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

Applicant/Program: The Coalition for the Homeless/Project Stand Down Applicant Requested Amount: \$11,000 Appropriation Request Amount: \$10,000 \$10,250 \$11,000

Executive Summary of Request

The Coalition for the Homeless will be holding it's Annual Project Stand Down on October 7, 2020. Since we are experiencing the Covid-19 virus, the event will be held in a different way. The items for the homeless will be taken to local shelters instead of having the homeless come to one spot. Items will include backpacks, socks, and materials about benefits and health screenings. A coat drive will also be held and winter items will be distributed at this time.

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

24 District # Madouna Flood Primary Sponsor Signature \$1,000 Amount 7/22/2020 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.

N/A

Approved by:

Appropriations Committee Chairman

Final Appropriations Amount:

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Applicant/Program:

The Coalition for the Homeless/Project Stand Down

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

N/A

Council Member Signature and Amount

District 1 Jussica Grun	\$\$
District 2 3 m bh	\$\$
District 3	\$\$
District 4 <u>Barbara Septon Smith</u>	500 \$
District 5	\$
District 6 David James	250
District 7 (bl.M.C.S	\$
District 8 Brandon Coan	\$\$
District 9 Bill Hollander	\$\$
District 10 Pat Muluiluil	\$\$
District 11	\$\$
District 12 Red Bland	\$1000 \$
District 13 Mark H. Fox	500.00 \$
District 14 (indi Fowler	\$
District 15 Kun Tran	\$

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Applicant/Program:

The Coalition for the Homeless/Project Stand Down

Additional Disclosure and Signatures

Printer and the second s	Adultional Disclosure	
List below	al Council Office Disclosure any personal or business relationship you, your n, its volunteers, its employees or members of i	family or your legislative assistant have with this its board of directors.
NA		
District 16		\$
District 17		\$
District 18		\$
District 19	1Bhg	\$
District 20	Stuart Bunson	\$
District 21	Ncole A. George	\$
District 22		\$
District 23	James Peden	250 \$

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NEIGHBORHOOD DEVELOPMENT FUND APPLICATION	
Legal Name of Applicant Organization The Coalition for the Homeless	
Program Name and Request Amount Project Stand Down/\$11,000	
	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	Yes
Is the funding proposed by Council Member(s) less than or equal to the request amount?	Yes
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? 	Y
Is the current Fiscal Year Budget included?	Yes
Is the entity's board member list (with term length/term limits) included?	Yes
Is recommended funding less than 33% of total agency operating budget?	Yes
Does the application budget reflect only the revenue and expenses of the project/program?	Yes
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	N/A
Is the most recent annual audit (if required by organization) included?	Yes
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?	N/A
Prepared by: Andrea Derouen Date: 07/22/2020	

LOUISVILLE METRO COUNCIL	NEIGHBORHOOD	DEVELOPMENT E	ΙΙΝΟ ΔΡΡΙΙCΑΤΙΟΝ

	SECTION 1 - APPLI	CANT INFORMATIO	N
Legal Name of Appli	cant Organization:	the Homeless, Inc	
(as listed on: <u>http://www</u>	.sos.ky.gov/business/records		
	Mailing Address: 1300 S. Fourth S	treet Suite 250, Lo	uisville, KY 40208
Website: www.louh	omeless.org		
Applicant Contact:	Natalie Harris	Title:	Executive Director
Phone:	502-363-9550 ext. 1212	Email:	nharris@louhomeless.org
Financial Contact:	Marsha Bailey	Title:	Housing Manager and Office Man
Phone:	502-636-9550 ext. 1206	Email:	mbailey@louhomeless.org
Organization's Repre	esentative who attended NDF Train	ing: Natalie Harris	
GEO	GRAPHICAL AREA(S) WHERE PROGE	RAM ACTIVITIES A	RE (WILL BE) PROVIDED
Program Facility Loc	ation(s): 1300 S. Fourth Street, Su	ite 250 Louisville,	KY 40208
Council District(s):	Serve all Jefferson Count	ty Zip Code(s):	Serve all of Jefferson County
	SECTION 2 – PROGRAM REQUE	ST & FINANCIAL I	NFORMATION
PROGRAM/PROJECT	NAME:Ending Veteran, Youth and C	Chronic Homeless	ness
Total Request: (\$)	11,000 Total Metro Av	ward (this progran	n) in previous year: (\$) 15,000
Purpose of Request	(check all that apply):		
	Funds (generally cannot exceed 33%	u .	
	ing/services/events for direct benefi		
Capital Pro	ject of the organization (equipment,	furnishing, buildir	ng, etc)
The Following are Re	equired Attachments:		
IRS Exempt Status D	etermination Letter	Signed lease if r	ent costs are being requested
Current year project	ed budget	IRS Form W9	
Current financial sta			is if used in the proposed program
Most recent IRS Form			required by organization)
	ition (current & signed)	Faith Based Org	anization Certification Form, if applicable
Cost estimates from capital expense	proposed vendor if request is for		
Government for this	I year ending June 30, list all funds a or any other program or expense, in t or Metro Council Appropriation (N	cluding funds rece	ived through Metro Federal Grants,
Source:	Community Development Block 😭	Amount: (\$)	137,300
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant cor	ntacted the BBB Charity Review for p		Yes No
	et the BBB Charity Review Standards	· •	L

Applicant's Initials

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 6,986 homeless persons served in Louisville last year was our neighbor and someone's child, parent, brother, or sister. Over 1,500 were under the age of 24, 726 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 number of homeless young adults of Louisville in half and helped Louisville become one of a handful of cities that has reached "functional zero" in addressing veteran homelessness.

Things have changed greatly for everyone since the COVID-19 pandemic. Some things have gotten better including more telehealth and greatesr access to public housing vouchers and hotels paid for through local foundations and the Community Services Block Grant. But, other services like day shelter and access to rest rooms and other services during the day have become much more difficult. Therefore, to maintain safety, but still get resources to the homeless, we will be conducting a modified Stand Down in 2020 and working hard to advocate for the best use of COVID-19 resources in order to address and prevent homelessness.

"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.

Applicant's Initial

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF		
Board Member	Term End Date	
Sheila Etchen, Past Chair	December 2020	
Vaughn Payne, Vice Chair	December 2019	
Caroline Heine, Treasurer	December 2020	
Maria Schaefer, Vice Chair	December 2020	
Andy Patterson, Secretary	December 2019	
Adria Johnson	December 2022	
Mark McWane	December 2021	
Kyle Elmore	December 2022	
Kathy Beach	December 2021	
Tameka Laird	December 2022	
Laurie Beth Baird	December 2021	
Carla Sturgeon	December 2021	
Tom Walton	December 2021	
Гатаra Reif	December 2021	
Jason Warrier (Dec 2020) Kristen Jordan (Dec 2021) Tabitha Underwood (De 2021)		
Wood McGraw (Dec 2020) Robert Byers (Dec 2020) Lonnie Williams (Dec 2022)		
Andrea Aikin (2020)		

Describe the Board term limit policy:

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	93,000
Mary Frances Schafer	65,370
Brandi Scott	63,392

Applicant's Init

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. In most years, over 50 local service agencies have booths at the Stand Down/Project Homeless Connect site of Salvation Army on Brook Street. This year, after great discussion with the VA and other partners, we have agreed to have the annual Stand Down on October 7, 2020, but to make great changes in how we coordinate the event. We will collect a number of homeless adults at each shelter and outreach location prior to the event. We will also work with our partner, the Louisville Apartment Association to collect as many of the items as we need to create a backpack with resources for each person and deliver to the locations. We will also provide materials in each bag with information about free medical services, housing and other resources. Additionally, we will work with partner, Salvation Army to host a community-wide coat collection and pick up of additional back packs and coats at the Brook Street Salvation Army location on October 7, 2020 for anyone not included in the lists provided by shelter and outreach. We anticipate serving more clients than in years past due to the delivery system at approximately 750. Lastly, we will be working with all the shelter partners to continue providing assistance through the Rx: Housing Program for deposits and furniture so that clients can move into housing. This assistance can be provided remotely through an on-line application.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s): Stand Down 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. Stand Down/Project Homeless Connect will take place on October 7, 2020. During that day, volunteers will deliver backpacks with resources to all local shelters and outreach teams for distribution. Additionally, any others will be invited to the Salvation Army Male High School campus on Brook Street for a coat drive or to get a packpack if they missed requesting one. Any left over coats will be distributed from Salvation Army to the shelters as needed through the winter. Finally, to insure people can still move quickly from shelter to housing, funds will be provided on-line for deposits and furniture as part of the Rx: Housing Program.

Costs for Stand Down will include reader glasses, socks, sundry items, sleeping bags, rental deposits, furniture for new housing, and staff time to plan, prepare backpacks and deliver supplies. The project planning has begun and items must be purchased prior to the October 7th 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.

Applicant's Initials

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<u><u><u></u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u></u>	f this request is a fundraiser, please detail how the proceeds will be spent:
N/A	
D: F	For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date
	ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for
func	ds to be spent before the grant award period, identify the applicable circumstances:
here and the second	The funding request is a reimbursement of the following expenditures that will probably be incurred after the
	 application date, but prior to the execution of the grant agreement: ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this
	application.
	The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the
	grant agreement.
May	be necessary if grant agreement is not ready to expend funds for events.
П	Reimbursements should not be made before application date unless an emergency can be demonstrated
	by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach
	invoices or proof of payment):
	✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
	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.

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Applicant's Initials

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 750 persons on October 7, 2020. All served will be homeless. Services include backpacks with resources and information for those in shelter, backpacks and sleeping bags for those on the streets, winter coats for both groups that will continue to be distributed through the winter and deposits and furniture for anyone ready to move into housing without these resources. We believe this opportunity to serve so many people on one day will achieve: 1) more information about resources to get persons who are homeless into housing, 2) insurance that all homeless persons can access a warm winter coat for safety, and 4) shortened lengths of time homeless for those ready to move in but who need a deposit or furniture.

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 and partners will house at least 150 chronically homeless, 100 homeless young adults and 250 homeless veterans by the end of the year from coordination of Rx: Housing and local housing resources. 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) persons sheltered, 2) persons housed, 3) employment and other income, and 4) returns to homelessness.

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.

Applicant's Initials

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	3,500.00	5,000	8,500.00
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (See Detailed List on Page 8)	7,500	\$26,500	\$34,000
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (See Detailed List on Page 8)			
J: Machinery & Equipment			
K: Capital Project			
L: Other Expenses (See Detailed List on Page 8)			
*TOTAL PROGRAM/PROJECT FUNDS	\$11,000	\$31,500.00	42,500
	25.8 %	74.2 %	100%

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

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	\$31,500
Fees Collected from Program Participants	
Other (please specify)	
na 12 – juga Sarah Francis Ingera da 187	\$31,500

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

**Must equal or exceed total in column 2.

Applicant's Initia

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
Backpacks	1,000	500	1,500
Sleeping Bags/Blankets	800	0	800
Reader Glasses	200	0	200
Socks	0	500	500
Rental Deposits	2,000	15,000	17,000
Furniture	2,500	10,000	12,500
Sundry Items	200	500	700
Shirts	500	0	500
Non-perishable Snacks	300	0	300
		· · · · · · · · · · · · · · · · · · ·	
	-		
			-
Total	7,500	26,500	34,000

Applicant's Init

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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	\$5,000	25 x 20 hours x \$10
Louisville Apt. Assoc. and others client assist.	\$18,000	value of last year's donations
Coat donations	\$30,000	value of last year's donations
<i>Total Value of In-Kind</i> (to match Program Budget Line Item. Volunteer Contribution &Other In Kind)	\$53,000	

* 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, 2020

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

If YES, please explain:

Applicant's Initials

SECTION 7 – CERTIFICATIONS & ASSURANCES

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

Standard Assurances

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

Standard Certifications

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

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

Tameka Laird, Office of Resilience and Community Services 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.

Signatur	e of Legal Signatory:	11 a bas	let	A r	Date:	06/15/20
Legal Sig	natory: (please print): Nat	alie Harris			Title:	Executive Director
Phone:	502-636-9550	Extension:	1212	Email:	nharris@louh	omeless.org

Applicant's Initi

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

THE COALITION FOR THE HOMELESS INC.

LOUISVILLE, KY 40204-0462

Date: JAN 1 5 1991

PO BOX 4462

Employer Identification Number: 61-1118307 Contact Person: DOTTIE DOWNING Contact Telephone Number: (513) 684-3578 Our Letter Dated: July 2, 1987 Addendem Applies:

