Print Form

NEIGHBORHOOD DEVELOPMENT FUND
Not-for-Profit Transmittal and Approval Form

Applicant/Program: Service for Peace / MAN UP
Applicant Requested Amount: $5250
Appropriation Request Amount: $5250

Executive Summary of Request

Writing/producing a play based on the book "They Say I'm Still Not a Man" by Louisville author and 14th Metro district resident Jeremiah Wrong. The play emphasizes the need for males to MAN UP through their present day struggles and tribulation. Older males will lead with younger at risk yound adults to teach them life lessons.

Is this program/project a fundraiser?	☐ Yes	☒ No
Is this applicant a faith based organization?	☐ Yes	☒ No
Does this application include funding for sub-grantee(s)?	☐ Yes	☒ No

I have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I have read the organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required.

14	Cindi Fowler	500-	1/26/17
District #	Primary Sponsor Signature	Amount	Date

Primary Sponsor Disclosure

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

Approved by:

____

Appropriations Committee Chairman		Date

Final Appropriations Amount: _______

Applicant/Program:

Service for Peace / MAN UP

Additional Disclosure and Signatures

Additional Council Office Disclosure

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

N/A

Council Member Signature and Amount

District 1		$
District 2	Barbara Shanklin	$ 250.00
District 3		$
District 4		$
District 5	Cheri B. Hamilton	$ 1000
District 6	[illegible]	$ 500.00
District 7	[illegible]	$ 250.00
District 8		$
District 9		$
District 10	Glenn P. [illegible]	$ 200.00
District 11		$
District 12		$
District 13	Vicki Aubrey Welch	$ 250
District 14		$
District 15	Mary C. Woolridge [illegible]	$ 200

Applicant/Program:

Service for Peace / MAN UP

Additional Disclosure and Signatures

Additional Council Office Disclosure
List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

District 16 ______________________ $__________

District 17 ______________________ $__________

District 18 ______________________ $__________

District 19 ______________________ $__________

District 20 ______________________ $__________

District 21 ______________________ $__________

District 22 ______________________ $__________

District 23 ______________________ $__________

District 24 ______________________ $__________

District 25 ______________________ $ 250.00

District 26 ______________________ $__________

LOUISVILLE METRO COUNCIL
NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Legal Name of Applicant Organization

Program Name and Request Amount

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	...
Is the funding proposed by Council Member(s) less than or equal to the request amount?	...
Is the proposed public purpose of the program viable and well-documented?	...
Will all of the funding go to programs specific to Louisville/Jefferson County?	...
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	...
Has prior Metro Funds committed/granted been disclosed?	...
Is the application properly signed and dated by authorized signatory?	...
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	...
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	...
Is the entity in good standing with: ▸ Kentucky Secretary of State? ▸ Louisville Metro Revenue Commission? ▸ Louisville Metro Government? ▸ Internal Revenue Service? ▸ Louisville Metro Human Relations Commission?	...
Is the current Fiscal Year Budget included?	...
Is the entity's board member list (with term length/term limits) included?	...
Is recommended funding less than 33% of total agency operating budget?	...
Does the application budget reflect only the revenue and expenses of the project/program?	...
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	...
Is the most recent annual audit (if required by organization) included?	...
Is a copy of Signed Lease (if rent costs are requested) included?	...
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	...
Are the Articles of Incorporation of the Agency included?	...
Is the IRS Form W-9 included?	...
Is the IRS Form 990 included?	...
Are the evaluation forms (if program participants are given evaluation forms) included?	...
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	...
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	...

Prepared by: Date:

Print Form

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization: *(as listed on: http://www.sos.ky.gov/business/records*	Service For Peace		
Main Office Street & Mailing Address:	P.O. Box 17006 Louisville, KY 40217		
Website:	www.manupsua.net and/or www.serviceforpeace.com		
Applicant Contact:	Jeremiah Morton	**Title:**	Steering Committee Member
Phone:	502-290-3611	**Email:**	morton.jeremiah@gmail.com
Financial Contact:	Peter Hayes	**Title:**	Louisville Director
Phone:	502-290-3611	**Email:**	phayes@serviceforpeace.org
Organization's Representative who attended NDF Training:	Peter Hayes		
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	Salvation Army/ Old Male High School		
Council District(s):	14	**Zip Code(s):**	40203

SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME:	MAN UP Presents: The Say I'm Still Not a Man (Stage Play)		
Total Request: ($)	5,250	**Total Metro Award (this program) in previous year: ($)**	0

Purpose of Request (check all that apply):

- ☐ Operating Funds (generally cannot exceed 33% of agency's total operating budget)
- ☑ Programming/services/events for direct benefit to community or qualified individuals
- ☐ Capital Project of the organization (equipment, furnishing, building, etc)

The Following are Required Attachments:

- ☑ IRS Exempt Status Determination Letter
- ☑ Current year projected budget
- ☑ Current financial statement
- ☑ Most recent IRS Form 990 or 1120-H
- ☑ Articles of Incorporation (current & signed)
- ☐ Cost estimates from proposed vendor if request is for capital expense
- ☐ Signed lease if rent costs are being requested
- ☑ IRS Form W9
- ☐ Evaluation forms if used in the proposed program
- ☑ Annual audit (if required by organization)
- ☐ Faith Based Organization Certification Form, if applicable

For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.

Source:	n/a	Amount: ($)	0
Source:	n/a	Amount: ($)	0
Source:	n/a	Amount: ($)	0

Has the applicant contacted the BBB Charity Review for participation? ☒ Yes ☐ No

Has the applicant met the BBB Charity Review Standards? ☒ Yes ☐ No

Applicant's Initials PH

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS
Describe Agency's Vision, Mission and Services:

MAN UP is a project of Service For Peace a 501C3 organization.

Agency's Vision: MAN UP works to reduce crime and violence and improve the lives of families by mentori

Agency's Mission: To change the social behavior of men in Louisville, Kentucky.

Agency's Services:

*We host various street summits in the West End to reduce crime and violence.
*We sponsor an annual peace walk as part of the Mayor's Give A Day.
*We work with LMPD Derby-City Ambassadors and the Mayor's office to recruit and train Derby City Amba
*We host The Annual MAN UP Award Banquet to honor 10 outstanding men who serve our community.

Applicant's Initials PH

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Ken Bates	September 31st, 2017
Charles Phillips	September 31st, 2017
Michael Lenaghan	September 31st, 2017
Catherine Houlihan	September 31st, 2017
Lillian Kato	September 31st, 2017
Juan Casimiro	September 31st, 2017
Michael Imasua	September 31st, 2017
Yenisel Rodriguez	September 31st, 2017
Jun Sook Moon	September 31st, 2017

Describe the Board term limit policy:

The board is elected every two years with no term limits.

Three Highest Paid Staff Names	Annual Salary
Peter Hayes	$49,500

Applicant's Initials PH

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 – PROGRAM/PROJECT NARRATIVE

A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.):

Describe the program/project start and end dates- January 14th, 2016 Start Date and January 14th, 2016

Program Description- We will be writing/producing a play based on the book "They Say I'm Still Not a Man" by Louisville author and 14th Metro District resident Jeremiah Wrong. The play emphasizes the need for males to MAN UP through their present day struggles and tribulations. Older males will lead with younger at risk young adults to teach them life lessons.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s):

Band $350
Playwright Director $1,500
Cast (7) $1000
Tickets $50
Flyers $300
Radio Ads $500
Social Media Ads $500
Video Promo $100
Moving Truck $100
Moving Crew $100
Strike Team $100
Setting Designer $100
Hall Rental $300
Food Refreshments $100
Security $100
Graphic Design $50

Total $5,250

Applicant's Initials PH

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

C: If this request is a fundraiser, please detail how the proceeds will be spent:

N/A

D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:

☐ The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:

- ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.

The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.

☐ Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):

- ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
- ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.

Applicant's Initials RH

E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served:

Measurable Outcomes

I. Raise awareness of domestic violence to males/females and the damage it does to families.

II. Increase understanding of the struggle of non-custodial fathers who want to be actively involved in the lives of the children.

Data Collection
I. We will have online and onsite registration to track all participants.

Benefit Measures
I. We will do pre and post written surveys along with video interviews. We will assess participants views and knowledge of domestic violence.

II. We will track new members of MAN UP who join with us through this play.

F: Briefly describe any existing collaborative relationships the organization has with other community organizations. Describe what those partners are bringing to the relationship in general and to this program/project specifically.

MAN UP- Organizer & Producer of the play.
Men Building Men- Will recruit 200 at risk youth and family members to attend the play.
Various Churches- 10 to 15 churches will help promote the event and recruit participants to attend.
The Village Midwest Inner City Program- They will help recruit mothers and children to attend and get involved.

Applicant's Initials PH

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – PROGRAM/PROJECT BUDGET SUMMARY

THE PROGRAM/PROJECT BUDGET SHOULD REALISTICALLY ESTIMATE WHAT AMOUNT IS NEEDED FROM METRO GOVERNMENT AND WHAT IS EXPECTED FROM OTHER SOURCES.

Program/Project Expenses	Column 1 Proposed Metro Funds	Column 2 Non-Metro Funds	Column (1+2)=3 Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (See Detailed List on Page 8)			
G: Professional Service Contracts	$5,250		$5,250
H: Program Materials			
I: Community Events & Festivals (See Detailed List on Page 8)			
J: Machinery & Equipment			
K: Capital Project			
L: Other Expenses (See Detailed List on Page 8)			
****TOTAL PROGRAM/PROJECT FUNDS***	$5,250		$5,250
% of Program Budget	100 %	0 %	**100%**

List funding sources for total program/project costs in Column 2, Non-Metro Funds:

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	
Fees Collected from Program Participants	
Other (please specify)	
Total Revenue for Columns 2 Expenses **	

**Total of Column 1 MUST match "Total Request on Page 1, Section 2"*

***Must equal or exceed total in column 2.*

Applicant's Initials PH

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7 (circle one and use multiple sheets if necessary)	Column 1 Proposed Metro Funds	Column 2 Non-Metro Funds	Column (1 + 2)=3 Total Funds
Total	n/a	n/a	n/a

Applicant's Initials PH

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Detail of In-Kind Contributions for this PROGRAM only: Includes Volunteers, Space, Utilities, etc. (Include anything not bought with cash revenues of the agency).

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Total Value of In-Kind (*to match Program Budget Line Item.* Volunteer Contribution &Other In Kind)	N/A	N/A

*** DONOR INFORMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION. VOLUNTEERS NEED NOT BE LISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NOTING HOW MANY HOURS PER PERSON PER WEEK**

Agency Fiscal Year Start Date:	October 1st

Does your Agency anticipate a significant increase or decrease in your budget from the current fiscal year to the budget projected for next fiscal year? **NO** ☑ **YES** ☐

If YES, please explain:

N/A

Applicant's Initials PH

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 7 – CERTIFICATIONS & ASSURANCES

By signing Section 7 of the Grant Application, the authorized official signing for the applicant organization certifies and assures to the best of his or her knowledge and/or belief the following Assurances and Certifications. If there is any reason why one or more of the assurances or certifications listed cannot be certified or assured, please explain in writing and attach to this application.

