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

Applicant/Program: Coalition for the Homeless, Inc. Stand Down and Give a Jam Applicant Requested Amount: \$19,000 Appropriation Request Amount: 12,500
Executive Summary of Request
This NDF goes to fund Project Stand Down, which creates a day where the homeless, especially veterans can come to a single site and recieve several services. Over 50 agencies will have booths that will serve approximately 600 people. They will be able to access state IDs, flu shots, and other medical services and other benefits that such as eye screenings and glasses and applications. The event is October 2, 2019.
Is this program/project a fundraiser? Is this applicant a faith based organization? Does this application include funding for sub-grantee(s)? Yes No 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.
District # Primary Sponsor Signature 35000 June 14, 2019 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:

Coalition for the Homeless, Inc. Stand Down and Give-A-Jam

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.

Council Member Signature and Amount

District 1	\$
District 2 Barban Shanklin	\$ 500 -
District 3	\$
District 4 Barbara Soften Smith	\$ 500 -
District 5	\$
District 6	\$
District 7 Mula MfCrasus	\$ 500
District 8	\$ 500
District 9 SUL Hollow	\$ 1000
District 1 CMM P3 Males	\$ 250.00
District 11	\$
District 12 Block	\$ 1000
District 13	\$ 500.00
District 14 Chill Toully	s 750-
District 15 Leven Taystrat	s # 500

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Applicant/Program:

Coalition for the Homeless, Inc. Stand Down and Give-A-Jam

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 Steel	\$ 250.00
District 17	
District 18	\$
District 19	\$
District 20 Stuart Benson	
District 21 Juste Harry	\$ 500.00
District 22	\$
District 23	\$
District 24	\$
District 25	s.250. ec
District 26	\$

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Legal Name of Applicant Organization Coalition for the Homeless, Inc.

Program Name and Request AmountStand Down and Give-A-Jam	
	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	Ye₅≖
Is the funding proposed by Council Member(s) less than or equal to the request amount?	Ye₅▼
Is the proposed public purpose of the program viable and well-documented?	Yes▼
Will all of the funding go to programs specific to Louisville/Jefferson County?	Yes▼
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	Yes▼
Has prior Metro Funds committed/granted been disclosed?	Yes▼
Is the application properly signed and dated by authorized signatory?	Yes▼
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	N/A
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?	Yes
Is the current Fiscal Year Budget included?	Yes▼
Is the entity's board member list (with term length/term limits) included?	Yeṭ▽
Is recommended funding less than 33% of total agency operating budget?	Yeş▼
Does the application budget reflect only the revenue and expenses of the project/program?	Ye₅▽
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	Ye₅⊐
Is the most recent annual audit (if required by organization) included?	Yeş⊽
Is a copy of Signed Lease (if rent costs are requested) included?	N/A 🕶
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	N/A
Are the Articles of Incorporation of the Agency included?	Yes
Is the IRS Form W-9 included?	Yes▼
Is the IRS Form 990 included?	Yes▼
Are the evaluation forms (if program participants are given evaluation forms) included?	N/A =
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	N/A=
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	上五
Prepared by: Andrea Derouen Date: May 23, 2019	

SECTION 1 – APPLICANT INFORMATION				
Legal Name of Applicant Organization: Coalition for the Homeless, Inc.				
(as listed on: http://www.sos.ky.gov/business/records				
Main Office Street & Mailing Address: 1300 S. Fourth Street Suite 250, Louisville, KY 40208				
Website: www.louho	meless.or	3		·
Applicant Contact:	Natalie 1	Harris	Title:	Executive Director
Phone:	502-636	-9550 ext. 212	Email:	nharris@louhomeless.org
Financial Contact:	Maria N	fullaney	Title:	Accountant
Phone:	502-636	-9550 ext. 216	Email:	mmullaney@louhomeless.org
Organization's Repres	sentative	who attended NDF Traini	ng: Natalie Harris	
GEO	GRAPHICA	L AREA(S) WHERE PROGR	AM ACTIVITIES ARE	(WILL BE) PROVIDED
Program Facility Loca	tion(s):	1300 S. Fourth Street, Su	ite 250 Louisville, K	Y 40208
Council District(s):		Serve all Jefferson Count	y Zip Code(s):	Serve all of Jefferson County
	SECTI	ON 2 – PROGRAM REQUE	ST & FINANCIAL INF	ORMATION
PROGRAM/PROJECT	NAME:En	ding Veteran, Youth and C	Chronic Homelessnes	ss
Total Request: (\$)	19,000	Total Metro Av	vard (this program)	in previous year: (\$) 17,500
Purpose of Request (check all t	hat apply):		
Operating F	unds (gen	erally cannot exceed 33%	of agency's total op-	erating budget)
Programmir	ng/service	s/events for direct benefit	to community or q	ualified individuals
Capital Proje	ect of the	organization (equipment,	furnishing, building,	etc)
The Following are Rec	quired Att	achments:		
■ IRS Exempt Status De	terminatio	n Letter	Signed lease if ren	t costs are being requested
■ Current year projecte	d budget		■ IRS Form W9	
■ Current financial state	ement		Evaluation forms i	f used in the proposed program
■ Most recent IRS Form	990 or 11	20-H	Annual audit (if re	quired by organization)
■ Articles of Incorporat	ion (curre	nt & signed)	Faith Based Organ	ization Certification Form, if applicable
Cost estimates from proposed vendor if request is for capital expense				
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 (Communit	y Development Block 🚰	Amount: (\$)	37,300
Source:			Amount: (\$)	
Source:			Amount: (\$)	
Has the applicant cont	tacted the	BBB Charity Review for p	articipation? 🔳 Ye	s 🔲 No
Has the applicant met	the BBB (Charity Review Standards?	Yes No	

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SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

The Coalition for the Homeless, Inc. is a 501(c)3 nonprofit organization with a mission to advocate for people who are homeless and for the prevention and elimination of homelessness. Our efforts are targeted in a three-pronged approach:

- 1) Educate the community about homelessness and inspire action,
- 2) Advocate for system changes, and
- 3) Coordinate the community response to homelessness through efficient use of resources and funding.

The Coalition for the Homeless is Louisville's leading advocate for the homeless. While our 30+ homeless service agency members are working to address the immediate needs of the homeless each day, we are advocating for systems change, educating the community to inspire action, and coordinating the system to increase resources and create better service solutions.

We serve people just like you. Every one of the 6,695 homeless persons served in Louisville last year was our neighbor and someone's child, parent, brother, or sister. Over 1,000 were under the age of 18, 700+ were veterans, and over half of the adults living in shelter were employed.

And what we do is working. Through collaborative efforts, the Coalition for the Homeless leverages over \$12 million in federal funding to Louisville. We have implemented best practices in our service system including the Single Point of Entry, Common Assessment, and Rx: Housing program, which has cut the chronic street homeless population and helped Louisville become one of a handful of cities that has reached "functional zero" in addressing veteran homelessness. By December 2020, we plan to reach the same "functional zero" for homeless youth and young adults.

This year, our priorities through Rx: Housing Veterans are to maintain "functional zero" for veteran homelessness in Louisville and end young adult homelessness by the end of 2020. Through community partnerships with over two dozen agencies, we housed over 800 homeless veterans in 2015 and continue to house approximately 250 newly homeless veterans each year. During a 100-day challenge in 2017, the team housed 115 homeless young adults from a list of 220. The number is now down to 76 and we hope to house that list plus newly homeless young adults for approximately 150 this year.

Finally, the team housed approximately 150 chronically homeless persons this past year (an increase of 50% from last year) and has been actively working with the Mayor's Task Force to create better services for this population. This effort is being informed by a study on best practices for street homelessness in Louisville conducted by University of Louisville and the learnings from the this year's creation of a low-barrier shelter.

"Functional Zero" is the federal term used to identify a community that has housed all of a homeless population (like homeless veterans) with a system in place to quickly house those who become homeless within this population in the future. "Homeless Youth" are unaccompanied homeless persons 24 years of age or younger.

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF		
Board Member	Term End Date	
Sheila Etchen, Chair	December 2020	
Vaughn Payne, Vice Chair	December 2020	
Caroline Heine, Treasurer	December 2020	
Andy Patterson, Secretary	December 2019	
Greg Mayes, Jr.	December 2021	
Mark McWane	December 2021	
Kathy Beach	December 2021	
Tamara Reif	December 2021	
Laurie Beth Baird	December 2021	
Carla Sturgeon	December 2021	
Tom Walton	December 2021	
Wood McGraw	December 2020	
Maria Schafer	December 2020	
Iason Warrier	December 2020	
Kim Cordell-Fife (Dec 2020) Robert Byers (Dec 2020) Andrea Aikin (Dec 2020)		
E. Wayne Schwertley (Dec 2020) Michael Shumway (Dec 2019) Robert Moore (Dec 2019)		

Describe the Board term limit policy:

Eric Friedlander (Dec 2019) Kyle Elmore (Dec 2022) Kristen Jordan (Dec 2022)

Directors shall be elected for staggered three (3) year terms unless they are being elected to complete an unexpired term. Directors shall be divided into three cohorts, each cohort consisting of no more than nine (9) members. Terms of office begin and end at the beginning of the calendar year, unless otherwise designated. The terms shall be arranged so that in each year the terms of approximately one-third of the Directors expire. A Director can serve two full terms of three years each and can serve again only after having come off the Board for at least one full year. Exceptions to this policy can be made by the Board to address the need for an Officer to remain on the Board through his/her term of office.

Three Highest Paid Staff Names	Annual Salary
Natalie Harris	91,000
Mary Frances Schafer	64,403
Brandi Scott	62,150

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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.):

Project Stand Down was first created by the Veteran's Administration to provide services to homeless veterans. A separate event was created by the city and The Coalition for the Homeless for non-veterans. The groups then agreed to combine the events to create more opportunities for all homeless persons. The purpose is to create a day where the homeless can come to a single site and get a myriad of services at once. Over 50 local service agencies will have booths at the Stand Down/Project Homeless Connect site of Salvation Army on Brook Street, October 2, 2019, 8-2:00 p.m. This opportunity brings services to the client versus them having to travel around town and wait in line to meet each need. The ultimate goal is to increase access to services and shorten lengths of homelessness in Louisville. We anticipate approximately 600 persons to be in attendance. They are able to access state IDs, flu shots and other medical services, eye screenings and glasses, counseling, applications for housing, food, clothing, hair cuts and sundry items, employment and educational opportunities, applications for food stamps, Medicaid and other benefits. Give-a-Jam is an event created to allow musicians, artists, chefs and business owners to donate their talents to show their commitment to ending homelessness in Louisville. The evening includes sets of music by the cream of the crop of the Louisville music scene in a one-of-a-kind jam. Another highlight of the evening is soup provided by Louisville chefs with all proceeds going to the Coalition for furniture and deposits for homeless persons moving from the streets to housing. Our goal is to house 250 homeless veterans, 150 homeless young adults and 150 chronically homeless persons with the assistance of this funding. The event is scheduled for December 19 from 6:00 - 11:00 p.m. at Headliners Music Hall, 1386 Lexington Rd. Louisville, KY. Over 400 are expected to be in attendance. 4

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

All funds provided by Louisville Metro Council for Ending Chronic, Young Adult and Veteran Homelessness are used solely for Stand Down and Give-a-Jam event costs for which 100% of the proceeds will be used for the Rx: Housing Program that provides deposits and furniture for the homeless moving to permanent housing. The Coalition and community partners first solicit in-kind services from local nonprofits, churches and businesses (including the Louisville Apt. Assoc.) and only use NDF funds to cover costs that cannot be accessed through donations. All costs will be incurred for events to address the short-term (Stand Down) and long-term (Give-a-Jam) needs of homeless veterans, young adults and the chronically homeless. Stand Down/Project Homeless Connect will take place on October 2, 2019 from 8 a.m.-2 p.m. at the Salvation Army Male High School campus on Brook Street with approximately 600 participants and Give-a-Jam will take place on December 19, 2019 from 6 - 11:00 p.m. at the Headliners Music Hall with over 400 participants.

For Stand Down, The Coalition will purchase backpacks, clothing and hygiene kits for distribution unless these are donated. We will also cover the cost of IDs, reader glasses, volunteer t-shirts, port-a-pots, breakfast, lunch, interpretive services, supplies for additional services like the foot washing, rental and/or utility costs to Salvation Army and staff time to plan, set up and clean up after the event. For Give-a-Jam, The Coalition will cover: space for the event and artists, t-shirts, printing costs, tables and chairs, stage set up and equipment, tickets, liquor license, pop, dinner supplies for preparing and keeping food warm, facility rental and staff time to plan, set up and clean up. All proceeds from this event go to furniture and deposits to assist vets, young adults and chronically homeless in accessing permanent housing.

The project planning for both events has begun and items must be purchased prior to the October 2nd event. If the

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C: If this request is a fundraiser, please detail how the proceeds will be spent:	
This request supports Give-a Jam, a fund-raiser at Headliners Music Hall on December 19, 2019. We anticipate	
\$55,000 in revenue, including a sponsorship through NDF. Here is an expense budget of that funding:	
T-shirts \$ 2,300 Liquor License \$ 150 Pots, bowls and spoons \$ 800 Sponsor Signs and Printing \$ 400 Pop and Alcohol \$ 500	
Facility Costs \$ 3,050 Staffing \$ 6,000	
Food/Items for Warming Food \$ 100 Total \$13,500	
All proceeds from this event (\$43,500) go toward staffing and deposits to assist veterans, young adults and the chronically homeless in getting access to permanent housing.	
D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval dat 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 to 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 the application. The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement. 	
May be necessary if grant agreement is not ready to expend funds for events.	
 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 (attainvoices 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. 	ch

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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:

We anticipate providing direct services to approximately 600 persons on October 2, 2019. All served will be homeless. Services include state IDs, flu shots, shelter reservations, eye exams, health screenings, housing applications, education and job training opportunities, haircuts, sign ups for Medicaid and other benefits, food and clothing. We believe this opportunity to serve so many people at one site will achieve: 1) lower waiting lists and back logs at social service agencies, 2) improved health of the local homeless population and a lowering of hospital visits, 3) shorter waiting times for homeless in need of services, and 4) shortened lengths of time homeless for those participating particularly for those who access IDs that help them obtain other benefits.

Each participant is asked to complete a survey which asks what services were most helpful and what services should be added in the future. We also conduct assessments of those who have not had one done in the shelter to identify those in greatest need and find the best housing option for each person.

The Coalition for the Homeless will house 150 chronically homeless, 150 homeless young adults and 250 homeless veterans by the end of the year from proceeds of Give-a-Jam and other activities and grants. We manage the HMIS database that tracks all homeless service agencies in the community and is used to track progress including ending veteran, young adult and chronic homelessness. For this grant, we will be tracking the following outcomes to determine program progress and success:

- 1) find housing for 150 homeless young adults, 150 chronically homeless and 250 homeless veterans identified, 2) create on-going system to insure all newly homeless vets, young adults and chronically homeless have immediate access to shelter, 3) create on-going system to insure all homeless vets, young adults and the chronically homeless that
- 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.

The Coalition for the Homeless regularly works in collaboration with other local nonprofits and businesses including our 30+ member service agencies and other advocacy agencies. The Rx: Housing group created to end veteran, chronic and now young adult homelessness in Louisville includes over two dozen active groups working toward this goal. Members include The Office of the Mayor, The Coalition for the Homeless, St. Vincent de Paul, Volunteers of America (VOA), Louisville Metro Housing Authority (LMHA), Veterans for Peace, Restoration Center, Louisville Metro Community Services, Robley Rex VA Hospital Homeless Programs (VA), Family Health Centers (FHC), St. John Center, The Kentucky Department of Veterans Affairs (KDVA), Legal Aid Society, the Brain Injury Alliance, VCAL, CenterStone, Coalition Supporting Young Adults, the CoC Youth Action Board, Metro United Way 2-1-1. YMCA Safe Place (RHYP), Home of the Innocents (HOTI), KentuckianaWorks (WIOA), REimage, YouthBuild, Louisville Youth Group (LGBTQ), True Up (Foster Care), Center for Women and Families (DV), Family Scholar House, Louisville Metro Community Services and Safe and Healthy Neighborhoods, Kentucky Shakespeare, AMPed, Metro Louisville Police Department, Louisville Apartment Association, Jefferson Community and Technical College, Louisville Free Public Library, Family and Children's Place, Uspiritus, Maryhurst, Emerging Workforce, Jefferson County Public Schools (JCPS), University of Louisville, Greater Louisville Inc., Wellspring, Good News Volunteers, Restorative Justice of Louisville, Kristy Love Foundation Jewish Family and Career Services, Salvation Army, St. Vincent de Paul, Louisville Urban League, Wednesday's Child, Legal Aid of Louisville, Transit Authority of River City (TARC), and Louisville Human Trafficking Task Force.