No

Dear 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

	REVENUE	2020-21	2019-20	den al antario	COMMU	INITY COORDI	NATION				HOUSING	and the second second				DEVELO	PMENT	TOTAL
1000							Stand Down/											
(Relation				CoC/HPPP	HMIB/BPE	Prevention/ Diversion	WF/Street Tips	TARC/ Advocacy	CH2	LASH	тнуа	внсн	PSHCH	PSHYA	RX Housing	Bingo	General	
ľ	RESTRICTED				Minimalor Car	Offersion	CIP-	(urodud)	Margari Mi 14 Margari	μ αση τ	106	onon	and other way	FOIL P	THE THE	Dingo	and or the factor	Martin D. P. Low
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	State Advocacy 1	8,000.00	2000/00/00/00/00/00/00/00/00/00/00/00/00					\$ 8,000.00	Contraction of the									\$ 8,000.00
	HMIS 1	3 -	\$ -		s -			• 0.000.00										\$
	iomeless Prev. Proj. († 1	7,719.00	\$ 7,719.00	\$ 7,719.00				And the South of Party of State			and the second	1			and the second second	Canada Contra Contractor		\$ 7,719.00
		000 ETZ 00	\$ 209,577.00	and the second s	\$ 209,577.00		THE COMPLEX		0.0000000000000000000000000000000000000	20020000000	Talansian sea		180.000000000			01040-010503		\$ 209,577.00
	HMIS I, II, III and IV S CoC Planning S	209,577.00 288,970.00	\$ 292,291.00	\$ 288,970.00	\$ 209,577.00	+												\$ 258,970.00
	Prevention/Diversion	120,187.00	\$ 82,500.00			\$ 120,187.00												\$ 120,187.00
	SHP CFH Admin	126,697.00	\$ 126,697.00						\$31,618.00	\$28,794.00	\$7,077.00	\$13,602.00	\$18,786.00	\$6,543.00	\$20,277.00			\$ 126,697.00
4524 4525	SHP CFH Operations SHP CFH Leasing Sala	\$ 58,550.00	\$ 22,950.00 \$ 66,500.00						\$10,000.00	\$9,000.00		\$550.00	\$15,000.00	\$9,000.00	\$15,000.00			\$ - \$ 58,550,00
4526	SHP CFH Services		\$ 2,000.00															\$
	HUD Pass Thru Leasin	\$ 2,128,652.00	\$ 1,991,392.00						\$511,785.00		\$135,408.00	\$252,243.00			\$275,162.00			\$2,128,852.00
	HUD Pass Thru Operat HUD Pass Thru Servic	\$ 141,984.00 \$ 607,910.00	\$ 123,965.00 \$ 593,487.00	}			+			\$39,285.00 \$124,602.00	\$14,336.00 \$66,706.00		\$11,701.00	\$9,557.00 \$43,708.00	\$21,290.00 \$113,600.00			\$141,984.00 \$607,910.00
	HUD Pass Thru HMIS	\$ 1,500.00	\$ 1,500.00									\$1,500.00						\$ 1,500.00
4536	HUD Pass Thru Admin	\$ 126,703.00	\$ 126,703.00						\$31,619.00	\$28,795.00	\$7,078.00		\$18,787.00	\$6,544.00	\$20,278.00	1993	No. Concerning	\$126,703.00
	Metro United Way	10.000.00	E 11000.00	L 10.000.00			1							-				\$ 10,000.00
4820	CoC City	\$ 10,000.00	\$ 14,382.00	\$ 10,000.00			1 DEPENDENT	Consultation of the	and the second second	and the second		SCHOOL	State of the	1993000000000000		-		\$ 10,000.00;
	NDF	\$ 10,000.00	\$ 16,000.00			10033033021021002	\$ 10,000.00						and support of the sec		energi benerin yang di badar	ALL STREET STATUTES (1995)	NAMES OF COMPANY STREET, STREE	\$ 10,000.00
	CDBG White Flag	\$ 32,000.00	\$ 32,000.00				\$ 32,000.00		1	1				L				\$ 32,000.00
	CDBG CoC	\$ 45,000.00 \$ 35,000.00	\$ 70,200.00	\$ 45,000.00	8 25 000 00	+						1						\$ 45,000.00
	CDBG HMIS/SPE Other Contracts & Gra	\$ 35,000.00 nts	\$ 35,000,00	19935 SUCSER	\$ 35,000.00	Canada a serie	Contractions	100 100 100 100 100 100 100 100 100 100	-	(States and the	01020300000		GRANT PERMIT			Generation (News	STATISTICS.	\$ 35,000.00
ľ	Street Tips	\$	\$ 500.00				S -			1,100(1274),1870(30)		CANNER COME AND STOCK						-\$ -
	TARC Tickets	\$ 708,250.00	\$ 430,000.00					\$ 708,250.00		No. Autor instant								\$ 708,250.00
	Subtotal	\$ 4,666,699.00	\$ 4,245,363,00	\$ 351,689.00	\$ 244,577.00	\$ 120,187.00	\$ 42,000.00	\$716,250,00	\$ 737,847.00	\$ 661,830.00	\$ 230,605.00	\$ 345,992.00	\$ 538,390.00	\$ 211,725,00	\$.465,607.00			\$ 4,666,699,00
	UNRESTRICTED			Contraction of the second		N CARGON AND AND		A STATE OF A					C. COMPANY STREET, STRE	Sector Sector And	And a second second second			
13330	Donations - Foundation	\$ 233,300.00	\$ 45,000.00	\$ 107,500.00		+		\$ 76,300.00	1				1				\$ 49,500.00	\$ 233,300.00
13310	Donations - Sponsorsh	\$ 15,000.00	\$ 15,000.00				1										\$ 15,000.00	\$ 16,000.00
	Donations - Individuals													<u> </u>				\$ 155,100,00
13490 15010	Donations - Religious Interest	\$ 5,000.00 \$ 100.00	\$ 5,000.00 \$ 100.00					+		+						l	\$ 5,000.00 \$ 100,00	
5030	Investments	\$ 5,000.00					1										\$ 5,000.00	
46410	Bingo Income	\$ 200,000.00											1			\$ 200,000.00		\$ 200,000.00
46430	Misc Income	<u>s</u> -	\$ -													ļ		\$ -
47230 47240	Membership Dues HMIS Membership Fee	\$ 30,000.00 \$ 36,000.00			\$ 36,000.00	;+				+			<u> </u>		<u> </u>	<u> </u>	\$ 30,000.00	\$ 30,000,00
49010	Give a Jam Income	\$ 15,000.00				·											\$ 15,000.00	
49020	Other Fundraiser Incom	\$ 80,000,00	\$ 88,000.00														\$ 80,000.00	\$ 80,000.00
	Subtotal	\$ 774,500.00		\$ 107,500.00		3	3	3	\$	1	5	1	-		1.5 ····	\$ 200,000.00.	\$ 354,700.00	\$ 774,500.00
	TOTAL	\$ 5,441,199.00	\$ 4,977,963.00	\$ 409,189.00		UNITY COORL		1 \$ /16,260.00	3 37,847.00	SHP. GRANT	1 \$ 230,805.00	1 2 081,884.00	1 #0#0#0#	1 \$ 211,725.00	\$ 465,807.00		OPMENT	\$ 5,441,199.00 TOTAL
	EXPENSES	19-20	18-19	CoC/HPPP		Prev/Diversi		e ARC/Advoca	ic CH2	LASH	THYA	SHCH	PSHCH	РНУА	Advocacy	Bingo	General	
													· · · · · ·	_				1 States States
	Business Expenses	\$ 300.00	\$ 850.00		\$ 300.00					+			+	+		 	1	\$ 300.00
60901 60910	Hiring Expenses Annual Mtgs and Ev	\$ 300.00				<u> </u>		\$ 2,500.00	5	1	†	+	+	+	+	1	- ·	\$ 300.00
60920	Board/Planning Exp												1				\$ 2,200.00	
60930	Bank Service Charg	s -	s -	+	-						-						\$	\$ -
60935 60961	Bingo Service Charg	\$ 75.00 \$ 36,000.00			+					+	+	+		+	+	\$ 75.00	\$ 36,000.00	\$ 75.00
60961 60962	Event Expenses Ger Event Expenses Rx	\$ 6,500,00						+		+	+	+		+	+	1	\$ 6,500.00	
60975	Bingo Permits	\$ 450.00								1						\$ 350.00		
	Contract Categories																	
62110 62120	Accounting Services Audit	\$ 840.00 \$ 16,800.00			0 \$ 1,080.0	0 \$ 360.0	n	+	\$ 11,160.0	+	+	+			+	-h	\$ 840.00	
62120	Web Hosting	\$ 1,800.00			\$ 1,800.0		×		· · · · · · · · · · · · · · · · · · ·								× 2,040.00	\$ 1,800.00
62170	Web Management/W	\$ 860.00	\$ 3,000.00	0													\$ 860.00	\$ 860.00
62180	Contract Services T			0 \$ 5,000.0	0	-	<u> </u>				+	_			1	- 		\$ 5,000,00
62180	Contract Services A Contract Services D			0	-+			\$ 2,500.0	<u>v</u>	+		+		+	+	+	\$ 2,500.00	
62180	Contract Security S	\$ 1,560.00	\$.													1	\$ 1,560.00	
	Contract Services G	\$ 500,00	\$ 500.00														\$ 500.00	\$ 500.00
62190	Payroll Services	\$ 2,600.00	\$ 2,600.00									+			+	t 0.005.00	\$ 2,600.0	
62825	Bingo Security Facilities Categories	\$ 2,025.00	\$ 4,000.0	` †			-	-		-	+		1	+	+	\$ 2,025.00	+	\$ 2,025.00
62850	Janitorial Services	\$ 1,200.00															\$ 1,200,0	
62870	Property and Liabili					0 \$ 62.0			\$ 1,922.0								\$ 713.0	
	Rent	\$ 137,616.00			0 \$ 75,689.0	0 \$ 16,514.0	0		\$ 13,762.0	0		-			+	-	\$ 13,761.0	\$ 137,616.00 \$ 62,660.00
62890			e 93 200 0		1													
	Bingo Rent	\$ 52,650.00			\$ 62,400.0	20					+					\$ 52,650.00		\$ 52,650.00 \$ 52,400.00

. r																			
	Operations Categorie																		
65010	Books and Referenc			00.00														\$ 100.00	\$ 100.00
65020	Postage	\$ 2,600.00		500.00	\$ 300.00					\$ 300.00								\$ 1,400.00	\$ 2,600,00
65032	Copier	\$ 3,697.00		500,00	\$ 480.00	\$ 2,033.00	\$ 444.00			\$ 370.00								\$ 370.00	
65035	Printing	\$ 5,000.00		00.00					\$ 1,500.00									\$ 3,500.00	
65038	Street Tips Printing/	\$ 3,000.00	\$ 8,5	500.00				\$ 3,000.00											\$ 3,000.00
5031	Bingo Printing	\$ -	5	-													\$ -		\$ -
55045	Bingo Supplies	\$ 43,500.00	\$ 87,0	00.00													\$ 43,500.00		\$ 43,500.00
65040	Office Supplies	\$ 14,000.00	\$ 9,0	00.00	\$ 1,820.00	\$ 7,700.00	\$ 280.00			\$ 1,400.D0								\$ 2,800.00	\$ 14,000.00
5051	Telephone	\$ 8,500.00	\$ 10,0	00.00	\$ 1,105.00	\$ 4,675.00	\$ 1,020.00			\$ 850.00								\$ 850.00	\$ 8,500.00
91 - F	Furniture and Upgra	des	\$ 5,0	00.00		\$ -													\$.
i052	Language Line Expe	\$ 500.00	\$ 5	500.00		\$ 500.00													\$ 500,00
055	InterNet Costs		\$ 2,0	00.00															s .
	Membership Dues	\$ 1,700.00		700.00														\$ 1,700.00	
	Other Expense Categ		1																
	in the second se	s .	5	. 1			1										s .		\$.
	Bingo Taxes	\$ 11.942.00	\$ 23.8	385.00			1										\$ 11,942,00		\$ 11,942.00
zoľ	D&O Insurance	\$ 2,300.00		00.00						\$ 1,000.00							•	\$ 1,300.00	
	Pavroll Categories	÷ 2,000.00	1 2,0				t											·	- A,000.00
	Health Insurance and	\$ 156,401.00	\$ 101,5		12 850 00	\$ 24,414.00	1 21 609 00		\$ 1 495 00	\$ 28,713.00								\$ 37,322.00	\$ 156,401.00
660 660	Salaries	\$ 944,475.00		330.00		\$ 162,637.00				\$ 166,619.00								\$ 237,629.00	
9-1		\$ 944,475.00		520.00	a 244,310.00	a 102,037.00	a 121,/90.00		011,404.00	\$ 100,019.00							\$ 6,100.00	≱ ∠31,029.00	
30	Bingo Salaries																\$ 6,100.00		\$ 6,100.00
	Retirement Funds	in benefits		463.50			L												\$.
Y	Life/Disability insura	in benefits		125.00			L												\$ -
50	Payroll Tax	in salary		salary															\$ -
5	Employer Payroli Ta			327.00	\$ 22,021.00	\$ 14,349.00	\$ 11,481.00		\$ 882.00	\$ 15,503.00								\$ 20,874.00	
B	Bingo Payroli Tax	\$ 540.00		309.00													\$ 540.00		\$ 540.00
50	Worker's Comp	\$ 1,000.00		500.00														\$ 1,000.00	\$ 1,000.00
5	AmeriCorps		\$ 13,5	500.00	\$ -														s -
1	Program Expense Ca	tegories																	
ſ	Website/Marketing E																	\$ 3,000.00	\$ 3,000.00
2	White Flag and Shell	\$ 32,000.00	\$ 32,0	00.00				\$ 32,000.00											\$ 32,000.00
0[TARC Tickets	\$ 656,800.00	\$ 460,0	00.00					\$ 656,800.00										\$ 656,800.00
10	Stand Down Expens	\$ 7,000.00	\$ 6,0	00.00				\$ 7,000.00											\$ 7,000.00
o	Community Education	\$ 500.00	5	-					\$ 500.00										\$ 500.00
ol	Rx: Houlsng Depost		\$ 20,0	00.00														\$ 25,000.00	\$ 25,000.00
j, J	Prev/Div Fund			000.00															\$ _
÷1	HUD Pass Thru Cated	ories	1																-
670	HUD Pass Thru Lea		\$ 1,991,3	392.00						\$511,785.00	\$431,354.00	\$135,408.00	\$252,243.00	\$386.327.00	\$136,373.00	\$275,162.00			\$ 2,128,652.00
670				965.00			1			\$38,078.00	\$39,295.00	\$14,336.00	\$7,737.00	\$11,701.00		\$21,280.00			\$ 141,984.00
- 1	HUD Pass Thru Serv			487.00			1		1	\$114,747.00	\$124,602.00	\$66,706.00	\$56,758,00	\$87,789,00		\$113,600.00			\$ 607,910.00
7084				500.00			1		1		÷.24,002.00	400,700,00	\$1,500.00	407,703,00	\$40,100.00	\$115,000.00			\$ 1,500,00
7084	WIID Dage They Like		, → 1,0				1	1	-	\$31,619.00	\$28,795.00	\$7,078.00	\$13,602.00	\$18,787.00	\$6,544.00	\$20,278.00			\$ 126,703.00
7085	HUD Pass Thru HMI		6 400						1	\$31,619.00	\$20,795.00	\$1,078.00	\$13,002.00	\$10,787.00	\$5,544.00	\$20,278.00			\$ 128,703.00
	HUD Pass Thru Adm	\$ 126,703.00	\$ 126,	703.00										1				1	the second state of the se
)85)81	HUD Pass Thru Adm Staff Support Catego	\$ 126,703.00 ries																	
085 081 10	HUD Pass Thru Adm Staff Support Catego Conferences	\$ 126,703.00 ries \$ 11,000.00	\$ 18,0	000.00	\$ 7,000.00					\$ 1,000.00								\$ 1,000.00	
085 081 310	HUD Pass Thru Adm Staff Support Catego Conferences Monthly Travel	\$ 126,703.00 ries \$ 11,000.00 \$ 10,000.00	\$ 18,0 \$ 5,1	000.00 500.00	\$ 2,500.00				\$ 2,500.00	\$ 1,000.00 \$ 2,000.00								\$ 1,000.00 \$ 2,000.00	\$ 10,000.00
85 81 10 20	HUD Pass Thru Adır Staff Support Catego Conferences Monthly Travel Per Diems and Exp.	\$ 126,703.00 ries \$ 11,000.00 \$ 10,000.00 \$ 25,000.00	\$ 18,0 \$ 5, \$ 25,0	000.00 500.00 000.00					\$ 2,500.00			· · · · · · · · · · · · · · · · · · ·						\$ 2,000.00	\$ 10,000.00 \$ 25,000.00
85 81 10 20	HUD Pass Thru Adır Staff Support Catego Conferences Monthly Travel Per Diems and Exp.	\$ 126,703.00 ries \$ 11,000.00 \$ 10,000.00 \$ 25,000.00 \$ 10,000.00	\$ 18,0 \$ 5,1 \$ 25,1 \$ 5,1	000.00 500.00 000.00 000.00	\$ 2,500.00				\$ 2,500.00			······································							\$ 10,000.00 \$ 25,000.00 \$ 10,000.00
085 081 310 320	HUD Pass Thru Adır Staff Support Catego Conferences Monthly Travel Per Diems and Exp Staff and Board Trai Reserve	\$ 126,703.00 ries \$ 11,000.00 \$ 10,000.00 \$ 25,000.00	\$ 18,0 \$ 5,1 \$ 25,1 \$ 5,1 \$ 15,1	000.00 500.00 000.00 000.00 000.00	\$ 2,500.00 \$ 25,000.00	\$ 500.00	\$ 500.00			\$ 2,000.00								\$ 2,000.00 \$ 10,000.00 \$ 15,000.00	\$ 10,000.00 \$ 25,000.00 \$ 10,000.00 \$ 15,000.00
085	HUD Pass Thru Adır Staff Support Catego Conferences Monthly Travel Per Diems and Exp Staff and Board Trai	\$ 126,703.00 ries \$ 11,000.00 \$ 10,000.00 \$ 25,000.00 \$ 10,000.00	\$ 18,0 \$ 5,1 \$ 25,1 \$ 5,1 \$ 15,1	000.00 500.00 000.00 000.00 000.00 239.84	\$ 2,500.00 \$ 25,000.00 \$ 373,488.00	\$ 500.00 \$ 360,263.00	\$ 500.00 \$ 174,359.00		\$ 680,151.00	\$ 2,000.00 \$ 940,828.00								\$ 2,000.00 \$ 10,000.00 \$ 15,000.00 \$ 439,119.00	\$ 10,000,00 \$ 25,000,00 \$ 10,000,00
85 81 10 20	HUD Pass Thru Adır Staff Support Catego Conferences Monthly Travel Per Diems and Exp Staff and Board Trai Reserve	\$ 126,703.00 ries \$ 11,000.00 \$ 10,000.00 \$ 25,000.00 \$ 10,000.00 \$ 15,000.00	\$ 18,0 \$ 5,0 \$ 25,0 \$ 5,0 \$ 15,0 \$ 5,071,	000.00 500.00 000.00 000.00 000.00 239.84	\$ 2,500.00 \$ 25,000.00 \$ 373,488.00	\$ 500.00 \$ 360,263.00	\$ 500.00 \$ 174,359.00		\$ 680,151.00	\$ 2,000.00								\$ 2,000.00 \$ 10,000.00 \$ 15,000.00 \$ 439,119.00	\$ 10,000.00 \$ 25,000.00 \$ 10,000.00 \$ 15,000.00 \$ 5,438,190.00