Standard Assurances

1. Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
2. Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the approval is automatically revoked and the funds will not be disbursed to our organization.
3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
6. Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
7. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end.
8. Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
10. Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
11. Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

Standard Certifications

1. The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
2. The Agency has a written Affirmative Action/Equal Opportunity Policy.
3. The Agency does not discriminate in employment or in provision of any service/program/activity/event based on age, color, disabled status, national origin, race, religion, sex, gender identity or sexual orientation, or Vietnam era veteran status.
4. The Agency certifies it will not require clients, recipients, or beneficiaries to participate in religious, political, fraternal or like activities in order to receive services/benefits provided with Louisville Metro Government funds.
5. The Agency understands the Americans with Disabilities Act (ADA) and makes reasonable accommodations.

Relationship Disclosure: List below any relationship you or any member of your Board of Directors or employees has with any Councilperson, Councilperson's family, Councilperson's staff or any Louisville Metro Government employee.

SECTION 8 – CERTIFICATIONS & ASSURANCES

I certify under the penalty of law the information in this application (including, without limitation, "Certifications and Assurances") is accurate to the best of my knowledge. I am aware my organization will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. I further certify that I am legally authorized to sign this application for the applying organization and have initialed each page of the application.

Signature of Legal Signatory:		**Date:**	10-6-16
Legal Signatory: (please print):	Peter Hayes	**Title:**	Louisville Director

Phone:	502-290-3611	**Extension:**	N/A	**Email:**	phayes@servicefor peace.org

Applicant's Initials PH

STATE OF DELAWARE
SECRETARY OF STATE
DIVISION OF CORPORATIONS
FILED 09:00 AM 02/13/2002
020095937 - 3491603

CERTIFICATE OF INCORPORATION
OF
SERVICE FOR PEACE, INC.

FIRST: The name of the Corporation shall be Service for Peace, Inc.

SECOND: The address of its registered office in the State of Delaware is 2711 Centerville Road, Suite 400 in the city of Wilmington, County of New Castle. The name of its registered agent at such address is Corporation Service Company.

THIRD: The purposes of the Corporation are to be organized and operated exclusively for charitable, educational, religious or scientific purposes within the meaning of section 501(c)(3) of the Internal Revenue Code of 1986, as amended from time to time (hereinafter, the "Code"), including, as limited by the foregoing, developing educational and charitable service projects in the United States of America and abroad that bring about a transformation in the human heart, human relationships, and human culture by fostering mutual understanding, cooperation and respect, thereby facilitating peace by breaking down the barriers between generations, religions, races, genders, cultures and nations.

Solely for the above purposes, the Corporation is empowered to exercise all rights and powers conferred by the laws of the State of Delaware upon nonprofit corporations, including, but without limitation thereon, the right and power to receive gifts, bequests and contributions outright, in trust or in any other form; to collect dues; to hold, manage, encumber, dispose of or otherwise deal with real and personal property; and to use, apply, invest and reinvest the principal and/or income therefrom or to distribute the same for the above purposes.

FOURTH: The corporation shall be a nonprofit corporation.

FIFTH: The corporation shall not have any capital stock.

SIXTH: The Corporation shall have no members.

SEVENTH: Directors shall be elected in the manner set forth in the Bylaws and shall have such qualifications as may be set forth in the Bylaws. Elections of directors need not be by written ballot unless the Bylaws of the Corporation so provide.

EIGHTH: No part of the net earnings of the Corporation shall inure to the benefit of or be distributable to its directors, officers or private individuals, but the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article THIRD hereof. Notwithstanding any other provision of these Articles, the

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF INCORPORATION OF "SERVICE FOR PEACE, INC.", FILED IN THIS OFFICE ON THE THIRTEENTH DAY OF FEBRUARY, A.D. 2002, AT 9 O'CLOCK A.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

3491603 8100

020095937

AUTHENTICATION: 1612601

DATE: 02-14-02

Corporation shall not carry on any activities not permitted to be carried on by an organization exempt from federal income tax under section 501(c)(3) of the Code. The Corporation shall not carry on propaganda or otherwise attempt to influence legislation to such extent as would result in the loss of exemption under section 501(c)(3) of the Code. No activity of the Corporation shall consist of participating in or intervening in (including the publishing or distributing of statements) any political campaign on behalf of or in opposition to any candidate for public office.

NINTH: Upon the dissolution of the Corporation, the board of directors shall, after paying or making provisions for the payment of all of the known liabilities of the Corporation, distribute all of the assets of the Corporation exclusively for charitable, educational, religious or scientific purposes to such "qualified" organization or organizations as the board of directors shall determine. An organization shall be deemed to be a "qualified" organization for purposes of this Article NINTH only if at the time of the distribution of such assets it is operated exclusively for the purposes described in section 170(c)(2)(B) and is an organization described in section 501(c)(3) of the Code. Any of such assets not so distributed shall be distributed by the court of claims of the county in which the principal office of the Corporation is then located, exclusively for the aforesaid purposes of the Corporation, or to such qualified organization or organizations as said court shall determine.

TENTH: Any reference in these Articles to a section of the Code shall be interpreted to include a reference to the corresponding provisions of any applicable future United States internal revenue law.

ELEVENTH: The name and mailing address of the sole incorporator are as follows:

Bruce J. Casino
Baker & Hostetler LLP
1050 Connecticut Avenue, N.W.
Suite 1100
Washington, D.C. 20036

TWELFTH: The Corporation shall indemnify its directors and officers for the defense of civil or criminal actions or proceedings as set forth in its Bylaws, so long as such indemnification does not constitute a violation of any provision of the Internal Revenue Code applicable to a public charity as described in section 509(a)(1), (2) or (3) of such Code. To the fullest extent permitted by the General Corporation Law of the State of Delaware, as the same exists or may hereafter be amended, a director of the Corporation shall not be liable to the

Form **W-9**
(Rev. October 2007)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
Sevice For Peace, Inc.

Business name, if different from above

Check appropriate box: ☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership
☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ ....
☐ Other (see instructions) ▶ **Non-Profit**

☑ Exempt payee

Address (number, street, and apt. or suite no.)
P.O. Box 17006

Requester's name and address (optional)

City, state, and ZIP code
Louisville, KY 40217

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

or

[redacted]

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here **Signature of U.S. person ▶** **Date ▶**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

• The U.S. grantor or other owner of a grantor trust and not the trust, and

• The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.

2. The treaty article addressing the income.

3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,

2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of $50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a $500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). Check the "Limited liability company" box only and enter the appropriate code for the tax classification ("D" for disregarded entity, "C" for corporation, "P" for partnership) in the space provided.

For a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line.

For an LLC classified as a partnership or a corporation, enter the LLC's name on the "Name" line and any business, trade, or DBA name on the "Business name" line.

Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

Note. You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),

2. The United States or any of its agencies or instrumentalities,

3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,

4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or

5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,

7. A foreign central bank of issue,

8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,

9. A futures commission merchant registered with the Commodity Futures Trading Commission,

10. A real estate investment trust,

11. An entity registered at all times during the tax year under the Investment Company Act of 1940,

12. A common trust fund operated by a bank under section 584(a),

13. A financial institution,

14. A middleman known in the investment community as a nominee or custodian, or

15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over $600 required to be reported and direct sales over $5,000[1]	Generally, exempt payees 1 through 7[2]

[1] See Form 1099-MISC, Miscellaneous Income, and its instructions.

[2] However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, and payments for services paid by a federal executive agency.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at *www.ssa.gov*. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at *www.irs.gov/businesses* and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting *www.irs.gov* or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: *A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.*

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt payees, see *Exempt Payee* on page 2.

Signature requirements. Complete the certification as indicated in 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account [1]
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor [2]
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee [1]
b. So-called trust account that is not a legal or valid trust under state law	The actual owner [1]
5. Sole proprietorship or disregarded entity owned by an individual	The owner [3]
For this type of account:	**Give name and EIN of:**
6. Disregarded entity not owned by an individual	The owner
7. A valid trust, estate, or pension trust	Legal entity [4]
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

[1] List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

[2] Circle the minor's name and furnish the minor's SSN.

[3] You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

[4] List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

Call the IRS at 1-800-829-1040 if you think your identity has been used inappropriately for tax purposes.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to *phishing@irs.gov*. You may also report misuse of the IRS name, logo, or other IRS personal property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: *spam@uce.gov* or contact them at *www.consumer.gov/idtheft* or 1-877-IDTHEFT(438-4338).

Visit the IRS website at *www.irs.gov* to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

***** THIS IS NOT A FILEABLE COPY *****

Form **8879-EO**

Department of the Treasury
Internal Revenue Service

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2013, or fiscal year beginning OCT 1, 2013, and ending SEP 30, 20 14

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

▶ **Information about Form 8879-EO and its instructions is at** www.irs.gov/form8879eo.

OMB No. 1545-1878

2013

Name of exempt organization: Service For Peace, Inc.

Employer identification number: [redacted]

Name and title of officer: Dr Charles Phillips President

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 ▶ [X]	**b** **Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	**1b**	862,071.
2a Form 990-EZ check here ▶ [ ]	**b** **Total revenue,** if any (Form 990-EZ, line 9)	**2b**	
3a Form 1120-POL check here ▶ [ ]	**b** **Total tax** (Form 1120-POL, line 22)	**3b**	
4a Form 990-PF check here ▶ [ ]	**b** **Tax based on investment income** (Form 990-PF, Part VI, line 5)	**4b**	
5a Form 8868 check here ▶ [ ]	**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 2013 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

[X] I authorize Brunhofer & Balise, LLP (ERO firm name) to enter my PIN [redacted] (Enter five numbers, but do not enter all zeros)

as my signature on the organization's tax year 2013 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 2013 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 ▶ ***** THIS IS NOT A FILEABLE COPY *** Date ▶

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. [redacted]

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2013 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 ▶ 02/05/15

ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So

LHA **For Paperwork Reduction Act Notice, see instructions.** Form **8879-EO** (2013)
323051
10-01-13

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.

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

OMB No. 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning OCT 1, 2013 and ending SEP 30, 2014

B Check if applicable: Address change; Name change; Initial return; Terminated; Amended return; Application pending

C Name of organization: Service For Peace, Inc.

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address): P.O. Box 3096 | Room/suite

City or town, state or province, country, and ZIP or foreign postal code: Bridgeport, CT 06605

D Employer identification number [redacted]

E Telephone number 203-339-0064

G Gross receipts $ 862,071.