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Coalition for the Homeless - 2019 Neighborhood Development Fund Application

Page 4: Section 5.A. Project Stand Down was first created by the Veteran's Administration to provide services to homeless veterans. A separate event was created by the city and The Coalition for the Homeless for non-veterans. The groups then agreed to combine the events to create more opportunities for all homeless persons. The purpose is to create a day where the homeless can come to a single site and get a myriad of services at once. Over 50 local service agencies will have booths at the Stand Down/Project Homeless Connect site of Salvation Army on Brook Street, October 2, 2019, 8-2:00 p.m. This opportunity brings services to the client versus them having to travel around town and wait in line to meet each need. The ultimate goal is to increase access to services and shorten lengths of homelessness in Louisville. We anticipate approximately 600 persons to be in attendance. They are able to access state IDs, flu shots and other medical services, eye screenings and glasses, counseling, applications for housing, food, clothing, hair cuts and sundry items, employment and educational opportunities, applications for food stamps, Medicaid and other benefits. Give-a-Jam is an event created to allow musicians, artists, chefs and business owners to donate their talents to show their commitment to ending homelessness in Louisville. The evening includes sets of music by the cream of the crop of the Louisville music scene in a one-of-a-kind jam. Another highlight of the evening is soup provided by Louisville chefs with all proceeds going to the Coalition for furniture and deposits for homeless persons moving from the streets to housing. Our goal is to house 250 homeless veterans, 150 homeless young adults and 150 chronically homeless persons with the assistance of this funding. The event is scheduled for December 19 from 6:00 - 11:00 p.m. at Headliners Music Hall, 1386 Lexington Rd, Louisville, KY. Over 400 are expected to be in attendance.

Page 4: Section 5.B. All funds provided by Louisville Metro Council for Ending Chronic, Young Adult and Veteran Homelessness are used solely for Stand Down and Give-a-Jam event costs for which 100% of the proceeds will be used for the Rx: Housing Program that provides deposits and furniture for the homeless moving to permanent housing. The Coalition and community partners first solicit in-kind services from local nonprofits, churches and businesses (including the Louisville Apt. Assoc.) and only use NDF funds to cover costs that cannot be accessed through donations. All costs will be incurred for events to address the short-term (Stand Down) and long-term (Give-a-Jam) needs of homeless veterans, young adults and the chronically homeless. Stand Down/Project Homeless Connect will take place on October 2, 2019 from 8 a.m.-2 p.m. at the Salvation Army Male High School campus on Brook Street with approximately 600 participants and Give-a-Jam will take place on December 19, 2019 from 6 - 11:00 p.m. at the Headliners Music Hall with over 400 participants.

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event go to furniture and deposits to assist vets, young adults and chronically homeless in accessing permanent housing.

The project planning for both events has begun and items must be purchased prior to the October 2nd event. If the grant agreement is not issued early enough, we will need to purchase items prior to approval and grant agreement dates but not before application submission. In this case, we will purchase the items and request reimbursement after the funding is released.

<u>Page 6: Section 5.E.</u> We anticipate providing direct services to approximately 600 persons on October 2, 2019. All served will be homeless. Services include state IDs, flu shots, shelter reservations, eye exams, health screenings, housing applications, education and job training opportunities, haircuts, sign ups for Medicaid and other benefits, food and clothing. We believe this opportunity to serve so many people at one site will achieve: 1) lower waiting lists and back logs at social service agencies, 2) improved health of the local homeless population and a lowering of hospital visits,

3) shorter waiting times for homeless in need of services, and 4) shortened lengths of time homeless for those participating particularly for those who access IDs that help them obtain other benefits.

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1) find housing for 150 homeless young adults, 150 chronically homeless and 250 homeless veterans identified, 2) create on-going system to insure all newly homeless vets, young adults and chronically homeless have immediate access to shelter, 3) create on-going system to insure all homeless vets, young adults and the chronically homeless that enter shelter are housed within three months in future.

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.

	Column 1	Column 2	Column (1+2)=3
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits	6,000.00	8,000.00	14,000.00
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			-
F: Client Assistance (See Detailed List on Page 8)	9,000.00	\$22,350.00	\$31,350
G: Professional Service Contracts			-
H: Program Materials			,
I: Community Events & Festivals (See Detailed List on Page 8)	\$4,000.00	\$3,500.00	\$7,500.00
J: Machinery & Equipment			_
K: Capital Project			
L: Other Expenses (See Detailed List on Page 8)			
*TOTAL PROGRAM/PROJECT FUNDS	\$19,000.00	\$33,850.00	\$52,850.00
SC CT Programme England	35.9 %	64.1 %	100%

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

Other State, Federal or Local Government	\$7,350.00
United Way	
Private Contributions (do not include individual donor names)	\$59,000.00
Fees Collected from Program Participants	-
Other (please specify)	\$15,000.00
Total develope for Columbia a Expenses	\$81,350.00

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

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^{**}Must equal or exceed total in column 2.

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7	Column 1	Column 2	Column (1 + 2)=3
(circle one and use multiple sheets if necessary)	Proposed Metro Funds	Non- Metro Funds	Total Funds
See attachments (page 11 and 12)			
See highlighted Hems			
		-	
Total			

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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
Volunteers	\$26,200	655 x 4 hours x \$10
Lion's Eye and Louisville Apt. Assoc items	\$42,000	value from last year
Give-a-Jam event donations of music and food	\$30,000	value from last year
Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)	\$98,200	<u>, </u>

* 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: July 1,	2019			
Does your Agency anticipate a significate budget projected for next fiscal year?	int increase o	or decrease in your bud YES [lget from the current	fiscal year to the
If YES, please explain:				

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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

- 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.
- 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.
- 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.
- Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end.
- 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.
- 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.
- 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.
- 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.
- 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.

Eric Friedlander of Resilience and Community Resources for Metro Louisville serves on our board of directors.

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: 04/09/2019 Matalle Harris Legal Signatory: (please print): Title: Executive Director Phone: Extension: 502-636-9550 212 Email: nharris@louhomeless.org

Page 10 Effective May 2016

Stand Down/Project Homeless Connect – October 2019

Income

Sponsorships (including NDF)	\$15,000
Private Donations	\$17,000
US Veterans Affairs	\$ 7,350
Jalso \$42,000 in-kind services and	\$22 000 valuntaars

Expenses

	NDF	Other
Staff Time (Personnel)	\$3,000	\$5,000
Backpacks (Client Asst.)	\$1,300	\$7,000
Sweatshirts/Ponchos (Client Asst.)	\$ 300	\$8,000
Socks and Underwear (Client Asst.)	\$ 100	\$2,000
Reader Glasses (Client Asst.)	\$ 100	\$ 100
Footwashing Items (Client Asst.)	\$ 50	\$ 100
TARC Tickets (Client Asst.)	\$ 150	\$ 50
Interpreter (Client Asst.)	\$ 0	\$ 100
Towels (Client Asst.)	\$ 500	\$2,000
Donuts (Client Asst.)	\$ 750	\$ O
Space Rental (Client Asst.)	\$ 1,000	\$1,500
Lunch (Client Asst.)	\$ 2,800	\$1,000
IDs (Client Asst.)	\$ 400	\$ 200
Port-a-Pots (Client Asst.)	\$ 350	\$ O
T-Shirts (Client Asst.)	\$1,200	\$ 300
Total	\$12,000	\$27,350

Give a Jam - December 2019

Income

Sponsorships (including NDF) \$20,000
Private Donations \$22,000
Event Proceeds \$15,000

(also \$3,200 in-kind volunteers, \$30,000 in donated music and food)

Expenses

	NDF	Other
Staff Time (Personnel)	\$3,000	\$3,000
T-shirts (Event Exp.)	\$1,000	\$1,300
Liquor License (Event Exp.)	\$ 0	\$ 150
Event and Auction Tickets (Event Exp.)	\$ 0	\$ 0
Pots, Bowls, Spoons (Event Exp.)	\$ 500	\$ 300
Facility Costs Including Tent(Event Exp.) <mark>\$2,050</mark>	\$1,000
Food and Warming Soup (Event Exp.)	\$ 50	\$ 50
Signs and Printing (Event Exp.)	\$ 200	\$ 200
Tables and Table Cloths (Event Exp.)	\$ 200	\$ 0
Pop and Alcohol (Event Exp.)	\$ 0	\$ 50 0
Total	\$ 7,000	\$6,500

(\$43,500 profit goes to pay for Rx: Housing program deposits and furniture for the homeless.)

INTERNAL REVENUE SERVICE DISTRICT DIRECTOR P. D. BOX 2508 CINCINNATI, OH 45201

Date: JAN 1 5 1991

THE COALITION FOR THE HOMELESS INC PO BOX 4462 LOUISVILLE, KY 40204-0462 Employer Identification Number: 61-1118307 Contact Person: DOTTIE DOWNING Contact Telephone Number: (513) 684-3578

Our Letter Dated: July 2, 1987 Addendem Applies:

Bear Applicant:

This modifies our letter of the above date in which we stated that you would be treated as an organization which is not a private foundation until the expiration of your advance ruling period.

Your exempt status under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3) is still in effect. Based on the information you submitted, we have determined that you are not a private foundation within the meaning of section 509(a) of the code because you are an organization of the type described in section 509(a)(2).

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(2) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(2) organization.

If we have indicated in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

Because this letter could help resolve any questions about your private foundation status, please keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown above.

Harold M. Browning District Director

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Letter 1050(DD/CG)

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Prepared by Natalie 4/15/2019

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The Coalition for the Homeless

PROFIT AND LOSS

July 2018 - March 2019

	TOTAL
ncome	
43300 Direct Public Grant Categories	
43310 Sponsorships	16,800.00
43330 Foundation and Trust Grants	69,175.60
Total 43300 Direct Public Grant Categories	85,975.60
43400 Direct Public Support Categories	
43450 Individ, Business Contributions	217,450.87
43490 Religious Organizations	3,600.00
Total 43400 Direct Public Support Categories	221,050.87
44500 Government Grant Categories	
44520 HUD Grants to Coalition Categories	
44521 HUD Grant - Coc/HPPP	223,481.67
44522 HUD Grants - Administration	98,413.57
44523 HUD Grants - HMIS	173,300.11
44525 HUD Grants - Leasing Salaries	42,632.24
44527 HUD grants-services	1,767.68
Total 44520 HUD Grants to Coalition Categories	539,595.27
44520P Program Income To Coalition	
44527P PI Services	269.43
Total 44520P Program Income To Coalition	269.43
44530 HUD Pass Thru Grant Categories	
44531 HUD Grants - Leasing Thru CFH and Our inspections	927,515.36
44532 HUD Grants - Leasing Thru Grantees	480,820.98
44533 HUD Grants - Operations for Grantees	74,777.47
44534 HUD Grants - Services	364,906.42
44535 HUD Grants - HMIS	1,018.37
44536 HUD Grants - Administration	76,368.67
44537 HUD Grants - CFH Operations for client utilities	12,821.90
Total 44530 HUD Pass Thru Grant Categories	1,938,229.17
44530P Program Income Pass Thru	
44531P PI Leasing Thru CFH	4,419.44
44533P Operations to Grantees Program Income	1,178.00
44534P PI Services	52,173.06
44536P PI Administration	1,746.48
44537P Operations - CFH Operations for client utilities	635.76
Total 44530P Program Income Pass Thru	60,152.74
44540 Louisville Grant Categories	
44541 CoC	118,912.80
44542 Education	25,000.00
44544 Stand Down	17,500.00
Total 44540 Louisville Grant Categories	161,412.80
44550 State Grant Categories	
44551 Adanta CoC/HPPP	5,789.25

A PERO MILO A I	TOTAL
44552 KHC Advocacy	8,000.00
Total 44550 State Grant Categories	13,789.25
Total 44500 Government Grant Categories	2,713,448.66
44800 Indirect Public Support Categories	
44820 United Way - CoC/HPPP	12,279.05
Total 44800 Indirect Public Support Categories	12,279.05
45000 Investment Ctegories	
45010 Interest-Savings, Short-term CD	378.64
45030 Change in Market Value	6,941.17
Total 45000 Investment Ctegories	7,319.81
46400 Other Income Categories	
46410 Bingo Income	308,482.00
46420 TARC Sales	319,571.35
Total 46400 Other Income Categories	628,053.35
47200 Membership Income Categories	
47230 Membership Dues	37,900.00
47240 HMIS Fees	41,730.00
Total 47200 Membership Income Categories	79,630.00
49000 Special Event Income Categories	
49005 Special/Pass-thru Projects	28,020.00
49010 Give a Jam	25,440.69
49020 Other Fundraisers	88,342.96
Total 49000 Special Event Income Categories	141,803.65
69500 Transfers In	70,000.00
Total Income	\$3,959,560.99
GROSS PROFIT	\$3,959,560.99
Expenses	
60900 Business Expense Categories	
60910 Annual Meetings and Events	1,981.98
60920 Board Meeting/Planning Expenses	802.42
60930 Bank Fees	1,525.80
60935 Bingo Fines and Penalties	676.81
60960 Event Expense Categories	
60961 Fundraising - Fundraiser	39,067.36
60962 Fundraising - Rx Housing	7,272.53
Total 60960 Event Expense Categories	46,339.89
60970 Licenses and Permits	65.00
60975 Bingo Licences and Permits	380.00
Total 60900 Business Expense Categories	51,771.90
60990 Investment Loss Categories	
60992 Other Investment Transactions	2,975.68
Total 60990 Investment Loss Categories	2,975.68
62100 Contract Categories	
62110 Accounting Fees	3,480.00
62120 Audit	14,500.00
62150 Web Hosting	1,114.05
62170 Web Management	468.00
62180 Other Contract Services	27,782.92

	TOTAL
62190 Payroll Services	1,988.26
62825 Bingo Security	2,850.00
Total 62100 Contract Categories	52,183.23
62800 Facilities Categories	
62850 Janitorial Services	1,125.00
62890 Rent, Parking, Utilities	66,166.56
62895 Bingo Rent	60,800.00
62899 HMIS/SPE Equipment and Services	55,421.43
Total 62800 Facilities Categories	183,512.99
65000 Operations Categories	·
65010 Books, Subscriptions, Reference	115.95
65020 Postage, Mailing Service	2,076.91
65032 Copier	2,571.14
65035 Printing	1,499.80
65038 Street Tips Printing	8,643.55
65040 Supplies	16,734.00
65045 Bingo Supplies	70,595.92
65050 Communication Categories	70,000.02
65051 Telephone	7,054.17
65052 Language Line Expenses - HMIS	256.75
Total 65050 Communication Categories	7,310.92
65060 Memberships and Dues	1,580.00
Total 65000 Operations Categories	111,128.19
	111,126.19
65100 Other Types of Expenses	
65120 Insurance - Liability, D and O	2,191.38
65160 Other Misc Costs	359.42
65185 Bingo Taxes	16,919.26
Total 65100 Other Types of Expenses	19,470.06
66000 Payroll Expenses	
66010 Health Insurance	60,023.18
66020 Salaries	508,125.67
66025 Salaries - Other	27,611.85
66029-1 Bingo Salaries	13,000.00
66030 Retirement Funds	22,143.51
66040 Life/Disability Insurance	4,709.22
66050 Worker's Comp Insurance	1,403.00
66065 Employer Payroll Taxes	44,164.66
66069B Bingo Payroll Tax	1,496.80
66080 Metro United Way Payments	228.28
Total 66000 Payroll Expenses	682,906.17
67000 Program Expense Categories	
67010 White Flag and Shelter Assistan	9,289.10
67020 TARC Tickets	315,522.00
67030 Stand Down Expenses	6,832.96
67050 Rx Housing Deposits	19,580.38
67055 Prevention & Diversion	500.00
67070 Special / One-time Project	89,816.05
67080 HUD Pass Thru Categories	
67081 HUD Pass Thru Funds - Administration	76,368.67

	TOTAL
67082 HUD Pass Thru Funds - Leasing to Landlords and Inspections	927,515.36
67083 HUD Pass Thru Funds - Operations	74,777.47
67084 HUD PASS Thru Funds - Services	364,906.42
67085 HUD Pass Thru Funds - HMIS Expenses	1,018.37
67086 Pass Thru Funds - Leasing to Subrecipients	480,820.98
67087 HUD Pass Thru Funds - Operations to CFH	12,821.90
Total 67080 HUD Pass Thru Categories	1,938,229.17
67080P Program Income Expense	
67081P Administration	1,746.48
67082P Leasing Thru Landlords	4,419.44
67084P Services	52,173.06
67085P Operations PI	1,178.00
67087P Operations to CFH PI	635.76
Total 67080P Program Income Expense	60,152.74
Total 67000 Program Expense Categories	2,439,922.40
68300 Staff Support Categories	
68310 Conference, Convention, Meeting	13,762.88
68320 Travel and Food	13,672.35
68330 Staff Development	17,467.24
Total 68300 Staff Support Categories	44,902.47
69000 Transfers Out	70,000.00
Total Expenses	\$3,658,773.09
NET OPERATING INCOME	\$300,787.90
NET INCOME	\$300,787.90