PROFIT AND LOSS

July 2019 - June 2020

16,300.0 163,250.0 179,550.0 285,482.1 5,678.9 291,161.0 252,860.9 107,765.4 209,577.00
163,250.0 179,550.0 285,482.10 5,678.9 291,161.0 252,860.9 107,765.44 209,577.00
163,250.0 179,550.0 285,482.1 5,678.9 291,161.0 252,860.9 107,765.44 209,577.00
179,550.0 285,482.1 5,678.9 291,161.0 252,860.9 107,765.4 209,577.0
285,482.10 5,678.99 291,161.0 252,860.99 107,765.48 209,577.00
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613,195.69
60,624.10
523,115.59
1,044.05
97,385.15
28,056.44
2,641,980.46
7,773.38
8,904.02
93,383.09
878.41
110,938.90
80,000.00
15,500.00

PROFIT AND LOSS

July 2019 - June 2020

	TOTAL
44550 State Grant Categories	
44551 Adanta CoC/HPPP	7,719.00
Total 44550 State Grant Categories	7,719.00
Total 44500 Government Grant Categories	3,619,879.81
44800 Indirect Public Support Categories	
44820 United Way - CoC/HPPP	9,799.98
Total 44800 Indirect Public Support Categories	9,799.98
45000 Investment Ctegories	
45010 Interest-Savings, Short-term CD	777.27
45020 Income and Distributions	10,209.14
45030 Change in Market Value	37,414.08
Total 45000 Investment Ctegories	48,400.49
46400 Other Income Categories	
46410 Bingo Income	324,853.00
46420 TARC Sales	620,899.70
46425 Dona O'Sullivan Income	11,450.75
46430 Other Program Income	2,864.59
Total 46400 Other Income Categories	960,068.04
47200 Membership Income Categories	
47230 Membership Dues	34,300.00
47240 HMIS Fees	45,778.93
Total 47200 Membership Income Categories	80,078.93
49000 Special Event Income Categories	
49005 Special/Pass-thru Projects	105,207.09
49010 Give a Jam	17,404.87
49020 Other Fundraisers	51,761.26
Total 49000 Special Event Income Categories	174,373.22
69500 Transfers In	190,000.00
Total Income	\$5,553,311.55
GROSS PROFIT	\$5,553,311.55
Expenses	
60900 Business Expense Categories	
60905 Office renovation / maintenance	82,892.21
60910 Annual Meetings and Events	2,655.54
60920 Board Meeting/Planning Expenses	1,481.12
60930 Bank Fees	1,439.00
60935 Bingo Fines and Penalties	12.00

PROFIT AND LOSS

July 2019 - June 2020

	TOTAL
60960 Event Expense Categories	
60961 Fundraising - Fundraiser	32,310.16
60962 Fundraising - Rx Housing	6,467.16
Total 60960 Event Expense Categories	38,777.32
60970 Licenses, Fees and Permits	15.00
60975 Bingo Licences, Fees and Permits	380.00
Total 60900 Business Expense Categories	127,652.19
60990 Investment Loss Categories	
60992 Other Investment Transactions	4,705.93
Total 60990 Investment Loss Categories	4,705.93
62100 Contract Categories	
62110 Accounting Fees	830.00
62120 Audit	16,390.00
62150 Web Hosting	1,800.00
62180 Other Contract Services	12,525.33
62190 Payroll Services	2,418.79
Total 62100 Contract Categories	33,964.12
62800 Facilities Categories	
62825 Bingo Security	2,850.00
62830 ADT Security System	638.00
62850 Janitorial Services	3,322.87
62870 Property Insurance	3,201.63
62890 Rent, Parking, Utilities	125,272.11
62895 Bingo Rent	67,100.00
62899 HMIS/SPE Equipment and Services	58,200.00
Total 62800 Facilities Categories	260,584.61
65000 Operations Categories	
65010 Books, Subscriptions, Reference	1,179.37
65020 Postage, Mailing Service	4,115.03
65032 Copier	3,707.21
65035 Printing	1,869.47
65038 Street Tips Printing	840.00
65040 Supplies	17,875.64
65045 Bingo Supplies	73,423.18
65050 Communication Categories	
65051 Telephone	10,263.87
65052 Language Line Expenses - HMIS	951.95
65055 Internet Cost	1,359.31
Total 65050 Communication Categories	12,575.13
65060 Memberships and Dues	1,705.00
Total 65000 Operations Categories	117,290.03

PROFIT AND LOSS July 2019 - June 2020

	ΤΟΤΑ
65100 Other Types of Expenses	
65120 Insurance - Liability, D and O	2,176.8
65160 Other Misc Costs	50.0
65185 Bingo Taxes	22,067.12
Total 65100 Other Types of Expenses	24,293.93
66000 Payroll Expenses	
66010 Health Insurance	91,213.75
66020 Salaries	828,677.41
66025 Salaries - Other	11,282.39
66029-1 Bingo Salaries	10,890.00
66030 Retirement Funds	48,280.08
66040 Life/Disability Insurance	7,869.75
66050 Worker's Comp Insurance	2,583.00
66065 Employer Payroll Taxes	69,203.58
66069B Bingo Payroll Tax	981.00
66080 Metro United Way Payments	-27.05
Total 66000 Payroll Expenses	1,070,953.91
67000 Program Expense Categories	
67010 White Flag and Shelter Assistan	34,773.00
67020 TARC Tickets	619,624.81
67030 Stand Down Expenses	6,201.04
67050 Rx Housing Deposits	24,025.71
67055 Prevention & Diversion	17,644.99
67060 Unreimbursable Service Expenses	2,094.00
67065 Other Program Expense	875.00
67070 Special / One-time Project	107,047.77
67075 Dona O'Sullivan Expense	5,508.85
67080 HUD Pass Thru Categories	
67081 HUD Pass Thru Funds - Administration	97,385.15
67082 HUD Pass Thru Funds - Leasing to Landlords and Inspections	1,318,573.44
67083 HUD Pass Thru Funds - Operations	60,624.10
67084 HUD PASS Thru Funds - Services	524,992.26
67085 HUD Pass Thru Funds - HMIS Expenses	1,044.05
67086 Pass Thru Funds - Leasing to Subrecipients	613,195.69
67087 HUD Pass Thru Funds - Operations to CFH	28,056.44

PROFIT AND LOSS

July 2019 - June 2020

	TOTAL
67080P Program Income Expense	
67081P Administration	878.41
67082P Leasing Thru Landlords	7,759.38
67084P Services	91,506.42
67085P Operations PI	8,904.02
Total 67080P Program Income Expense	109,048.23
Total 67000 Program Expense Categories	3,570,714.53
68300 Staff Support Categories	
68310 Conference, Convention, Meeting	7,468.38
68320 Travel and Food	9,651.90
68330 Staff Development	15,430.64
68340 Staff Appreciation	3,109.69
Total 68300 Staff Support Categories	35,660.61
69000 Transfers Out	190,000.00
Total Expenses	\$5,435,819.86
NET OPERATING INCOME	\$117,491.69
NET INCOME	\$117,491.69

Form	990	Under section 501	n of Organization Exe (c), 527, or 4947(a)(1) of the Interna	al Revenue Code (excep	t private founda	ations)	OMB No. 1545-0047
Department of Internal Reve	of the Treasury enue Service		t enter social security numbers or to www.irs.gov/Form990 for instru				Open to Public Inspection
A For th	ne 2018 calenda		$\frac{1}{100}$ $\frac{1}$				NEXTROPPORT INTERNAL
B Check if	A 11	of organization				Employer i	dentification number
Address	change	Coal	lition for the Home	ess, Inc.			
Name ch		business as					18307
Initial ret	Numbe	er and street (or P.O. box if ma) 0 S. 4th Stre	il is not delivered to street address)	R		Telephone r	number 36-9550
Final retu			y, and ZIP or foreign postal code	L		<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>
terminate	ed i i	isville	KY 40203		G	Gross receip	ts\$ 7,270,797
Amended		and address of principal officer					
Applicatio		talie Harri	is		H(a) Is this a group H(b) Are all subord If "No," att	linates includ	
I Tax-exe		501(c)(3) 501(c) () < (insert no.) 4947(a)(1) or 527			
J Website		ouhomeless.			H(c) Group exempl		
The second	NP44	and a second	ssociation Other	L Year	of formation:	<u>[M</u>	State of legal domicile:
Parti	Summar		on or most significant activities:				
vernance	See Sched	dule O	-			· · · · · · · · · · · · · · · · · · ·	
0 2 C		-	discontinued its operations or dis				01
ອອ 3 ທີ່ ,							21 21
			s of the governing body (Part VI,				21
			calendar year 2018 (Part V, line				460
Ă O		volunteers (estimate if r				7a	0
			Part VIII, column (C), line 12			7b	0
	Net unrelated bus	Silless (axable ilicollie i	10111 0111 990-1, inte 38	<u></u>	Prior Year	110	Current Year
a 8 (Contributions and	d grants (Part VIII, line	1h)		4,101,	027	4,237,640
8 (9 9 10 10	Program service	revenue (Part VIII, line	2g)		401,	007	406,636
8 10 1		ne (Part VIII, column (A	(1 + 2 + 2)		25,	072	22,613
[∞] 11 (Other revenue (P	art VIII, column (A), lin	es 5, 6d, 8c, 9c, 10c, and 11e)		193,		226,573
12	Total revenue – a	add lines 8 through 11 (must equal Part VIII, column (A)	line 12)	4,721,	056	4,893,462
13 (Grants and simila	ar amounts paid (Part I)	K, column (A), lines 1–3)		1,061,	678	<u>2,933,400</u>
14 6	Benefits paid to o	or for members (Part IX	, column (A), line 4)				0
କ୍ଷ 15 ସ	Salaries, other co	mpensation, employee	e benefits (Part IX, column (A), lir	es 5–10)	836,	224	912,218
a) I		Iraising fees (Part IX, c	olumn (A), line 11e)			Annual frame of south and the	0
ă bī		expenses (Part IX, colu		5,259		Managara Managara	
- 1 17 0			es 11a-11d, 11f-24e)		1,054,		744,014
1	•	-	equal Part IX, column (A), line 25)	2,952,		4,589,632
<u>19</u>	Revenue less exp	penses. Subtract line 1	8 from line 12		1,768, ginning of Current		303,830 End of Year
Fund Balances	Total assats (Por	t X line 16)			1,182,		1,475,208
Ass Ass Ass Ass Ass Ass Ass Ass Ass Ass	Total assets (Pari Total liabilities (Pi		•••••••••••••••••••••••••••••••••••••••		295,		288,069
L2 Indi		d balances. Subtract lir	ne 21 from line 20	· · · · · · · · · · · · · · · · · · ·	887,	and the second se	1,187,139
Part II	5A2-						
Under pe	nalties of perjury, I	declare that I have exami	ned this return, including accompany ther than officer) is based on all info				v knowledge and belief, it i
			unument			<u> </u>	. <u>.</u>
Sign	Signature of					Date	
Here	Nata		S	Execut	lve Dire	ector	
		t name and title			<u> </u>	·····	
Paid	Print/Type preparer's	; name	Preparer's signature		Date	Check	if PTIN

	Print Type prepa	rei s na	rieparers signature	Date	Check	If Fine
Paid	Barbara La	sky	Barbara Lasky	03/	02/20 self-er	nployed P00015280
Preparer	Firm's name	•	Baldwin CPAs, PLLC		Firm's EIN 🕨	20-1416603
Use Only			10180 Linn Station Road Suite 200			
	Firm's address	•	Louisville, KY 40223		Phone no.	502-584-9793
May the IF	RS discuss this	s retur	n with the preparer shown above? (see instructions)			Yes No
For Paperv	work Reduction	ActN	lotice, see the separate instructions.			Form 990 (2018)

rm 990 (2018) Coalition f			Page 2
	am Service Accomplishmen contains a response or note		X
Briefly describe the organization's r			<u>anne beurd tradining – un d'Entraider – un ann</u> a
See Schedule O			
· · · · · · · · · · · · · · · · · · ·			
•••••••••••••••••••••••••••••••••••••••			•••••••••••••••••
2 Did the organization undertake any	significant program services during t	he year which were not listed on the	
prior Form 990 or 990-EZ?			Yes X No
If "Yes," describe these new service			
B Did the organization cease conduct services?		ow it conducts, any program	Yes 🗶 No
If "Yes," describe these changes or			
expenses. Section 501(c)(3) and 50		of its three largest program services, as mea report the amount of grants and allocations ed.	
Homeless Youth Commorganizations, to a adult homelessness addressing this cau	nittee, made up of cally around the co . We received and use through the HUI	meless services. It f more than 70 differer mmon goal of ending y allocated \$3.45 milli Homeless Youth Demo have reduced youth ho	t partner outh and young on toward Grant. Since
purchase bus ticket Coalition and other homeless individual	ts and passes at ha rs. TARC tickets and ls only, are then s	ts of\$) (Revenue ansit Authority of Riv alf price for agency m ad passes, which are p sold to program partic 000 tickets and 400 pa	er City (TARC) f members of the provided for sipants. The
•••••••••••••••••••••••••••••••••••••••			
• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •
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			• • • • • • • • • • • • • • • • • • • •
otherwise be turned 35 degrees). Three housing numbers bey	l away during sever shelters participa wond their normal c program pays for a	as of\$ 36,672) (Revenue gency shelter for person the weather (above 95 d ate in the program and capacity to the Coalit approximately 10,000 h	egrees or below submit their ion for
			· · · · · · · · · · · · · · · · · · ·
•••••••••••••••••••••••••••••••••••••••			
• • • • • • • • • • • • • • • • • • • •			
· · · · · · · · · · · · · · · · · · ·			
d Other program services (Describe in	Schedule Ο)		
d Other program services (Describe ir (Expenses \$	Schedule O.) including grants of\$) (Revenue \$)