F Name and address of principal officer: Dr. Charles Phillips, 59 Roger Williams Rd, Bridgeport, CT 06610

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)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( )◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www.serviceforpeace.org

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 2002 **M** State of legal domicile: DE

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: We provides meaningful community-based service learning opportunities for youth (ages

2 Check this box ▶ ☐ 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	8
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	7
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	9
6	Total number of volunteers (estimate if necessary)	6	38614
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,046,361.	680,946.
	9	Program service revenue (Part VIII, line 2g)	140,684.	181,125.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	110.	0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,187,155.	862,071.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	205,264.	230,758.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	400,183.	341,864.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	5,561.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 28,248.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	567,528.	275,466.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,172,975.	853,649.
	19	Revenue less expenses. Subtract line 18 from line 12	14,180.	8,422.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	299,539.	285,755.
	21	Total liabilities (Part X, line 26)	38,149.	15,943.
	22	Net assets or fund balances. Subtract line 21 from line 20	261,390.	269,812.

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

▶ Dr. Charles Phillips, President
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
David Balise,CPA		02/05/15		[redacted]

Firm's name ▶ Brunhofer & Balise, LLP | Firm's EIN ▶ [redacted]

Firm's address ▶ 287 Farview Avenue, Paramus, NJ 07652 | Phone no. 201-599-9899

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

See Schedule O for Organization Mission Statement Continuation

Filing Instructions

Prepared for:	Prepared by:
Service For Peace, Inc. P.O. Box 3096 Bridgeport, CT 06605	Brunhofer & Balise, LLP 287 Farview Avenue Paramus, NJ 07652

2013 FORM 990

Electronic Filing:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-EO to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

2013 CALIFORNIA FORM 199

Form 199 has a balance due of ....$ 10

The Form 199 return has been prepared for electronic filing. If you wish to have it transmitted electronically to the FTB, please sign date and return Form 8453-EO to our office. We will then submit the electronic return to the FTB. Do not mail a paper copy of the return to the FTB.

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 5.x products, uncheck the "Shrink oversized pages to paper size" and uncheck the "Expand small pages to paper size" options, in the Adobe "Print" dialog. When using Acrobat 6.x and later products versions, select "None" in the "Page Scaling" selection box in the Adobe "Print" dialog.

CLIENT'S COPY

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Connecting People to Peace through Service - Service For Peace is an independent nonprofit organization providing service and learning opportunities through community projects which promote transformational and sustainable personal and community development

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 [X] 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 [X] 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 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 $ 353,366. including grants of $ 145,029.) (Revenue $ 181,125.)

INTERNATIONAL VOLUNTEER PROGRAMS

In 2014, SFP organized 13 international volunteer programs (IVPs) involving US universities. Of those 13, nine involved returning clients, suggesting a high level of satisfaction. New clients include University of Louisville, Auburn University, Georgia Southern University, and Rice University. IVP director Janna Gullery reported that, "We are growing in success and reputation among many of the largest, most developed and most influential Alternative Break programs in the country, including University of California at San Diego, New York University, and Appalachian State University."

SFP's philosophy is exactly what students (and many administrators)

4b (Code:) (Expenses $ 245,549. including grants of $ 85,729.) (Revenue $)

MARTIN LUTHER KING DAY OF SERVICE

On the domestic level, SFP was one of only six national lead agencies for the annual Martin Luther King Day of Service organized by the King Center and the Corporation for National and Community Service. As such, for MLK Day 2014, SFP was able to offer $128,000 in sub-grants to 17 partner organizations. Those partners, including SFP chapters, recruited over 30,000 volunteers who completed more than 600 community service projects nationwide.

4c (Code:) (Expenses $ including grants of $) (Revenue $)

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

(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ 598,915.

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*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	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*	3		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*	4		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*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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*	11a	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*	11b		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*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	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 and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		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*	17		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*	18		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*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

		Line	Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $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*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) 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*	25a		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*	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		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*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		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*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		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*	33		X
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*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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*	35b		
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*	36		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*	37		X
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	38	X	

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 ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	8			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	9			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		X
b	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?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	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?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
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?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	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				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Form **990** (2013)

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 or note to any line in this Part VI [X]

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	1a	8		
	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.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	7		
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?		2		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?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a		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?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		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?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	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*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	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*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	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?	16a		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 ▶CA,CT,DE,FL,KY,WA

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.
[X] Own website [ ] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶
Treasurer - 203-339-0064
360 Fairfield Avenue, Suite 200, Bridgeport, CT 06604

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(1) Michael J. Lenaghan Chairperson	0.50	X						0.	0.	0.
(2) Dr. Charles Phillips President and Director	25.00	X		X				58,970.	0.	54,708.
(3) Ken Bates Treasurer and Director	0.50	X		X				0.	0.	0.
(4) Juan Casimiro Director	0.50	X						0.	0.	0.
(5) Catherine Houlihan Director	0.50	X						0.	0.	0.
(6) Michael Imasua Director	0.50	X						0.	0.	0.
(7) Jun Sook Moon Director	0.50	X						0.	0.	0.
(8) Yenisel Rodriguez Director	0.50	X						0.	0.	0.
(9) Lillian Kato Acting Secretary	20.00			X				21,150.	0.	13,648.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
1b Sub-total								80,120.	0.	68,356.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								80,120.	0.	68,356.

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 ▶ 0

			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*	3		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*	4		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*	5		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 NONE	(B) Description of services	(C) Compensation

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 ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e 160,000.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 520,946.				
	g Noncash contributions included in lines 1a-1f: $ 15,928.					
	h **Total.** Add lines 1a-1f ▶		680,946.			
Program Service Revenue		Business Code				
	2 a Participant Fees	611710	181,125.	181,125.		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f ▶		181,125.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶					
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					
		(i) Real / (ii) Personal				
	6 a Gross rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) ▶					
	7 a Gross amount from sales of assets other than inventory	(i) Securities / (ii) Other				
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss) ▶					
	8 a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less: direct expenses	b				
	c Net income or (loss) from fundraising events ▶					
	9 a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities ▶					
	10 a Gross sales of inventory, less returns and allowances	a				
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory ▶					
	Miscellaneous Revenue	Business Code				
	11 a					
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a-11d ▶					
	12 **Total revenue.** See instructions. ▶		862,071.	181,125.	0.	0.

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 governments and organizations in the United States. See Part IV, line 21	85,729.	85,729.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	145,029.	145,029.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	80,089.	48,451.	22,793.	8,845.
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	164,052.	115,435.	43,667.	4,950.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	76,644.	51,586.	17,302.	7,756.
10 Payroll taxes	21,079.	13,652.	6,291.	1,136.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	32,588.		32,588.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	5,561.			5,561.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	77,344.	34,455.	42,889.	
12 Advertising and promotion	1,403.	1,350.	53.	
13 Office expenses	19,652.	3,268.	16,384.	
14 Information technology	1,033.		1,033.	
15 Royalties				
16 Occupancy				
17 Travel	67,530.	36,709.	30,821.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	24,607.	22,608.	1,999.	
20 Interest	789.	399.	390.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	365.		365.	
23 Insurance	9,248.		9,248.	
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 Project Supplies	38,989.	38,989.		
b Training and Publicatio	1,225.	1,225.		
c Registration and Taxes	573.		573.	
d Training expense	90.		90.	
e All other expenses	30.	30.		
25 **Total functional expenses.** Add lines 1 through 24e	853,649.	598,915.	226,486.	28,248.
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 ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X | Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	283,098.	1	274,576.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	13,250.	4	2,100.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	2,041.	8	0.
	9	Prepaid expenses and deferred charges		9	6,102.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 14,651.			
	b	Less: accumulated depreciation — 10b: 12,824.	0.	10c	1,827.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,150.	15	1,150.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	299,539.	16	285,755.
Liabilities	17	Accounts payable and accrued expenses	35,149.	17	15,943.
	18	Grants payable		18	
	19	Deferred revenue	3,000.	19	0.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26	**Total liabilities.** Add lines 17 through 25	38,149.	26	15,943.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	261,390.	27	269,812.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	261,390.	33	269,812.
	34	Total liabilities and net assets/fund balances	299,539.	34	285,755.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	862,071.
2	Total expenses (must equal Part IX, column (A), line 25)	2	853,649.
3	Revenue less expenses. Subtract line 2 from line 1	3	8,422.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	261,390.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	269,812.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ 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?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
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?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2013
Open to Public Inspection

Name of the organization: Service For Peace, Inc.

Employer identification number: [redacted]

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 [X] 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 - Non-functionally integrated

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?

		Yes	No
(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?	11g(i)		
(ii) A family member of a person described in (i) above?	11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		

h Provide the following information about the supported organization(s).

(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? Yes	No	(v) Did you notify the organization in col. (i) of your support? Yes	No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	No	(vii) Amount of monetary support
Total									

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

Schedule A (Form 990 or 990-EZ) 2013

332021
09-25-13

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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	930,082.	1118069.	1365238.	1046361.	680,946.	5140696.
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	930,082.	1118069.	1365238.	1046361.	680,946.	5140696.
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)						1677844.
6 **Public support.** Subtract line 5 from line 4.						3462852.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	930,082.	1118069.	1365238.	1046361.	680,946.	5140696.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	257.	200.	128.	110.		695.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						5141391.

12 Gross receipts from related activities, etc. (see instructions) ..... 12 | 434,446.

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 2013 (line 6, column (f) divided by line 11, column (f)) ..... 14 | 67.35 %

15 Public support percentage from 2012 Schedule A, Part II, line 14 ..... 15 | 63.81 %

16a **33 1/3% support test - 2013.** 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 - 2012.** 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 - 2013.** 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 - 2012.** 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2012** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2013.** 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 - 2012.** 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.** 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).

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2013

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
UCI	1,118,500.	1,015,672.
United Vision Foundation	765,000.	662,172.

Total Excess Contributions to Schedule A, Part II, Line 5 .... 1,677,844.

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**
▶ **Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at** *www.irs.gov/form990*.

OMB No. 1545-0047

2013

Name of the organization

Service For Peace, Inc.

Employer identification number

[redacted]

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

[X] For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of $5,000 or more during the year ▶ $ ____________

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization	Employer identification number
Service For Peace, Inc.	[redacted]

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Global Peace Festival Foundation 24 Link Drive Rockleigh, NJ 07647	$ 44,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	UCI 7777 Leesburg Pike, Suite 406N Falls Church, VA 22043	$ 270,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	United Vision Foundation 24 Link Drive Rockleigh, NJ 07647	$ 145,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
Service For Peace, Inc.	[redacted]

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

Name of organization	Employer identification number
Service For Peace, Inc.	[redacted]

Part III *Exclusively* religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than $1,000 for the year. Complete columns **(a)** through **(e)** and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

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

OMB No. 1545-0047
2013
Open to Public Inspection

Name of the organization: Service For Peace, Inc.
Employer identification number: [redacted]

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.

		(a) Donor advised funds	(b) Funds and other accounts
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 and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ______

4 Number of states where property subject to conservation easement is located ▶ ______

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ ______

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ______

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 XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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.

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 XIII, 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 XIII.