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2017 Open to Public Inspection

Ā	For th	ne 2017 d	calendar year, or tax year beginning $0.7/0.1/17$, and endin	g 06/3	0/18	_	
В	Check if a	applicable:	C Name of organization			D Employe	er identification number
П	Address o	change	Coalition for the Homeles	s, Inc	•		
\exists	Name cha	onge	Doing business as			61-1	118307
		•	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite	E Telephor	
_	Initial retu		1300 S. 4th Street City or town, state or province, country, and ZIP or foreign postal code			502-	636-9550
	Final retu terminate					l	E 446 60E
	Amended	i return	Louisville KY 40203			G Gross red	ceipts\$ 7,116,697
_			F Name and address of principal officer:		H(a) Is this ag	roup return for	subordinates Yes X No
	Application	on pending	Natalie Harris		"	·	H., H.,
					H(b) Are all su		iladod:
					II "NO	," attach a list.	. (see instructions)
1_	Tax-exer	mpt status;		527			
J	Website	: • W	ww.louhomeless.org		H(c) Group ex	emption numb	
-		organization	x Corporation Trust Association Other		L Year of formation:		M State of legal domicile:
P	art l		ımmary				
	1 6	Briefly de	escribe the organization's mission or most significant activities:				
Se	١.	See	Schedule O				
Ъ	١.						
Governance	Ι.						
ó	2 (Check th	is box if the organization discontinued its operations or dispos	ed of more	than 25% of its ne	t assets.	
			of voting members of the governing body (Part VI, line 1a)				23
es	4 1	Number	of independent voting members of the governing body (Part VI, line	1b)	;	4	23
7			mber of individuals employed in calendar year 2017 (Part V, line 2a)				17
Activities &			mber of volunteers (estimate if necessary)			اما	750
			related business revenue from Part VIII, column (C), line 12	* ,		7a	0
			lated business taxable income from Form 990-T, line 34				0
					Prior Ye	аг	Current Year
<u>o</u>	8 (Contribut	tions and grants (Part VIII, line 1h)			0,453	4,146,558
Revenue			service revenue (Part VIII, line 2g)		. 39	1,684	401,353
ě	10	Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)		3	0,393	25,072
ĸ			venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		23	9,131	194,604
			enue – add lines 8 through 11 (must equal Part VIII, column (A), line			1,661	4,767,587
	13 (Grants a	nd similar amounts paid (Part IX, column (A), lines 1–3)		2,44	6,857	2,750,935
			paid to or for members (Part IX, column (A), line 4)				0
(i)			other compensation, employee benefits (Part IX, column (A), lines			8,097	836,224
nse							0
Expenses	b 1	Total fun	onal fundraising fees (Part IX, column (A), line 11e) draising expenses (Part IX, column (D), line 25) ▶ 156	566	The state of the s	ريون واريسيسر کست ا <u>و</u> سيسر دريسيس	
ш	17 (Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		79	8,668	1,054,482
	18 7	Total exp	penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		3,94	3,622	4,641,641
		•	less expenses. Subtract line 18 from line 12	<i></i>		8,039	125,946
Net Assets or Fund Balances			* 1411111111111111111111111111111111111		Beginning of Cu	rrent Year	End of Year
sets	20	Total ass	sets (Part X, line 16)			1,799	<u>1,182,577</u>
AB	21	Total liab	pilities (Part X, line 26)		5	6,756	<u>295,119</u>
캺	22 1	Net asse	ts or fund balances. Subtract line 21 from line 20		76	5,043	887,458
P	art II	a Si	gnature Block				
U	nder pe	nalties of	perjury, I declare that I have examined this return, including accompanying	schedules a	nd statements, and to	the best of	my knowledge and belief, it is
trı	ие, соп	ect, and c	complete. Declaration of preparer (other than officer) is based on all information	tion of which	preparer has any kno	wledge.	
Sig	gn	S	ignature of officer			Date	
He			Natalie Harris	Exe	cutive Di	recto	r
		 7	ype or print name and title				
		Print/Typ	e preparer's name Preparer's signature		Date	Check	if PTIN
Pai	d	Barbar	ra Lasky Barbara Lasky		02/08	1/19 self-em	nployed P00015280
Pre	parer	Firm's na				Firm's EIN	20-1416603
Use	Only	3,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	943 S 1st Street				
		Firm's ad	. T			Phone no.	502-584-9793
May	y the IF		ss this return with the preparer shown above? (see instructions)				Yes No
			N N N N N N N N N N N N N N N N N N N				000

rm 990 (2017) Coalition for			61-1118307	Page 2
	n Service Accomplishme			
	<u>ontains a response or not</u>	e to any l	ine in this Part III	X
Briefly describe the organization's mis	sion:			
See Schedule O				
Did the organization undertake any sig	mificant program services durin	g the year v	which were not listed on the	
prior Form 990 or 990-EZ?				Yes X No
If "Yes," describe these new services	on Schedule O.			
Did the organization cease conducting	, or make significant changes ir	how it con-	ducts, any program	
services?				Yes X No
If "Yes," describe these changes on Se	chedule O.			
Describe the organization's program s		h of its thre	e largest program services, as i	measured by
expenses. Section 501(c)(3) and 501(-	•
the total expenses, and revenue, if any			•	
a (Code:) (Expenses \$	3,886,427 including gr	ants of\$	2,700,266) (Reve	enue \$
Advocacy, Education,	and Coordinati	on:		, , , , , , , , , , , , , , , , , , , ,
Homeless Grant Admin	istration - The	prima	rv objective of	the Coalition is
the evaluation of ho	melessness in t	he com	munity, the edu	cation of citizen
about homelessness,	and the coordin	ation	of its member a	gencies and dozen
of other community p	artners The c	oaliti	on coordinated	Louisville's
Continuum of Care ap	plication resu	lting	in over \$9 5 mi	llion for homeles
services. It formed	and led the Wo	moles	Vouth Committee	e, made up of mor
than 70 different pa				
ending youth and you				
Day Challenge on You	tn Homeressness	, thro	ugn wnich partn	er agencies nouse
115 unaccompanied yo	utn and young a	dults	under the age o	1 25, reducing
b (Code:)(Expenses \$ TARC ticket sales - (Transit Authority of half price for agence tickets and passes a Coalition for the Ho The Coalition purchal month.	f River City) to y members of The re then sold at meless. They a	o purce e Coal half re pro ly 6,0	chase TARC ticke ition for the H price to agency wided for Homel 000 tickets and	ts and passes at omeless. TARC members of The ess persons only.
<u> </u>			• • • • • • • • • • • • • • • • • • • •	•••••
	***************************************	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	•••••••••••••••••••••••••••••••••••••••
	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •
	••••	• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •
	be turned away of three shelters beyond their program pays for	provi during rs par normal	severe weather ticipate in the capacity to Th	helter for person (above 95 degree program and subm e Coalition for
year at a rate of \$5				
			•••••	
			•••••	
***************************************			•••••	
•			•••••	
• • • • • • • • • • • • • • • • • • • •				• • • • • • • • • • • • • • • • • • • •
d Other program services (Describe in S	chedule O.)			
(Expenses \$	including grants of\$) (Revenue \$)
e Total program service expenses	4,329,943			
				Form 990 (2017)

Form 990 (2017) Coalition for the Homeless, Inc. 61-1118307

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? X Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II X 4 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, X 5 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 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete Schedule D, Part III X 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 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 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. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a 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 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 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 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e 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 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 12a 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV X 14b 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 X 15 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 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) X 17 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 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

Checklist of Required Schedules (continued) Yes No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20h Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X 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 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 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I X 25a 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 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 "Yes," complete Schedule L, Part II X 26 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 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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV X 28c 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 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 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 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 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.

Form 990 (2017) Coalition for the Homeless, Inc. 61-1118307

∂ Pą	Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this P	an v			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	l 1a	61	, j''',	165	No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	21			
C	Did the organization comply with backup withholding rules for reportable payments to vendors a					777.5
•	reportable gaming (gambling) winnings to prize winners?	•		1c	X	1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1	<u> </u>		PEZZ.	-= 1
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	17		F	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax	returns	s?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instru		***************************************		-	
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 Sche	dule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or or	other au	ithority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other	er finar	ncial			
	account)?			4a		X
b	If "Yes," enter the name of the foreign country: ▶			22		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Finar	icial Ac	counts	e de :	in the	(3.23)
	(FBAR).			. 1		T-2
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax ye			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tr	ansacti	on?	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 control	ributions	s or			i
	gifts were not tax deductible?			6b	erer izera.	gr s inn
7	Organizations that may receive deductible contributions under section 170(c).	_		J.,	7.	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	y for go	ods		4	in in
	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	i it was		7c		x
al	required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year	7d	[S. 15.35.	
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal ber		'	7e	r.	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit			7f	-	X
g	If the organization received a contribution of qualified intellectual property, did the organization f			7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the org			7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund main			e i	7	100
Ū	sponsoring organization have excess business holdings at any time during the year?	.,		8	#See of Cont	, ,
9	Sponsoring organizations maintaining donor advised funds.					, 7
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		Ca
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person	?		9b		
10	Section 501(c)(7) organizations. Enter:		-			,
8	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		71 5		
11	Section 501(c)(12) organizations. Enter:				733"	
а	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		2.71 	1 2-0	F-10 (201)
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		- 12,22		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					, vin. *,
а	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 C).				
b	Enter the amount of reserves the organization is required to maintain by the states in which	1,	1	neg :		2-1
	the organization is licensed to issue qualified health plans	13b			and a	in, in a
C	Enter the amount of reserves on hand	13c		7.1		77
	Did the organization receive any payments for indoor tanning services during the tax year?			14a	\vdash	X
ù	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sci	redule (•	14b	1 '	i

The Company

Louisville

financial statements available to the public during the tax year.

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

1300 S 4th St

Form 990 (201	17) Coalition for the Homeless, Inc. 61-1118307	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated E	mployees, 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	
4 - 0 1 - 1 - 1		

- 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.

(A) Name and Title	(B) Average hours per week (list any	box	k, unle	Pos heck ss pe	rson lirecto	than o is both or/truste	an 99)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1) Shella Etchen											
Chair	1.00 0.00	x		x				o	o	0	
(2) Christina Frile	The state of the s					П					
Vice Chair	1.00	$ \mathbf{x} $		x				o	0	0	
(3) Caroline Heine	0.00	<u> </u>		_		\vdash				0	
(0)	1.00										
Treasurer	0.00	X		X				o	0	0	
(4) Jared Dearing											
	1.00										
Secretary (5) Wood McGraw	0.00	X		X			\dashv	0	0	0	
(5) WOOD MCGIAW	1.00										
Board Member	0.00	x						0	o	0	
(6) Greg Mayes, Jr.						\Box					
	1.00										
Board Member	0.00	X	-				_	0	0	0	
(7) E. Wayne Schwer	1.00										
Board Member	0.00	$ \mathbf{x} $						o	o	0	
(8) Troy Ransdell	0.00	1				\neg	_				
	1.00										
Board Member	0.00	X						0	0	0	
(9) Mark McWane	1 00						Ì				
Board Member	1.00	x						o		0	
(10) Kitty McKune	0.00	┢╇	\dashv	\dashv	\dashv		\dashv	0	0	0	
(,	1.00										
Board Member	0.00	x	i					0	0	0	
(11)Michael Shumway						T					
Based Manha	1.00									_	
Board Member	0.00	X			\Box			0	0	Form 990 (2017)	

	17) Coalition										Page 8
Part VII	Section A. Officer (A) ame and title	(B) Average hours per week (list any	(C) Position (do not check more than o box, unless person is both officer and a director/truste					one i an	an from	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(12) Ro	bert Moore	1.00	x						0	o	0
	dy Patters		A						0		0
Board Me		1.00 0.00	x						0	0	0
(14) Ta	mara Reif	1.00									
Board Me	mber ic Friedla	0.00	X				Ш		0	0	0
(15) Er		1.00 0.00	x						0	0	0
	gardo Mans	illa									
Board Me	mber rla Schaef	0.00	x						0	0	0
(17) Ma		1.00 0.00	x						0	0	0
(18) Ja	son Warrie	r 1.00									
Board Me		0.00	x						0	0	0
	m Cordell-	1.00									
Board Me	mber al	0.00	X		L				0	0	0
	om continuation she	ets to Part VII	, Sec	ction	1 A .			•	87,081		
d Total (a	dd lines 1b and 1c)		<u></u>					▶	87,081	h 0400 000 -f	
	mber of individuals (i ble compensation fron				to th	ose	liste	ab c	ove) who received more t	nan \$100,000 or	
employe For any organiza individua Did any	ee on line 1a? If "Yes, individual listed on lin ation and related orga alperson listed on line	" complete Sch ne 1a, is the sur inizations great	edul n of er th 	e <i>J f</i> repo an \$	for so ortab 150 mpe	uch le co 000 	indivionpe ? If '	idua ensa 'Yes 	tion and other compensal c," complete Schedule J for any unrelated organizatio	tion from the or such on or individual	Yes No 3 X 4 X
	ces rendered to the d dependent Contract		103	s, CC	rripi	616	SUNE	auie	e J for such person		5 X
1 Comple	te this table for your f	ive highest com	pens	sate	d ind	lepe	nder	it co	intractors that received me	ore than \$100,000 of	ax vear
301110011		(A) business address	5011							(B) tion of services	(C) Compensation
					_						

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

Form **990** (2017)

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated business (D) Revenue (A) exempt function excluded from tax under sections 512-514 1a Federated campaigns 1a 51,629 b Membership dues 1b 25,165 c Fundraising events 1c d Related organizations 1d 4,069,764 Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 49,309 g Noncash contributions included in lines 1a-1f: h Total. Add lines 1a-1f Service Revenue te All and Comen Busn. Code 401,353 401,353 2a Tarc Tickets Program 5 f All other program service revenue g Total. Add lines 2a-2f ... Investment income (including dividends, interest, 25,072 and other similar amounts) 25,072 Income from investment of tax-exempt bond proceed 5 Royalties ... (i) Real (ii) Personal 6a Gross rents b Less: rental exps. C Rental inc. or (loss) d Net rental income or (loss)
7a Gross amount from Gross amount from (i) Securities (ii) Other sales of assets other than invento Less: cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Revenue (not including \$ 25,165 of contributions reported on line 1c). See Part IV, line 18 47,255 b Less: direct expenses 50,392 c Net income or (loss) from fundraising events 9a Gross income from gaming activities. 2,496,459 See Part IV, line 19 b Less: direct expenses 2,298,718 b 197,741 c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 100 b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code d All other revenue e Total. Add lines 11a-11d

4,767,587

401,353

Statement of Functional Expenses Part IX 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 (A) Total expenses (B) Program service (D) Do not include amounts reported on lines 6b, Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 1,689,257 1,689,257 Grants and other assistance to domestic individuals. See Part IV, line 22 1,061,678 1,061,678 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 22,417 trustees, and key employees 83,024 48,153 12,454 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 22.282 102,633 Other salaries and wages 611,699 486.784 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 141,501 102,127 15,502 23,872 Payroll taxes Fees for services (non-employees): Management b Legal 19,190 19,190 c Accounting Lobbying Martin Day of the san Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column 102,178 72,820 29,358 (A) amount, list line 11g expenses on Schedule O.) Advertising and promotion 12 13 Office expenses Information technology 14 Royalties 15 35,258 90,405 55,147 Occupancy 16 1,401 28,020 26,619 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 858 4,505 5,363 Conferences, conventions, and meetings 19 20 Payments to affiliates 21 2,364 1,418 709 237 22 Depreciation, depletion, and amortization Insurance 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.) Tarc Tickets 392,847 392,847 Other Program Expense 346,473 346,473 Printing _____ 3,039 16,884 13,001 844 Stand Down Program Expens 14,075 14,075 e All other expenses 36,683 18,686 13,629 4,368 4,641,641 4.329,943 155,132 156,566 25 Total functional expenses. Add lines 1 through 24e . 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)

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 471,723 319,379 1 Cash—non-interest bearing Savings and temporary cash investments 2 2 70,540 466,583 Pledges and grants receivable, net 3 3 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 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 a sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net Inventories for sale or use 2,630 3,516 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 18,276 b Less: accumulated depreciation 10b 6,573 10c 4,208 Investments—publicly traded securities Investments—other securities. See Part IV, line 11 266,817 388,040 12 12 Investments—program-related, See Part IV, line 11 13 13 Intangible assets 14 14 Other assets. See Part IV, line 11 15 15 821,799 1,182,57 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 Accounts payable and accrued expenses 56,756 17 295,11 17 18 Grants payable 18 Deferred revenue 19 19 Tax-exempt bond liabilities _____ 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and 22 disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 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 56,756 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here X and Balances complete lines 27 through 29, and lines 33 and 34. 697,121 774,004 Unrestricted net assets 27 Temporarily restricted net assets 67,922 28 28 Fund Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here 🕨 📗 and ់ complete lines 30 through 34. Net Assets Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 765,043 887,458 33 Total net assets or fund balances 821,799 1,182,577 Total liabilities and net assets/fund balances