Form 990 (2018) Coalition for the Homeless, Inc. 61-1118307 Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	[
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		1	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Disertation of the	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	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	<u>11c</u>		<u> </u>
d				**
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
-	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u>X</u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		~	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	<u> </u>	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	v	
	Schedule D, Parts XI and XII	12a	X	
a	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		v
42	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	120		X
13	Distriction of the second se	14a		X
	Did the organization maintain an office, employees, or agents outside of the United States?	140		<u></u>
5	fundraising, business, investment, and program service activities outside the United States, or aggregate		[
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
10	Sec. 5. The second se	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	ľ	х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
-	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			<u> </u>
	If "Yes," complete Schedule G, Part III	19	x	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	[
21	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 12, If "Yes," complete Schedule I, Parts I and II	21	X	

Form 990 (2018) Coalition for the Homeless, Inc. 61-1118307Part IVChecklist of Required Schedules (continued)

					<u> </u>	'es	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic indi	vidual	s on				
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			22	2	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	•					
	organization's current and former officers, directors, trustees, key employees, and highest compe	nsate	d				
	employees? If "Yes," complete Schedule J			23			X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more						
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answ	er line	es 24b				
	through 24d and complete Schedule K. If "No," go to line 25a			24;			X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period except			241	b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during to defease any tax-exempt bonds?	g the y	year	240	~		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the y	ear?	• • • • • • • • • • • • • • • • • • • •	240		-+	
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an		s henefit		-		
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	570000	o benone	25			х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person	n in s	a prior	·····	+	-+	
~	year, and that the transaction has not been reported on any of the organization's prior Forms 990						
	If "Yes," complete Schedule L, Part I	01 00		251			х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables	to an	••••••				
20	current or former officers, directors, trustees, key employees, highest compensated employees, o		' y				
	disqualified persons? If "Yes," complete Schedule L, Part II	•		26			х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employ		• • • • • • • • • • • • • • • • • •		-	-+	
~1	substantial contributor or employee thereof, a grant selection committee member, or to a 35% cor		d				
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	10 010	9	27			x
28	Was the organization a party to a business transaction with one of the following parties (see Sche	dule I					
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	auto .			1		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Par	+ IV		28a	nine over 1999 over	91989-0	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete the second se				+		
~	Schedule L, Part IV	010		281			х
с	An entity of which a current or former officer, director, trustee, or key employee (or a family memb	er the	reof		-		
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			280	;		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Scl		е <i>М</i>	29		x T	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qu				-	1	
	conservation contributions? If "Yes," complete Schedule M			30			Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Sc	hedul	le N. Part I	31			X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Y		· · · ·				
	complete Schedule N, Part II			32			х
33	Did the organization own 100% of an entity disregarded as separate from the organization under	Reaul	ations			1	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	U		33			Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R,	Part I	I, III,		Τ	T	
	or IV, and Part V, line 1			34			Х
35a	Did the second institution is a sector by $d = d^{2} d d d d d d d d d d d d d d d d d d d$			35a			Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction w					T	
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V,	line 2		35b	>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-cha	ritable	9				
	related organization? If "Yes," complete Schedule R, Part V, line 2			36			X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related o					T	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule	R, Pa	art VI	37			Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lin					T	
	19? Note. All Form 990 filers are required to complete Schedule O.			38	2	K	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance						
	Check if Schedule O contains a response or note to any line in this Pa	<u>rt V .</u>	<u></u>	<u></u>	<u></u> .	<u></u>	
					Y	es	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	85				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0				

Form 990 (201	8) Coalition	for	the	Homeless,	Inc.	61-1118307
	Ctatamanta Dag	andina (746	IDC Cilinge and	Tax Ca	mailiance (continued)

700000-000	art V Statements Regarding Other IRS Filings and Tax Compliance (continued)		<u>.</u>								
95.822968			Yes	No							
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax										
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 21										
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	windheining							
~	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)										
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	54943028051 <u>8</u>	X							
b											
4a											
-14	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x							
b	If "Yes," enter the name of the foreign country:										
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).										
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	nosenta antista	X							
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X							
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c									
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the										
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or										
	gifts were not tax deductible?	6b									
7	Organizations that may receive deductible contributions under section 170(c).			2							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods										
	and services provided to the payor?	7a	X								
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X								
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was										
	required to file Form 8282?	7c		X							
d	If "Yes," indicate the number of Forms 8282 filed during the year7d										
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u>X</u>							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Production of the Party	X							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		DECEMBER DECEMBER								
_	sponsoring organization have excess business holdings at any time during the year?	8		ann an							
9	Sponsoring organizations maintaining donor advised funds.	AP 19 19 19 19									
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a									
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		tional solution							
10	Section 501(c)(7) organizations. Enter:										
a	Initiation fees and capital contributions included on Part VIII, line 12										
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b										
11	Section 501(c)(12) organizations. Enter:										
	Gross income from members or shareholders Cross income from ethor courses 11a			a da casa da sera Angles da sera Angles da sera							
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b										
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	u di ta ji mili	and the second se							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year										
13	Section 501(c)(29) qualified nonprofit health insurance issuers.										
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	ang ng pagang ng pag	10000101000							
-	Note. See the instructions for additional information the organization must report on Schedule O.										
b	Enter the amount of reserves the organization is required to maintain by the states in which										
	the organization is licensed to issue qualified health plans	der Kingeleicht									
с	Enter the amount of reserves on hand										
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X							
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b									
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or										
	excess parachute payment(s) during the year?	15		<u>X</u>							
	If "Yes," see instructions and file Form 4720, Schedule N.										
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u>X</u>							
	If "Yes," complete Form 4720, Schedule O.										

Form 990 (2018)

Form 990 (2018) Coalition for the Homeless, Inc. 61-1118307

Page 6

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

Sec	tion A. Governing Body and Management			<u></u>	<u></u>	
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	21			
	If there are material differences in voting rights among members of the governing body, or					
	if the governing body delegated broad authority to an executive committee or similar				с. С. р.	
	committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	21	_		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	,		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	s filed?	<i></i>	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?			7b	usa di Kalaria	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during t	he year	by the follow	/ng:		
а	The governing body?			<u>8a</u>	X	
b	Each committee with authority to act on behalf of the governing body?			<u>8b</u>	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached a	t				
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		<u>X</u>
Sec	tion B. Policies (This Section B requests information about policies not required by the	e Inter	nal Reven	ue Co		
					Yes	
	Did the organization have local chapters, branches, or affiliates?			10a		<u>X</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	v	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	e filing t	ne form?	11a	X	REAL
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					2019/19/2019 Letaersizear
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could giv	/e rise i	o connicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			40-	v	
4.0	describe in Schedule O how this was done	· · · · · · · · ·	<i></i>	12c	X X	
13	Did the organization have a written whistleblower policy?			13	X	
14 4 5	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	• • • • • • •		14		
15		ion?				
~	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decis The organization's CEO, Executive Director, or top management official			15a	X	arrandi i
d h	Other officers or key employees of the organization	• • • • • • •		15a 15b		X
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	• • • • • • •	• • • • • • • • • • • • • • •			
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
iua	with a taxable entity during the year?			16a	nakanikak	X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its					
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			16b		<u>Careford</u>
Sec	tion C. Disclosure		<u></u>	1 100		
<u>060</u> 17	List the states with which a copy of this Form 990 is required to be filed $\triangleright KY$				-	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-	T (Sect	ion 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (<i>explain in Schedule O</i>)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of	interes	t policy, and			
	financial statements available to the public during the tax year.		. ,,			

20 St	tate the name, addres	s, and telephone number of the	person who possesses the	organization's books and records 🕨
-------	-----------------------	--------------------------------	--------------------------	------------------------------------

	olato ino mano, adarooo, and telephone manoo	at and potoon it		100000		· · · · · · · · ·
\mathbf{T}	he Company	1300	S	4th	St	
T						

KY 40203

Form 990 (2018) Coalition for the Homeless, Inc. 61-1118307

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

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

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

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest

compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for	bo: off	k, unle icer a	Pos check ess pe nd a c	irson lirecto	than one is both an pr/trustee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	(W-2/1099-MISC)	(organization and related organizations
(1)Shella Etchen		1						······································	
	1.00								
Chair	0.00	X		X		ļ	0	0	0
(2)Dr. Vaughn Payn									
	1.00								•
Vice Chair	0.00	x		X			0	0	0
(3) Andy Patterson	1.00								
Secretary	0.00	x		x			0	0	0
(4) Caroline Heine	0.00			~			<u>v</u>	<u> </u>	<u>v</u>
(4) our or rice meane	1.00								
Treasurer	0.00	x		x			0	0	0
(5) Wood McGraw									
.,	1.00								
Board Member	0.00	x					0	0	0
(6) Greg Mayes, Jr.									
• • • • • • • • • • • • • • • • • • • •	1.00								
Board Member	0.00	X					0	0	0
(7)E. Wayne Schwer									
	1.00								
Board Member	0.00	X					0	0	0
(8)Mark McWane	1.00								
Board Member	0.00	x					0	0	0
(9) Michael Shumway							0	<u> </u>	<u> </u>
(3)MICHAEL DHUMWAY	1.00								
Board Member	0.00	x					0	0	0
(10)Robert Moore									
• •	1.00								
Board Member	0.00	X					0	0	0
(11)Tamara Reif									
• • • • • • • • • • • • • • • • • • • •	1.00								
Board Member	0.00	X]				0	0	0
DAA									Form 990 (2018)

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Form 990 (2018) Coalition Part VII Section A. Officer									8307 ated Employees (continu	Page 8				
(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				e Po er (do not chec box, unless p y officer and a				than or	ne an	(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				
(12) Eric Friedla	nder 1.00													
Board Member (13) Marla Schaef	0.00	x						0	0	0				
Board Member	1.00 0.00	x						0	0	0				
(14) Jason Warrie	r 1.00													
Board Member (15) Kim Cordell-	0.00	x						0	0	0				
Board Member	1.00	x						0	0	0				
(16) Robert Byers														
Board Member (17) Andrea Aikin	0.00	X					_	0	0	0				
Board Member	1.00	x						0	0	0				
(18) Kathy Beach	1.00													
Board Member (19) Laurie Beth	0.00 Baird	x					_	0	0	0				
Board Member	1.00 0.00	x						0	0	0				
1b Sub-total c Total from continuation she		Sec	tion	Α.			•	89,543						
d Total (add lines 1b and 1c) Total number of individuals (in				o th	ose	listed	abo	89,543 ove) who received more t	han \$100,000 of					
reportable compensation from3 Did the organization list any f	ormer officer, c	lirect	or, c						ensated	Yes No				
 employee on line 1a? <i>If "Yes,</i> For any individual listed on line organization and related organization 	ne 1a, is the sur	n of	repo	rtabl	le co	ompen	isat	tion and other compensal	ion from the	3 X				
 individual Did any person listed on line for services rendered to the o 									n or individual	5 X				
Section B. Independent Contract	ors									3 A				
1 Complete this table for your fi compensation from the organ	ization. Report							ndar year ending with or	within the organization's t					
Name and	(A) business address							Descrip	(B) lion of services	Compensation				
								<u></u>						
2 Total number of independent received more than \$100,000									0					

					Homel	<u>ess, Inc.</u>	61-111830	7	Page 9
9	irt A		of Reven	ue contains	a respons	se or note to anv	line in this Part VI		
						(A)	(B) Related or	(C)	(D)
						Total revenue	exempt	Unrelated business	Revenue excluded from tax
<i>.</i>							function revenue	revenue	under sections 512-514
Grants	1a	Federated campaig	ns <u>1</u>	a					
		Membership dues		b	79,630				
Gifts, ilar Ai		Fundraising events		<u>с</u>	36,696	5 <u></u>			
<u>Ö</u> i	d	Related organizatio		d					
Sins	e	Government grants (contrib		<u>e 3</u>	,463,253	S 			
er ti	t	All other contributions, gifts, and similar amounts not incl			658,061				
0 E E E		Noncash contributions inclu	L		202,740				
Program Service Revenue Contributions, (y h	Total. Add lines 1a-		Ψ	▶	4,237,640			
		Total. Add mics Ta		<u></u>	Busn. Code	sector and a sector of the sector sector and the			
sver	2a	Tarc				406,636	406,636		
å Å	b	*							
<u>.</u>	c	· · · · · · · · · · · · · · · · · · ·							
Sel	d								
ram	е								
rog	f	All other program se							
d	<u> </u>	Total. Add lines 2a-				406,636			
	3	Investment income		vidends, int	erest,	22,613			22,613
	4	and other similar an Income from investr	· · · · · · ·			22,013			22,013
	-4 5	Royalties				· ······			
	J		(i) Real		Personal				
	6a	Gross rents	()						
	b	Less: rental exps.							
	C	Rental inc. or (loss							
	_d	Net rental income or	r (loss)						
	7a	Gross amount from (i) Securities	(i	i) Other				
		other than inventor							
	b	Less: cost or other							
		basis & sales exps							
		Gain or (loss)		L					
		Net gain or (loss)			<u></u>				
nue	oa	(not including \$				2. 2.			
ş		of contributions reported							
Ř		See Part IV, line 18		a	118,207				
Other Revenue	b	Less: direct expense	es	b	87,176				
0	с	Net income or (loss)	from fundra	ising event	s 🕨	31,031			31,031
	9a	Gross income from gam	ning activities.						
		See Part IV, line 19		a <u>2,</u>	485,238				
		Less: direct expense			290,159				
		Net income or (loss)		g activities	<u></u>	195,079			195,079
	10a	Gross sales of inven						A second seco	
	h	returns and allowand Less: cost of goods		ab					
		Net income or (loss)			•				
ľ	<u>v</u>	Miscellaneou		niventory	Busn. Code				
	11a	Miscellaneous			1	463	463	n Canada Santa Santa An	tatin britatindan ataun dan papatan papatan
	b								
	С								
	d	All other revenue							
	е	Total. Add lines 11a	–11d		▶	463	CONTRACTOR AND A DESCRIPTION OF A DESCRIPTION OF A DESCRIPTION OF A DESCRIPTION		
	12	Total revenue. See	instructions.)	4,893,462	407,099	0	248,723

