### Net Asset / Fund Balance at Beginning of Year

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total expenses</td>
<td>4,157,823</td>
</tr>
</tbody>
</table>

### Revenue

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions</td>
<td>4,151,382</td>
</tr>
<tr>
<td>Program service revenue</td>
<td></td>
</tr>
<tr>
<td>Investment income</td>
<td>6,441</td>
</tr>
<tr>
<td>Capital gain / loss</td>
<td></td>
</tr>
<tr>
<td>Fundraising / Gaming:</td>
<td></td>
</tr>
<tr>
<td>Gross revenue</td>
<td></td>
</tr>
<tr>
<td>Direct expenses</td>
<td></td>
</tr>
<tr>
<td>Net income</td>
<td>0</td>
</tr>
<tr>
<td>Other income</td>
<td></td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program services</td>
<td>3,205,363</td>
</tr>
<tr>
<td>Management and general</td>
<td>246,048</td>
</tr>
<tr>
<td>Fundraising</td>
<td>44,622</td>
</tr>
<tr>
<td>Total expenses</td>
<td>3,496,033</td>
</tr>
</tbody>
</table>

### Net Asset / Fund Balance at End of Year

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total expenses</td>
<td>661,790</td>
</tr>
<tr>
<td>Excess / (deficit)</td>
<td></td>
</tr>
</tbody>
</table>

### Balance Sheet

#### Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>Beginning</th>
<th>Ending</th>
<th>Differences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liabilities</td>
<td>138,858</td>
<td>171,908</td>
<td>33,050</td>
</tr>
<tr>
<td>Net assets</td>
<td>2,995,933</td>
<td>3,657,723</td>
<td>661,790</td>
</tr>
</tbody>
</table>

#### Liabilities

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assets</td>
<td>3,134,791</td>
</tr>
<tr>
<td>Liabilities</td>
<td>138,858</td>
</tr>
<tr>
<td>Net assets</td>
<td>2,995,933</td>
</tr>
</tbody>
</table>

#### Differences

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assets</td>
<td>138,858</td>
</tr>
<tr>
<td>Liabilities</td>
<td>171,908</td>
</tr>
<tr>
<td>Net assets</td>
<td>661,790</td>
</tr>
</tbody>
</table>

### Miscellaneous Information

- **Amended return**: Not applicable
- **Return / extended due date**: 08/15/22
- **Failure to file penalty**: Not applicable
Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2020, or fiscal year beginning \[\text{10/01, 2020, and ending 9/30 21}\].

Go to www.irs.gov/Form8879EO for the latest information.

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

Name and title of officer or person subject to tax

MERCEDES LEMP

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, 5a, 6a, or 7a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, 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 one line in Part I.

1a Form 990 check here □ X b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b 4,157,823
2a Form 990-EZ check here □ X b Total revenue, if any (Form 990-EZ, line 9) 2b
3a Form 1120-POL check here □ X b Total tax (Form 1120-POL, line 22) 3b
4a Form 990-PF check here □ X b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b
5a Form 8868 check here □ X b Balance due (Form 8868, line 3c) 5b
6a Form 990-T check here □ X b Total tax (Form 990-T, Part III, line 4) 6b
7a Form 4720 check here □ X b Total tax (Form 4720, Part III, line 1) 7b

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that □ X I am an officer of the above organization or □ X I am a person subject to tax with respect to (name of organization) __________________________ (EIN) ___________ and that I have examined a copy of the 2020 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 electronic return.

I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the 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 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 electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

□ X I authorize DELEON & STANG, CPAS AND ADVISORS to enter my PIN 63256 as my signature

□ As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 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.

Signature of officer or person subject to tax □ X 06/07/22

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.

52428605004

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return 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.

□ X I authorize CLINT LEHMAN, CPA to enter my PIN as my signature

□ As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 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.

Signature of officer or person subject to tax □ X 06/07/22

EROS e-file providers are required to retain this form as instructed.

For Paperwork Reduction Act Notice, see back of form.

Form 8879-EO (2020)
**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 for instructions and the latest information.