Form 990 (2017)

Forn	n 990 (2017) Coalition for the Homeless, Inc. 61-1118307			Page 12
Pa	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		7,587
2	Total expenses (must equal Part IX, column (A), line 25)	2		L,641
3	Revenue less expenses. Subtract line 2 from line 1	3	125	5,946
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	765	5,043
5	Net unrealized gains (losses) on investments	5		3,531
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		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10	887	7,458
P	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			,.
			Y	es No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			V
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		37.12	
	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		227	A Day
	reviewed on a separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			Time and the second
b	Were the organization's financial statements audited by an independent accountant?		2b 3	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			7.
	separate basis, consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			7 Y
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 2	X
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.		Y	71 8 3 49 49 1
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 2	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.			<u>X</u>
			Form \$	990 (2017)

Form 990 (2017) Coalitio	n for th	ıe	Но	me	<u>le</u>	SS	,	Inc. 61-111	8307	Page (
Part VI Section A. Officer (A) Name and title	(B) Average hours per week (list any	(C) Position (do not check more than or box, unless person is both officer and a director/truste				than o	one 1 an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(20) Robert Byers	1.00									
Board Member	0.00	x						0	0	
(21) Andrea Aikin	1.00								_	
Board Member (22) Dr. Vaughn P	0.00	X		_		H		0	0	
Board Member	1.00	x						0	0	(
(23) Kathy Beach										
Board Member	1.00	x						o	. 0	
(24) Natalie Har	ris									
Executive Director	40.00 0.00			x				87,081	0	
1b Sub-total								87,081		
c Total from continuation she d Total (add lines 1b and 1c)										
2 Total number of individuals (including but no	t lim	ited	to th	ose	liste	d ab	ove) who received more t	han \$100,000 of	
reportable compensation from										Yes No
3 Did the organization list any temployee on line 1a? If "Yes	," complete Sch	iedu	le J	for s	uch	indiv	ridua	a/		3
4 For any individual listed on li organization and related organization	anizations great	er th	an \$	150	,000	?	"Yes	s," complete Schedule J fo	or such	4 TE
individual 5 Did any person listed on line for services rendered to the	1a receive or a	ccru "Ye.	e co	mpe	nsat lete	ion f Sche	rom	any unrelated organization	on or individual	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Section B. Independent Contrac	tors									
Complete this table for your to compensation from the organ	five highest con nization. Report	npen com	sate ipen	d ind satio	depe on fo	nder r the	nt co	ontractors that received m endar year ending with or	ore than \$100,000 of within the organization's	tax year.
Name and	(A) d business address							Descrip	(B) tion of services	(C) Compensation
							-			
							-			

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

2

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

			Coalition f	or the	Homeless	s, In	c.	l	61-11	18307
Pa	rt I	Reas	son for Public Charit	ty Status (/	All organizatio	ns mus	t comp	lete this part.	See inst	ructions.
The	rga		ot a private foundation beca							
1		A church, o	onvention of churches, or a	ssociation of	churches describ	ed in se	ction 170	(b)(1)(A)(i).		
2		A school de	scribed in section 170(b)(1)(A)(ii). (Atta	ch Schedule E (F	Form 990	or 990-E	Z).)		
3			r a cooperative hospital se							
4			esearch organization opera						A)(iii). Ente	er the hospital's name,
5		•	ition operated for the benef	it of a callage						· · · · · · · · · · · · · · · · · · ·
3	Ш		ntion operated for the benef 0(b)(1)(A)(iv). (Complete P		or university own	nea or op	erated by	a governmentai	unit descrit	pea in
6			tate, or local government of		al unit described i	in eactio	n 470/h\/	41/41/63		
7.	Н		ition that normally receives						46	maralali a
•		described in	section 170(b)(1)(A)(vi).	(Complete Pa	part of its suppor irt II.)	t nom a ;	Jovennie	intar unit of Hom	nie Aenerai	public
8			y trust described in section			Part II.)				
9			ral research organization d				erated in	conjunction with	a land-gran	at college
		or university university:	or a non-land grant college	e of agricultur	e (see instruction	ns). Enter	the name	e, city, and state	of the colle	ge or
10	X		tion that normally receives:	(1) more that	n 33 1/3% of its s	support fr	om contril	hutions member	shin fees a	nd arass
		receipts fror	n activities related to its exc	empt functions	s—subject to cert	tain exce	ptions, an	d (2) no more th	an 33 1/3%	of its
		support from	n gross investment income	and unrelated	l business taxabl	e income	(less sec	tion 511 tax) from	n businesse	es
			the organization after June							
11	_		tion organized and operate							
12		An organiza	tion organized and operate	d exclusively	for the benefit of,	to perfor	m the fun	ctions of, or to c	arry out the	purposes
		Or one or mo Check the h	ore publicly supported orga ox in lines 12a through 12d	nizations describe	cribed in section is the type of sun	1)(a)eu c Porting o) or secti roanizatio	on 509(a)(2). Se	e section :	509(a)(3). 3f and 13a
	а		A supporting organization of							
		the supp	orted organization(s) the p	ower to regula	arly appoint or ele	ect a mai	s supporte	ed organization(s), typically i	by giving
		supporti	ng organization. You must	complete Pa	rt IV. Sections	A and B.	only or line	s directors of tite	sices of the	
	b		A supporting organization :				ith its sur	oported organiza	tion(s), hy f	naving
		control c	r management of the supp	orting organiz	ation vested in th	ne same j	ersons th	nat control or ma	nage the su	pported
		organiza	ition(s). You must comple	te Part IV, Se	ctions A and C.				-	
	C ,	Type III	functionally integrated. A	supporting o	rganization opera	ated in co	nnection	with, and functio	nally integra	ated with,
	.		orted organization(s) (see in							_
	d	type III	non-functionally integrated.	ed. A support	ing organization	operated	in connec	ction with its sup	oorted orga	nization(s)
			ot functionally integrated. Then the second in the second						ind an atter	itiveness
	e		nis box if the organization re						ne II. Tyme I	III
	- 1	function	ally integrated, or Type III n	on-functional	y integrated supp	orting or	ganization	n is a Type i, Ty 1.	pe II, Type	III
	f	Enter the nu	mber of supported organiza	ations		_				
	g	Provide the t	following information about	the supported	organization(s).					
(f) N		of supported	(II) EIN	1	of organization	(lv) Is the o	rganization	(v) Amount of r	nonetary	(vI) Amount of
	orga	nization			d on lines 1–10 e instructions))		ir governing	support (other support (see
				above (se	e instructions))	Yes	nent?	instructio	ns)	instructions)
(A)				·		163	140			
(,,,										
(B)										
(0)										
(C)										
(D)										
(E)				-						
			A		4	14 - 1 - 2 - 2	San Sandara			
otal				1 2 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			and the second			

Sche		lition for				-1118301	Page 2
Pa	rt II Support Schedule for C	Organizations	Described in	Sections 170	0(b)(1)(A)(iv) a	ind 170(b)(1)(A)(Ai)
	(Complete only if you ch	ecked the box	on line 5, 7, o	r 8 of Part I or	if the organiza	ation failed to qu	lality under
	Part III. If the organizatio	n fails to quali	fy under the te	ests listed belo	w, piease con	ipiete Part III.)	
	tion A. Public Support				1		
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	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)					5-23 et 1 ye 2	
6	Public support. Subtract line 5 from line 4.	<u>िक्र वे ते तिक्षित्र तिक्ष</u> ा			merchant managers, to promote	September 1	
	idar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	(a) 2013	(b) 2014	(0) 2010	(4) 2010	(0, 2011	(1) 1 5 1 1 1
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
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 VI.)						
11	Total support. Add lines 7 through 10			The second secon			
12	Gross receipts from related activities, et	c. (see instruction	S)	fourth on 66th to		501(0)(3)	
13	First five years. If the Form 990 is for the						N
500	organization, check this box and stop he tion C. Computation of Public S	ere Perc	entage				
	Public support percentage for 2017 (line			lumn (fl)		14	%
14 15	Public support percentage for 2017 (interpretage from 2016 Sc						%
16a	33 1/3% support test—2017. If the orga	anization did not o	heck the box on I	ine 13. and line 1	4 is 33 1/3% or m	ore, check this	
104	box and stop here. The organization qu						▶ □
b	33 1/3% support test—2016. If the orga	anization did not o	heck a box on line	e 13 or 16a, and I			
-	this box and stop here. The organizatio						▶ □
17a	10%-facts-and-circumstances test—2						
	10% or more, and if the organization me	ets the "facts-and	l-circumstances" t	est, check this bo	x and stop here.	Explain in	
	Part VI how the organization meets the	facts-and-circum	stances" test. The	organization qua	lifies as a publicly	supported	_
	organization						▶ 📖
b							
	15 is 10% or more, and if the organization	on meets the "fact	s-and-circumstan	ces" test, check t	his box and stop	here.	
	Explain in Part VI how the organization						.
	supported organization						▶ □
18	Private foundation. If the organization						_
	instructions						_ ⊔

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

	II tile organization rails to	quality under	li le lesis lister	a pelow, piega	e complete r	art 11.)	
	tion A. Public Support			4 3 4 4 4 T	/ 13		(n = · ·
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,504,357	2,793,643	3,500,488	3,450,453	4,146,558	15,395,499
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's fax-exempt purpose	316,349	385,182	390,894	395,701	401,353	1,889,479
3	Gross receipts from activities that are not an unrelated trade or business under section 513	1,838,589	2,005,960	2,360,726	2,490,684	2,543,714	11,239,673
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	3,659,295	5,184,785	6,252,108	6,336,838	7,091,625	28,524,651
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			2 2 2 2 2 2		SECTIONS CONTRACTOR OF	
8	Public support. (Subtract line 7c from				3 1 1 1 E		
0	line 6.)					The foliage of the state of	28,524,651
	tion B. Total Support	(-) 0040	(F) 0044	(a) 204E	(4) 2040	(=) 2017	(f) Total
		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	
9	Amounts from line 6	3,659,295	5,184,785	6,252,108	6,336,838	7,091,625	28,524,651
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	6,056	14,534	24,447	30,393	25,072	100,502
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975		_				
c	Add lines 10a and 10b	6,056	14,534	24,447	30,393	25,072	100,502
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 VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	3,665,351	5,199,319	6,276,555	6,367,231	7,116,697	28,625,153
14	First five years. If the Form 990 is for the organization, check this box and stop he	e organization's fir	st, second, third,	fourth, or fifth tax	year as a section		. 🗆
Sec	tion C. Computation of Public S		ntage	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
15	Public support percentage for 2017 (line			umn (fl)		15	99.65%
16	Public support percentage from 2016 Sc						99.69%
	tion D. Computation of Investm						
17	Investment income percentage for 2017			13, column (f))		17	%
18	Investment income percentage from 201					ا ہے ا	%
19a	33 1/3% support tests—2017. If the org			ine 14, and line 1	5 is more than 33	3 1/3%, and line	
	17 is not more than 33 1/3%, check this						X
b	33 1/3% support tests—2016. If the org						
	line 18 is not more than 33 1/3%, check						
20	Private foundation. If the organization of	did not check a box	on line 14, 19a,	or 19b, check this	box and see inst	tructions	▶ ∐

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes." and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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10b		
(Form 996	ог 990-	EZ) 2017

	ule A (Form 990 or 990-EZ) 2017 Coalition for the Homeless, Inc. 61-11183	107		Page 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		The second	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			34
	below, the governing body of a supported organization?	11a		- 11
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations	1.10		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	20 j. f. d.	70 12.3	1.1.1.27
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	-4		
		* = 501		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	Ā	w L	
	controlled the organization's activities. If the organization had more than one supported organization,	35-4		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Finda #	an Artis
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		may also a design
2	Did the organization operate for the benefit of any supported organization other than the supported	2 21 . 3 . 4	# TE - TE - TE	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	** -#* K		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	Trip-	M. Wd	िक्षेत्रस्य ह
	supervised, or controlled the supporting organization.	2	L	
Sect	ion C. Type II Supporting Organizations		,	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	2014: 1,000 to 1,000 1 2 7 3 1	47.4	
	or management of the supporting organization was vested in the same persons that controlled or managed	(T) (1.2)		
	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	3.4		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	n parting	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		24.40;	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	4	!∵ ″ಿ≂ಕ	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		2:32.	
_				
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2	Agrico Carrier	F Feylan
	the organization maintained a close and continuous working relationship with the supported organization(s).		(mm:=48/1 1)	i
3	By reason of the relationship described in (2), did the organization's supported organizations have a	-TV		
	significant voice in the organization's investment policies and in directing the use of the organization's	2.7	7	Tate
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		100	
<u> </u>	supported organizations played in this regard.	3		
Seci	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruc	:tions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	nstructi	ons).	
		0.0		
2	Activities Test. Answer (a) and (b) below.	-	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	3 (3)	n nas	manufag (
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		.) <u>.</u>	
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		1 - Jan _ 1.	
	reasons for the organization's position that its supported organization(s) would have engaged in these		Constitution of	
	activities but for the organization's involvement.	2b	n negge	يو _ن وو ^{اد} سوي
2		20	NG St. C.	
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>	1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		"." <u>(2.7</u> -4)	
	trustees of each of the supported organizations? Provide details in Part VI.	3a	V	77 77 -
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		Militari.	
7.4.4	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	0000	E7\ 204~
DAA	Schedule A (F	טרווו ששט	OL 990-I	EZ) 201/

Schedule A (Form 990 or 990-EZ) 2017 Coalition for the Homeles			307 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust of	n Nov.	20, 1970 (explain in Part '	√I). See
instructions. All other Type III non-functionally integrated supporting organization	s must o	complete Sections A throu	
Section A - Adjusted Net Income	(B) Current Year (optional)		
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		<u> </u>
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see	15-3		
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	10		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other	. 7		
factors (explain in detail in Part VI):	1.5		
Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1 1		
2 Enter 85% of line 1.	2		
Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally integr	ated Tv		tion (see
instructions).	,		
	-		

Schedule A (Form 990 or 990-EZ) 2017

	le A (Form 990 or 990-EZ) 2017 Coalition for the		nc. 61-1118	307 Page 7
Par		Supporting Organ	izations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pur			
2	Amounts paid to perform activity that directly furthers exempt purpos			
	organizations, in excess of income from activity	_		
3	Administrative expenses paid to accomplish exempt purposes of sup	oported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.		<u> </u>	
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organ	ization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017:			ing the second
а				
b	From 2013			
	From 2014			
	From 2015	WILLIAM RELIGIONS		
	From 2016		H 提供的 1997年 2015年	
-	Total of lines 3a through e	A STATE OF THE STA	A CONTRACTOR OF THE PARTY OF TH	
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Carryover from 2012 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from		FRANCIA AFRICA SA	
	Section D, line 7:			
а	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.	ti en		
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			15年12月1日 (新年12月1日) (新年12月
-	and 4c.			
8	Breakdown of line 7:	第7章 P\$13章 1		The second secon
	Excess from 2013	A. Perintan E.M.		
	Excess from 2014			
	Excess from 2015	正学者 医苦苦毒素		
	Excess from 2016			
	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Fo	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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DAA	Schedule A (Form 990 or 990-EZ) 2017

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. Complete if the organization is described below. Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- · Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• S	ection 501(c)(4), (5), or (6) organizations: Complete Part	III.			
	e of organization			Employer iden	tification number
	Coalition for the B	Iomeless, Inc.		61-11183	
Par	TIA Complete if the organization is exe	mpt under section 50°	l(c) or is a se	ction 527 organi	zation.
	Provide a description of the organization's direct and ind				
	definition of "political campaign activities")				
2	Political campaign activity expenditures (see instructions	3)		▶ \$	
	Volunteer hours for political campaign activities (see inst				
Par	Complete if the organization is exe	mpt under section 50°	l(c)(3).	<u> </u>	
1	Enter the amount of any excise tax incurred by the organ	nization under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organiza	tion managers under section	4955	▶ \$	
3	If the organization incurred a section 4955 tax, did it file	Form 4720 for this year?			Yes No
	Was a correction made?				
b	If "Yes " describe in Part IV.				
Par	I-C Complete if the organization is exe	mpt under section 50'	(c), except s	ection 501(c)(3).	
1	Enter the amount directly expended by the filing organization	ation for section 527 exempt	function		
	activities			▶ \$	
2	Enter the amount of the filing organization's funds contri				
	527 exempt function activities			▶\$	
3	Total exempt function expenditures. Add lines 1 and 2. E				
	line 17b			▶\$	<u></u>
4	Did the filing organization file Form 1120-POL for this ye	ear?			Vaa IIIa
5	Enter the names, addresses and employer identification	number (EIN) of all section 5	27 political organi	zations to which the fi	lling
	organization made payments. For each organization liste	ed, enter the amount paid from	n the filing organi	zation's funds. Also ei	nter
	the amount of political contributions received that were p	romptly and directly delivered	l to a separate po	litical organization, su	ıch
	as a separate segregated fund or a political action comm	nittee (PAC). If additional spa	ce is needed, pro	vide information in Pa	rt IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly delivered to a separate
					political organization.
					If none, enter -0
(1)					
(2)					
		<u></u>			
(3)					
(4)					
(5)			1		
					<u></u>
(6)					

