

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 private foundations)Do not enter social security numbers on this form as it may be made public.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**  
Open to Public Inspection**A For the 2023 calendar year, or tax year beginning**

, and ending

**B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

**C** Name of organization**THE EMERGENCY ASSISTANCE CENTER INC**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

**9433 OLDE EIGHT ROAD SUITE B**

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

**NORTHFIELD****OH 44067****D** Employer identification number**34-1899752****E** Telephone number**330-467-7945****G** Gross receipts\$**668,722****F** Name and address of principal officer:**H(a)** Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **WWW.TEACENTER.ORG****H(c)** Group exemption number**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: **1999****M** State of legal domicile: **OH****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <b>SUPPORTING OUR NEIGHBORS IN NEED BY PROVIDING FOOD AND OTHER BASIC NECESSITIES WHILE LEADING A COLLABORATIVE COMMUNITY EFFORT TO ACCESS RESOURCES THAT PROMOTE HEALTHY LIVES.</b>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 2% of its net assets.		
	3	5	
	4	5	
	5	6	
	6	65	
Revenue	7a	0	
	7b	0	
Expenses	8	Prior Year	Current Year
	9	521,301	655,089
	10	0	0
	11	2,682	13,633
	12	523,983	668,722
	13	0	0
	14	0	0
	15	140,348	148,372
	16a	0	0
	17	1,280	0
Net Assets or Fund Balances	18	355,440	427,421
	19	495,788	575,793
	20	28,195	92,929
	21	638,731	730,020
	22	4,445	4,613
	23	634,286	725,407

**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		Date	
	<b>RANDALL HYDE</b>		<b>TRUSTEE - CHAIRMAN</b>	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if PTIN
	<b>JOSEPH R. MICHALSKI CPA</b>	<b>JOSEPH R. MICHALSKI CPA</b>	<b>10/02/24</b>	self-employed <b>P00738093</b>
	Firm's name	Firm's EIN	Phone no.	
	<b>NMS, INC.</b>	<b>34-1909930</b>	<b>440-286-5222</b>	

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2023)



**Part IX Statement of Functional Expenses***Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).*Check if Schedule O contains a response or note to any line in this Part IX ☐*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 domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	55,994	50,395	5,599	
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	81,013	75,188	5,825	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	11,365	10,432	926	
11 Fees for services (nonemployees):				
a Management				
b Legal	3,732		3,732	
c Accounting	8,110		8,110	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	566		566	
13 Office expenses	1,729		1,729	
14 Information technology				
15 Royalties				
16 Occupancy	33,046		33,046	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,316	6,259	57	
23 Insurance	1,283		1,283	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>NON-CASH DONATIONS</b>	247,299	247,299		
b <b>FOOD PURCHASE</b>	97,371	97,371		
c <b>MINOR EQUIPMENT</b>	4,995	1,169	3,826	
d <b>VEHICLE EXPENSE</b>	4,729	4,729		
e All other expenses	18,245	3,420	13,545	1,280
25 <b>Total functional expenses.</b> Add lines 1 through 24e	575,793	496,269	78,244	1,280
26 <b>Joint costs.</b> 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)				