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service (A) Total expenses (D) (C) Do not include amounts reported on lines 6b, Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 1 1,689,442 1,689,442 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 1,243,958 1,243,958 individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members Compensation of current officers, directors, 5 trustees, and key employees 89,543 51,935 13,431 24,177 6 Compensation not included above, to disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 652,066 548,682 24,003 79,381 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 109,712 88,854 5,538 15,320 9 10 Payroll taxes 60,897 3,074 49,319 8,504 11 Fees for services (non-employees): Management а b Legal 18,160 18,160 Accounting С d Lobbying Professional fundraising services. See Part IV, line 17 е Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, column g 122,008 69,502 52,506 (A) amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion 2,359 46,736 37,851 13 Office expenses 6,526 Information technology 14 15 Rovalties 84,240 65,495 7,452 11,293 Occupancy 16 59,750 2,987 56,763 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 4,124 1,982 2,142 19 Conferences, conventions, and meetings 20 Interest Payments to affiliates 21 416 337 21 58 Depreciation, depletion, and amortization 22 Insurance 23 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.) 394,314 394,314 а Tarc 6,833 6,833 b stand down Miscellaneous 4,870 4,870 С 2,563 d Dues and Subscriptions 2,563 e All other expenses 4,305,267 139,106 4,589,632 145,259 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here 🕨 if following SOP 98-2 (ASC 958-720)

Form 990 (2018) Coalition for the Homeless, Inc. 61-1118307

Page 10

DAA

All Institutions	X Balance Sheet					
	Check if Schedule O contains a response or	note to any line	in this Part X	r	, <u></u>	<u></u>
				(A) Beginning of year		(B) End of year
1	\mathbf{v}			319,379	1	557,48
2	• • • • • • • • • • • • • • • • • • • •		· · · <i>· · ·</i> · · · · · · · · · · · · ·	166 502	2	401 10
3	Pledges and grants receivable, net			466,583		421,19
4	Accounts receivable, net				4	
5						
	trustees, key employees, and highest compensated					
	Complete Part II of Schedule L	· · · · · · · · · · · · · · · · · · ·		5		
6	Loans and other receivables from other disqualified					
	4958(f)(1)), persons described in section 4958(c)(3	nd .				
	sponsoring organizations of section 501(c)(9) volur	_				
}	organizations (see instructions). Complete Part II o	•			6	
7	• • • • • • • • • • • • • • • • • • • •			20	7	
0				38		0 61
9		· · · · · · · · · · · · · · · · · · ·		4,329	9	9,61
10a	a Land, buildings, and equipment: cost or		10 070			
	other basis. Complete Part VI of Schedule D		<u>18,276</u> 14,484			2 70
1	Less: accumulated depreciation	10b	14,484	4,208	1	3,79
11				200 040	11	402 11
12			· · · · · · · · · · · · · · · · · · ·	388,040		483,11
13	r-3				13	
14	9				14	
15	,,,,,,,			1 100 577	15	1 475 00
16				1,182,577		1,475,20
17				295,119		288,06
18	Grants payable				18	
19	Deferred revenue				19	
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Complete Part				21	
22						
	trustees, key employees, highest compensated emp	-				
	disqualified persons. Complete Part II of Schedule I				22	
23	5-5			23		
	Unsecured notes and loans payable to unrelated th			24		
25						
	parties, and other liabilities not included on lines 17				25	
0	of Schedule D		295,119	25 26	288,06	
26	Total liabilities. Add lines 17 through 25	heek here	7	295,119	20	200,00
	Organizations that follow SFAS 117 (ASC 958), o		and l			
07	complete lines 27 through 29, and lines 33 and 3		774,004	27	1,028,86	
27	Unrestricted net assets		113,454	27	158,27	
28	Temporarily restricted net assets	115,454	20	130,27		
27 28 29 30 31 32	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC		∠ 3 			
	complete lines 30 through 34.					
20			20 10000000			
30			<u>30</u> 31			
31	Paid-in or capital surplus, or land, building, or equip			31	<u></u>	
32	Retained earnings, endowment, accumulated incom		887,458		1,187,13	
33	Total net assets or fund balances			1,182,577	<u>33</u> 34	1,475,20

1,475,208 Form 990 (2018)

For	m 990 (2018) Coalition for the Homeless, Inc. 61-1118307			Paç	ge 12
P	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			\square
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,89	93,4	462
2	Total expenses (must equal Part IX, column (A), line 25)		4,58	39,0	632
3	Revenue less expenses. Subtract line 2 from line 1	30	03,8	830	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		87,4		
5	Net unrealized gains (losses) on investments		-4,1	149	
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	1,18	37,1	139
Pa	Int XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: 🗌 Cash 🛛 🔀 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.			en ja ja Danas	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	frankt, Dietholden	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	2110031/1244FE
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			Carded and the Contract of the second	and and an other standing of the
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		provincial (1925)	And and an an an an an an	nnen großen ein gez
	the Single Audit Act and OMB Circular A-133?		3a	x	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			x	
			Form	990	(2018)

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Form 990 (2018) Coalitio								Inc. 61-111 5, and Highest Compens		Page 8
(A) Name and title	(A) (B) Name and title Average hours per week (list any			(C) Position (do not check more than or box, unless person is both officer and a director/trust				(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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 compensatec employee	Former	(W-2/1099-MISC)	(w-2)10354416C)	organization and related organizations
(20) Carla Sturge										* <u></u>
Board Member (21) Tom Walton	1.00 0.00	x						0	0	0
Board Member	1.00	x						0	0	0
(22) Natalie Har										
Executive Director	40.00			x				89,543	0	0
	· · · · · · · · · · · · · · · · · · ·									
										W , 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 199
								00 540		••••••••••••••••••••••••••••••••••••••
1b Sub-total		 Sor	tion	Δ		• • •		89,543		
d Total (add lines 1b and 1c)										
2 Total number of individuals (i reportable compensation from	ncluding but no	t limi	ted t			listeo	d ab	ove) who received more t	han \$100,000 of	
3 Did the organization list any f employee on line 1a? <i>If "Yes</i> ,										Yes No
4 For any individual listed on lir organization and related organization	ne 1a, is the sur anizations greate	n of er th	repo an \$	rtab 150,	le co ,000	ompe ? If "	ensa	tion and other compensat	ion from the	4
5 Did any person listed on line for services rendered to the c	1a receive or acorganization? If	ccrue	e cor	nper	nsati	ion fr	om <i>dule</i>	any unrelated organizatio	n or individual	
Section B. Independent Contract 1 Complete this table for your f			ato	ا ا ا	long	ndor	t oc	ntractore that received	are than \$100,000 of	
compensation from the organ	nization. Report	com	pens	atio	iepe in fo	r the	cale	endar year ending with or	within the organization's t	
(A) Name and business address							(B) Description of services			(C) Compensation
								<u> </u>	<u></u>	······································
2 Total number of independent										
received more than \$100,000										

sc	HEDULE A	Pub	lic Charity Statu	s and Pul	blic Suppo	ort	OMB No. 1545-0047
(Fo	rm 990 or 990-EZ)	Complete if the or	ganization is a section 501(c)(3) organ	ization or a section 4	947(a)(1) nonexempt cl	naritable trust.	2018
Depa	artment of the Treasury		Attach to Form 9	990 or Form 990	-EZ.		Cpen to Public
Inter	nal Revenue Service	🕨 🕨 Go to	www.irs.gov/Form990 for in	structions and f	the latest informa	tion.	Inspection
Nam	e of the organization	Coalition f	or the Homeless	s, Inc.		Employer identif	
P	art I Reas		ty Status (All organizatio		plete this part.)		
The		•	ause it is: (For lines 1 through		-		
1	and the second se		ssociation of churches describ				
2 3	and the second se		1)(A)(ii). (Attach Schedule E (I				
3 4			rvice organization described in Ited in conjunction with a hosp			۵)(iii) Enter th	e hospital's name
•	city, and stat		ada in conjunction man a noop.				lo noopitar o namo,
5			fit of a college or university own	ned or operated I	oy a governmental	unit described	in
		(b)(1)(A)(iv). (Complete P					
6	mannand	-	r governmental unit described				
7	described in	section 170(b)(1)(A)(vi).		-	iental unit of from	the general pu	DIIC
8 9			n 170(b)(1)(A)(vi). (Complete i lescribed in section 170(b)(1)		in conjunction with	a land-grant c	ollege
5			e of agriculture (see instruction				
10		ion that normally receives	: (1) more than 33 1/3% of its s	support from cont	ributions, member	ship fees, and	gross
	•		empt functionssubject to cer	•			its
		•	and unrelated business taxabl 30, 1975. See section 509(a			n businesses	
11		•	d exclusively to test for public				
12		•	d exclusively for the benefit of			•	•
			nizations described in section I that describes the type of sup				
	r	-	operated, supervised, or contro				
		• • • •	ower to regularly appoint or electronic complete Part IV, Sections		the directors or true	stees of the	
			supervised or controlled in con				
			orting organization vested in the termination organization vested in the termination of terminat		that control or ma	nage the supp	orted
	c Type III f	functionally integrated. A	A supporting organization operation structions). You must compl	ated in connectio	n with, and functio	nally integrate	d with,
	d 🗌 Type III ı	non-functionally integrat	ed. A supporting organization he organization generally mus	operated in conr	ection with its sup	ported organiz	
			i must complete Part IV, Sec			and an attentiv	611655
			eceived a written determination			pe II, Type III	
		mber of supported or Type III n	ion-functionally integrated support	porting organizat	ion.		
			the supported organization(s)			· · · · · · · · · · · · · · · · · · ·	
(i)	Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the organizatio		· · · ·	(vi) Amount of
	organization		(described on lines 1–10 above (see instructions))	listed in your governin document?	Ig support (i instructio	1	other support (see instructions)
				Yes No	-	,	,
(A)							
(B)							
(C)							
(D)							
(E)	· · · ·	11					
()							
Tota		A at Nation, and the last	ctions for Form 990 or 990-E7		-154 1928 1949	Sabadula A (E	orm 990 or 990-EZ) 2018

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

	art II Support Schedule for ((Complete only if you ch	Drganizations ecked the bo>	Described in on line 5, 7, c	Sections 17 or 8 of Part I o	r if the organiz	and 170(b)(1)(A ation failed to q	
	Part III. If the organization	on fails to qual	ity under the te	ests listed bei	ow, please con	nplete Part III.)	
	ction A. Public Support				T		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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)						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4						
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						L = 1000000
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			uning a constant and a state of the			
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc	. (see instruction	s)			12	
13	First five years. If the Form 990 is for th	e organization's f	irst, second, third,	fourth, or fifth tax	x year as a sectior	1 501(c)(3)	
	organization, check this box and stop he						>
	tion C. Computation of Public S						
14	Public support percentage for 2018 (line	6, column (f) divid	ded by line 11, col	umn (f))			%_
15	Public support percentage from 2017 Sc	hedule A, Part II,	line 14			15	%
16a	33 1/3% support test-2018. If the orga				4 is 33 1/3% or mo	ore, check this	
	box and stop here. The organization qua	•	• • •				🏲 🛄
b	33 1/3% support test-2017. If the orga				ine 15 is 33 1/3%	or more, check	
	this box and stop here. The organization						🕨 🗌
1/a	10%-facts-and-circumstances test—20 10% or more, and if the organization med Part VI how the organization meets the "	ets the "facts-and	-circumstances" te	est, check this bo	x and stop here.	Explain in	
	organization						🕨 📘
b	10%-facts-and-circumstances test-20	-					
	15 is 10% or more, and if the organizatio						
	Explain in Part VI how the organization m	neets the "facts-a	nd-circumstances	' test. The organi	zation qualifies as	a publicly	
	supported organization						▶∟
18	Private foundation. If the organization of						
	instructions						<u> </u>

		<u>alition f</u>				-1118307	Page 3
P	art III Support Schedule for C						
	(Complete only if you ch						under Part II.
	If the organization fails to	o qualify under	the tests liste	d below, pleas	se complete P	art II.)	
	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership						
	fees received. (Do not include any "unusual grants.")	2,793,643	3,500,488	3,450,453	4,146,558	4,237,640	18,128,782
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	385,182	390,894	395,701	401,353	406,636	1,979,766
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	2,005,960	2,360,726	2,490,684	2,543,714	2,603,445	12,004,529
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	5,184,785	6,252,108	6,336,838	7,091,625	7,247,721	32,113,077
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						
с	Add lines 7a and 7b						·······
8	Public support. (Subtract line 7c from		territer (States)				· · · · · · · · · · · · · · · · · · ·
	line 6.)						32,113,077
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	5,184,785	6,252,108	6,336,838	7,091,625	7,247,721	32,113,077
100	Gross income from interest, dividends,		<u>i</u>				
104	payments received on securities loans, rents,						
	royalties, and income from similar sources	14,534	24,447	30,393	25,072	22,613	117,059
b	Unrelated business taxable income (less	·		· · · · ·		· · · ·	
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b	14,534	24,447	30,393	25,072	22,613	117,059
			<u>, , , , , , , , , , , , , , , , , , , </u>				
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						
4.0	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	5,199,319	6,276,555	6,367,231	7,116,697	7,270,334	32,230,136
14	First five years. If the Form 990 is for the		rst, second, third,	fourth, or fifth tax	year as a section	i 501(c)(3)	
<u></u>	organization, check this box and stop he					<u></u>	······ P
	tion C. Computation of Public S			(0)			A A A A A A A A A A
15	Public support percentage for 2018 (line						99.64 %
<u>16</u>	Public support percentage from 2017 Sch						99.62%
	tion D. Computation of Investm			40 1 10			~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
17	Investment income percentage for 2018			13, column (f))			%
18	Investment income percentage from 201						%
19a	33 1/3% support tests—2018. If the org						► X
-	17 is not more than 33 1/3%, check this k						
b	33 1/3% support tests—2017. If the org						
	line 18 is not more than 33 1/3%, check t						
20	Private foundation. If the organization d	id not check a bo	x on line 14, 19a,	or 19b, check this	s box and see inst	ructions	🕨 📘

and even much tasks	ule A (Form 990 or 990-EZ) 2018 Coalition for the Homeless, Inc. 61-1118	<u>307 Ра</u>	Page 4
Pa	Supporting Organizations		
	(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, co		A
	and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of P		
	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and com	plete Part V.)	
Sect	tion A. All Supporting Organizations		
		Yes	No
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).	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer		
	(b) and (c) below.	3a	
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.	3b	
С	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.	3c	
4a	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.	4a	and the second
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.	4b	
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.	4c	
5a	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).	5a	100-00-00-00-00-00-00-00-00-00-00-00-00-
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	anism for in the state of the s	
	designated in the organization's organizing document?	5b	
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6	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.	6	hemoslow
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor		
	(as 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).	7	
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).	8	
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.	9a	and the second second
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.	9b	
С	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.	9c	
10a	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.	10a	1100000000
	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		
b			astrataci

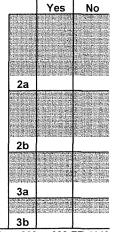
Schedule A (Form 990 or 990-EZ) 2018 Coalition for the Homeless, Inc. 61-1118307 Page 5 Part IV Supporting Organizations (continued)