Sch	edule C (Form 990 or 990-EZ) 2017 CO	alition for the Homeless, in	C. 61-111830/	Page ∠							
Pa	art II-A Complete if the or	ganization is exempt under section 501(c)(3) and filed Form 5768 (elect	tion under							
41.	section 501(h)).										
Α	Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name,										
	address, EIN, exp	enses, and share of excess lobbying expenditures									
В	Check ▶ ☐ if the filing organ	nization checked box A and "limited control" p	ovisions apply.								
		Lobbying Expenditures		b) Affiliated							
	(The term "expenditure	es" means amounts paid or incurred.)	organization's totals gr	roup totals							
18	a Total lobbying expenditures to influe	ence public opinion (grass roots lobbying)	0								
k	b Total lobbying expenditures to influence	ence a legislative body (direct lobbying)	5,759								
(c Total lobbying expenditures (add lin	es 1a and 1b)	5,759								
•	d Other exempt purpose expenditures		4,641,641								
6	e Total exempt purpose expenditures	(add lines 1c and 1d)	4,647,400								
1	f Lobbying nontaxable amount. Enter	the amount from the following table in both									
	columns.		382,370								
	If the amount on line 1e, column (a) of	r (b) is: The lobbying nontaxable amount is:									
	Not over \$500,000	20% of the amount on line 1e.									
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.									
	Over \$1,000,000 but not over \$1,500,00	0 \$175,000 plus 10% of the excess over \$1,000,000.									
	Over \$1,500,000 but not over \$17,000,0	00 \$225,000 plus 5% of the excess over \$1,500,000.									
	Over \$17,000,000	\$1,000,000.	and the second s								
9	g Grassroots nontaxable amount (ent	er 25% of line 1f)	95,593								
ŀ	h Subtract line 1g from line 1a. If zero	or less, enter -0-	0								
	i Subtract line 1f from line 1c. If zero	or less, enter -0-	0								
	j If there is an amount other than zer	o on either line 1h or line 1i, did the organization file Form	4720								
	reporting section 4911 tax for this ye	ear?		Yes No							

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditu	res During 4-Year	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount	316,058	347,007	347,071	382,370	1,392,506
b Lobbying ceiling amount (150% of line 2a, column (e))			The second secon		2,088,759
c Total lobbying expenditures	11,477	11,308	7,271	5,759	35,815
d Grassroots nontaxable amount		86,752	86,768	95,593	269,113
e Grassroots ceiling amount (150% of line 2d, column (e))				And the second s	403,670
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017 Coalition for the Homeless, Inc. 61-Part II-B. Complete if the organization is exempt under section 501(c)(3) and has N	-111 IOT fi		
(election under section 501(h)).	(a	9)	(b)
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?	<u> </u>		
f Grants to other organizations for lobbying purposes?		-	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	\vdash	-	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities?			
Other activities? Total. Add lines 1c through 1i	3.5		
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	: 100 ± 100		
• • • • • • • • • • • • • • • • • • • •		1,142	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	24(.)	(5)	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	U1(C)	(5), C	
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior Part III-B Complete if the organization is exempt under section 501(c)(4), section 5 	year?		3
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."	o," OF	R (b)	Part III-A, line 3, is
Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		. 4	
political expenses for which the section 527(f) tax was paid).		er en	
a Current year		2a	
b Carryover from last year		2b 2c	
c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		=======================================	
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		(88,30) (84-5	
and political expenditure next year?		4	
5 Taxable amount of lobbying and political expenditures (see instructions)		5	
Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.	Part II-	-A, line	es 1 and

Schedule C (Form	990 or 990-EZ) 2017	Coalit	tion :	for	the	<u> Homeles</u>	s, :	Inc.	61-11183	07 Page	4
Part IV	Supplemental	Informati	ion (con	ntinued	d) (k						

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Employer identification number Name of the organization Coalition for the Homeless, Inc. 61-1118307 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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)? 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on 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) Revenue included on 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 Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Schedule D (Form 990) 2017	<u>Coalition</u>	for the	Homeless,	Inc	61-11183	10 /	Page Z
Part III Organizati	ons Maintaining	Collections	of Art, Historica	al Treasure	s, or Other S	imilar Ass	ets (continuea)
3 Using the organization's collection items (check	s acquisition, accessi all that apply):	ion, and other reco	ords, check any of th	ne following that	at are a significar	nt use of its	
a Public exhibition		d 📙	Loan or exchange p	programs			
b Scholarly research		0	Other				
c Preservation for futu	ure generations						
4 Provide a description of	the organization's o	ollections and exp	lain how they furthe	r the organizat	ion's exempt pur	pose in Part	
XIII.							
5 During the year, did the	organization solicit of	or receive donation	ns of art, historical tr	easures, or ot	her similar		
assets to be sold to rais	e funds rather than t	o be maintained a	s part of the organiz	ation's collect	ion?		Yes No
Part IV: Escrow an	d Custodial Arr	angements.			_		
Complete it	f the organization	n answered "Y	es" on Form 990), Part IV, lii	ne 9, or repor	ted an amo	ount on Form
990, Part X	(, line 21.						
1a Is the organization an a	gent, trustee, custod	ian or other interm	ediary for contributi	ons or other a	ssets not		
included on Form 990, I	Part X?						Yes No
b If "Yes," explain the arra	angement in Part XIII	and complete the	following table:				
							Amount
c Beginning balance						1c	
d Additions during the year	ar					1d	
e Distributions during the	year						
f Ending balance						1f	
2a Did the organization inc	dude an amount on F	orm 990, Part X, I	ine 21, for escrow o	r custodial acc	count liability?		Yes No
b If "Yes," explain the arra	angement in Part XIII	I. Check here if the	e explanation has be	en provided o	n Part XIII		
Part V Endowme	nt Funds.						
Complete i	f the organization	n answered "Y	es" on Form 990				
	_	(a) Current year	(b) Prior year	(c) Two yea	rs back (d) Th	ree years back	(e) Four years back
1a Beginning of year balar	nce						
b Contributions							
c Net investment earning	s, gains, and						
losses							
d Grants or scholarships		<u></u>					
e Other expenditures for							
programs							
f Administrative expense							
g End of year balance	L						
2 Provide the estimated p	percentage of the cur	rent year end bala	ance (line 1g, colum	n (a)) held as:			
a Board designated or qu	iasi-endowment 🕨 📜	%					
b Permanent endowment	t ▶%						
c Temporarily restricted e		%					
The percentages on lin							
3a Are there endowment f	unds not in the posse	ession of the orgai	nization that are hel	d and administ	tered for the		
organization by:							Yes No
(i) unrelated organizat	tions						3a(i)
(ii) related organization	ns						3a(ii)
b If "Yes" on line 3a(ii), a				R?	. ,		3b
4 Describe in Part XIII the			ndowment funds.				
Part VI Land, Buil	ldings, and Equ	ipment.		0 D-4 57 F	na 44# On- 1	Farm 000 !	Dort V line 10
	<u>if the organizatio</u>						
Description of p	roperty	(a) Cost or other	.	or other basis	(c) Accumulat depreciation		(d) Book value
		(investment) (other)	depredation		
1a Land						(
b Buildings							
c Leasehold improvement							
d Equipment				10 076	4 A	060	4,208
e Other	, , , , , , , , , , , , , , , , , , , ,	1	D 1)() (2)	18,276		,068	4,208
Total. Add lines 1a through	1e. (Column (d) musi	t equal ⊢orm 990,	rаπ x, соштп <u>(В),</u>	iirie Tuc.) ,			4,200

Complete if the organization answered "Yes" on 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 inco	ome taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total, (Column (b) must equal Form 990, Part X, col. (B) line 25	5.) ▶	

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

Schedule D (Form 990) 2017 Coalition for the Homel	ess, Inc.	61-1118307	Page 4
Part XI Reconciliation of Revenue per Audited Financia	al Statements W	ith Revenue per Ret	
Complete if the organization answered "Yes" on Fo	orm 990, Part IV,	line 12a.	
1 Total revenue, gains, and other support per audited financial statements			4,371,209
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		100 Salari	
a Net unrealized gains (losses) on investments	2a	-3,531	
b Donated services and use of facilities	2b_		
c Recoveries of prior year grants	2c	75.00	
d Other (Describe in Part XIII.)	2d	-392,847	
e Add lines 2a through 2d			-396,378
3 Subtract line 2e from line 1			4,767,587
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			
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b		4c	4 5 6 5 5 6 5
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 12.) ,	5	4,767,587
Part XII Reconciliation of Expenses per Audited Financ	ial Statements	With Expenses per R	eturn.
Complete if the organization answered "Yes" on Fo	orm 990, Part IV	, line 12a.	<u> </u>
1 Total expenses and losses per audited financial statements			4,248,794
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		The state of the s	
a Donated services and use of facilities		er 3.2° - 23.	
b Prior year adjustments		<u> </u>	
c Other losses	2c	000 045	
d Other (Describe in Part XIII.)		-392,847	200 047
e Add lines 2a through 2d			-392,847
3 Subtract line 2e from line 1		3	4,641,641
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		\$ - 1 m	
b Other (Describe in Part XIII.)	4b		į.
c Add lines 4a and 4b			4 647 647
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, II	ine 18.)	5	4,641,641
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; Pa	art X, line
2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this pa	irt to provide any add	ditional information.	
Part X - FIN 48 Footnote			
			o/bonofit from
The Coalition's accounting policy pro	vides that	a tax expense	e/benerit irom
	anizad who	n it is more	likely than no
an uncertain tax position may be reco	dursed whe	II IL IS MOTE	TIKETY CHAIL IN
that the maritime will be quetnized u	non ovamin	ation includ	ing regolution
that the position will be sustained u	bou examin	iacton, includ	ing resolution
of any related appeals on litigation	nrogoeeoe	based on the	technical
of any related appeals or litigation	brocesses.	Dased Oil Line	CGOIIIILCAL
merits. Management believes The Coal	ition has	no uncertain	tax positions
merits. Management Delleves ine Coal	TCTOII IIGS	110 direct cati	COM PODECTIONS
resulting in an accrual of tax expens	e or henef	i+	
resulting in an accidal of tax expens	<u></u>		
Part XI, Line 2d - Revenue Amounts In	cluded in	Financials -	Other
de talle to place y deletation proper deletation and deletation de	:======================================	. 	
Tarc Tickets		\$	-392,847
Part XII, Line 2d - Expense Amounts I	ncluded in	Financials -	Other
D			

Schedule D	(Form 990) 2017 Coalition for the Homeles	s, Inc. b	1-1118307	Page 5
Part XII	(Form 990) 2017 Coalition for the Homeles Supplemental Information (continued)			
_			ć	202 047
Tarc	tickets		·····.	-392,847
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SCHEDULE G (Form 990 or 990-EZ

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest instructions.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Employer Identification number Name of the organization 61-1118307 Coalition for the Homeless, Inc. Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations Solicitation of government grants b Special fundraising events Phone solicitations d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (fill) Did fund-(v) Amount paid to (vi) Amount paid to raiser have (iv) Gross receipts (or retained by) (or retained by) (i) Name and address of individual custody or (B) Activity organization from activity fundraiser listed in or entity (fundraiser) control of ontributions col. (I) Yes No 5 6 8 9 10 **Total** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from 3

registration or licensing.

Schedule G (Form 990 or 990-EZ) 2017 Coalition for the Homeless, Inc. 61-1118307 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events GiveAJam (add col. (a) through None (event type) (total number) col. (c)) (event type) 1 Gross receipts 72,420 72,420 25,165 25,165 2 Less: Contributions 3 Gross income (line 1 minus 47,255 47,255 line 2). 4 Cash prizes 5 Noncash prizes 8,137 8,137 6 Rent/facility costs Direct Expenses 7 Food and beverages 8 Entertainment 42,255 42,255 9 Other direct expenses 50,392 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) ► 3

The income summary. Subtract line 10 from line 3, column (d) ► 3

From 11 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 12 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 12 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 12 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 13 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 13 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 13 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 13 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 14 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 15 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 15 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 15 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 15 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 15 Net income summary. Subtract line 10 from line 3, column (d) ► 3

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From 15 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 15 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 15 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 15 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 15 Net income summary. Subtract line 10 from line 3, column (d) ► 3

From 15 Net income summary. Subtract line 10 from line 3, co Part III than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 2,496,459 415,040 2,081,419 1 Gross revenue 1,606,121 2,092,643 486,522 2 Cash prizes Expenses 3 Noncash prizes Direct 76,800 76,800 4 Rent/facility costs 129,275 129,275 5 Other direct expenses 85.00 % 85.00 % Yes Yes Yes 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 2,298,718 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 197,741 9 Enter the state(s) in which the organization conducts gaming activities: **KY** a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

.....

b If "Yes," explain:

Sche		Form 990 or 990-E									Page 3
11	Does th	ne organization con	duct gaming activit	es with non	nembers?			·			Yes X No
12	Is the o	rganization a granto	or, beneficiary or tr	ustee of a tro	ust, or a me	mber of a p	artnership or o	ther entity			
		to administer charit								[Yes X No
13		the percentage of								_	_
а	The ord	anization's facility	JJJ							13a 1	00.00%
b	An outs	ide facility		.,						13b	%
14	Enterth	ne name and addres	ss of the nerson wi	no prepares	the organiza	ation's gami	ng/special eve	ents books ar			
14	records		ss of the person wi	io piepaies	ine organiza	agon's gam	ng/special eve	anta booka ai			
	Name I	Jennifer	r Haggard								
		5001 Ste	ephan Drive								
	Addres	s Louisvil	lle						KY 4025	8	
15a	Does th	e organization have	e a contract with a	third party fr	om whom ti	he organizat	tion receives g	aming			
		a?				_					Yes X No
h	If "Yes	enter the amount of	of gaming revenue	received by	the organiz	ation ▶\$		ar	nd the		
~		of gaming revenue									
^		" enter name and a				• • • • • • • • • • • • • • • • • • • •					
C	11 163,	enter name and at	udiess of the tillid	Jaity.							
	Name)	>									
	Addres	s >									
16		manager informati									
		_									
	Name I	Jennifer H	iaggard								
	Gaming	manager compens	sation ▶\$								
	Descrip	tion of services pro	vided >								
	☐ Dir	ector/officer	Employee		Independe	ent contracto	ρr				
17		ory distributions:									
а	Is the o	rganization required	d under state law to	make chari	table distrib	outions from	the gaming pr	oceeds to			
		ne state gaming lice								L	Yes 🛚 No
b	Enter th	ne amount of distrib	utions required und	ler state law	to be distril	buted to oth	er exempt orga	ani zations or			
		the organization's							_		
Pai	tN	Part III, lines 9	I Information. , 9b, 10b, 15b,								
		See instruction	15				.				
							• • • • • • • • • • • • • • • • • • • •				
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								Sc	hedule G (For	m 990 or	990-EZ) 2017

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SCHEDULE I (Form 990)

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

OMB No. 1545-0047

(Form 990)		Governme Complete if the or	nts, ar ganizatio	Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	in the United In Form 990, Part IV	States , line 21 or 22.		2017
Department of the Treasury Internal Revenue Service		oĐ ◀	to www.ir	► Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.	990. he latest informatio	in.		Open to Public Inspection
Name of the organization	Coalition for the Homeless	Homeless.	Inc.				Empk	Employer identification number 61-1118307
Part General	General Information on Grants and Assistan	d Assistance						
1 Does the organization the selection criteria u 2 Describe in Part IV the	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	s the amount of the tance?	grants or	assistance, the grant ids in the United Stat	ses' eligibility for the	grants or assistan	ce, and	Yes X No
Partill Grants ar	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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.	Somestic Orga nt that received	nization more th	s and Domestic	Governments.	Complete if the ted if additiona	organization a	answered "Yes" on Form led.
(a) Name and ac or go	(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 noncash assistance	(h) Purpose of grant or assistance
(1) Wellspring P. O. Box 1927 Louisville	, KY 40201		501c3	668,342				
(2) St. John Center 700 E Muhammad Ali Blvd Louisville KY	ır 1 Ali Blvd KY 40202		501c3	272,011				
(3) Family Health Center 2215 Portland Avenue Louisville	Center Avenue KY 40212		501c3	286,400				
(4) St. Vincent de Paul 4709 Allmond Avenue Louisville	Paul Ivenue KY 40209		501c3	191,166				
(5) Home of the In 1100 East Mark Louisville	of the Innocents East Market Street Ile KY 40206		501c3	183,041				
(6) House of Ruth 1022 S 6th Str Louisville	(6) House of Ruth 1022 S 6th Street Louisville KY 40203		501c3	29,105				
(7) Family and Childrens 525 Zane Street Louisville	lldrens st KY 40203		50103	13,037				
(8) Wayside Christian Mission P.O. Box 7249 Louisville KY 40	cian Mission RY 40257	61-0667139	501c3	33,270				Housing Assistance
(9) Salvation Army 911 S Brook Louisville			501c3	12,885				
2 Enter total number of	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nt organizations lis	ted in the l	ine 1 table	•••••••••••••••••••••••••••••••••••••••			A

3 Enter total number of other organizations listed in the line 1 table
For Paperwork Reduction Act Notice, see the Instructions for Form 990.