---

**Department of the Treasury**

**Internal Revenue Service**

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

---

### Part I  Summary

Briefly describe the organization's mission or most significant activities:

**MY SISTER'S PLACE, INC. SHELTERS, SUPPORTS AND EMPOWERS SURVIVORS OF DOMESTIC VIOLENCE AND THEIR CHILDREN, WHILE PROVIDING LEADERSHIP AND EDUCATION TO BUILD A SUPPORTIVE COMMUNITY.**

---

#### Activities & Governance

- **Number of voting members of the governing body (Part VI, line 1a)**
  - Prior Year: 3
  - Current Year: 6
- **Number of independent voting members of the governing body (Part VI, line 1b)**
  - Prior Year: 4
  - Current Year: 6
- **Total number of individuals employed in calendar year 2020 (Part V, line 2a)**
  - Current Year: 42
- **Total number of volunteers (estimate if necessary)**
  - Current Year: 0
- **Total unrelated business revenue from Part VIII, column (C), line 12**
  - Current Year: 0
- **Net unrelated business taxable income from Form 990-T, Part I, line 11**
  - Current Year: 0

#### Revenue

<table>
<thead>
<tr>
<th>Description</th>
<th>Prior Year</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions and grants (Part VIII, line 1h)</td>
<td>2,687,614</td>
<td>4,151,382</td>
</tr>
<tr>
<td>Program service revenue (Part VIII, line 2g)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td>
<td>1,100</td>
<td>6,441</td>
</tr>
<tr>
<td>Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td>
<td>2,688,714</td>
<td>4,157,823</td>
</tr>
<tr>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>4,462,422</td>
<td>4,462,422</td>
</tr>
</tbody>
</table>

#### Expenses

- **Total fundraising expenses (Part IX, column (D), line 25)**
  - Current Year: 44,622
- **Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)**
  - Current Year: 1,188,723
- **Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)**
  - Current Year: 3,808,770
- **Revenue less expenses. Subtract line 18 from line 12**
  - Current Year: -120,057

**Beginning of Current Year**

- 3,134,791

**End of Year**

- 3,292,631

**Total assets (Part X, line 16)**

- 1,620,048
- 2,011,184

**Total liabilities (Part X, line 26)**

- 2,808,771
- 3,496,033

**Net assets or fund balances. Subtract line 21 from line 20**

- 44,622
- 661,790

---

**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.

**Signature of officer**

**MERCEDES LEMP**

**EXECUTIVE DIRECTOR**

7/13/2022

---

**Paid Preparer Use Only**

- **Name**: DELEON & STANG, CPAS AND ADVISORS
- **EIN**: 52-1373858
- **Address**: 100 LAKEFOREST BLVD STE 650
- **Phone**: 301-948-9825

**For Paperwork Reduction Act Notice, see the separate instructions.**
**MY SISTER'S PLACE, INC.**

**52-1263256**

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III

<table>
<thead>
<tr>
<th>Code</th>
<th>Expenses</th>
<th>Revenue</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>4a</td>
<td>$1,432,147</td>
<td></td>
<td>Shelters, supports, and empowers survivors of domestic violence and their children, while providing leadership and education to build a supportive community.</td>
</tr>
<tr>
<td>4b</td>
<td>$1,320,632</td>
<td></td>
<td>Transitional housing - in 2012, MSP launched RISE (reaching independence through survivor empowerment), an innovative transitional-to-permanent housing program. MSP works to rebuild clients' credit and budgeting skills, helps them secure employment and leases in their own names, and provides rental subsidy for 12 months (with the option to extend up-to an additional 12 months). MSP has expanded their rise program significantly to serve an average of 30 families. RISE Plus, added in 2020, added 30 more families and extends rent support to two years.</td>
</tr>
<tr>
<td>4c</td>
<td>$407,728</td>
<td></td>
<td>Community counseling &amp; consultation - MSP provides case management to 54 families in the city’s FRSP (family rehousing and stabilization program), delivering supportive services to families that have experienced domestic violence.</td>
</tr>
</tbody>
</table>

**Total program service expenses**

$3,205,363
<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3</td>
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<td>6</td>
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<tr>
<td>8</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>10</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11a</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>11c</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>11d</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>11e</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>11f</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>12a</td>
<td>X</td>
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<tr>
<td>12b</td>
<td></td>
<td>X</td>
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<tr>
<td>13</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>14a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14b</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>15</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>X</td>
<td></td>
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<tr>
<td>17</td>
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<tr>
<td>18</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>20a</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>20b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
### Part IV Checklist of Required Schedules (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>22 Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If “Yes,” complete Schedule I, Parts I and III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If “Yes,” answer lines 24b through 24d and complete Schedule K. If “No,” go to line 25a</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Did the organization act as an “on behalf of” issuer for bonds outstanding at any time during the year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If “Yes,” complete Schedule L, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If “Yes,” complete Schedule L, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If “Yes,” complete Schedule L, Part III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If “Yes,” complete Schedule L, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b A family member of any individual described in line 28a? If “Yes,” complete Schedule L, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If “Yes,” complete Schedule L, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>29 Did the organization receive more than $25,000 in non-cash contributions? If “Yes,” complete Schedule M</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If “Yes,” complete Schedule M</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>31 Did the organization liquidate, terminate, or dissolve and cease operations? If “Yes,” complete Schedule N, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If “Yes,” complete Schedule N, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>34 Was the organization related to any tax-exempt or taxable entity? If “Yes,” complete Schedule R, Part II, III, or IV, and Part V, line 1</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b If “Yes” to line 35a, 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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

### Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable</td>
<td></td>
<td>7</td>
</tr>
<tr>
<td>b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td><strong>Form 990 (2020)</strong> <strong>MY SISTER'S PLACE, INC.</strong></td>
<td><strong>52-1263256</strong></td>
<td></td>
</tr>
</tbody>
</table>

### Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

#### 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.
- **Yes**
- **No**

#### 2b
- If at least one is reported on line 2a, did the organization file all required federal employment tax returns?
- **X**

#### 3a
- Did the organization have unrelated business gross income of $1,000 or more during the year?
- **Yes**
- **No**

#### 3b
- If "Yes," has it filed a Form 990-T for this year?
- **Yes**
- **No**

#### 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)?
- **Yes**
- **No**

#### 4b
- If "Yes," enter the name of the foreign country.

#### 5a
- Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?
- **Yes**
- **No**

#### 5b
- Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?
- **Yes**
- **No**

#### 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 as charitable contributions?
- **Yes**
- **No**

#### 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).
- 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?
- **Yes**
- **No**

#### 7c
- If "Yes," did the organization notify the donor of the value of the goods or services provided?
- **Yes**
- **No**

#### 7d
- Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?
- **Yes**
- **No**

#### 7e
- If "Yes," indicate the number of Forms 8282 filed during the year.

#### 7f
- Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?
- **Yes**
- **No**

#### 7g
- Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?
- **Yes**
- **No**

#### 7h
- If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?
- **Yes**
- **No**

#### 8 Sponsoring organizations maintaining donor advised funds.
- Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?
- **Yes**
- **No**

#### 9 Sponsoring organizations maintaining donor advised funds.
- Did the sponsoring organization make any taxable distributions under section 4966?
- **Yes**
- **No**

#### 10 Section 501(c)(7) organizations.
- Enter:
  - a) Initiation fees and capital contributions included on Part VIII, line 12
  - **10a**
  - b) Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities
  - **10b**

#### 11 Section 501(c)(12) organizations.
- Enter:
  - a) Gross income from members or shareholders
  - **11a**
  - b) Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)
  - **11b**

#### 12a Section 4947(a)(1) non-exempt charitable trusts.
- Is the organization filing Form 990 in lieu of Form 1041?
- **Yes**
- **No**

#### 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.
- 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.
- **13b**

#### 14a
- Did the organization receive any payments for indoor tanning services during the tax year?
- **Yes**
- **No**

#### 14b
- If "Yes," has it filed a Form 720 to report these payments?
- **Yes**
- **No**

#### 15
- Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?
- **Yes**
- **No**

#### 16
- Is the organization an educational institution subject to the section 4968 excise tax on net investment income?
- **Yes**
- **No**
Section A. Governing Body and Management

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 on Schedule O.

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?

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant divestiture of the organization's assets?

6 Did the organization have members or stockholders?

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

a The governing body?

b Each committee with authority to act on behalf of the governing body?

9 Is there any officer, director, trustee, or employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.

Section B. Policies

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

10a Did the organization have local chapters, branches, or affiliates?

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?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

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

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.

13 Did the organization have a written whistleblower policy?

14 Did the organization have a written document retention and destruction policy?

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

b Other officers or key employees of the organization

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?

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?

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[ ] Own website [ ] Another's website [x] Upon request [ ] Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records

JOVIAH NDAHAYO

1436 U STREET, NW #303

WASHINGTON, DC 20009 202-529-5261
### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List all of 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.

See instructions for the order in which to list the persons above.