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 XIII and complete the following table:

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

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

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:

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. 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				
b Buildings				
c Leasehold improvements				
d Equipment		12,458.	12,458.	0.
e Other		2,193.	366.	1,827.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				1,827.

Schedule D (Form 990) 2013

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. 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)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	973,897.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b	111,826.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	111,826.
3	Subtract line **2e** from line **1**			3	862,071.
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 XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	862,071.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	965,475.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	111,826.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	111,826.
3	Subtract line **2e** from line **1**			3	853,649.
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 XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	853,649.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2013
Open to Public Inspection

Name of the organization: Service For Peace, Inc.

Employer identification number [redacted]

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ...... ☐ Yes ☒ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
3 a Sub-total	0	0			0.
b Total from continuation sheets to Part I	0	0			0.
c **Totals** (add lines 3a and 3b)	0	0			0.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean - Antigua & Barbuda, Aruba,	support service projects and peace-building	17,100.	wire	0.		
		Central America and the Caribbean - Antigua & Barbuda, Aruba,	support service projects and peace-building	96,539.	wire	0.		
		South Asia - Afghanistan, Bangladesh, Bhutan, India,	support service projects and peace-building	25,060.	wire	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 3

3 Enter total number of other organizations or entities ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Y[redacted]/, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of non-cash assistance	**(g)** Description of non-cash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* ☐ Yes ☒ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)* ☐ Yes ☒ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* ☐ Yes ☒ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)* ☐ Yes ☒ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)* ☐ Yes ☒ No

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

Part I, Line 2:

Explanation: All grant proposals are reviewed and approved first by our grant manager, and then by our finance committee, before funds are issued.

All grantee organizations are required to report to us quarterly on how the funds have been spent. Reports include financial details, narratives, and photos of activities. The reports are reviewed by our monitored by program director and finance committee. Annual reports from each grantee organization are reviewed by our Board of Directors.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047
2013
Open to Public Inspection

Name of the organization: Service For Peace, Inc.
Employer identification number: [redacted]

Part I **General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Global Peace Festival Foundation 215 Ward Road Ellenwood, GA 30294	26-4599860	501(c)(3)	10,000.	0.			MLK Season of Service
City of Bloomington MLK Commission 401 N. Morton Street, Suite 260 Bloomington, IN 47402	35-6000954	501(c)(3)	17,000.	0.			MLK Season of Service
Alpha Kappa Alpha Sorority, Inc. 5656 S. Stony Island AVenue Chicago, IL 60637	36-2152330	501(c)(3)	10,000.	0.			MLK Season of Service

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 3.

3 Enter total number of other organizations listed in the line 1 table ▶

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Part I, Line 2:

1) Approval:

by A- Grant manager/Resource development manager

B- CEO & Treasurer, Financial committee members, Board members

2)Monitoring:

by A- Program director and Bookkeeper

B- CEO & Treasurer (Monthly),

C- Finance committee members (Quarterly),

Part IV Supplemental Information

D- Board members (Semi annually, annually)

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

OMB No. 1545-0047
2013
Open to Public Inspection

Name of the organization: Service For Peace, Inc.
Employer identification number: [redacted]

Form 990, Part I, Line 1, Description of Organization Mission:

14-25), in order to promote civic knowledge and engagement.

Form 990, Part III, Line 1, Description of Organization Mission:

around the world. We bring together people and partners of diverse faiths, ethnicities, nationalities, generations, and cultures to address profound social needs by discovering commonality and genuine appreciation for differences - all through service. We believe that peace begins with the inner peace fostered by service to others and that active cooperation provides the foundation and the real hope for peace.

Form 990, Part III, Line 4a, Program Service Accomplishments:

want to hear; that we place the communities and their long-term development first. The visiting volunteers play a significant role through safe, affordable, fun and meaningful programs but without jeopardizing the dignity of our communities.

In 2014, SFP continued to bring volunteers to its community development programs in Guatemala and the Dominican Republic. For example Auburn University sent 12 volunteers to SFP's Community of Peace of El Quimal, Guatemala. Together with Guatemalan staff, volunteers and community members, they completed the first phase of a construction project focused on building three new classrooms in the community. This was part of the community's eight-month plan to increase educational quality through more and improved school facilities.

Name of the organization: Service For Peace, Inc.

Employer identification number: [redacted]

Form 990, Part VI, Section B, line 11:

Explanation: Form 990 is emailed to all Directors for their review and comment, before it is filed.

Form 990, Part VI, Section B, Line 12c:

Explanation: The Board reviews the compliance of all directors and officers annually.

Form 990, Part VI, Section B, Line 15:

Explanation: The Board approves the pay of all officers annually in advance, and ensures that pay is at or below the comparative rate for each position.

Form 990, Part VI, Section C, Line 19:

Explanation: Our governing documents are available to the public upon request.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	Machinery & Equipment											
1	Office equipment, 2002	032002	SL	5.00	17	788.			788.	788.		0.
3	Printer and Projector	031504	SL	5.00	17	2,687.			2,687.	2,687.		0.
5	Toshiba Laptop	021605	SL	3.00	17	1,369.			1,369.	1,369.		0.
8	IBM Notebook	031508	SL	3.00	17	2,030.			2,030.	2,030.		0.
9	Office Data Phone System	020209	SL	3.00	17	2,784.			2,784.	2,784.		0.
10	Apple Notebook and Desktop Computer	091510	SL	3.00	17	2,800.			2,800.	2,800.		0.
	* 990 Page 10 Total Machinery & Equipm					12,458.		0.	12,458.	12,458.	0.	0.
	Other											
11	Apple Notebook	110913	SL	3.00	19A	2,193.			2,193.			366.
	* 990 Page 10 Total Other					2,193.		0.	2,193.	0.	0.	366.
	* Grand Total 990 Page 10 Depr					14,651.		0.	14,651.	12,458.	0.	366.

328102
05-01-13

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Form **4562**

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization 990

(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2013

Attachment Sequence No. 179

Name(s) shown on return	Business or activity to which this form relates	Identifying number
Service For Peace, Inc.	Form 990 Page 10	[redacted]

Part I Election To Expense Certain Property Under Section 179 **Note:** *If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2012 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 ▶	13	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II **Special Depreciation Allowance and Other Depreciation (Do not** include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III **MACRS Depreciation (Do not** include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2013	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B - Assets Placed in Service During 2013 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property		2,193.	3 Yrs.	HY	SL	366.
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year	/		40 yrs.	MM	S/L	

Part IV **Summary** (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	366.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

316251 12-19-13 LHA **For Paperwork Reduction Act Notice, see separate instructions.** Form **4562** (2013)

Part V **Listed Property** (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A - Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles.***)**

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use						25		
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
30 Total business/investment miles driven during the year (**do not** include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: *If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.*

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2013 tax year:					
43 Amortization of costs that began before your 2013 tax year				43	
44 **Total.** Add amounts in column (f). See the instructions for where to report				44	

Form **8868**
(Rev. January 2014)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at** *www.irs.gov/form8868*

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing *(e-file)*. You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits.*

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	Service For Peace, Inc.	[redacted]
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. Box 3096	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Bridgeport, CT 06605	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ Treasurer
360 Fairfield Avenue, Suite 200 - Bridgeport, CT 06604
Telephone No. ▶ 203-339-0064 Fax No. ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ . If this is for the whole group, check this box ▶ [ ] . If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until May 15, 2015 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ [ ] calendar year ______ or
▶ [X] tax year beginning OCT 1, 2013 , and ending SEP 30, 2014 .

2 If the tax year entered in line 1 is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	$ 0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	$ 0.
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	$ 0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

328941 11-14-13

TAXABLE YEAR **2013**

California Exempt Organization Annual Information Return

FORM **199**

Calendar Year 2013 or fiscal year beginning (mm/dd/yyyy) 10/01/2013 , and ending (mm/dd/yyyy) 09/30/2014 .

Corporation/Organization Name: SERVICE FOR PEACE, INC.

California corporation number: [redacted]

Address (suite, room, or PMB no.): P.O. BOX 3096

City: BRIDGEPORT | State: CT | ZIP Code: 06605

A First Return ☐ Yes [X] No

B Amended Information Return • ☐ Yes [X] No

C IRC Section 4947(a)(1) trust ☐ Yes [X] No

D Final Information Return?
• ☐ Dissolved • ☐ Surrendered (Withdrawn)
• ☐ Merged/Reorganized Enter date: (mm/dd/yyyy) •

E Check accounting method:
(1) ☐ Cash (2) [X] Accrual (3) ☐ Other

F Federal return filed?
(1)• ☐ 990T (2)• ☐ 990 PF (3)• ☐ Sch H (990)

G Is this a group filing for the subordinates/affiliates? • ☐ Yes [X] No
If "Yes," attach a roster. See instructions

H Is this organization in a group exemption? ☐ Yes [X] No
If "Yes," what is the parent's name?

I Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? • ☐ Yes [X] No
If "Yes," explain, and attach copies of revised documents.

J If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign, or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? • ☐ Yes [X] No
If "Yes," complete and attach form FTB 3509.

K Is the organization exempt under R&TC Section 23701g? • ☐ Yes [X] No
If "Yes," enter the gross receipts from nonmember sources $

L If organization is exempt under R&TC Section 23701d and is exclusively religious, educational, or charitable, and is supported primarily (50% or more) by public contributions, check box. No filing fee is required. • ☐

M Is the organization a Limited Liability Company? • ☐ Yes [X] No

N Did the organization file Form 100 or Form 109 to report taxable income? • ☐ Yes [X] No

O Is the organization under audit by the IRS or has the IRS audited in a prior year? • ☐ Yes [X] No

Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8 •		1	181,125. 00
	2	Gross dues and assessments from members and affiliates •		2	00
	3	Gross contributions, gifts, grants, and similar amounts received STMT 1 •		3	680,946. 00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. **This line must be completed.** If the result is less than $50,000, see General Instruction B •		4	862,071. 00
	5	Cost of goods sold •	5 00		
	6	Cost or other basis, and sales expenses of assets sold •	6 00		
	7	Total costs. Add line 5 and line 6		7	00
	8	Total gross income. Subtract line 7 from line 4 •		8	862,071. 00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18 •		9	852,954. 00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8 •		10	9,117. 00
Filing Fee	11	Filing fee $10 or $25. See General Instruction F		11	10. 00
	12	Total payments		12	00
	13	Penalties and Interest. See General Instruction J		13	00
	14	Use tax. See General Instruction K •		14	00
	15	**Balance due.** Add line 11, line 13, and line 14. Then subtract line 12 from the result •		15	10. 00

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer ▶ | Title: PRESIDENT | Date | • Telephone: 203-339-5767

Paid Preparer's Use Only
Preparer's signature ▶ | Date: 02/05/15 | Check if self-employed ▶ ☐ | • PTIN: [redacted]

Firm's name (or yours, if self-employed) and address ▶ BRUNHOFER & BALISE, LLP
287 FARVIEW AVENUE
PARAMUS, NJ 07652
Telephone: 201-599-9899