DAA

Schedule I (Form 990) (2017)

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990. Go to www.irs.gov/Form990 for the latest information. Open To Public Inspection

Employer identification number

61-1118307 Coalition for the Homeless, Inc. Types of Property (a) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on noncash contribution amounts applicable items contributed Form 990, Part VIII, line 1g Art — Works of art 1 Art --- Historical treasures 2 Art — Fractional interests 3 Books and publications 4 Clothing and household 5 goods Cars and other vehicles 6 Boats and planes _____ 7 Intellectual property 8 Securities - Publicly traded 9 10 Securities — Closely held stock 11 Securities - Partnership, LLC, or trust interests Securities — Miscellaneous 12 Qualified conservation 13 contribution — Historic structures Qualified conservation contribution — Other Real estate --- Residential 15 Real estate — Commercial 16 Real estate — Other 17 Collectibles 18 Food inventory 19 Drugs and medical supplies 20 21 Taxidermy Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 49,309 Other (Auction Items) 25 Other ►(.) 26 Other ►(_____ 27 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 4 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required 30a to be used for exempt purposes for the entire holding period? b If "Yes." describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 31 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a 32a contributions? h If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Schedule M (Form	990) 2017 Coal	ition for	the Ho	meless.	Inc.	61-111830	7	Page 2
Part	990) 2017 Coal Supplemental I the organization or a combination	is reporting in	Part I. colur	nn (b), the n	umber of co	ontributions, the	32b, and 33, a number of iter	and whether ms received,
	or a combination	TOI DOUT. AISO	complete un	is part for ari	y additiona	a imorrida.		
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SCHEDULE O (Form 990 or 990-EZ)

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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Coalition for the Homeless, Inc.

Employer identification number 61–1118307

Form 990 - Organization's Mission or Most Significant Activities
The mission of the Coalition for the Homeless is to advocate for people who
are homeless and for the prevention and elimination of homelessness. The
Coalition for the Homeless has been the voice of homelessness in Louisville
for more than a quarter of a century. We work closely with homeless
service providers, civic groups, concerned citizens, faith-based
organizations and local, state and federal governments to do three things:
1) Educate the community about homelessness and inspire action, 2) Advocate
for system changes, and) Coordinate the community response to homelessness
through efficient use of resources and funding.
Form 990 - Organization's Mission
The mission of The Coalition for the Homeless is to advocate for people who
are homeless and for the prevention and elimination of homelessness. The
Coalition for the Homeless has been the voice of homelessness in Louisville
for over 30 years. We work closely with homeless service providers, civic
groups, concerned citizens, faith-based organizations and local, state and
federal governments to do three things: 1) Educate the community about
homelessness and inspire action, 2) Advocate for system changes, and 3)
Coordinate the community response to homelessness through efficient use of
resources and funding.
Form 990, Part III, Line 4a - First Accomplishment
youth homelessness by 50%.

Department of the Treasury

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

(99) Internal Revenue Service Name(s) shown on return Coalition for the Homeless, Inc.

Identifying number 61-1118<u>307</u>

	ss or activity to which this form relates adirect Deprecia	ation						
THE PERSON NAMED IN	rt l Election To Exp	ense Certain Pro	perty Under S	ection 179				
-21-	Note: If you have	e any listed proper	ty, complete Pa	art V before yo	ou complete	Part I.		
1	Maximum amount (see instruc						1	510,000
2	Total cost of section 179 prope	2						
3	Threshold cost of section 179	3	2,030,000					
4	Reduction in limitation. Subtra-		4					
5	Dollar limitation for tax year. Subtra		5	FT 22-22 (198-89 15-7888 15				
6	(a) Descrip	(a) Description of property (b) Cost (business use only) (c) Elected cost						
				 			-	
					_			
7	Listed property. Enter the amo				7		8	AND THE PARTY OF THE PARTY.
8	Total elected cost of section 1						9	
9	Tentative deduction. Enter the						10	
10	Carryover of disallowed deduc						11	
11								
12	40							u Fruit Jay (Fig. 14
13 Note	: Don't use Part II or Part III be	low for listed property	Instead use Part V	12	13			
Note	Special Deprec	iation Allowance	and Other Den	reciation (Do	n't include l	isted pro	operty	() (See instructions.)
	Special depreciation allowance	e for qualified property	(other than listed n	roperty) placed in	service	iotod pre	1	,, (God manacher)
14	during the tax year (see instru						14	
4E	Property subject to section 16						15	
15	Other depreciation (including /						16	2,364
16		iation (Don't inclu						
	III. IMAGRO Deprec	Mation (Don't more	Sectio					
17	MACRS deductions for assets	placed in service in ta	x vears beginning b	efore 2017	·		17	0
18	If you are electing to group any assets p						7.1	
10	Section B—	Assets Placed in Serv	ice During 2017 T	ax Year Using th	ne General Dej	preciation	Syste	em
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for deprecia (business/investment only-see instruction	use	(e) Convention	(f) Met	hod	(g) Depreciation deduction
19a	3-year property							
b	5-year property							
	7-year property							
d	10-year property							
е	15-year property	4 6 6 6 6 6 6 6						
f	20-year property							
g	25-year property			25 yrs.		S/I		
h	Residential rental			27.5 yrs.	MM	S/I		<u> </u>
	property			27.5 yrs.	MM	S/I		
i	Nonresidential real			_39 yrs.	MM	S/I		
	property				MM	S/L		
	Section C—A	ssets Placed in Servi	ce During 2017 Ta	x Year Using the	Alternative D	1		tem
<u>20a</u>	Class life					S/I		
b	12-year			12 yrs.		S/I		
С				40 yrs.	MM	S/		
P	art IV Summary (See							
21	Listed property. Enter amount	from line 28					21	
22	Total. Add amounts from line							2,364
	here and on the appropriate li				ISTRUCTIONS		22	Z,304
23	For assets shown above and	-		enter the	92			
	portion of the basis attributable	e to section 263A cost	S		23			- AECO

ORIGINAL COPY FILED SECRETARY OF STATE OF KENTUCKY,

ARTICLES OF INCORPORATION

MAY 2 2 1986 10

0F

Drefelf & Davis

THE COALITION FOR THE HOMELESS

WE, THE UNDERSIGNED, having associated for the purposes of forming a non-profit, non-stock corporation, under and pursuant to the laws of the Commonwealth of Kentucky, and more particularly Kentucky Revised Statutes, Chapter 273, hereby certify as follows:

ARTICLE I - TITLE

The name of the Corporation shall be the Coalition For the Homeless, Inc. 1/

ARTICLE II - DURATION

The duration of the Corporation shall be perpetual or until such time as it is dissolved by operation of law.

ARTICLE III - PURPOSES

The Corporation is organized and shall be operated exclusively for charitable and educational purposes as described within Section 501(c)(3) of the Internal Revenue Code of 1954 and revisions thereto. More specifically, these purposes include the following:

- To foster a general community awareness of the plight of homeless men, women and children who live on the streets of Louisville and Jefferson County, Kentucky;
- To promote public policies which are intended to alleviate the health.
 legal, social and economic problems of said individuals;
- 3. To purchase, establish, organize and/or operate a Day Center for the homeless and to undertake all activities necessary to the maintenance and development of said Day Center, and
- 4. To undertake any and all activities which do not conflict with Kentucky Revised Statutes, Chapter 273 and which do not conflict with other laws of the Commonwealth of Kentucky.

254 p. 184

The principal place of business and registered office of said Corporation shall be 706 E. Muhammad Ali Blvd., Louisville, Kentucky 40202, and the registered agent for service of process located at said principal place of business shall be Larry Otto.

ARTICLE V - INCORPORATORS

The names and addresses of the incorporators of this Corporation are:

- 1. Larry Otto
 420 South Second Street
 Louisville, Kentucky 40202
- Jim Gilmore
 323 W. Broadway
 Louisville, Kentucky 40202
- 3. Alphonso O'Neil White 1363 South Second Street Louisville, Kentucky 40207

ARTICLE VI - INITIAL BOARD OF DIRECTORS

The initial Board of Directors who shall serve until the Board of Directors is duly elected at the first membership meeting are:

- Larry Otto, President
 421 South Second Street
 Louisville, Kentucky 40202
- 2. Jim Gilmore, Vice President Brown Building, Suite 615 323 West Broadway Louisville, Kentucky 40202
- 3. Teresa Watson, Secretary
 Seven Counties Services
 834 E. Broadway
 Louisville, Kentucky 40204
- 4. Alhonso O'Neil White, Treasurer 1636 South Second Street Louisville, Kentucky 40207
- 5. The Reverend Mike Elliott, at large 733 East Jefferson Street Louisville, Kentucky 40202

- Blanche Cooper,
 Judge's Designee
 West Jefferson, Suite
 Louisville, Kentucky 40202
- 7. Mary Mulvihill, Mayor's Designee 727 West Main Street Louisville, Kentucky 40202

ARTICLE VII - BYLAWS

The Bylaws for the Corporation shall be adopted by the Board of Directors.

__ARTICLE VIII - NONPROFIT STATUS

No part of the net earnings or assets of the Corporation shall inure to the benefit of, or be distributable to its members, directors, officers or any private persons.

No substantial part of the activities of the Corporation shall be devoted to attempts to influence legislation. Further, the Corporation shall not intervene or otherwise participate in (including through the publication or distribution of statements) any political campaign on behalf of any candidate for public office. Notwithstanding any other provision of these articles, the Corporation shall not undertake activities which are

- a) impermissable under Section 501(c)(3) of the Internal Revenue Code of 1954 and amendments, applicable to corporations exempt from federal income tax or
- b) impermissable under Section 170(c)(2) of the Internal Revenue Code of 1954 and amendments, applicable to corporations which can receive tax deductable contributions

ARTICLE IX - DISSOLUTION

Upon the dissolution of the Corporation, the Board of Directors shall, after paying or making provision for payment of all debts and liabilities of the Corporation, dispose of all the assets of the Corporation in the following manner:

- 1) conveyance or distribution to an organization(s) organized and operated exclusively for charitable, educational, religious or scientific purposes and, at that time, qualified as an exempt organization under Section 501(c)(3) of the Internal Revenue Code of 1954 (or corresponding provision of any future United States Internal Revenue law), and/or
- 2) making distributions which, themselves, further civic, educational or charitable purposes which are consistent with the purposes for which this Corporation was formed, consistent with Kentucky Revised Statute, Chapter 273, and consistent with the tax exempt purposes enumerated in Section 501(c)(3) of the Internal Revenue Code.

ARTICLE X - INTERNAL AFFAIRS

The initial Bylaws shall be adopted by the initial Board of Directors.

Thereafter, the Corporation shall be governed by the Bylaws. Membership and voting shall be determined as provided in the Bylaws.

ARTICLE XI - LIABILITY

The officers and members of this Corporation shall not be held personally liable for any debt or obligation of the Corporation solely because of their position as officers and members of the Corporation.

ARTICLE XII - AMENDMENTS

Amendments to these Articles shall be made pursuant to the provisions of KRS Section 273.263.

IN TESTIMONY WHEREOF, witness the signatures of the incorporators of this Corporation on this ____ day of February, 1986.

ARTICLE X - INTERNAL AFFAIRS

The initial Bylaws shall be adopted by the initial Board of Directors.

Thereafter, the Corporation shall be governed by the Bylaws. Membership and voting shall be determined as provided in the Bylaws.

ARTICLE XI - LIABILITY

The officers and members of this Corporation shall not be held personally liable for any debt or obligation of the Corporation solely because of their position as officers and members of the Corporation.

ARTICLE XII - AMENDMENTS

Amendments to these Articles shall be made pursuant to the provisions of KRS Section 273.263.

IN TESTIMONY WHEREOF, witness the signatures of the incorporators of this Corporation on this day of February, 1986.

Survey C. Otto

Form W-9 (Rev. October 2018)

(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

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

	1 Name (as shown on your income tax return). Name is required on this line; do	o not leave this line blank.											
	The Coalition for the Homeless, Inc. 2 Business name/disregarded entity name, if different from above												
	2 Business name/disregarded entity name, if different from above												
က်						A Everation to decide and the section							
<u>4</u>	 Check appropriate box for federal tax classification of the person whose name following seven boxes. 	ne is entered on line 1. Che	ck only	one (of the	e 4 Exemptions (codes apply only to certain entities, not individuals; see							
Print or type. See Specific Instructions on page	Uniowing saveit doxes.	_						ctions				210, 9 66	
E O	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation	☐ Partnership	Tru	st/es	state				•		•		
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Print or type. c Instructions	☐ Limited liability company. Enter the tax classification (C=C corporation, S=	S corporation, P=Partners	ship) 🟲 _										
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F D	is disregarded from the owner should check the appropriate box for the ta			OI LL	LQ INC								
eci	☐ Other (see instructions) ▶					ø	(aplies	to accoun	nta apa	intaine	l outsidi	the U.S.)	
Sp	5 Address (number, street, and apt. or suite no.) See instructions.		Request	ler's	name	and	dado	iress (o	ptio	nai)			
Še	1300 S. 4th St., Ste. 250												
0,	6 City, state, and ZIP code												
	Louisville, KY 40208												
	7 List account number(s) here (optional)												
Par	Taxpayer Identification Number (TIN)												
	our TIN in the appropriate box. The TIN provided must match the name	e given on line 1 to avo	old	Soc	cial se	cui	ity n	umber					
backu	withholding. For individuals, this is generally your social security num	ber (SSN). However, fo						T	٦		T		
	nt alien, sole proprietor, or disregarded entity, see the instructions for F		_				-			-			
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	onger subject to backup withholding; and												
	a U.S. citizen or other U.S. person (defined below); and												
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other t	nan interest and dividends you are not required to sign the certification, bu	at you must provide your	correct	TIN	. See	the	inst	ruction	ıs ƙ	r Pai	t II, la	ter.	
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Future	developments. For the latest information about developments	• Form 1099-B (stock	or mut	uel f	fund e	sale	e ar	ri cert	oin	otho	-		
	to Form W-9 and its instructions, such as legislation enacted	transactions by broke		MCH I	iui iu i	JELIC	. S CII	tu cert	CQ11 I	Oute			
after tr	ey were published, go to www.irs.gov/FormW9.	• Form 1099-S (proce		m re	eal es	tate	e tra	nsactio	ons)			
Purk	oose of Form	• Form 1099-K (merci									actic	ns)	
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	ation return with the IRS must obtain your correct taxpayer	1098-T (tuition)			2.464			- (0100		_ ,		5041	
identifi	cation number (TIN) which may be your social security number	• Form 1099-C (cance	eled det	bt)									
	individual taxpayer identification number (ITIN), adoption er identification number (ATIN), or employer identification number	• Form 1099-A (acquis			endon	me	nt o	f secui	ed	prop	erty)		
	o report on an information return the amount paid to you, or other	Use Form W-9 only										nt	
amoun	t reportable on an information return. Examples of information	allen), to provide your				-							
	include, but are not limited to, the following.	If you do not return											
• Form	1099-INT (interest earned or paid)	be subject to backup	withhok	ding	. See	W	nat i	s back	up	with	ıoldir	g,	

later.



Department of Veterans Affairs – Stand Down

TO:

Project Homeless Connect/Stand Down Planning Committee

FROM:

Jamie Watts

DATE:

December 3, 2015

SUBJECT:

2015 Evaluation

Project Homeless Connect/Stand Down was held at the Salvation Army on October 7, 2015. A total of 560 clients came through the front door. Of these it was confirmed that 133 identified themselves as serving in the military and that 7 of those were sleeping out. There were 76 non-Veterans who identified as sleeping out.

There were over 50 vendors and/or booths, a Veterans medical room, civilian medical room, eye exams, TARC transportation, state ID's, food, backpacks, hygiene kits, and common assessment screenings completed.

Participating community partners were as follows:

Brain Injury Alliance of Kentucky

Common Assessment - Phoenix

Community Action

Coventry Cares of KY

Department of Veteran Affairs -Compensation and Pension Benefits (Regional Office)(VBA)

Health Department - HIV Testing

Humana Care Source

Interlink Counseling Service Inc.