Ра	Supporting Organizations (continued)	
		Yes No
11	Has the organization accepted a gift or contribution from any of the following persons?	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	
	below, the governing body of a supported organization?	11a
b	A family member of a person described in (a) above?	11b
С	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
Sect	ion B. Type I Supporting Organizations	
		Yes No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	
	controlled the organization's activities. If the organization had more than one supported organization,	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1
2	Did the organization operate for the benefit of any supported organization other than the supported	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	
	supervised, or controlled the supporting organization.	2
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	
	or management of the supporting organization was vested in the same persons that controlled or managed	
	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	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2
3	By reason of the relationship described in (2), did the organization's supported organizations have a	
-	significant voice in the organization's investment policies and in directing the use of the organization's	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	
	supported organizations played in this regard.	3
secti	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 instru-	uctions).
-		,

- a 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.
- c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2	Activities	Test.	Answer	(a)	and	(b)	below.
---	------------	-------	--------	-----	-----	-----	--------

- a 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 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 that these activities constituted substantially all of its activities.
- 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 reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*



Coalition for the Homeless, Inc. 61-1118307 Schedule A (Form 990 or 990-EZ) 2018 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See 1 instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 2 2 Recoveries of prior-year distributions Other gross income (see instructions) 3 3 Add lines 1 through 3. 4 4 5 5 Depreciation and depletion 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 Other expenses (see instructions) 7 7 8 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a a Average monthly value of securities b Average monthly cash balances 1b С

Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 see instructions). 4 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by .035. 7 7 Recoveries of prior-year distributions 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount **Current Year** 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 3 Enter greater of line 2 or line 3. 4 4 5 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to 6 emergency temporary reduction (see instructions). 6

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2018 Coalition for the Homeless, Inc. 61-1118307 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exemp	t purposes		
2	Amounts paid to perform activity that directly furthers exempt p	urposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of	of supported 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.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the c	organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
c	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
	Remaining underdistributions for years prior to 2018, if		and a second	
-	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI . See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
-	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
•	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2015			
a	Excess from 2017	A DESCRIPTION OF A DESCRIPTION OF A DESCRIPTION		

Schedule A (Fo	orm 990 or 990-EZ) 2018	Coalition	for the	e Homeless	, Inc.	61-1118307	Page 8
	Supplemental In III, line 12; Part IV	formation. Provid V, Section A, lines Part IV, Section C	le the explar 1, 2, 3b, 3c,	ations required 4b, 4c, 5a, 6, 9a	by Part II, line a, 9b, 9c, 11a	e 10; Part II, line a, 11b, and 11c; F	17a or 17b; Part Part IV, Section
	3a, and 3b; Part V	V, line 1; Part V, S Also complete this	ection B, line	e 1e; Part V, Sec	tion D, lines	5, 6, and 8; and I	
	<u> </u>		s part for any				
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SCHEDULE C (Form 990 or 990-EZ)	Political C	ampaign and Lobb	oying Activi	ities	OMB No. 1545-0047
(i onin 350 or 550-EZ)	For Organizations Exem	pt From Income Tax Under	section 501(c) a	nd section 527	2018
Department of the Treasury Internal Revenue Service	 Complete if the organization Go to www.irs.g 	n is described below. pov/Form990 for instructions ar		n 990 or Form 990-EZ. nation.	Open to Public Inspection
	red "Yes," on Form 990, Part IV,	line 3, or Form 990-EZ, Par	t V, line 46 (Polit	ical Campaign Activ	ities), then
	izations: Complete Parts I-A and I				
	an section 501(c)(3)) organization ns: Complete Part I-A only.	s: Complete Parts I-A and C I	below. Do not con	nplete Part I-B.	
	red "Yes," on Form 990, Part IV,	line 4. or Form 990-EZ. Par	t VI. line 47 (Lob	bving Activities). the	n
	izations that have filed Form 5768				
· · · · · •	izations that have NOT filed Form		1 11		
	red "Yes," on Form 990, Part IV,	line 5 (Proxy Tax) (see sepa	arate instruction	s) or Form 990-EZ, F	Part V, line 35c (Proxy
Tax) (see separate instruc		. 11			
 Section 501(c)(4), (5), o Name of organization 	or (6) organizations: Complete Parl	[]]].		Employer ider	ntification number
	alition for the H	Homeless. Inc.		61-11183	
	e if the organization is exe		1(c) or is a se		
1 Provide a description	of the organization's direct and inc	lirect political campaign activi	ties in Part IV. (se	e instructions for	
definition of "political of	campaign activities")				
	ivity expenditures (see instructions	· · · · · · · · · · · · · · · · · · ·		• \$	
	blitical campaign activities (see ins		1(0)(2)		
	e if the organization is exe		1(0)(3).	▶ \$	
	ny excise tax incurred by the orga ny excise tax incurred by organiza		1055	▶ \$	
	urred a section 4955 tax, did it file	F		Ψ	Yes No
4a Was a correction mad	o?	· · · · · · · · · · · · · · · · · · ·			
b If "Yes," describe in Pa					
Part I-C Complete	e if the organization is exe	mpt under section 50°	1(c), except s	ection 501(c)(3).	
1 Enter the amount direct activities	ctly expended by the filing organiz	ation for section 527 exempt	function	▶\$	
2 Enter the amount of th 527 exempt function a	ne filing organization's funds contri activities	buted to other organizations f		▶\$	
	expenditures. Add lines 1 and 2. E	Enter here and on Form 1120-	-POL,		
line 17b 4 Did the filing organizat	tion file Form 1120-POL for this ye				│ Yes │ No
	resses and employer identification		27 political organi		
	yments. For each organization liste	• •			-
	contributions received that were p				
as a separate segrega	ted fund or a political action comn	nittee (PAC). If additional space	ce is needed, prov	vide information in Pa	rt IV.
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
					If none, enter -0
(1)					
(2)					
(3)					
(4)					terrenten ander and and and and a
(5)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
(6)					

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

Schedule C (Form 990 or 990-EZ) 2018 Coali	tion for the Homeless, Ind	<u>c. 61–111830</u>	7 Page 2
Part II-A Complete if the organiz	ation is exempt under section 501(c)(3) and filed Form 576	8 (election under
section 501(h)).		······	<u>.</u>
A Check if the filing organization	belongs to an affiliated group (and list in Part I	V each affiliated group n	nember's name,
address, EIN, expenses	, and share of excess lobbying expenditures).		
B Check ▶ ☐ if the filing organization	checked box A and "limited control" provisions	apply.	
	ying Expenditures	(a) Filing	(b) Affiliated
(The term "expenditures" m	eans amounts paid or incurred.)	organization's totals	group totals
1a Total lobbying expenditures to influence pr	ublic opinion (grass roots lobbying)	0	
b Total lobbying expenditures to influence a	legislative body (direct lobbying)	8,517	
c Total lobbying expenditures (add lines 1a	and 1b)	8,517	
d Other exempt purpose expenditures		4,581,115	
e Total exempt purpose expenditures (add li		4,589,632	
f Lobbying nontaxable amount. Enter the an	nount from the following table in both		
columns.		379,482	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		and the second second
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 \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25%	of line 1f)	94,871	
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 zero on eit	her line 1h or line 1i, did the organization file Form 4	720	
reporting section 4911 tax for this year?			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.)

L	obbying Expenditu	res During 4-Year	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	347,007	347,071	382,370	379,482	1,455,930
b Lobbying ceiling amount (150% of line 2a, column (e))					2,183,895
c Total lobbying expenditures	11,308	7,271	5,759	8,517	32,855
d Grassroots nontaxable amount	86,752	86,768	95,593	94,871	363,984
 e Grassroots ceiling amount (150% of line 2d, column (e)) 					545,976
f Grassroots lobbying expenditures				0	

Schedule C (Form 990 or 990-EZ) 2018 Coalition for the Homeless, Inc. 61-1118307 Page 3 P

art II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

For			(a)		(b)			
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No		Amo	ount		
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: Volunteers?							
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?							
	Na dia advantia ana da O			Andreas Andreas (1975) Andreas Andreas (1975)	n an	an a		
ŭ	Mailings to members, legislators, or the public?			<u> </u>				
e	Publications, or published or broadcast statements?							
	Grants to other organizations for lobbying purposes?							
	Direct contact with legislators, their staffs, government officials, or a legislative body?							
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			ļ				
	Other activities?	no secondario d	RUN CALVE AR					
	Total. Add lines 1c through 1i			-			ional situation	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	4 Philocomolece						
b	If "Yes," enter the amount of any tax incurred under section 4912	ing offering						
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912							
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?							
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6).	01(c)	(5), c	r sec	tion	1	T	
						Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?				1	ļ		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			• • • • • •	2		ļ	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior y			<u></u>	3	-		
-	rt III-B Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."		(b)			line	3, is	
1	Dues, assessments and similar amounts from members		1					
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of							
	political expenses for which the section 527(f) tax was paid).	1000101						
	Current year		2a					
b	Carryover from last year		2b					
C	Total		2c					
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	1011010						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	47.1212 1	4					
	Taxable amount of lobbying and political expenditures (see instructions)		5					
Pa	t IV Supplemental Information							
	ide 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); F e instructions); and Part II-B, line 1. Also, complete this part for any additional information.	Part II-/	A, line	s 1 an	d			
•		• • • • • • •						

Schedule C (Form	990 or 990-EZ) 201 Supplementa	8 Coalit:	ion for t	he Hon	neless,	Inc.	61-1118307	Page 4
	Supplementa	ai informatio	n (continuea)					<u></u>
								••••••
				· · · · · · · · · · · · · · · · · · ·				
	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •						
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					· · · · · <i>· · · · ·</i> · · · · · · ·	•••••		
			• • • • • • • • • • • • • • • • • • • •					
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			· · · · · · · · · · · · · · · · · · ·					
						-		

e curri		Cumplementel [Timen aigl Ofeferrante	
(Form		Supplemental F	Financial Statements ation answered "Yes" on Form 990,	OMB No. 1545-0047
(10111	550)	Part IV, line 6, 7, 8, 9, 10, 11	a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b	2018
	t of the Treasury venue Service	Atta	ch to Form 990.	Open to Public
1 	e organization	Go to www.irs.gov/Form990 to	or instructions and the latest information	Employer identification number
Name of th	e organization			
The full statement of the state		r the Homeless, Inc.		61-1118307
Part	Organiza	ations Maintaining Donor Advised F	unds or Other Similar Funds	or Accounts.
•	Complete	e if the organization answered "Yes" o		
			(a) Donor advised funds	(b) Funds and other accounts
	tal number at end o			
2 Ag	gregate value of co	ontributions to (during year)		
		rants from (during year)		
	gregate value at er	nd of year nform all donors and donor advisors in writing t	hat the exects hald in depart advised	
		ation's property, subject to the organization's e nform all grantees, donors, and donor advisors		
		poses and not for the benefit of the donor or do		
				Yes No
Parti	OMENTS	ation Easements.		
		if the organization answered "Yes" of	n Form 990, Part IV, line 7.	
1 Pu		vation easements held by the organization (che		
		nd for public use (e.g., recreation or education)		portant land area
Π	Protection of natu		Preservation of a certified histo	•
Ē	Preservation of op	ben space		
		ough 2d if the organization held a qualified con day of the tax year.	servation contribution in the form of a c	onservation Held at the End of the Tax Year
				2102152020
		ed by conservation easements		2b
c Nu	mber of conservation	on easements on a certified historic structure ir	ncluded in (a)	20
		on easements included in (c) acquired after 7/2		
		hin the National Register		2d
3 Nur	mber of conservation	on easements modified, transferred, released,		nization during the
tax	year 🕨			
		re property subject to conservation easement i		
		have a written policy regarding the periodic me		
		ement of the conservation easements it holds?		YesNo
6 Sta ►	ff and volunteer ho	ours devoted to monitoring, inspecting, handling	of violations, and enforcing conservati	on easements during the year
• •	ount of expenses i	ncurred in monitoring, inspecting, handling of v	iolations, and enforcing conservation e	asements during the year
▶ \$			isialishs, and shiersing conservation e	accinents during the year
8 Doe		on easement reported on line 2(d) above satisf	y the requirements of section 170(h)(4)	(B)(i)
and	section 170(h)(4)((B)(ii)?		Yes No
		now the organization reports conservation ease	•	
		clude, if applicable, the text of the footnote to th	e organization's financial statements th	nat describes the
		ting for conservation easements.		
Part I	Complete	tions Maintaining Collections of Art if the organization answered "Yes" or	r, Historical Treasures, or Oth a Form 990, Part IV, line 8.	er Similar Assets.
1a lfth	······	cted, as permitted under SFAS 116 (ASC 958),	and the second	and balance sheet
	-	treasures, or other similar assets held for publi		
pub	lic service, provide	e, in Part XIII, the text of the footnote to its finan	cial statements that describes these ite	ems.
b lfth	e organization elec	cted, as permitted under SFAS 116 (ASC 958),	to report in its revenue statement and	balance sheet
wor	ks of art, historical	treasures, or other similar assets held for publi	c exhibition, education, or research in f	urtherance of
		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		▶ \$
		eived or held works of art, historical treasures, o		, provide the
		uired to be reported under SFAS 116 (ASC 958	relating to these items:	
b Ass	ets included in For	m 990, Part X	••••••••••••••••••••••••••••••••••••••	▶ \$ Sabadada D (Earra 000) 2010
For Pape	rwork Reduction	Act Notice, see the Instructions for Form 99	υ.	Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 Coalitic					Page 2
 3 Using the organization's acquisition, acce collection items (check all that apply): 					
a Public exhibition	d	Loan or exchange p	rograms		
b Scholarly research	e				
c Preservation for future generations	•		• • • • • • • • • • • • • • • • • • • •		
 4 Provide a description of the organization's XIII. 	collections and exp	lain how they further	the organizat	ion's exempt purpose ir	Part
5 During the year, did the organization solid	it or receive donatio	ns of art historical tre	easures or of	her similar	
assets to be sold to raise funds rather tha					Yes No
Part IV Escrow and Custodial A					
Complete if the organizati	on answered "Y	es" on Form 990	, Part IV, lii	ne 9, or reported ar	amount on Form
990, Part X, line 21.				-	
1a Is the organization an agent, trustee, cust	odian or other interm	nediary for contributio	ons or other a	ssets not	
					Yes No
b If "Yes," explain the arrangement in Part X	(III and complete the	following table:		r	
					Amount
d Additions during the year					·····
e Distributions during the year					
f Ending balance		• • • •		<u>1f</u>	
2a Did the organization include an amount or					
b If "Yes," explain the arrangement in Part X Part V Endowment Funds.	AIII. Check here if the	e explanation has bee	en provided of		
Complete if the organizati	on answered "V	es" on Form 990	Part IV lir	ne 10	
	(a) Current year	(b) Prior year	(c) Two year		back (e) Four years back
1a Beginning of year balance	(u) ourion you	(a) The year			
b Contributions			1		
c Net investment earnings, gains, and					······································
lanana					
d. Create es esteleration					
e Other expenditures for facilities and			1		
programs					
• • • • • • • • •					
g End of year balance					
2 Provide the estimated percentage of the c	urrent year end bala	nce (line 1g, column	(a)) held as:		
a Board designated or quasi-endowment ►					
b Permanent endowment > %					
c Temporarily restricted endowment ▶	%				
The percentages on lines 2a, 2b, and 2c s	hould equal 100%.				
3a Are there endowment funds not in the pos	session of the organ	ization that are held	and administe	ered for the	
organization by:					Yes No
(i) unrelated organizations					<u>3a(i)</u>
(ii) related organizations					3a(ii)
b If "Yes" on line 3a(ii), are the related organ			۲? 		3b
4 Describe in Part XIII the intended uses of		dowment funds.			
Part VI Land, Buildings, and Eq				a 11a Saa Farm (100 Dert V line 10
Complete if the organization	(a) Cost or other b	······	T	(c) Accumulated	<u>(d) Book value</u>
Description of property	(investment)	(oth		depreciation	(d) BOOK Value
1a and					
1a Land					
 b Buildings c Leasehold improvements 					
d Equipment					<u> </u>
e Other			18,276	14,484	3,792
Total. Add lines 1a through 1e. (Column (d) mu				▶	3,792