May the FTB discuss this return with the preparer shown above? See instructions • ☐ Yes ☐ No

SERVICE FOR PEACE, INC. [redacted]

328951 11-14-13

Part II Organizations with gross receipts of more than $50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	1	00
	2	Interest	2	00
	3	Dividends	3	00
	4	Gross rents	4	00
	5	Gross royalties	5	00
	6	Gross amount received from sale of assets (See Instructions)	6	00
	7	Other income SEE STATEMENT 2	7	181,125. 00
	8	**Total** gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	8	181,125. 00
Expenses and Disbursements	9	Contributions, gifts, grants, and similar amounts paid STATEMENT 3	9	229,758. 00
	10	Disbursements to or for members	10	00
	11	Compensation of officers, directors, and trustees SEE STATEMENT 4	11	80,089. 00
	12	Other salaries and wages	12	164,052. 00
	13	Interest	13	789. 00
	14	Taxes	14	21,079. 00
	15	Rents	15	00
	16	Depreciation and depletion (See instructions)	16	670. 00
	17	Other Expenses and Disbursements SEE STATEMENT 5	17	356,517. 00
	18	**Total** expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	852,954. 00

Schedule L Balance Sheets

	Beginning of taxable year (a)	(b)	End of taxable year (c)	(d)
Assets				
1 Cash		283,098.		274,576.
2 Net accounts receivable		13,250.		2,100.
3 Net notes receivable				
4 Inventories		2,041.		
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans				
9 Other investments				
10 a Depreciable assets	12,458.		14,651.	
b Less accumulated depreciation	(12,458.)		(12,824.)	1,827.
11 Land				
12 Other assets STMT 6		1,150.		7,252.
13 Total assets		299,539.		285,755.
Liabilities and net worth				
14 Accounts payable		35,149.		15,943.
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable				
18 Other liabilities STMT 7		3,000.		
19 Capital stock or principle fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		261,390.		269,812.
22 Total liabilities and net worth		299,539.		285,755.

Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than $50,000.

1 Net income per books	9,117.	7 Income recorded on books this year not included in this return.	
2 Federal income tax		8 Deductions in this return not charged against book income this year	
3 Excess of capital losses over capital gains			
4 Income not recorded on books this year		9 Total. Add line 7 and line 8	
5 Expenses recorded on books this year not deducted in this return		10 Net income per return. Subtract line 9 from line 6	9,117.
6 Total. Add line 1 through line 5	9,117.		

Form 199	Cash Contributions of $5000 or More Included on Part I, Line 3	Statement 1

Contributor's Name	Contributor's Address	Date of Gift	Amount
Global Peace Festival Foundation	24 Link Drive Rockleigh, NJ 07647		44,000.
UCI	7777 Leesburg Pike, Suite 406N Falls Church, VA 22043		270,000.
United Vision Foundation	24 Link Drive Rockleigh, NJ 07647		145,000.
Total Included on Line 3			459,000.

Form 199	Other Income	Statement 2

Description	Amount
Participant Fees	181,125.
Total to Form 199, Part II, line 7	181,125.

Service For Peace, Inc. [redacted]

Form 199	Cash Contributions, Gifts, Grants and Similar Amounts Paid	Statement 3

Activity Classification: International Service Projects

Donees Name	Donees Address	Relationship	Amount
Asociacion Servicio Para La Paz	24 Calle A 16-19 Zona 6 Guatemala City Guatemala 01006	None	17,100.

Donees Name	Donees Address	Relationship	Amount
Servicio Para La Paz	Avienda 25 de Bebrero, Las Americas No 175c, Satno Domingo Este,DominicanRep	None	95,539.

Donees Name	Donees Address	Relationship	Amount
SFP Nepal	Ward No 7, Sifal, Kathamandu, Nepal	None	25,060.

Donees Name	Donees Address	Relationship	Amount
various international	various	None	6,330.

Total for this Activity 144,029.

Activity Classification: MLK Season of Service

Donees Name	Donees Address	Relationship	Amount
Global Peace Festival Foundation	21010 76th Ave W, Edmonds WA	None	10,000.

Donees Name	Donees Address	Relationship	Amount
Alpha Kappa Alpha Sorority Inc	5656 S Stony Island Ave, Chicago IL 60637	None	10,000.

Donees Name	Donees Address	Relationship	Amount
City of Bloomington MLK Commission	401 N. Morton Street Bloomington,IN	None	17,000.

Donees Name	Donees Address	Relationship	Amount
Community Connection of Northeast Georgi	1695 Old West Broad Street, Athens, GA 30607	None	5,000.

Donees Name	Donees Address	Relationship	Amount
Oshman Family Jewish Community Center	3921 Fabian Way, Palo Alto CA 94303	None	5,000.

Donees Name	Donees Address	Relationship	Amount
Pennsylvania Family Coalition	21 Swarts Drive, Covington PA 18424	None	5,000.

Donees Name	Donees Address	Relationship	Amount
United Way of the Greater Triangle	2400 Perimeter Park Drive, Morrisville NC 27560	None	5,000.

Donees Name	Donees Address	Relationship	Amount
University of Bridgeport	244 University Avenue, Bridgeport CT 06601	None	5,000.

Donees Name	Donees Address	Relationship	Amount
various domestic	various	None	23,729.
	Total for this Activity		85,729.
Total Included on Form 199, Part II, line 9			229,758.

Form 199 Compensation of Officers, Directors and Trustees Statement 4

Name and Address	Title and Average Hrs Worked/Wk	Compensation
Michael J. Lenaghan P.O. Box 3096 Bridgeport, CT 06605	Chairperson 0.50	0.
Dr. Charles Phillips P.O. Box 3096 Bridgeport, CT 06605	President and Director 25.00	0.
Ken Bates P.O. Box 3096 Bridgeport, CT 06605	Treasurer and Director 0.50	0.
Juan Casimiro P.O. Box 3096 Bridgeport, CT 06605	Director 0.50	0.
Catherine Houlihan P.O. Box 3096 Bridgeport, CT 06605	Director 0.50	0.
Michael Imasua P.O. Box 3096 Bridgeport, CT 06605	Director 0.50	0.
Jun Sook Moon P.O. Box 3096 Bridgeport, CT 06605	Director 0.50	0.

Service For Peace, Inc. [redacted]

Yenisel Rodriguez P.O. Box 3096 Bridgeport, CT 06605	Director 0.50	0.
Lillian Kato P.O. Box 3096 Bridgeport, CT 06605	Acting Secretary 20.00	0.
Total to Form 199, Part II, line 11		0.

Form 199	Other Expenses	Statement 5

Description	Amount
Project Supplies	38,989.
Training and Publicatio	1,225.
Registration and Taxes	573.
Training expense	90.
Other employee benefits	76,644.
Accounting fees	32,588.
Professional fundraising fees	5,561.
Other professional fees	77,344.
Advertising and promotion	1,403.
Office expenses	19,652.
Information technology	1,033.
Travel	67,530.
Conferences and conventions	24,607.
Insurance	9,248.
All other expenses	30.
Total to Form 199, Part II, line 17	356,517.

Form 199	Other Assets	Statement 6

Description	Beg. of Year	End of Year
Prepaid Expenses and Deferred Charges	0.	6,102.
Security Deposits	1,150.	1,150.
Total to Form 199, Schedule L, line 12	1,150.	7,252.

Form 199	Other Liabilities	Statement 7

Description	Beg. of Year	End of Year
Deferred Revenue	3,000.	0.
Total to Form 199, Schedule L, line 18	3,000.	0.

TAXABLE YEAR
2013

Corporation Depreciation and Amortization

CALIFORNIA FORM
3885

Attach to Form 100 or Form 100W. FORM 199 FEIN [redacted]

Corporation name: SERVICE FOR PEACE, INC.

California corporation number: [redacted]

Part I Election To Expense Certain Property Under IRC Section 179

1 Maximum deduction under IRC Section 179 for California	1	$25,000
2 Total cost of IRC Section 179 property placed in service	2	
3 Threshold cost of IRC Section 179 property before reduction in limitation	3	$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	

	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6			

7 Listed property (elected IRC Section 179 cost)	7	
8 Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9 Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10 Carryover of disallowed deduction from prior taxable years	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12 IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2014. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

(a) Description property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation Method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
14							
SEE STATEMENT	8	14,651.	12,303.				

15 Add the amounts in column (g) and column (h). The total of column (h) may not exceed $2,000. See instructions for line 14, column (h)	15	670.	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g); **or** Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h), **or** Depreciation (if no election is made), enter the amount from line 15, column (g)	16	670.
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	366.
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	304.

Part IV Amortization

(a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instructions)	(f) Period or percentage	(g) Amortization for this year
19						

20 Total. Add the amounts in column (g)	20	
21 Total amortization claimed for federal purposes from federal Form 4562, line 44	21	
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12	22	

CA 3885 Depreciation Statement 8

Asset No./ Description	Date in Service	Cost or Basis	Prior Depr	Method	Life	Depre- ciation	Bonus
1 Office equipment, 2002	03/20/02	788.	788.	SL	5.00	0.	
3 Printer and Projector	03/15/04	2,687.	2,687.	SL	5.00	0.	
5 Toshiba Laptop	02/16/05	1,369.	1,369.	SL	3.00	0.	
8 IBM Notebook	03/15/08	2,030.	2,030.	SL	3.00	0.	
9 Office Data Phone System	02/02/09	2,784.	2,629.	SL	3.00	0.	
10 Apple Notebook and Desktop Computer	09/15/10	2,800.	2,800.	SL	3.00	0.	
11 Apple Notebook	11/09/13	2,193.		SL	3.00	670.	
Total Depr to Form 3885		14,651.	12,303.			670.	

022

Date Accepted ____________________

DO NOT MAIL THIS FORM TO THE FTB

TAXABLE YEAR **2013**

California e-file Return Authorization for Exempt Organizations

FORM **8453-EO**

Exempt Organization name	Identifying number
Service For Peace, Inc.	[redacted]

Part I Electronic Return Information (whole dollars only)

1	Total gross receipts (Form 199, line 4)	1	862,071 .00
2	Total gross income (Form 199, line 8)	2	862,071 .00
3	Total expenses and disbursements (Form 199, line 9)	3	852,954 .00

Part II Settle Your Account Electronically for Taxable Year 2013

4 ☐ Electronic funds withdrawal 4a Amount 4b Withdrawal date (mm/dd/yyyy)

Part III Banking Information (Have you verified the exempt organization's banking information?)