Internal Revenue Service - Taxpayer Advocate

Kentucky Department of Veterans Affairs (KDVA)

Kentucky Lions Eye Foundation

Kynect - Phoenix

Louisville Free Public Library

Louisville Health Department

Metro United Way 211

Mountain Comprehensive Care Center/Veterans Transition Center

Neighborhood Place - Social Service Collaborative

Office for Women - Louisville Metro Government

Phoenix Family Health Center

Phoenix Family Health Center - Dental

Phoenix Family Health Center (CAB)

Phoenix Health Care for the Homeless - Consumer Advisory Board

Phoenix Health Center - Social Service s

Robley Rex VAMC - Compensated Work Therapy

Robley Rex VAMC Chaplain Service

Robley Rex VAMC LGBT Services

Robley Rex VAMC - PTSD and MST Programs

Robley Rex VAMC Eligibility

Robley Rex VAMC Healthcare for Homeless Veterans

Robley Rex VAMC Homeless Community Employment Coordinator

Robley Rex VAMC Medical

Robley Rex VAMC OEF/OIF/OND Program

Robley Rex VAMC Substance Use Disorder Program

Robley Rex VAMC Suicide Prevention Program

Robley Rex VAMC Veterans Justice Outreach

Salvation Army

St. John Day Center

St. Vincent De Paul

The Center for Promotion of Recovery and Resilience of Traumatized Children and Youth

Together We Stand Ministry

VET Center of Louisville

Veteran Voices of Kentuckiana – Consumer Council

Veterans' Outreach

VOA Homeless Veteran Reintegration Program (HVRP)

VOA Supported Services for Veteran Families (SSVF)

Volunteers of America - HIV services

Wayside Christian Mission

WellCare Health Plans, Inc., Community Advocate

YMCA Safe Place Service

Participants utilized almost all services offered but were especially interested in healthcare, eye exams, driver's license / ID's, give aways, housing, and employment.

Exit Interviews

Number of people through the door – 560

133 Veteran (7 reported sleeping out, down from 25 last year) - 24% 90 completed exit interviews.

Of the 133 Veterans, 38 were housed and 65 were in GPD beds.

427 Non-Veteran participants (76 reported sleeping out) 283 completed exit interviews

1. Did you get what you came for

95% - Yes

If not, what were you looking for?

Shoes

Underwear

Sweatshirts

Clothing

Employment Opportunities

Booze

Satisfaction with individual	Very		Not	No Opinion/Didn't
areas:	satisfied	Satisfied	Satisfied	use
Health Services	66%	29%	1%	4%
Community Services	67%	29%	3%	1%
		-	•	· · · · · · · · · · · · · · · · · · ·
Security Services	60%	30%	4%	0%
	1	Ι .		Γ
People who served you	73%	27%	0%	0%
		/***		
Veterans Resources	75%	7%	0%	5%

1. If you could change one thing about today, what would it be?

Breakfast

I don't know

Me

Too crowded

Homelessness

Security needs improving

Give away coats

Would like to volunteer next year

Would be better outside, not so crowded

Hallways are too tight

Configure service areas better

More notice or information

Extend services to Vets who served in boot camp

only

Almost all participants were Satisfied or Very Satisfied with the event. Themes that came from the suggestions were the following:

Tight hallways, too crowded

Vendors / Booths were sent a follow up survey for their suggestions. Eleven responses were received.

- Did you receive accurate information about registration and event?
 10 Yes 1 No- It would have been helpful to know where tables for resources were to be situated. Different from last year. I went to the area from last year with no direction and had to ask several people where to go.
- Did you have what you needed at the event?
 10 Yes 1 No If the area / tables were not closed in. Had to walk all the way around to get to seating area.
- 3. Do you think the set-up of the event was conducive to reaching the clients? 10 Yes 1 No Better structure in previous years where clients were evaluated based on needs, were mandated to apply for resources, and verified to get free resources, back packs, socks, etc.

4. Is there anything else you would suggest that we could do better or different next year?

The set up wasn't as structured or productive as previous years. It should be clearly stated where volunteers and resources workers are to be seated. Agenda? Map? Maybe

Set up for Veterans seemed blocked in - not easy access for providers to get in and out of area – My first event – was impressed – great event. More coffee and water more accessible to volunteers.

8 responses had no other suggestions

All "no" responses came from the same feedback form.

Committee members feedback for next year (add additional comments from 12/3/15 meeting)

- Haircuts Barber school attended Indiana Stand Down and would like to offer services for Louisville's Stand Down
- Add Athena's Sisters to the planning committee
- Separate VA and non-VA give away areas
- More signage with arrows
- Reconfigure medical hallway or move services out too many people waiting in hallway

	<u>ID's</u>		
The total cost was \$ There were _	_ one year IDs, _	four year IDs and	renewals



The Coalition for the Homeless, Inc.

Independent Auditors' Report

And Financial Statements

For the Years Ended

June 30, 2018 and 2017

Contents

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Independent Auditors' Report	1
Financial Statements:	
Statements of Financial Position Statements of Activities Statements of Functional Expenses Statements of Cash Flows Notes to Financial Statements	3 4 5 6 7
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Independent Auditors' Report

Board of Directors
The Coalition for the Homeless, Inc.

We have audited the accompanying financial statements of The Coalition for the Homeless, Inc., (a not-for-profit organization) which comprise the statements of financial position as of June 30, 2018 and 2017, 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 and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audits 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 auditor's 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 The Coalition for the Homeless, Inc. as of June 30, 2018 and 2017, 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.

Other Matters

Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. Code of Federal Regulations (CFR) Part 200, Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements.

The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated December 9, 2018 on our consideration of The Coalition for the Homeless, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of The Coalition for the Homeless, Inc.'s internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering The Coalition for the Homeless, Inc.'s internal control over financial reporting and compliance.

Baldwin CPAs, PLLC

Louisville, Kentucky December 9, 2018

The Coalition for the Homeless, Inc. Statements of Financial Position June 30, 2018 and 2017

	2018	2017
Assets		
Cash	\$ 319,379	\$ 471,723
Grants receivable	447,356	52,835
Promises to give	19,227	17,705
Inventory	38	2,630
Prepaid expenses	4,329	3,516
Investments	388,040	266,817
Property and equipment, net	 4,208	6,573
Total assets	\$ 1,182,577	\$ 821,799
Liabilities and net assets		
Liabilities		
Accounts payable	\$ 266,542	\$ 38,571
Accrued expenses and withholdings	 28,577	 18,185
Total Liabilities	295,119	56,756
Net assets		
Unrestricted	774,004	697,121
Temporarily restricted	 113,454	 67,922
Total net assets	887,458	765,043
Total liabilities and net assets	\$ 1,182,577	\$ 821,799

The Coalition for the Homeless, Inc. Statements of Activities For the Years Ended June 30, 2018 and 2017

		2018			2017	
	Unrestricted	Temporarily Restricted	Total	Unrestricted	Temporarily Restricted	Total
Revenue and support:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			() () () () () () () () () ()		000
Grants and contributions	\$ 3,858,115	\$ 211,649	\$ 4,069,764	\$ 3,268,492	\$ 130,971	\$ 3,389,463
Charitable gaming revenue, net	197,741	\mathbf{I}_{i}^{o}	197,741	185,490	E)	185,490
Membership dues	51,629	τ	51,629	50,990	9)	50,990
Special event revenue	72,420		72,420	95,434		95,434
Special event expense	(50,392)		(50,392)	(45,810)	1	(45,810)
Investment income	1,903	360	1,903	6,921	•	6,921
Realized and unrealized gain (loss) on investments, net	19,638	ж	19,638	17,097	***	17,097
Other income	8,506	Ŧ	8,506	22,866	8	22,866
	4,159,560	211,649	4,371,209	3,601,480	130,971	3,732,451
Net assets released from restrictions: Restrictions satisfied by payments	166,117	(166,117)		152,778	(152,778)	AS
Total revenue and support	4,325,677	45,532	4,371,209	3,754,258	(21,807)	3,732,451
Expenses: Program services Management and general	3,937,096 155,132	X X 3	3,937,096 155,132 158,566	3,305,744 131,266	9	3,305,744 131,266 133,777
Total expenses	4,248,794	-	4,248,794	3,570,787	-	3,570,787
Change in net assets Net assets at beginning of year	76,883 697,121	45,532 67,922	122,415 765,043	183,471 513,650	(21,807) 89,729	161,664 603,379
Net assets at end of year	\$ 774,004	\$ 113,454	\$ 887,458	\$ 697,121	\$ 67,922	\$ 765,043

The accompanying notes are an integral part of these financial statements

The Coalition for the Homeless, Inc. Statements of Functional Expenses For the Years Ended June 30, 2018 and 2017

Management and General
\$ 34,736
15,502
t
1
12
999
844
119
35,258
9,284
429
1,401
2,131
709
48,548
1,000
ж
4,505
\$ 155,132

The accompanying notes are an integral part of these financial statements.

The Coalition for the Homeless, Inc. Statements of Cash Flows For the Years Ended June 30, 2018 and 2017

	2018	2017
Cash flows from operating activities		
Change in net assets	\$ 122,415	\$ 161,664
Adjustments to reconcile change in net assets		
to net cash provided by operating activities:		
Depreciation	2,364	2,365
Realized and unrealized (gain) loss on investments	(19,638)	(17,097)
(Increase) decrease in operating assets:	(004.504)	07.000
Grants receivable	(394,521)	97,300
Promises to give	(1,522)	3,124
Inventory	2,592	(2,604)
Prepaid expenses	(813)	273
Increase (decrease) in operating liabilities:		
Accounts payable	227,971	(2,640)
Accrued expenses and withholdings	 10,392	6,554
Net cash provided (used) by operating activities	 (50,760)	 248,939
Cash flows from investing activities		
Purchase of investments	(101,584)	(86,722)
Net cash provided (used) by investing activities	(101,584)	 (86,722)
Net increase in cash	(152,344)	162,217
Cash, beginning of year	 471,723	 309,506
Cash, end of year	\$ 319,379	\$ 471,723

Note 1 - Significant Accounting Policies

Nature of Operations

The Coalition for the Homeless, Inc. (the "Coalition") is a not-for-profit corporation in Louisville, Kentucky, formed to advocate for people who are homeless and for the prevention and elimination of homelessness. The Coalition derives a significant portion of its revenues from contributions and grants from third party donors and government entities.

Basis of Accounting

The Coalition prepares its financial statements on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

Basis of Presentation

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) with regards to financial statements of Not-for-Profit Organizations. Under this guidance, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets and permanently restricted net assets. A description of the three net assets categories follows:

<u>Unrestricted Net Assets</u>: include the portion of expendable funds that are not subject to donor-imposed stipulations.

<u>Temporarily Restricted Net Assets</u>: include gifts for which donor- imposed restrictions have not been met.

<u>Permanently Restricted Net Assets</u>: include amounts which the donor has stipulated that the corpus be invested in perpetuity and only the income be made available for program operations in accordance with donor restrictions.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of revenue and expenses during the reporting periods. Accordingly, actual results could differ from those estimates.

Cash

Cash consists of cash on deposit. Cash held temporarily by a custodian for investment purposes is included in investments and is not considered to be cash equivalents for the statements of cash flows.

Grants Receivable

Grants receivable consist primarily of government cost reimbursement contracts billed but not received. All are considered collectible, so no allowance for doubtful accounts is necessary.

Promises to Give

Promises to give are recognized when the donor makes a promise to give to the Coalition that is, in substance, unconditional. Promises to give becoming due in the next year are recorded at net realizable value. Promises to give in subsequent years are reported at the present value of their net realizable value, using risk free interest rates applicable to the years in which the promises are recognized. Conditional promises to give are recognized when the conditions on which they depend are substantially met.

Inventory

Inventory consist of bus tickets on hand, at cost.

Investments

Investments consist of money market accounts and mutual funds and are stated at fair value as determined by quoted market prices. Unrealized gains and losses are included in the change in net assets in the accompanying statements of activities. The Coalition classifies all money market accounts held in managed accounts as investments.

Property and Equipment

Property and equipment are stated at cost or appraised value at the date of gift for donated assets. The Coalition has a policy to capitalize expenditures for property and equipment greater than \$1,000, Depreciation is provided on the straight-line method over the estimated useful lives of the assets.

Contributions and Grants

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence and/or nature of any donor restrictions.

Support that is restricted by the donor is reported as an increase in unrestricted net assets if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in temporarily or permanently restricted net assets, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statements of activities as net assets released from restrictions.

Donated goods and services

Contributions of tangible assets are recognized at their fair market value at date of donation. The amounts are reflected in the accompanying financial statements as unrestricted support and are offset by like amounts included in expenses. In-kind donations for the years ended June 30, 2018 and 2017 were \$24,144 and \$32,967, respectively and were for special events.

A large number of volunteers have given significant amounts of their time to the Coalition's operating activities. No amounts have been reflected in these statements for such services, since the services do not require specialized skills.

Expense Allocation

Expenses are charged to programs and supporting services on the basis of periodic time and expense studies. Management and general expenses include those expenses that are not directly identifiable with any other specific function but provide for the overall support and direction of the Coalition. During 2017, the Coalition changed its allocation procedures to better reflect fund raising expenses. The change had no effect on change in net assets or total assets.

Income Tax Status

The Coalition for the Homeless, Inc., qualifies as a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code and, accordingly, no provision for federal and state income taxes have been made in these statements.

The Coalition's accounting policy provides that a tax expense/benefit from an uncertain tax position may be recognized when it is more likely than not that the position will be sustained upon examination, including resolution of any related appeals or litigation processes, based on the technical merits. Management believes the Coalition has no uncertain tax positions resulting in an accrual of tax expense or benefit.

Reclassifications

Certain accounts in the prior-year financial statements have been reclassified for comparative purposes to conform to the presentation in the current year financial statements.

Note 2 - Concentrations of Credit Risk

<u>Cash</u> - The Coalition maintains its cash balances in several financial institutions in Louisville, Kentucky. The cash balances are insured by the Federal Deposit Insurance Corporation up to \$250,000. The risk is managed by maintaining all deposits in high quality financial institutions. The amounts in excess of the insured limit as of June 30, 2018 and 2017 was approximately \$54,000 and \$77,000, respectively.

<u>Investments</u> - Investment securities are exposed to various risks, such as interest rate, market and credit. Due to the level of risk associated with certain investment securities, and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in risks in the near term would result in material changes in the fair value of investments and net assets of the Coalition. To address the risk, the Coalition maintains a formal investment policy that sets out investment guidelines, asset allocation guidelines and requires review of the investment manager's performance. The finance committee oversees the entire process.

<u>Concentration of Revenue</u> - The Coalition is dependent on cost reimbursement contracts with the Department of Housing and Urban Development to carry out its program activities. The majority of these contracts have been currently renewed through third-party payers' fiscal years ending during 2018. However, any significant future changes in the level of government funding of these programs could have a favorable or unfavorable impact on the operating results of the Coalition. During the years ended June 30, 2018 and 2017, 79% and 85%, respectively, of total revenue and support was derived from federal, state, and local government grants.

Note 3 - Promises to Give

Promises to give are receivable in less than one year. The promises to give balance consists of the following as of June 30, 2018 and 2017, respectively:

	2018	2017		
Metro United Way	\$ 19,227	\$	17,705	

No allowance for doubtful accounts is considered necessary, as management believes that all amounts are collectible.

Note 4 - Investments

Investments consist of cash, stocks, and mutual funds that are stated at fair value based on quoted prices in active markets (all level 1 measurements) and are summarized as follows:

						realized Gains
	F	air Value	e Cost Basis			osses)
June 30, 2018						
Money market	\$	4,452	\$	4,452	\$	-
Mutual funds - ETF		17,946		17,978		(32)
Mutual funds - equities		365,642		313,646		51,996
	\$	388,040	\$	336,076	\$	51,964
June 30, 2017						
Money market	\$	1,031	\$	1,031	\$	_
Mutual funds - ETF		13,045		12,979		66
Mutual funds - equities		252,741		214,806		37,935
	\$	266,817	\$	228,816	\$	38,001

Note 5 - Fair Values of Financial Instruments

The ASC provides a framework for fair value measurements. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The methodology for measuring fair value species a three-tier hierarchy of valuation techniques based upon whether the inputs to those valuation techniques are bases on quoted prices of identical assets or liabilities (Level 1), significant other observable inputs (Level 2), or significant other unobservable inputs that reflect an organization's own assumptions of market participant valuation (Level 3).

Fair values of assets measured on a recurring basis at June 30, 2018 and 2017 are as follows:

	Balance at			Fair Value Measurements Using:					
	June 30, 2018			Level 1	Le	evel 2	Le	evel 3	
Financial assets:					-		50		
Money market accounts	\$	4,452	\$	4,452	\$	**	\$	7.E	
Mutual funds									
ETF		17,946		17,946		25		-	
Equities		365,642		365,642		5.		353	
	\$	388,040	\$	388,040	\$	<u>.</u>	\$		
	Ва	alance at		Fair Val	lue Mea	suremen	ts Using:		
	Jun	e 30, 2017		Level 1	Le	vel 2	Le	vel 3	
Financial assets:					0.1				
Money market accounts	\$	1,031	\$	1,031	\$	-	\$	-	
Mutual funds									
ETF		13,045		13,045		-		-	
Equities		252,741		252,741		72		-	
	\$	266,817	\$	266,817	\$	-	\$		

The valuation methodologies used for assets measured at fair value are:

The carrying amount of money market accounts approximate fair value due to the short-term nature of these instruments.