Schedule D (Form 990) 2018

	Form 990) 2018 Coalition for the Hor	meless, Inc.	61-1118307	Page 3
Part VII	Investments—Other Securities.	Dert IV	line 11h Cas Form Of	0 Dort V line 10
	Complete if the organization answered "Yes" of (a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)	(b) BOOK Value	Cost or end-of-yea	
(1) Financial				
	eld equity interests			
	futual Funds	483,118	Market	
(A)				
(B)		·····		
(C)				
(D)		······································		
(E) (F)		······································		
(G)	• • • • • • • • • • • • • • • • • • • •	······································	······	<u></u>
(H)				······································
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 12.) 🕨	483,118		
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" of	T		
	(a) Description of investment	(b) Book value	(c) Method of v	
(4)			Cost or end-of-year	
(1)				
(2) (3)				
(4)				
(5)				
(6)				
(7)			· · · · · · · · · · · · · · · · · · ·	
(8)		······································		······
(9)				
The second deal in the second second second second second	nn (b) must equal Form 990, Part X, col. (B) line 13.) Other Assets.			
Part IX	Complete if the organization answered "Yes" of	n Form 990 Part IV	line 11d See Form 99	0 Part X line 15
	(a) Description	arronneoo, raitry,		(b) Book value
(1)				
(2)				
(3)		······································		
(4)				
(5)				
(6)				
(7)				
<u>(8)</u> (9)		······.		
	n (b) must equal Form 990, Part X, col. (B) line 15.)	······································	•	
Part X	Other Liabilities.	***************************************		<u> </u>
an the second and a second	Complete if the organization answered "Yes" o	n Form 990, Part IV,	line 11e or 11f. See Fo	orm 990, Part X,
	line 25.			
1	(a) Description of liability	(b) Book value		
(1) Federal	income taxes			
(2)				
(3)				
(4)				
(5)				
(6) (7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 25.) 🕨			
	uncertain tax positions. In Part XIII, provide the text of the fo	potnote to the organization		
organization's	liability for uncertain tax positions under FIN 48 (ASC 740).	Check here if the text of the	ne footnote has been provide	d in Part XIII 🕱

Schedule D (Form 990) 2018 Coalition for the Homeles Part XI Reconciliation of Revenue per Audited Financial S			Page 4 n.
Complete if the organization answered "Yes" on Form	n 990, Part IV, line 12	a.	
1 Total revenue, gains, and other support per audited financial statements \dots		1	4,893,462
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
a Net unrealized gains (losses) on investments			
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1			4,893,462
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 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 			1 903 163
5 Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12</i> Part XII Reconciliation of Expenses per Audited Financial			<u>4,893,462</u>
Complete if the organization answered "Yes" on Form			um.
			4,589,632
 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: 			4,009,002
	2a		
a Donated services and use of facilities	2b		
 b Prior year adjustments c Other losses 	0.1		

d Other (Describe in Part XIII.)e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1	· · · · · · · · · · · · · · · · · · ·	3	4,589,632
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			1,000,002
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b		40	
			4,589,632
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1			
	<u> </u>		
5 Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 1</i> Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4		Part V, line 4; Part)	۲, line
Part XIII Supplemental Information.	4; Part IV, lines 1b and 2b;		ζ, line
Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	4; Part IV, lines 1b and 2b;		(, line
Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 42; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	4; Part IV, lines 1b and 2b;		(, line
Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 42; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	4; Part IV, lines 1b and 2b; provide any additional info	rmation.	
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 FootnoteThe Coalition's accounting policy provi	4; Part IV, lines 1b and 2b; provide any additional info des that a ta	rmation. x expense/	benefit from
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 Footnote	4; Part IV, lines 1b and 2b; provide any additional info des that a ta	rmation. x expense/	benefit from
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part toPart X - FIN 48FootnoteThe Coalition's accounting policy provian uncertain tax position may be recogn	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it	rmation. x expense/ is more li	benefit from kely than not
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 FootnoteThe Coalition's accounting policy provi	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it	rmation. x expense/ is more li	benefit from kely than not
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 FootnoteThe Coalition's accounting policy provi an uncertain tax position may be recogn that the position will be sustained upo	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination	rmation. x expense/ is more li , includin	benefit from kely than not g resolution
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part toPart X - FIN 48FootnoteThe Coalition's accounting policy provian uncertain tax position may be recogn	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination	rmation. x expense/ is more li , includin	benefit from kely than not g resolution
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 FootnoteThe Coalition's accounting policy provi an uncertain tax position may be recogn that the position will be sustained upo of any related appeals or litigation pr	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base	rmation. x expense/ is more li , includin d on the t	benefit from kely than not g resolution echnical
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 FootnoteThe Coalition's accounting policy provi an uncertain tax position may be recogn that the position will be sustained upo	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base	rmation. x expense/ is more li , includin d on the t	benefit from kely than not g resolution echnical
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 FootnoteThe Coalition's accounting policy provi an uncertain tax position may be recogn that the position will be sustained upo of any related appeals or litigation pr merits. Management believes The Coaliti	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base on has no unc	rmation. x expense/ is more li , includin d on the t	benefit from kely than not g resolution echnical
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 FootnoteThe Coalition's accounting policy provi an uncertain tax position may be recogn that the position will be sustained upo of any related appeals or litigation pr	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base on has no unc	rmation. x expense/ is more li , includin d on the t	benefit from kely than not g resolution echnical
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 FootnoteThe Coalition's accounting policy provi an uncertain tax position may be recogn that the position will be sustained upo of any related appeals or litigation pr merits. Management believes The Coaliti	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base on has no unc	rmation. x expense/ is more li , includin d on the t	benefit from kely than not g resolution echnical
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 FootnoteThe Coalition's accounting policy provi an uncertain tax position may be recogn that the position will be sustained upo of any related appeals or litigation pr merits. Management believes The Coaliti	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base on has no unc	rmation. x expense/ is more li , includin d on the t	benefit from kely than not g resolution echnical
Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 Footnote The Coalition's accounting policy provian uncertain tax position may be recogn that the position will be sustained upo of any related appeals or litigation pr merits. Management believes The Coalition resulting in an accrual of tax expense	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base on has no unc or benefit.	rmation. x expense/ is more li , includin d on the t	benefit from kely than not g resolution echnical
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 FootnoteThe Coalition's accounting policy provi an uncertain tax position may be recogn that the position will be sustained upo of any related appeals or litigation pr merits. Management believes The Coaliti	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base on has no unc or benefit.	rmation. x expense/ is more li , includin d on the t ertain tax	benefit from kely than not g resolution echnical
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 FootnoteThe Coalition's accounting policy provi an uncertain tax position may be recogn that the position will be sustained upo of any related appeals or litigation pr merits. Management believes The Coaliti resulting in an accrual of tax expensePart XIII - Supplemental Financial Info	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base on has no unc or benefit. rmation	rmation. x expense/ is more li , includin d on the t ertain tax	benefit from kely than not g resolution echnical positions
Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 Footnote The Coalition's accounting policy provian uncertain tax position may be recogn that the position will be sustained upo of any related appeals or litigation pr merits. Management believes The Coalition resulting in an accrual of tax expense	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base on has no unc or benefit. rmation	rmation. x expense/ is more li , includin d on the t ertain tax	benefit from kely than not g resolution echnical positions
Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 Footnote The Coalition's accounting policy provian uncertain tax position may be recogn that the position will be sustained upor of any related appeals or litigation presents. Management believes The Coalitier resulting in an accrual of tax expense Part XIII - Supplemental Financial Information for the Homeless, Inc., q	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base on has no unc or benefit. rmation ualifies as a	rmation. x expense/ is more li , includin d on the t ertain tax tax-exemp	benefit from kely than not g resolution echnical positions t
Part XIIISupplemental Information.Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 FootnoteThe Coalition's accounting policy provi an uncertain tax position may be recogn that the position will be sustained upo of any related appeals or litigation pr merits. Management believes The Coaliti resulting in an accrual of tax expensePart XIII - Supplemental Financial Info	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base on has no unc or benefit. rmation ualifies as a	rmation. x expense/ is more li , includin d on the t ertain tax tax-exemp	benefit from kely than not g resolution echnical positions t
Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part X - FIN 48 Footnote The Coalition's accounting policy provian uncertain tax position may be recogn that the position will be sustained upor of any related appeals or litigation presents. Management believes The Coalitier resulting in an accrual of tax expense Part XIII - Supplemental Financial Information for the Homeless, Inc., q	4; Part IV, lines 1b and 2b; provide any additional info des that a ta ized when it n examination ocesses, base on has no unc or benefit. rmation ualifies as a the Internal	rmation. x expense/ is more li , includin d on the t ertain tax tax-exemp Revenue C	benefit from kely than not g resolution echnical positions t ode and,

Schedule D (Form 990) 2018 Coalition for the Homeless, Inc. Part XIII Supplemental Information (continued)	61-1118307	Page 5
in these statements.		
The Coalition's accounting policy provides that an uncertain tax position may be recognized when that the position will be sustained upon examina of any related appeals or litigation processes,	it is more likel tion, including r	y than not esolution
merits. Management believes the Coalition has no		
resulting in an accrual of tax expense or benefi		
		•••••

Schedule D (Form 990) 2018

		s" on Form 99	90, Part IV, line 17, 18, or 19		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Attach to For to www.irs.gov/Form990 fo		n 990-EZ. and the latest information.		Open to Public Inspection
Name of the organization				Employer identifie	cation number
Coalition for t Part I Fundraising Activities. Compl				61-1118	
Form 990-EZ filers are not requ			wered res off		, mie 17.
1 Indicate whether the organization raised funds the	rough any of the follow	wing activit	ies. Check all that app	bly.	
a 🔲 Mail solicitations	e 🔄 Solicitation	n of non-go	vernment grants		
b Internet and email solicitations	f 🔄 Solicitation	n of govern	ment grants		
c 🔄 Phone solicitations	g 🔄 Special fu	ndraising e	vents		
d In-person solicitations	and the state that				
2a Did the organization have a written or oral agreen or key employees listed in Form 990, Part VII) or	entity in connection w	al (includin vith profess	g officers, directors, tr ional fundraising servi	ustees, ices?	Yes No
b If "Yes," list the 10 highest paid individuals or enti compensated at least \$5,000 by the organization.		suant to ag	reements under which	the fundraiser is to	be
compensated at least \$5,000 by the organization.	1	(iii) Did fund- raiser have	[]	(v) Amount paid to	(vi) Amount paid to
 (i) Name and address of individual or entity (fundraiser) 	(ii) Activity	custody or control of	(iv) Gross receipts from activity	(or retained by) fundraiser listed in	(or retained by) organization
		contributions?		col. (i)	
1		Yes No			
•					
2					
3					
4					
5					
5					
6					
7					
8					
9					
10					
Total	<u>_</u>				
Total 3 List all states in which the organization is registered		it contributi	ons or has been notifi	ed it is exempt from	
registration or licensing.					
	•••••••••••••••••••••••••••••••••••••••				
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	····	<i></i>	·····	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
For Paperwork Reduction Act Notice, see the Instruction	ctions for Form 990	or 990-EZ.		Schedule G (Form	990 or 990-EZ) 2018

 Schedule G (Form 990 or 990-EZ) 2018
 Coalition for the Homeless, Inc.
 61–1118307
 Page 2

 Part II
 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.

	greater than \$5,000.			
	(a) Event #1	(b) Event #2	(c) Other events	
	Develop Misser		Mana	(d) Total events
		None	(add col. (a) through col. (c))	
	(event type) (event type) (total number)		(total number)	
Gross receipts	122,654	32,249		154,903
Less: Contributions	29,908	6,788		36,696
Gross income (line 1 minus line 2)	92,746	25,461		118,207
Cash prizes				
Noncash prizes				
Rent/facility costs	1,272			1,272
Food and beverages	22,629		I	22,629
Entertainment				
Other direct expenses	49,385	13,890	а, 11100 _{вересиини} н түс – 1110 в. 1890 вересе түс – 1 – 1110 в. 1100	63,275
Direct expense summar	y. Add lines 4 through 9 in column	u (d)	•	87.176
Net income summary S	ubtract line 10 from line 3, column	(d)		87,176 31,031
Gaming. Con	plete if the organization an	swered "Yes" on Form 99() Part IV line 19 or r	
	on Form 990-EZ, line 6a.		, i artiv, inte 10, or i	
		(a) Bingo (b) Pull tabs/instant (c) Other gaming		(d) Total gaming (add
		bingo/progressive bingo		col. (a) through col. (c))
Gross revenue	414,188	2,071,050		2,485,238
Cash prizes	485,944	1,587,590		2,073,534
Noncash prizes				
Rent/facility costs	80,000			80,000
Other direct expenses	123,234	13,391		136,625
Volunteer labor	X Yes 85.00 %	X Yes 85.00 % No	Yes % X No	
Direct expense summar	y. Add lines 2 through 5 in column	(d)	►	2,290,159
Net gaming income sum	mary. Subtract line 7 from line 1, o	column (d)	•	195,079
		-h - f H t - t 0		
	's gaming licenses revoked, susp	ended, or terminated during the t	ax year?	Yes X No
r the state(s) in whi e organization licen o," explain:	ich th sed	ich the organization conducts gaming a sed to conduct gaming activities in eac	ich the organization conducts gaming activities: KX sed to conduct gaming activities in each of these states?	ch the organization conducts gaming activities:

Sch	edule G (Form 990 or 990-EZ) 2018 Coalition for the Homeless, Inc. 61-1118307 Page 3
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity
40	formed to administer charitable gaming? Yes X No
13	Indicate the percentage of gaming activity conducted in: The organization's facility
a b	
14	An outside facility 13b % Enter the name and address of the person who prepares the organization's gaming/special events books and
••	records:
	Name Jennifer Haggard 5001 Stephan Drive
	Address Louisville KY 40258
15a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the
	amount of gaming revenue retained by the third party ▶\$
С	If "Yes," enter name and address of the third party:
	Name ►
	Address ►
16	Gaming manager information:
	Name > Jennifer Haggard
	Gaming manager compensation ▶\$
	Description of services provided >
	Director/officer
17	Mandatory distributions:
' <i>a</i>	Is the organization required under state law to make charitable distributions from the gaming proceeds to
-	retain the state gaming license? Yes X No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or
	spent in the organization's own exempt activities during the tax year 🌬
	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information.
	See instructions.
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	Schedule G (Form 990 or 990-EZ) 2018