5 Routing number

6 Account number 7 Type of account: ☐ Checking ☐ Savings

Part IV Declaration of Officer

I authorize the exempt organization's account be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my Electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2013 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to my ERO, intermediate service provider, the reason(s) for the delay.**

Sign Here Signature of Officer | Date | Title: President

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an Intermediate Service Provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2013 e-file Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or four years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO Must Sign

ERO's signature | Date | Check if also paid preparer ☐ | Check if self-employed ☐ | ERO's PTIN [redacted]

Firm's name (or yours if self-employed) and address: Brunhofer & Balise, LLP, 287 Farview Avenue, Paramus, NJ | FEIN [redacted] | ZIP Code 07652

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign

Paid preparer's signature | Date | Check if self-employed ☐ | Paid preparer's PTIN [redacted]

Firm's name (or yours if self-employed) and address: Brunhofer & Balise, LLP, 287 Farview Avenue, Paramus, NJ | FEIN [redacted] | ZIP Code 07652

Board of Directors

First Name	Last Name	Company / Org	Job Title	Address	City	State	Zip	Country	E-Mail	Work number	Fax	Mobile/ Home phone
Ken	Bates (Treasurer)	United Vision Group	President	[redacted]	Doral	FL	33178	USA	[redacted]			[redacted]
Charles	Phillips	Service For Peace	CEO/President	[redacted]	Bridgeport	CT	06610	USA	[redacted]	203-339-0064	203-339-0874	[redacted]
Michael	Lenaghan (Chair)	Miami Dade College	Professor	[redacted]	Miami	FL	33018	USA	[redacted]	305-237-1631	305-237-1833	[redacted]
Catherine	Houlihan	Take Stock in Children	Mentor Program Coordinator	[redacted]	Miami	FL	33133	USA	[redacted]	786.543.2547		[redacted]
Lillian	Kato (acting Secry)	Service For Peace	Admin & Records Officer	[redacted]	Miami	FL	33187	USA	[redacted]	786-493-3570	305-234-7361	[redacted]
Juan	Casimiro	Excent, Inc	Vice President Global Affairs	[redacted]	Doral	FL	33178	USA	[redacted]	786-385-5285		[redacted]
Michael	Imasua	St Thomas University	Administrator	[redacted]	Miami	FL	33054	USA	[redacted]	786-759-0112		[redacted]
Yenisel	Rodriguez	University of Albany	Academic Advisor	[redacted]	Cohoes	NY	12047	USA	[redacted]	518-880-6634		[redacted]
Jun Sook	Moon	Global Peace Woman	Chairperson	[redacted]	Bridgeport	CT	06604	USA	[redacted]	203-339-0064		

Election and Term of Office. The directors shall be elected by the full Board of Directors at its annual meeting. Each director shall serve for a term of one year.

No term Limits

Service For Peace Actuals + Remaining Budget

Fiscal Year Ended September 30, 2014

	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Budget	
	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Total
INCOME STATEMENT BY MONTH													
Income													
4010 · Individual Contributions	505	219	258	1,157	180	374	1,409	991	384	264	114	725	6,581
4015 · Business Contributions	0	750	250	1,100	0	0	0	0	1,000	291	5,544	5,000	13,935
4230 · Foundation/Non Profit	66,350	44,100	45,900	41,200	39,100	39,100	34,100	32,861	38,300	35,100	34,950	34,100	485,161
4520 · Federal grants	0	64,000	0	0	0	96,000	0	0	0	0	0	0	160,000
4525 · Participant Fees	13,025	47,525	11,405	58,020	2,000	28,150	3,050	0	7,550	8,400	0	11,450	190,575
4600 · In Kind	0	0	0	0	0	146,472	0	0	0	0	0	0	146,472
5490 · Miscellaneous revenue	0	0	0	0	0	0	0	0	0	0	0	0	0
													0
Total Income	**79,880**	**156,594**	**57,813**	**101,477**	**41,280**	**310,096**	**38,559**	**33,852**	**47,234**	**44,055**	**40,608**	**51,275**	**1,002,724**
Expenses													
Grant & contract expense	27,785	72,851	14,515	57,528	7,171	69,351	0	1,863	4,120	10,122	21,160	11,697	298,162
Salaries & related expenses	37,239	33,136	31,365	29,988	26,919	27,211	30,250	26,663	25,781	27,954	24,321	26,252	347,079
Other personnel expenses	11,996	11,337	10,857	13,593	6,109	10,086	4,737	9,919	4,165	5,788	5,579	8,058	102,222
Non-personnel expenses	805	3,475	4,495	3,622	767	709	1,500	1,248	967	1,462	2,266	2,833	24,148
Occupancy expenses	1,420	1,649	1,536	1,516	1,591	1,516	1,519	1,607	1,516	1,525	1,420	1,371	18,187
Travel & meetings expenses	7,293	4,410	13,830	1,081	4,935	3,568	3,278	478	-850	2,428	756	4,211	45,419
Misc expenses	1,120	1,170	3,223	2,347	2,799	927	1,055	1,270	869	1,345	3,867	2,409	22,400
Business expenses	700	50		61	19	26	15	10		470	22		1,373
In Kind expenses	0	0	0	0	0	146,472	0	-319	0	0	0	0	146,153

Service For Peace Actuals + Remaining Budget

Fiscal Year Ended September 30, 2014

	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Budget	
	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Total
Total Expenses	88,357	128,076	79,821	109,736	50,310	259,866	42,354	42,739	36,568	51,094	59,391	56,832	1,005,143
Net Ordinary Income $	-8,477	28,518	-22,008	-8,259	-9,030	50,230	-3,794	-8,886	10,667	-7,039	-18,783	-5,557	-2,419
Total Expenses	-8,477	28,518	-22,008	-8,259	-9,030	50,230	-3,794	-8,886	10,667	-7,039	-18,783	-5,557	-2,419
Net Operating Income	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Income													
Interest Income	0	0	0	0	0	0	0	0	0	0	0	10	10
Total Other Income	0	0	0	0	0	0	0	0	0	0	0	10	10
Other Expenses													
Interest Expense	-	-	-	-	-	-	-	-	-	-	-	-	
Depreciation Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Other Expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Net Other Income	-	-	-	-	-	-	-	-	-	-	-	10	10
Net Income / (Loss)	(8,477)	28,518	(22,008)	(8,259)	(9,030)	50,230	(3,794)	(8,886)	10,667	(7,039)	(18,783)	(5,547)	(2,409)

Service For Peace Actuals + Remaining Budget

Fiscal Year Ended September 30, 2014

	B/S at Prior Year-End	Actual Oct-13	Actual Nov-13	Actual Dec-13	Actual Jan-14	Actual Feb-14	Actual Mar-14	Actual Apr-14	Actual May-14	Actual Jun-14	Actual Jul-14	Actual Aug-14	Budget Sep-14	Total
BALANCE SHEET BY MONTH														
ASSETS														
Current Assets													0	
Bank Accounts														
Checking/Money Mkt	282,682	250,722	317,329	248,621	306,945	239,557	335,742	292,586	268,072	295,290	270,107	266,057	251,656	
Cash on hand / Petty cash	415	415	415	415	415	415	415	415	415	415	415	415	415	
Total Bank Accounts	283,098	251,137	317,745	249,036	307,360	239,972	336,157	293,001	268,488	295,706	270,522	266,472	252,071	
Accounts Receivable														
Accounts Receivable	13,250	35,500	-	12,000	2,100	14,100	12,000	2,100	14,100	-	14,100	-	17,475	
Total Accounts Receivable	13,250	35,500	-	12,000	2,100	14,100	12,000	2,100	14,100	-	14,100	-	17,475	
Other Current Assets														
RD	2,041	-	-	-	-	-	-	-	-	-	-	-	-	
Prepaid Expense	-	-	9,436	9,022	8,008	6,694	5,630	5,016	4,202	3,388	2,873	2,459	2,045	
Employee Advance	-	-	-	4,101	4,101	4,101	4,101	4,101	4,101	4,101	4,101	4,101	-	
Deposits	1,150	1,150	1,150	1,150	1,150	1,150	1,150	1,150	1,150	1,150	1,150	1,150	1,150	
Total Other Current Assets	3,191	1,150	10,586	14,273	13,259	11,945	10,881	10,267	9,452	8,638	8,124	7,710	3,195	
Total Current Assets	299,538	287,787	328,330	275,309	322,719	266,017	359,038	305,368	292,040	304,344	292,747	274,183	272,742	
Fixed Assets														
Total Fixed Assets	-	-	-	-	-	-	-	-	-	-	-	-	-	
	-	-	-	-	-	-	-	-	-	-	-	-	-	
Total Other Assets	-	-	-	-	-	-	-	-	-	-	-	-	-	
TOTAL ASSETS	299,538	287,787	328,330	275,309	322,719	266,017	359,038	305,368	292,040	304,344	292,747	274,183	272,742	

Service For Peace Actuals + Remaining Budget

Fiscal Year Ended September 30, 2014

		Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Budget	
		Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Total
LIABILITIES AND EQUITY														
Liabilities														
Current Liabilities														
Accounts Payable														
Accounts Payable	28,544	30,667	38,822	9,729	67,364	15,014	65,250	11,802	9,965	10,625	6,644	8,188	11,261	-
Total Accounts Payable	28,544	30,667	38,822	9,729	67,364	15,014	65,250	11,802	9,965	10,625	6,644	8,188	11,261	
Credit Cards - US Bank	6,605	1,207	5,079	3,157	1,192	5,869	1,424	4,998	2,393	3,370	2,792	1,467	2,500	
AP Clearing + Unearned Revnue	3,000	3,000	3,000	3,000	3,000	3,000	-	-	-	-	-	-	-	
Total Current Liabilities	38,149	34,875	46,900	15,887	71,556	23,883	66,674	16,799	12,358	13,995	9,436	9,654	13,761	
	-	-	-	-	-	-	-	-	-	-	-	-	-	
Total Liabilities	38,149	34,875	46,900	15,887	71,556	23,883	66,674	16,799	12,358	13,995	9,436	9,654	13,761	
Equity														
Opening Balance Equity	91,844	91,844	91,844	91,844	91,844	91,844	91,844	91,844	91,844	91,844	91,844	91,844	91,844	
Unrestricted (Retained Earnings)	155,367	169,546	169,546	169,546	169,546	169,546	169,546	169,546	169,546	169,546	169,546	169,546	169,546	
Net Income	14,179	(8,477)	20,041	(1,967)	(10,226)	(19,256)	30,974	27,179	18,293	28,959	21,920	3,138	(2,409)	
Total Equity	261,390	252,913	281,430	259,422	251,163	242,133	292,363	288,569	279,682	290,349	283,310	264,527	258,981	
TOTAL LIABILITIES AND EQUITY	299,538	287,787	328,330	275,309	322,719	266,016	359,037	305,368	292,040	304,344	292,746	274,182	272,742	
ck figure	0	0	0	0	0	1	0	0	0	0	1	1	0	