Mutual funds are valued at fair value based on quoted market prices for identical securities in active markets that the Coalition has the ability to access at the measurement date.

Note 6 - Property and Equipment

Property and equipment and total accumulated depreciation are as follows:

	2018		 2017
Property and equipment Less accumulated depreciation	\$	18,276 (14,068)	\$ 18,276 (11,703)
	\$	4,208	\$ 6,573

Note 7 - Line of Credit

The Coalition has available a \$50,000 unsecured line of credit expiring April 5, 2019. Advances on the line of credit carry an interest rate of 4.25%.

Note 8 - Temporarily Restricted Net Assets

Temporarily restricted net assets consist of the following:

	2018		2017	
Continuum of Care Program,				
Metro United Way	\$	19,227	\$	17,705
Event sponsors		16,500		=:
Expanded services grant		50,000		≨:
Rx: Housing Grant		5,811		2,948
Program Income from Tenants		21,916		47,269
	\$	113,454	\$	67,922

Note 9 - Pension Plan

The Coalition maintains a simplified employee pension plan covering all employees who have attained 21 years of age and earn in excess of \$500. The Coalition contributes 7.0% of each eligible employee's salary. Employer contributions for the years ended June 30, 2018 and 2017 were \$54,115 and \$26,488.

Note 10 - Operating Leases

The Coalition leases office space under operating leases expiring in various years through 2023. Several of these leases have renewal options that are renewed in the normal course of business. Future minimum lease payments under non-cancelable operating leases at June 30, 2018, are as follows:

Due Fiscal Year Ending June 30,	Amount
2019 2020 2021 2022 2023	\$ 144,223 88,222 72,199 43,094 11,000
	\$ 358,738

Rent expense for the years ended June 30, 2018 and 2017 was \$175,630 and \$143,444, respectively.

Note 11 - Fiscal Agent

The Coalition and the Transit Authority of River City ("TARC") have entered into an agreement allowing the Coalition to act as TARC's fiscal agent and sell discounted TARC tickets to homeless shelters for their clients' use. The Coalition receives a small transaction fee for this service. The related ticket revenue and expense is included in other income in the statements of activities and is presented as follows:

	2018		2017	
Ticket revenue Ticket expense	\$	401,007 (392,847)	\$	391,684 (372,835)
Net ticket income	\$	8,160	\$	18,849

Note 12 - Federal Awards

During the years ended June 30, 2018 and 2017, the Coalition received federal awards under programs administered by the U.S Department of Housing and Urban Development. As required under the programs the Coalition passed through awards during the years ended June 30, 2018 and 2017 totaling \$2,750,935 and \$2,447,740, respectively, to sub-recipients who provide programs that assist the homeless.

Note 13 - Recently Issued Accounting Standards

Accounting Standards Update 2014-09, Revenue from Contracts with Customers (Topic 606)

In May 2014, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2014-09, Revenue from Contracts with Customers (Topic 606), requiring an entity to recognize the amount of revenue to which it expects to be entitled for the transfer of promised goods or services to customers. The core principle of ASU 2014-09 is to recognize revenues when a customer obtains control of a good or service, in an amount that reflects the consideration to which an entity is expected to be entitled for those goods or services. The standard will replace most existing revenue recognition guidance in GAAP when it becomes effective and permits the use of either a full retrospective or retrospective with cumulative effect transition method. In August 2015, the FASB issued ASU 2015-14, which deferred the effective date of ASU 2014-09 by one year. The updated standard will be effective for the year ending June 30, 2020. The Coalition has not yet selected a transition method and is currently evaluating the effect that the new standard will have on its financial statements.

Accounting Standards Update 2016-02, Leases (Topic 842)

In February 2016, the FASB issued ASU 2016-02, Leases (Topic 842), requiring all leases to be recognized on the Coalition's balance sheet as a right-of-use asset and a lease liability, unless the lease is a short term lease (generally a lease with a term of twelve months or less). At the commencement date of the lease, the Coalition will recognize: 1) a lease liability for Coalition's obligation to make payments under the lease agreement, measured on a discounted basis; and 2) a right-of-use asset that represents the Coalition's right to use, or control the use of, the specified asset for the lease term. Upon adopting the ASU, the Coalition will be required to recognize and measure its leases at the beginning of the earliest period presented using a modified retrospective approach.

ASU 2016-02 will be effective for the Coalition for the year ending June 30, 2021, with early adoption permitted. The Coalition is currently evaluating the effect that the new standard will have on its financial statements.

Accounting Standards Update 2016-14, Not-for-Profit Entities (Topic 958)

In August 2016, the FASB issued ASU No. 2016-14, Not-for-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities, that changes how a not-for-profit organization classifies its net assets, as well as the information it presents in the financial statements and notes about its liquidity, financial performance, and cash flows. The ASU includes a reduction in the number of net asset categories from three to two, conforming requirements on releases of capital restrictions, several new requirements related to expense presentation and disclosure (including investment expenses), and new required disclosures communicating information useful in assessing liquidity. The ASU will be effective for the Coalition for the year ending June 30, 2019. Early adoption is permitted. The Coalition is currently evaluating the effect that the new standard will have on its financial statements.

Note 14 - Subsequent Events

Management has evaluated subsequent events for recognition or disclosure in the financial statements through December 9, 2018, which was the date at which the financial statements were available to be issued.

Additional Information

The Coalition for the Homeless, Inc. Schedule of Expenditures of Federal Awards For the Year Ended June 30, 2018

Federal Grantor/Pass-Through Grantor/Program Title	Federal CFDA Number	Payments to sub-recipients	Total Federal Expenditures by CFDA Number
U.S. Department of Housing and Urban Development: CDBG - Entitlement Grants Cluster Community Development Block Grant	14.218	\$ -	\$ 80,000
Total CDBG - Entitlement Grants Cluser		-	80,000
Emergency Solutions Grant	14.231	50,669	50,669
Continuum of Care Program	14.267	2,700,266	3,320,815
Total U.S. Department of Housing and Urban Deveopment		2,750,935	3,451,484
Total Expenditures of Federal Awards		\$ 2,750,935	\$ 3,451,484

The Coalition for the Homeless, Inc. Notes to Schedule of Expenditures of Federal Awards For the Year Ended June 30, 2018

Note 1 - Basis of Presentation

The accompanying schedule of expenditures of federal awards (the Schedule) includes the federal award activity of The Coalition for the Homeless, Inc. under programs of the federal government for the year ended June 30, 2018. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of The Coalition for the Homeless, Inc., it is not intended to and does not present the financial position, changes in net assets, or cash flows of The Coalition for the Homeless, Inc.

Note 2 - Significant Accounting Policies

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

The Coalition for the Homeless, Inc. has not elected to use the 10 percent de minimis indirect cost rate as allowed under the Uniform Guidance.



Independent Auditors' Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance With Government Auditing Standards

Board of Directors
The Coalition for the Homeless, Inc.

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of The Coalition for the Homeless, Inc. which comprise the statements of financial position as of June 30, 2018 and 2017, and the related statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the financial statements and have issued our report thereon dated December 9, 2018.

Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered The Coalition for the Homeless, Inc.'s internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of The Coalition for the Homeless, Inc.'s internal control. Accordingly, we do not express an opinion on the effectiveness of The Coalition for the Homeless, Inc.'s internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether The Coalition for the Homeless, Inc.'s financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Baldwin CPAs, PLLC

Louisville, Kentucky December 9, 2018



Independent Auditors' Report on Compliance for Each Major Program and on Internal Control Over Compliance Required by the Uniform Guidance

Board of Directors
The Coalition for the Homeless, Inc.

Report on Compliance for Each Major Federal Program

We have audited The Coalition for the Homeless, Inc.'s (a not-for-profit organization) compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of The Coalition for the Homeless, Inc.'s major federal programs for the year ended June 30, 2018. The Coalition for the Homeless, Inc.'s major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with the requirements of laws, regulations, contracts and grants applicable to its federal programs.

Auditors' Responsibility

Our responsibility is to express an opinion on compliance for each of The Coalition for the Homeless, Inc.'s major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about The Coalition for the Homeless, Inc.'s compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination on The Coalition for the Homeless, Inc.'s compliance.

Opinion on Each Major Federal Program

In our opinion, The Coalition for the Homeless, Inc. complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2018.

Report on Internal Control over Compliance

Management of The Coalition for the Homeless, Inc. is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered The Coalition for the Homeless, Inc.'s internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of The Coalition for the Homeless, Inc.'s internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Baldwin CPAs, PLLC

Louisville, Kentucky December 9, 2018

The Coalition for the Homeless, Inc. Schedule of Findings and Questioned Costs For the Year Ended June 30, 2018

Summary of auditors' results:

- 1. The auditors' report expresses an unmodified opinion on whether the financial statements of The Coalition for the Homeless, Inc. were prepared in accordance with generally accepted accounting principles.
- 2. No significant deficiencies relating to the audit of the financial statements are reported in the internal control report. No material weaknesses are reported.
- 3. No instances of noncompliance material to the financial statements of The Coalition for the Homeless, Inc. which would be required to be reported on *Government Auditing Standards* were disclosed during the audit.
- 4. No significant deficiencies in internal control over major federal award programs were disclosed during the audit. No material weaknesses are reported.
- 5. The auditors' report on compliance for the major federal awards programs for The Coalition for the Homeless, Inc. expresses an unmodified opinion on all major federal programs.
- 6. There are no audit findings to be reported in accordance with 2 CFR 200.516(a).
- 7. Programs tested as major programs included:

Development of Housing and Urban Development Continuum of Care Program

CFDA #14,267 \$ 3,320,815

- 8. The dollar threshold to distinguish between Type A and Type B programs is \$750,000.
- 9. The Coalition for the Homeless, Inc. was determined to be a low-risk auditee.

Findings - financial statement audit: None

Findings and questioned costs - major federal award programs audit: None

THE COALITION FOR THE HOMELESS, INC.

General Information

Organization Number 0215424

Name THE COALITION FOR THE HOMELESS, INC.

Profit or Non-Profit N - Non-profit

Company Type KCO - Kentucky Corporation

Status A - Active
Standing G - Good
State KY

 File Date
 5/22/1986

 Organization Date
 5/22/1986

 Last Annual Report
 2/5/2019

Principal Office 1300 SO. FOURTH ST., SUITE 250

LOUISVILLE, KY 40203

Registered Agent NATALIE HARRIS

1300 SOUTH 4TH STREET, SUITE 250

LOUISVILLE, KY 40208

Current Officers

Chairman Sheila Etchen CEO **Natalie Harris** Vice Chairman Vaughn Payne Secretary **Andy Patterson Treasurer** Caroline Heine Director Sheila Etchen **Director** Vaughn Payne **Director** Caroline Heine **Director Andy Patterson** Director Natalie Harris Director Jennifer Baldwin **CFO** Jennifer Baldwin

Individuals / Entities listed at time of formation

DirectorLARRY OTTODirectorJIM GILMOREDirectorTERESA WATSONDirectorREV MIKE ELLIOTTDirectorBLANCHE COOPER

Incorporator LARRY OTTO Incorporator JIM GILMORE

Incorporator ALPHONSO O'NEIL WHITE

Images available online

images or PDF documents. Documents filed prior to September 15, 2004 will become available as the images are created.

"	FDF documents, Documents filed prior	to september	15, 2004 WIII Deco	ime avallable as	tne images	are crea
	Annual Report Amendment	3/11/2019	1	page	<u>PDF</u>	
	Annual Report	2/5/2019	1	page	<u>PDF</u>	
	Annual Report	1/17/2018	1	page	PDF	
	Annual Report	2/8/2017	1	page	<u>PDF</u>	
	Annual Report	2/9/2016	1	page	<u>PDF</u>	
	Annual Report	2/6/2015	1	page	PDF	
	Annual Report	1/27/2014	1	page	<u>PDF</u>	
	Annual Report	1/11/2013	1	page	<u>PDF</u>	
	Principal Office Address	1/11/2012	12:32:24 1	page	<u>PDF</u>	
	<u>Change</u>	PM		_		
	Annual Report	1/11/2012		page	<u>PDF</u>	
	Registered Agent name/address change	1/25/2011 PM	12:02:01	page	<u>PDF</u>	
	Annual Report	1/25/2011	1	page	PDF	
	Annual Report	1/21/2010			PDF	
	Annual Report	3/30/2009			PDF	
	Annual Report	8/11/2008			PDF	
	Annual Report	2/20/2007			tiff	<u>PDF</u>
	Annual Report	1/31/2006		-	PDF	
	Annual Report	2/11/2005			<u>PDF</u>	
	Annual Report	8/25/2003			 tiff	PDF
	Annual Report	7/2/2002			 tiff	PDF
	Annual Report	8/15/2001		-	 tiff	PDF
	Annual Report	7/6/2000		- -	 tiff	PDF
	Annual Report	8/17/1999	5		tiff	PDF
	Statement of Change	7/21/1999		· -	tiff	PDF
	<u>Letters</u>	1/28/1999	1	page	tiff	PDF
	Annual Report	9/2/1998	5	pages	tiff	PDF
	Statement of Change	7/3/1997	1	page	<u>tiff</u>	PDF
	<u>Annual Report</u>	7/1/1997	3	pages	<u>tiff</u>	PDF
	<u>Annual Report</u>	7/1/1996	3	pages	<u>tiff</u>	PDF
	<u>Annual Report</u>	7/1/1995	2	pages	tiff	<u>PDF</u>
	Statement of Change	5/26/1994	1	page	<u>tiff</u>	<u>PDF</u>
	<u>Annual Report</u>	4/20/1994	1	page	<u>tiff</u>	<u>PDF</u>
	<u>Annual Report</u>	4/5/1993	1	page	tiff	<u>PDF</u>
	<u>Annual Report</u>	3/25/1992	1	page	<u>tiff</u>	<u>PDF</u>
	Statement of Change	3/16/1992	1	page	tiff	<u>PDF</u>
	Annual Report	7/1/1991	2	pages	<u>tiff</u>	<u>PDF</u>
	<u>Annual Report</u>	7/1/1990	3	pages	tiff	PDF
	Annual Report	7/1/1989	2	pages	<u>tiff</u>	<u>PDF</u>
	Articles of Incorporation	5/22/1986	7	pages	<u>tiff</u>	<u>PDF</u>
	Articles of Incorporation	5/22/1986	7	pages	tiff	<u>PDF</u>

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced

1/2010	TOOOTHO TO LO	Studen Olganization O
Amendment to annual report	3/11/2019 10:55:11 AM	3/11/2019 10:55:11 AM
Annual report	2/5/2019 2:05:46 PM	2/5/2019 2:05:46 PM
Annual report	1/17/2018 2:10:31 PM	1/17/2018 2:10:31 PM
Annual report	2/8/2017 2:40:08 PM	2/8/2017 2:40:08 PM
Annual report	2/9/2016 12:04:13 PM	2/9/2016 12:04:13 PM
Annual report	2/6/2015 1:44:44 PM	2/6/2015 1:44:44 PM
Annual report	1/27/2014 2:59:52 PM	1/27/2014 2:59:52 PM
Annual report	1/11/2013 12:34:01 PM	1/11/2013 12:34:01 PM
Annual report	1/11/2012 12:40:16 PM	1/11/2012 12:40:16 PM
Principal office change	1/11/2012 12:32:24 PM	1/11/2012 12:32:24 PM
Registered agent address change	1/25/2011 12:02:01 PM	1/25/2011 12:02:01 PM
Annual report	1/25/2011 11:58:11 AM	1/25/2011 11:58:11 AM
Annual report	1/21/2010 2:56:23 PM	1/21/2010 2:56:23 PM
Annual report	3/30/2009 9:46:38 AM	3/30/2009 9:46:38 AM
Annual report	8/11/2008 12:00:58 PM	8/11/2008 12:00:58 PM
Annual report	2/20/2007 7:34:13 AM	2/20/2007
Annual report	1/31/2006 12:03:34 PM	1/31/2006 12:03:34 PM
Annual report	2/11/2005	2/11/2005
Annual report	6/1/2004	6/1/2004
Registered agent address change	•	7/21/1999
Principal office change	2/1/1999	2/1/1999
Annual report	7/3/1997	7/3/1997
Registered agent address change	7/3/1997	7/3/1997

Microfilmed Images

Microfilm images are not available online. They can be ordered by faxing a <u>Request For Corporate Documents</u> to the Corporate Records Branch at 502-564-5687.

Annual Report	12/31/2004 2:06:18 PM	1 page
Annual Report	8/25/2003	1 page
Annual Report	7/2/2002	1 page
Annual Report	8/15/2001	1 page
Annual Report	7/6/2000	4 pages

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