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

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ZOE SHARP</td>
<td>2.00</td>
<td>BOARD CHAIR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.00 X X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) SHAWN WRIGHT</td>
<td>2.00</td>
<td>BOARD VICE CHAIR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.00 X X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) SANTINA ROCCA</td>
<td>2.00</td>
<td>TREASURER</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.00 X X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) MAIRZY WEBSTER KRULIC</td>
<td>2.00</td>
<td>BOARD SECRETARY</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.00 X X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) BEVERLY ALLEN, ESQ.</td>
<td>2.00</td>
<td>COMPLIANCE OFFICER</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.00 X X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) AMY BERGER</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7) JENNY BRODY, ESQ.</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) NOELLE C. DUBIANSKY</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9) EVA PETKO ESBER</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10) MELANIE HIND</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11) MICHELLE A. KISLOFF, ESQ.</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.00 X</td>
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<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(12) ALEX LEVIN</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(13) LISA ORLOWSKI</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(14) LISA ROSENTHAL</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(15) SOPHIE SAHAF</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(16) BAILEY WILLIAMS</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17) MERCEDES LEMP</td>
<td>40.00</td>
<td>EXECUTIVE DIRECTOR</td>
<td>160,622</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(18) TOSHIRA MONROE</td>
<td>40.00</td>
<td>DEPUTY DIRECTOR</td>
<td>111,227</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

1b Subtotal: 271,849  
c Total from continuation sheets to Part VII, Section A: 271,849

d Total (add lines 1b and 1c): 271,849

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

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual: Yes 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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
</table>

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: 0
**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII.

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td>27,485</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td>3,102,764</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1,021,133</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g Noncash contributions included in lines 1a-1f</td>
<td>$</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>h Total. Add lines 1a–1f</strong></td>
<td><strong>4,151,382</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>g Total. Add lines 2a–2f</strong></td>
<td><strong>6,441</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
<th>(i) Real (ii) Personal</th>
<th>(i) Securities (ii) Other</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6a Gross rents</td>
<td></td>
<td></td>
<td>(i)</td>
<td>(ii)</td>
</tr>
<tr>
<td>6b Less: rental expenses</td>
<td></td>
<td></td>
<td>(i)</td>
<td>(ii)</td>
</tr>
<tr>
<td>6c Rental inc. or (loss)</td>
<td></td>
<td></td>
<td>(i)</td>
<td>(ii)</td>
</tr>
<tr>
<td><strong>d Net rental income or (loss)</strong></td>
<td><strong>6,441</strong></td>
<td></td>
<td>(i)</td>
<td>(ii)</td>
</tr>
</tbody>
</table>

| Other Revenue                                           | (i) Securities (ii) Other | | |
|---------------------------------------------------------|------------------|---------------------------|-------|-------|
| 7a Gross amount from sales of assets other than inventory|                  |                           | (i)  | (ii)  |
| 7b Less: cost or other basis and sales expenses         |                  |                           | (i)  | (ii)  |
| 7c Gain or (loss)                                       |                  |                           | (i)  | (ii)  |
| **d Net gain or (loss)**                                | **6,441**        |                           | (i)  | (ii)  |

| Other Revenue                                           | | | |
|---------------------------------------------------------|------------------|---------------------------|-------|-------|
| 8a Gross income from fundraising events (not including $ |                  |                           |       |       |
| of contributions reported on line 1c)                   |                  |                           |       |       |
| See Part IV, line 18                                    |                  |                           |       |       |
| 8b Less: direct expenses                                |                  |                           |       |       |
| 8c Net income or (loss) from fundraising events         |                  |                           |       |       |
| **9a Gross income from gaming activities.**             |                  |                           |       |       |
| See Part IV, line 19                                    |                  |                           |       |       |
| 9b Less: direct expenses                                |                  |                           |       |       |
| 9c Net income or (loss) from gaming activities          |                  |                           |       |       |
| **10a Gross sales of inventory, less returns and allowances** | |                  |       |       |
| 10b Less: cost of goods sold                            |                  |                           |       |       |
| 10c Net income or (loss) from sales of inventory        |                  |                           |       |       |

| Miscellaneous Revenue                                    | | | |
|---------------------------------------------------------|------------------|---------------------------|-------|-------|
| 11a                                                     |                  |                           |       |       |
| 11b                                                     |                  |                           |       |       |
| 11c                                                     |                  |                           |       |       |
| 11d All other revenue                                   |                  |                           |       |       |
| **e Total. Add lines 11a–11d**                          | **6,441**        |                           |       |       |

**Total revenue. See instructions**                      | **4,157,823**    | **0**                     | **0** | **6,441** |
### Statement of Functional Expenses