Service For Peace Actuals + Remaining Budget

Fiscal Year Ended September 30, 2014

Statement of Cash Flows By Month	Actual Oct-13	Actual Nov-13	Actual Dec-13	Actual Jan-14	Actual Feb-14	Actual Mar-14	Actual Apr-14	Actual May-14	Actual Jun-14	Actual Jul-14	Actual Aug-14	Budget Sep-14	Total
OPERATING ACTIVITIES													
Net Income	(8,477)	28,518	(22,008)	(8,259)	(9,030)	50,230	(3,794)	(8,886)	10,667	(7,039)	(18,783)	(5,547)	(2,409)
Adjustments to reconcile Net Income to Net Cash provided by operations:													
Accounts Receivable	(22,250)	35,500	(12,000)	9,900	(12,000)	2,100	9,900	(12,000)	14,100	(14,100)	14,100	(17,475)	(4,225)
Other Current Assets	2,041	(9,436)	(3,687)	1,014	1,314	1,064	614	814	814	514	414	4,515	(5)
Acct. Pay & Accrued Exp.	2,124	8,154	(29,092)	57,635	(52,350)	47,236	(53,448)	(1,837)	660	(3,981)	1,544	3,073	(20,283)
Credit Cards	(5,398)	3,871	(1,921)	(1,965)	4,677	(4,445)	3,573	(2,605)	977	(578)	(1,325)	1,033	(4,105)
Net cash provided by operating activities	**(31,961)**	**66,607**	**(68,708)**	**58,324**	**(67,389)**	**96,185**	**(43,155)**	**(24,514)**	**27,218**	**(25,184)**	**(4,050)**	**(14,400)**	**(31,026)**
FINANCING ACTIVITIES													
Fixed Asset Additions	-	-	-	-	-	-	-	-	-	-	-	-	
Net cash provided by financing activities	-	-	-	-	-	-	-	-	-	-	-	-	-
Net cash Increase / (Decrease) for period	**(31,961)**	**66,607**	**(68,708)**	**58,324**	**(67,389)**	**96,185**	**(43,155)**	**(24,514)**	**27,218**	**(25,184)**	**(4,050)**	**(14,400)**	**(31,026)**
Cash at beginning of period	283,098	251,137	317,745	249,036	307,360	239,972	336,157	293,001	268,488	295,706	270,522	266,472	283,098
Cash at end of period	**251,137**	**317,744**	**249,037**	**307,360**	**239,972**	**336,157**	**293,002**	**268,488**	**295,706**	**270,522**	**266,472**	**252,072**	**252,072**
ck figure	0	0	-1	1	1	0	0	0	0	1	0	-1	1

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: MAY 24 2007

SERVICE FOR PEACE INC
2838 FAIRFIELD AVE SECOND FLR
BRIDGEPORT, CT 06605-0000

Employer Identification Number:
[redacted]
DLN:
17053083805097
Contact Person:
THOMAS C KOESTER ID# 31116
Contact Telephone Number:
(877) 829-5500
Public Charity Status:
509(a)(2)

Dear Applicant:

Our letter dated July 2002, stated you would be exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, and you would be treated as a public charity, rather than as a private foundation, during an advance ruling period.

Based on the information you submitted, you are classified as a public charity under the Code section listed in the heading of this letter. Since your exempt status was not under consideration, you continue to be classified as an organization exempt from Federal income tax under section 501(c)(3) of the Code.

Publication 557, Tax-Exempt Status for Your Organization, provides detailed information about your rights and responsibilities as an exempt organization. You may request a copy by calling the toll-free number for forms, (800) 829-3676. Information is also available on our Internet Web Site at www.irs.gov.

If you have general questions about exempt organizations, please call our toll-free number shown in the heading.

Please keep this letter in your permanent records.

Sincerely yours,

Robert Choi

Robert Choi
Director, Exempt Organizations
Rulings and Agreements

RECEIVED
6/18/07

Letter 1050 (DO/CG)

SERVICE FOR PEACE, INC.

Financial Statements and
Independent Auditors' Report
Years Ended
September 30, 2014 and 2013

CONTENTS

BRUNHOFER & BALISE, LLP
Certified Public Accountants
287 Farview Avenue
Paramus, New Jersey 07652
201-599-9899

Independent Auditors' Report

Board of Directors
Service For Peace, Inc.
Bridgeport, CT

We have audited the accompanying financial statements of Service For Peace, Inc. (a non-profit organization) which comprise the statements of financial position as of September 30, 2014 and 2013, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Service For Peace, Inc. as of September 30, 2014 and 2013 and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Brunhofer & Balise, LLP

Paramus, New Jersey
February 18, 2015

SERVICE FOR PEACE, INC.
Statements of Financial Position
September 30,

ASSETS

	2014	2013
CURRENT ASSETS		
Cash	$ 274,576	$ 283,098
Grants receivable	2,100	13,250
Inventory	0	2,041
Prepaid expenses	6,102	0
Total Current Assets	282,778	298,389
PROPERTY AND EQUIPMENT		
Property and equipment, at cost	14,651	12,458
Less: accumulated depreciation	(12,824)	(12,458)
Total Property and Equipment	1,827	0
OTHER ASSETS		
Deposits	1,150	1,150
Total Deposits	1,150	1,150
TOTAL ASSETS	$ 285,755	$ 299,539

LIABILITIES AND NET ASSETS

	2014	2013
CURRENT LIABILITIES		
Accounts payable	$ 15,943	35,149
Deferred revenues	0	3,000
Total Current Liabilities	15,943	38,149
TOTAL LIABILITIES	15,943	38,149
NET ASSETS		
Unrestricted net assets	269,812	261,390
Total Net Assets	269,812	261,390

The accompanying notes are an integral part of these statements.

SERVICE FOR PEACE, INC.
Statements of Activities
Years ended September 30,

	2014	2013
CHANGES IN UNRESTRICTED NET ASSETS:		
Revenues		
Unrestricted contributions received	$ 505,018	$ 809,066
Government grants received	160,000	160,000
Non-cash materials, services, & use of facilities received	127,754	174,645
Program service revenue	181,125	140,684
Interest income	0	110
Total Revenue	973,897	1,284,505
Expenses		
Service project expenses	710,741	963,020
General and administrative expenses	226,486	284,428
Fundraising expenses	28,248	22,877
Total Expenses	965,475	1,270,325
INCREASE (DECREASE) IN NET ASSETS:	$ 8,422	$ 14,180
Net Assets, at beginning of year	261,390	247,210
Net Assets, at end of year	$ 269,812	$ 261,390

The accompanying notes are an integral part of these statements.

SERVICE FOR PEACE, INC.
Statement of Functional Expenses
Year Ended September 30, 2014

	Total	Service Projects USA	Service Projects Overseas	General & Admin	Fund-raising
Bank fees	$ 6,723	$ 5	$ 592	$ 6,126	$ 0
Depreciation	365	0	0	365	0
Donations	230,758	85,729	145,029	0	0
Employee benefits	77,864	11,035	40,873	18,187	7,769
Equipment rental and maintenance	1,192	0	0	1,192	0
Insurance	9,248	0	0	9,248	0
Office expenses	2,715	450	30	2,235	0
Payroll expenses	244,142	72,674	91,212	66,460	13,796
Payroll taxes	19,858	5,911	7,419	5,406	1,122
Postage and freight	642	109	0	533	0
Printing and publishing	1,555	1,073	55	427	0
Professional fees	182,987	111,656	2,616	63,154	5,561
Rent	18,365	108	12	18,245	0
Service expenses	46,863	28,630	5,838	12,395	0
Supplies	40,337	24,098	13,362	2,877	0
Taxes and licenses	553	0	0	553	0
Telephone expense	5,860	726	716	4,418	0
Training and development	1,255	0	1,165	90	0
Travel	59,331	7,936	42,360	9,035	0
Vehicle expenses	14,862	7,235	2,087	5,540	0
TOTALS	$ 965,475	$ 357,375	$ 353,366	$ 226,486	$ 28,248

The accompanying notes are an integral part of these statements.

SERVICE FOR PEACE, INC.
Statement of Functional Expenses
Year Ended September 30, 2013

	Total	Service Projects USA	Service Projects Overseas	General & Admin	Fund-raising
Bank fees	$ 6,977	$ 3,598	$ 19	$ 3,075	$ 285
Depreciation	815	348	0	467	0
Donations	205,264	66,250	139,014	0	0
Employee benefits	88,746	25,179	20,933	40,992	1,642
Insurance	8,119	(1,938)	2,850	6,592	615
Office expenses	9,202	376	2,005	6,821	0
Payroll expenses	287,948	99,863	89,381	89,080	9,624
Payroll taxes	23,490	7,719	7,304	7,679	788
Postage and freight	902	465	0	397	40
Printing and publishing	631	212	163	198	58
Professional fees	191,770	91,428	20,932	74,183	5,227
Rent	18,659	4,346	4,212	9,360	741
Service expense	115,319	53,149	60,402	1,647	121
Supplies	165,264	152,183	6,925	5,405	751
Taxes and licenses	1,177	0	0	1,177	0
Telephone expense	7,024	1,121	3,136	2,552	215
Training and development	16,441	0	5,418	10,371	652
Travel	88,801	32,144	42,955	11,953	1,749
Vehicle expense	33,776	11,111	9,817	12,479	369
TOTALS	$1,270,325	$ 547,554	$ 415,466	$ 284,428	$ 22,877

SERVICE FOR PEACE, INC.
Statements of Cash Flows
Years Ended September 30,

	2014	2013
Cash flows from operating activities		
Excess (deficiency) of revenue over expenses	$ 8,422	$ 14,180
Adjustments to reconcile excess revenue over expenses to net cash provided by operating activities:		
Depreciation	366	814
Changes in assets and liabilities		
(Increase) decrease in grants receivable	11,150	116,658
(Increase) decrease in inventory	2,041	0
(Increase) decrease in prepaid expenses	(6,101)	1,334
Increase (decrease) in accounts payable	(19,207)	23,322
Increase (decrease) in accrued expenses	0	0
Increase (decrease) in deferred revenues	(3,000)	3,000
Total adjustments	(14,751)	145,128
Net cash provided (used) by operating activities	(6,329)	159,308
Cash flows from investing activities		
Purchase of equipment	(2,193)	0
Net cash provided (used) by investing activities	(2,193)	0
Cash flows from financing activities		
	0	0
Net cash provided (used) by financing activities	0	0
Net increase (decrease) in cash	$ (8,522)	$ 159,308
Cash at beginning of year	283,098	123,790
Cash at end of year	$ 274,576	$ 283,098

The accompanying notes are an integral part of these statements.

The summary of significant accounting policies of Service For Peace, Inc. (a non-profit organization) is presented to assist in understanding the Organization's financial statements. These policies conform to accounting principles generally practiced in the United States. The financial statements and notes are representations of the Organization's management, which is responsible for their integrity and objectivity.

Nature of Organization

Service For Peace, Inc. ("the Organization") was incorporated on February 13, 2002 in the State of Delaware as a not-for-profit organization, and is exempt from the payment of income taxes on its activities under Section 501(c)(3) of the Internal Revenue Code. The Organization evaluated its tax positions and determined that its positions are more likely than not to be sustained on examination. The Organization's 2011 through 2013 tax years are open for examination by the IRS. The Organization was organized to promote volunteerism at the community level. Through service projects and educational seminars, training is provided to upcoming community leaders to use volunteerism as a means of promoting good citizenship and peace between people of different races, faiths and nationalities. The Organization's goal is to create a worldwide movement of selfless service.

