPS	30
TOTAL	<u>\$ 15,188</u>