**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

<table>
<thead>
<tr>
<th>(A)</th>
<th>Total expenses</th>
<th>(B)</th>
<th>Program service expenses</th>
<th>(C)</th>
<th>Management and general expenses</th>
<th>(D)</th>
<th>Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td>155,748</td>
<td>144,834</td>
<td>10,341</td>
<td>573</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td>1,477,735</td>
<td>1,328,088</td>
<td>119,628</td>
<td>30,019</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>26,426</td>
<td>23,828</td>
<td>2,103</td>
<td>495</td>
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</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>205,198</td>
<td>185,028</td>
<td>16,327</td>
<td>3,843</td>
<td></td>
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</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>146,077</td>
<td>131,718</td>
<td>11,623</td>
<td>2,736</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (nonemployees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td>19,000</td>
<td></td>
<td>19,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)</td>
<td>64,287</td>
<td>64,287</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>12</td>
<td>Advertising and promotion</td>
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<td></td>
<td>963</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>13</td>
<td>Office expenses</td>
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<td>28,178</td>
<td>2,486</td>
<td>585</td>
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<td></td>
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<td>14</td>
<td>Information technology</td>
<td>34,222</td>
<td>30,858</td>
<td>2,723</td>
<td>641</td>
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<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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<td>16</td>
<td>Occupancy</td>
<td>714,963</td>
<td>688,189</td>
<td>24,908</td>
<td>1,866</td>
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<tr>
<td>17</td>
<td>Travel</td>
<td>4,066</td>
<td>4,066</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>116,375</td>
<td>104,936</td>
<td>9,259</td>
<td>2,180</td>
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<td></td>
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<tr>
<td>23</td>
<td>Insurance</td>
<td>65,365</td>
<td>58,940</td>
<td>5,201</td>
<td>1,224</td>
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<td></td>
</tr>
<tr>
<td>24</td>
<td>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.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>RESIDENT ASSISTANCE</td>
<td>205,275</td>
<td>205,275</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>b</td>
<td>UTILITIES, TRASH</td>
<td>51,160</td>
<td>50,069</td>
<td>1,091</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>MISCELLANEOUS</td>
<td>45,099</td>
<td>41,466</td>
<td>3,633</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>CLEANING &amp; MAINTENANCE</td>
<td>43,438</td>
<td>41,038</td>
<td>2,400</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td>89,387</td>
<td>74,565</td>
<td>14,362</td>
<td>460</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses, Add lines 1 through 24e</td>
<td>3,496,033</td>
<td>3,205,363</td>
<td>246,048</td>
<td>44,622</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>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 □ if following SOP 98-2 (ASC 958-720)</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>
### Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X.

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash—non-interest-bearing</td>
<td>798,084</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>217,255</td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>6,722</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>3,735,536</td>
</tr>
<tr>
<td>b</td>
<td>Less: accumulated depreciation</td>
<td>1,674,164</td>
</tr>
<tr>
<td>11</td>
<td>Investments—publicly traded securities</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Investments—other securities. See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments—program-related. See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td><strong>Total assets.</strong> Add lines 1 through 15 (must equal line 33)</td>
<td>3,134,791</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>138,858</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td>18</td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>19</td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td>20</td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td>21</td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td>22</td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>23</td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td>24</td>
</tr>
<tr>
<td>25</td>
<td>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</td>
<td>25</td>
</tr>
<tr>
<td>26</td>
<td><strong>Total liabilities.</strong> Add lines 17 through 25</td>
<td>138,858</td>
</tr>
<tr>
<td>27</td>
<td>Organizations that follow FASB ASC 958, check here [X]</td>
<td>2,995,933</td>
</tr>
<tr>
<td>and complete lines 27, 28, 32, and 33.</td>
<td></td>
<td>50,000</td>
</tr>
<tr>
<td>28</td>
<td>Net assets without donor restrictions</td>
<td>28</td>
</tr>
<tr>
<td>29</td>
<td>Capital stock or trust principal, or current funds</td>
<td>29</td>
</tr>
<tr>
<td>30</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td>30</td>
</tr>
<tr>
<td>31</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td>31</td>
</tr>
<tr>
<td>32</td>
<td>Total net assets or fund balances</td>
<td>2,995,933</td>
</tr>
<tr>
<td>33</td>
<td><strong>Total liabilities and net assets/fund balances</strong></td>
<td>3,134,791</td>
</tr>
</tbody>
</table>