Financial Statement Presentation

The Organization's financial statements are presented in accordance with the provisions of Financial Accounting Standards Board (FASB) Accounting Standard Codification (FASB ASC) 958-605, Accounting for Contributions Received and Contributions Made, and FASB ASC 958-205, Financial Statements of Not-for-profit Organizations.

FASB ASC 958-205-05 requires that the various funds be categorized to the existence or absence of donor-imposed restrictions. Accordingly, net assets and changes therein are analyzed and reported as unrestricted net assets – net assets that are not subject to donor-imposed restrictions, temporarily restricted – net assets subject to donor-imposed restrictions, or law that may be met by actions of the Organization and/or the passage of time and permanently restricted – net assets subject to donor-imposed restrictions requiring that they be maintained permanently by the Organization. For the years ended September 30, 2014 and September 30, 2013, the Organization does not have any donor imposed permanently or temporarily restricted net assets.

FASB ASC 855, Subsequent Events, was issued in May 2009. FASB ASC 855 establishes general standards of accounting for and disclosures of events that occur after the balance sheet date but before financial statements are issued or are available to be issued. It requires the disclosure of the date through which an entity has evaluated subsequent events and the basis for that date, that is, whether that date represents the date the financial statements were issued or were available to be issued. The Organization adopted FASB ASC 855 as of September 2009.

Basis of Accounting

The accompanying financial statements have been prepared using the accrual basis of accounting. Revenue is recognized when earned and expense when the obligation is incurred.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America as per guidance of the newly implemented Accounting Standard Codification FASB ASC 958 "Not for Profit Entities" requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Cash and Cash Equivalents, and Credit Risk

For purposes of the Statement of Cash Flows, the Organization considers all unrestricted highly liquid investments with an initial maturity of three months or less to be cash equivalents. The Organization's cash investments are placed with high credit-quality financial institutions and may exceed the amount of federal deposit insurance.

Property and Equipment

Property and equipment are carried at cost. All equipment costing $1,000 or more has been capitalized. Depreciation of all capitalized assets is computed by the straight-line method over estimated useful lives.

Contributions Receivable

Contributions receivable primarily consists of special event receivables and short-term promises to give from donors. Management periodically reviews the status of all receivable balances for collectability, which is assessed based on management's knowledge of the donor, the Organization's relationship with the donor, and the age of the receivable balance. As a result of these reviews, receivable balances for which collection is deemed doubtful are charged to bad debt expense.

In-Kind Contributions

Recorded Amounts: in-kind contributions of goods, services, and facilities used for operations or special events are recognized as in-kind contributions in accordance with generally accepted accounting principles.

Donated goods used at special projects are included in supply expense reported for the service project and donated services are included in payroll, professional fees, service and travel expense. Donated services are recognized at fair value if the services (a) create or enhance non-financial assets or (b) require specialized skills, are performed by people with those skills and would otherwise have been purchased by the Organization

Unrecorded Amounts: the Organization relies on contributions of both time and expertise from its pool of volunteers. In particular volunteers work on the Organization's programs and fund raising activities. The volunteers donated hundreds of hours of service, the total value of which cannot be easily calculated or estimated, yet these volunteers contribute significantly to the work, impact, and success of Service For Peace, Inc. The financial statements do not reflect the value of those contributed services because no reliable basis exists for determining an appropriate amount and the services do not meet the criteria necessary for recognition.

Expense Allocation

The costs of providing various programs and other activities have been summarized on a functional basis in the Statement of Activities and the Statement of Functional Expenses. General and administration expenses include those expenses that are not directly identifiable with another specific function but provide for the overall support and direction of the Organization.

Subsequent Events

Management has evaluated subsequent events through February 5, 2015, which is the date the financial statements were available to be issued.

SERVICE FOR PEACE, INC.
NOTES TO FINANCIAL STATEMENTS
Years Ended September 30, 2014 and 2013

NOTE A - PROPERTY AND EQUIPMENT

Property and equipment consisted of the following, as of September 30,

	2014	2013
Audiovisual equipment	$ 2,287	$ 2,287
Office equipment	12,364	10,171
Total at original cost	14,651	12,458
Less: accumulated depreciation	(12,824)	(12,458)
Equals net book value	$ 1,827	$ 0

NOTE B – FEDERAL FUNDS GRANT

In September 2011 the Organization received a three year grant of $160,000 per year from the Corporation for National and Community Service (CNCS), for the period September 2011 through August 2014. The grant is for the Organization's Martin Luther King Jr. Season of Service Program. This was the third three-year grant the Organization has received from CNCS. The prior three year grant was for $97,500 per year, for the period September 2008 through August 2011.

These are federal funds under CFDA #94.007. The grants are authorized by the National and Community Service Act of 1990, as amended, in support of national service programs. The Organization serves as a lead agency providing grants and support to communities throughout the nation. The grant requires that at least 70% of total project expense come from other sources. In-kind donations are permitted, and in-kind donations received by sub-recipient organizations and not recorded on the Organization's books are counted towards the matching requirement.

The Organization received $160,000 from CNCS during its fiscal year ending September 2014, for its January 2014 Season of Service events. During this same period the Organization and its sub-recipient partners received matching contributions, mostly non-cash, totaling $445,838. The matching contributions received were thus 74% of total project expense. These contributions supported MLK service programs in fourteen states in 2014.

The Organization received $160,000 from CNCS during its fiscal year ending September 2013, for its January 2013 Season of Service events. During this same period the Organization and its sub-recipient partners received matching contributions, mostly non-cash, totaling $472,803. The matching contributions received were thus 75% of total project expense. These contributions supported MLK service programs in thirty communities and fifteen states in 2013.

NOTE C – DONATED MATERIALS, SERVICES AND USE OF FACILITIES

The Organization received donated materials with an approximate fair value of $15,928 and $77,295 in the years ending September 30, 2014 and 2013, respectively. The Organization received services with an approximate fair value of $111,826 and $97,350 in the years ending September 30, 2014 and 2013, respectively. These amounts are included in contributions and expenses in the statements of activities.

NOTE D – CONCENTRATION

The Organization received 15% of its income from a non-profit organization and 28% from another organization in the year ending September 30, 2014.

The Organization received 13% and 10% of its income from two non-profit organizations and 24% from another organization in the year ending September 30, 2013.

NOTE E - RELATED PARTY TRANSACTIONS

In the year ended September 30, 2014, the Organization received cash donations totaling $189,400 from two non-profit organizations that have officers and directors in common with the Organization. In the year ended September 30, 2014 the Organization also received cash donations of $270,000 from another corporation that has officers and directors in common with the Organization.

In the year ended September 30, 2013, the Organization received cash donations totaling $413,066 from two non-profit organizations that have officers and directors in common with the Organization. In the year ended September 30, 2013 the Organization also received cash donations of $312,000 from another corporation that has officers and directors in common with the Organization.

Louisville Metro Government
Office of Management and Budget

Neighborhood Development Fund Training Attestation

Organization Name: Service For Peace

Participant Name: Peter Hayes

I agree that I am an authorized signatory of the organization named above and attest to having participated in reviewing the PowerPoint and the NDF financial reporting examples. In addition, I understand the requirements of the Neighborhood Development Fund grant process and the financial reporting documentation guidelines.

Peter Hayes 08/10/2016

Participant Signature Date

SERVICE FOR PEACE, INC.

General Information

Organization Number	0649813
Name	SERVICE FOR PEACE, INC.
Profit or Non-Profit	N - Non-profit
Company Type	FCO - Foreign Corporation
Status	A - Active
Standing	G - Good
State	DE
File Date	10/27/2006
Authority Date	10/27/2006
Last Annual Report	2/13/2017
Principal Office	360 FAIRFIELD AVE. SUITE 206 BRIDGEPORT, CT 06604
Registered Agent	C T CORPORATION SYSTEM 306 W. MAIN ST., STE 512 FRANKFORT, KY 40601

Current Officers

President	CHARLES T PHILLIPS
Secretary	Lillian Kato
Treasurer	KEN BATES
Director	MICHAEL LENAGHAN
Director	Ken Bates
Director	Lilian Kato
Director	Jun Sook Moon
Director	Catherine Houlihan
Director	Juan Casimiro

Individuals / Entities listed at time of formation

Images available online

Documents filed with the Office of the Secretary of State on September 15, 2004 or thereafter are available as scanned images or PDF documents. Documents filed prior to September 15, 2004 will become available as the images are created.

Annual Report	2/13/2017	1 page	PDF
Annual Report	7/5/2016	1 page	PDF
Principal Office Address Change	3/25/2016 11:04:38 AM	1 page	PDF
Annual Report	7/14/2015	1 page	PDF
Annual Report	4/7/2014	1 page	PDF
Annual Report	8/9/2013	1 page	PDF
Registered Agent	4/19/2012 12:41:46		

name/address change	PM	1 page	PDF	
Annual Report	1/13/2012	1 page	PDF	
Annual Report	4/6/2011	1 page	tiff	PDF
Annual Report	6/10/2010	1 page	tiff	PDF
Principal Office Address Change	11/6/2009	1 page	tiff	PDF
Annual Report	11/2/2009	1 page	PDF	
Annual Report	6/25/2008	1 page	tiff	PDF
Annual Report	6/8/2007	1 page	tiff	PDF
Application for Certificate of Authority	10/27/2006	4 pages	tiff	PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	2/13/2017 2:55:09 PM	2/13/2017 2:55:09 PM	
Annual report	7/5/2016 9:22:05 AM	7/5/2016 9:22:05 AM	
Principal office change	3/25/2016 11:04:38 AM	3/25/2016 11:04:38 AM	
Annual report	7/14/2015 12:25:42 PM	7/14/2015 12:25:42 PM	
Annual report	4/7/2014 10:37:38 AM	4/7/2014 10:37:38 AM	
Annual report	8/9/2013 2:38:09 PM	8/9/2013 2:38:09 PM	
Registered agent address change	4/19/2012 12:41:46 PM	4/19/2012 12:41:46 PM	
Annual report	1/13/2012 10:11:09 AM	1/13/2012 10:11:09 AM	
Annual report	4/6/2011 2:22:57 PM	4/6/2011	
Annual report	6/10/2010 2:39:13 PM	6/10/2010	
Principal office change	11/6/2009 9:52:35 AM	11/6/2009	
Annual report	11/2/2009 4:11:46 PM	11/2/2009 4:11:46 PM	
Annual report	6/25/2008 12:45:54 PM	6/25/2008	
Annual report	6/8/2007 12:15:22 PM	6/8/2007	
Add	10/27/2006 2:03:36 PM	10/27/2006	

Microfilmed Images