SCHEDULE I (Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.							
Internal Revenue Service	Go to www.i	rs.gov/Form990 for t	he latest information	on.				
Name of the organization Coalition for the	Homeless, Inc	•				Employer identification number 61–1118307		
Part I General Information on Grants an	d Assistance							
 Does the organization maintain records to substantiate the selection criteria used to award the grants or assist Describe in Part IV the organization's procedures for maintain the selection of the sele	the amount of the grants of the grants of the grants of the grant function of the use of grant function of the	assistance, the grant	ees' eligibility for the	e grants or assistar	ice, and	Yes 🔀 No		
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient tha	omestic Organizatio	ns and Domestic	Governments.	Complete if the	e organiza	tion answered "Yes" on Form 990		
1 (a) Name and address of organization or government	(b) EIN (c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description noncash assista	· · · · ·		
(1) Family Health Center 2215 Portland Aveneue Louisville KY 40212	501c3	366,145						
(2) Home of the Innocents 1100 East Market Street Louisville KY 40206	501c3	245,518						
(3) House of Ruth 1022 S 6th Street Louisville KY 40203	501c3	21,409						
(4) St. John Center 700 E Muhammad Ali Blvd Louisville KY 40202	501c3	283,291						
(5) St. Vincent de Paul 4709 Allmond Avenue Louisville KY 40209	501c3	166,865						
(6) Wellspring P. O. Box 1927 Louisville KY 40201	501c3	606,214						
(7)		000,211						
(8)								
(9)								
 2 Enter total number of section 501(c)(3) and governme 3 Enter total number of other organizations listed in the 	ling 1 table		·····		ı	·····		
For Paperwork Reduction Act Notice, see the Instruction				<u></u>				

DAA

Schedule I (Form 990) (2018) Coalition for the Homeless, Inc. 61-1118307

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

			additional			

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Housing Assistance		1,243,958			
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Pro	ovide the information	required in Part I, I	ine 2; Part III, colun	nn (b); and any other add	itional information.
					·····.
	•••••••••••••••••••••••••••••••••••••••				

Page 2

SCHEDULE M (Form 990)

Noncash Contributions

- Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- Attach to Form 990.
- Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 **2018** Open To Public Inspection

Employer identification number

61-1118307

Department of the Treasury
Internal Revenue Service
Name of the organization

Coalition for the Homeless, Inc. Types of Property

P	Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of determining			
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution amounts			
1	Art — Works of art							
2	Art — Historical treasures				anna ann an Anna ann ann ann ann ann ann	_		
3	Art — Fractional interests			·······		_		
4	Books and publications			······································		-		
5	Clothing and household							
-	goods							
6	Cars and other vehicles					_		
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded				a ta ang ang ang ang ang ang ang ang ang an			
10	Securities — Closely held stock							
11	Securities - Partnership, LLC,				,			
••	or trust interests							
12	Securities — Miscellaneous							
13	Qualified conservation							
10	contribution — Historic							
	structures							
14	Qualified conservation							
••	contribution — Other							
15	Real estate — Residential							
16	Real estate — Commercial							
17	Real estate — Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy				and a second			
22	Historical artifacts		· · · · · · · · · · · · · · · · · · ·					
23	Scientific specimens							
24	Archeological artifacts				.,			
25	Other (Event Supplies)	X	3	202,740				
26	Other ▶()							
27	Other ▶()							
28	Other ▶(
29	Number of Forms 8283 received by	the organ	nization during the tax y	ear for contributions for				
	which the organization completed F	orm 8283	, Part IV, Donee Ackno	wledgement	29			
	-				Yes No	>		
30a	During the year, did the organizatio	n receive	by contribution any pro	perty reported in Part I, lin	es 1 through			
	28, that it must hold for at least thre	e years fr	om the date of the initia	I contribution, and which i	sn't required			
	to be used for exempt purposes for	the entire	holding period?		30a X	•		
b								
31	Does the organization have a gift a		policy that requires the	review of any nonstanda	rd			
		-			<u>31 X</u>	•		
32a	Does the organization hire or use th	nird parties	s or related organizatior	ns to solicit, process, or se	ell noncash			
	contributions?		-		32a X			
b	If "Yes," describe in Part II.	• • • • • • • • • • • •						
33	If the organization didn't report an a	mount in	column (c) for a type of	property for which colum	n (a) is checked,			
	describe in Part II.		·					
-			iona fan Conno 000		Schodulo M (Earm 990) 201			

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

Schedule M (Form 990) 2018

Schedule M (Fo	orm 990) 2018 Coalitio	n for the	Homeless.	Inc. 61-	1118307	Page 2
	Supplemental Inform the organization is reported or a combination of bo	orting in Part I, c	olumn (b), the nı	umber of contribu	itions, the number o	33, and whether f items received,
	of a compination of bo	III. AISO COMPIEN	a this part for any			
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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.



Coalition for the Homeless, Inc. 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 VI, Line 11b - Organization's Process to Review Form 990 A draft of the 990 is emailed from the accounting firm before submission. The return is reviewed through the finance/audit committee of the board as 104548 03/02/2020 10:40 AM

Schedule O (Form 990 or 990-EZ) (2018) Name of the organization	Page 2 Employer identification number
Coalition for the Homeless, Inc.	61-1118307
well as the full board before approval for sub	mission.
Form 990, Part VI, Line 12c - Enforcement of C	
The organization has the policy signed annuall	y. In addition, the policy
is submitted to the Department of Housing and	Urban Development.
Form 990, Part VI, Line 15a - Compensation Pro	cess for Top Official
The Board of Directors reviews and evaluates t	he Executive Director and he
performance.	
Form 990, Part VI, Line 19 - Governing Documen	ts Disclosure Explanation
Governing documents are provided upon request.	
	·····

Schedule O (Form 990 or 990-EZ) (2018)

	m 4562		(In	cluding Inform ► Attach	and Amort ation on Listed to your tax return	Property)			OMB No. 1545-0172
	nal Revenue Service (99)	<u> </u>	Go to www.irs.	gov/Form4562 fo	or instructions an	d the latest info			Attachment Sequence No. 179
Nam	ie(s) shown on return	77	i an fan ti	h			Identify		
Busi	ness or activity to which th		ion for t	ne Homere	ss, inc.		61-1	118	307
	ndirect Dep								
			ense Certain Pr	operty Under	Section 179				
visti kultu			any listed prope			you complete	Part I.		
1	Maximum amount (se				······································			1	1,000,000
2	Total cost of section ?	179 propert	ty placed in service	(see instructions)				2	
3	Threshold cost of sec	ction 179 pr	operty before reduc	ction in limitation (see instructions)			3	2,500,000
4	Reduction in limitation				* * * * * * * * * * * * * * *			4	
_5	Dollar limitation for tax ye			ro or less, enter -0	1			5	
_6		(a) Description	n of property		(b) Cost (business u	se only) (c) Elected cost		
P.a				·····			·····		
	Listed				L				
7	Listed property. Enter			unto in column (o	linco C and 7	7		8	
8 9	Total elected cost of s Tentative deduction.), lines 6 and 7 \dots		· · · · · · · · · · · · · · · · ·	<u>0</u> 9	
9 10	Carryover of disallowe				32		·····	10	
11	Business income limit		•			line 5. See inst	· · · · · · · · · · · · -	11	
12	Section 179 expense			•	,		· •	12	
13	Carryover of disallowe					13	<u></u>		
Note	: Don't use Part II or P								
Pa	art II Special D	Deprecia	tion Allowance	and Other D	epreciation (D	on't include	listed prop	erty.	See instructions.)
14	Special depreciation a	allowance f	or qualified property	y (other than listed	l property) placed	in service			
	during the tax year. S	ee instructi	ons				L	14	
15	Property subject to se	ection 168(f)(1) election				L	15	
<u>16</u>	Other depreciation (in						<u></u>	16	985
P	art III MACRS [Deprecia	tion (Don't incl			uctions.)			
······					ion A				
17	MACRS deductions for	•						17	0
<u>18</u>	If you are electing to group an		ed in service during the ta sets Placed in Ser				P E	uctom	
	0600		(b) Month and year	(c) Basis for depre					
	(a) Classification of prope	erty	placed in service	(business/investmonly-see instruction)	ent use	(e) Convention	(f) Method	1 1	(g) Depreciation deduction
19a	3-year property								
b	5-year property								
c	7-year property					-			187
d	10-year property			0000000					
е	15-year property								
f	20-year property								
g	25-year property				25 yrs.		S/L		
h	Residential rental		[27.5 yrs.		S/L		
	property				27.5 yrs.		S/L		
i	Nonresidential real				39 yrs.	MM	S/L		
	property				<u> </u>		S/L		
20a	Class life	n C—Asse	ets Placed in Servi	ce During 2018	ax rear Using th	e Alternative De		systen	n
					12		S/L		
b	12-year 30-year				12 yrs. 30 yrs.	MM	S/L S/L		
	40-year				40 yrs.	MM			
	Int IV Summary	(See inc	structions)	1	<u> </u>				<u></u>
21	Listed property. Enter			,				21	
22	Total. Add amounts fr			7, lines 19 and 20	in column (a), and	l line 21. Enter	·····		
-	here and on the appro	priate lines	of your return. Par	tnerships and S c	orporations-see i			22	985
23	For assets shown abo								
For	portion of the basis att Paperwork Reduction				<u></u>	23			F 4560 (00.15)
DAA	apprintin Neuronom		, see separate ma		There	are no a	mounts	fo	Form 4562 (2018) r Page 2

Bingo

Gross receipts

Description	 Amount			
	\$ 414,188			
Total	\$ 414,188			

ORIGINAL COPY FILED SECRETARY OF STATE OF KENTUCKY, FRANKFORT, KENTUCKY

ARTICLES OF INCORPORATION

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MAY 2 2 1986

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. [

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:

1. 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;

2. 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. D. 184

1 5.6

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:

 Larry Otto 420 South Second Street Louisville, Kentucky 40202

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

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ARTICLE VI - INITIAL BOARD OF DIRECTORS

The initial Board of Directors who shall serve until the Board of Directors

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is duly elected at the first membership meeting are:

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

- Blanche Cooper, Judge's Designee
 527 West Jefferson, Suite Louisville, Kentucky 40202
- 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.

-3-

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.

unace C. O.

ARTICLE X - INTERNAL AFFAIRS

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www.baldwincpas.com



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-forprofit organization) which comprise the statements of financial position as of June 30, 2019 and 2018, 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, 2019 and 2018, 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 January 5, 2020 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 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 January 5, 2020

The Coalition for the Homeless, Inc. Statements of Financial Position June 30, 2019 and 2018

		2019		2018
Assets				
Cash	\$	557,485	\$	319,379
Grants receivable		406,816		447,356
Promises to give		14,383		19,227
Inventory		-		38
Prepaid expenses		9,614		4,329
Investments		483,118		388,040
Property and equipment, net		3,792		4,208
Total Assets	\$	1,475,208	\$	1,182,577
Liabilities and Net Assets				
Liabilities				
Accounts payable	\$	245,129	\$	266,542
Accrued expenses and withholdings	<u> </u>	42,940		28,577
Total Liabilities		288,069		295,119
Net assets				
Without donor restrictions		1,028,864		774,004
With donor restrictions		158,275	• <u></u>	113,454
Total Net Assets		1,187,139		887,458
Total Liabilities and Net Assets	\$	1,475,208	\$	1,182,577

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The Coalition for the Homeless, Inc. Statements of Activities For the Years Ended June 30, 2019 and 2018

		2019		2018			
	Without Donor	With Donor		Without Donor	With Donor		
	Restrictions	Restrictions	Total	Restrictions	Restrictions	Total	
Revenue and Support:							
Grants and contributions	\$ 4,271,850	\$ 243,778	\$ 4,515,628	\$ 3,858,115	\$ 211,649	\$ 4,069,764	
Charitable gaming revenue, net	195,079	-	195,079	197,741	-	197,741	
Membership dues	79,630	-	79,630	51,629	-	51,629	
Special event revenue	154,903	-	154,903	72,420	-	72,420	
Special event expense	(87,176)	-	(87,176)	(50,392)	-	(50,392)	
Investment income	4,614	-	4,614	1,903	_	1,903	
Realized and unrealized gain on investments, net	13,850	-	13,850	19,638	-	19,638	
Other income	12,785	-	12,785	8,506	-	8,506	
	4,645,535	243,778	4,889,313	4,159,560	211,649	4,371,209	
Net Assets Released from Restrictions:							
Restrictions satisfied by payments	198,957	(198,957)		166,117	(166,117)		
Total Revenue and Support	4,844,492	44,821	4,889,313	4,325,677	45,532	4,371,209	
Expenses:							
Program services	4,305,267	-	4,305,267	3,937,096	-	3,937,096	
Management and general	139,106	-	139,106	155,132	-	155,132	
Fundraising	145,259		145,259	156,566		156,566	
Total Expenses	4,589,632	12.	4,589,632	4,248,794		4,248,794	
Change in Net Assets	254,860	44,821	299,681	76,883	45,532	122,415	
Net Assets at Beginning of Year	774,004	113,454	887,458	697,121	67,922	765,043	
Net Assets at End of Year	\$ 1,028,864	\$ 158,275	\$ 1,187,139	\$ 774,004	\$ 113,454	\$ 887,458	

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, 2019 and 2018

	2019			2018				
-	Program	Management			Program	Management		· · · · · · · · · · · · · · · · · · ·
	Services	and General	Fundraising	Total	Services	and General	Fundraising	Total
Salaries and payroll taxes	\$ 649,936	\$ 40,508	\$ 112,062	\$ 802,506	\$ 534,937	\$ 34,736	\$ 125,050	\$ 694,723
Employee benefits	88,854	5,538	15,320	109,712	102,127	15,502	23,872	141,501
Federal awards - subrecipients	2,851,128	-	-	2,851,128	2,700,266	-	-	2,700,266
Stand down program	6,833	-	-	6,833	14,075	-	-	14,075
Shelter assistance	65,313	-	-	65,313	96,179	-	-	96,179
Special project expenses	146,877	-	-	146,877	104,851	-	-	104,851
Other assistance	264,396	-	-	264,396	196,112	-	-	196,112
Supplies	15,036	937	2,593	18,566	10,254	666	2,397	13,317
Printing and postage	14,983	934	2,583	18,500	14,830	963	3,467	19,260
Rent	65,495	4,082	11,293	80,870	55,147	35,258	-	90,405
Repairs and maintenance	-	3,370	-	3,370	-	9,284	-	9,284
Telephone and internet	7,832	488	1,350	9,670	6,603	429	1,543	8,575
Travel and conferences	56,763	2,987	-	59,750	26,619	1,401	-	28,020
Dues and subscriptions	-	2,563	-	2,563	-	2,131	-	2,131
Depreciation	337	21	58	416	1,418	709	237	2,364
Professional fees	69,502	70,666	-	140,168	72,820	48,548	-	121,368
Miscellaneous	-	4,870	-	4,870	-	1,000	-	1,000
Board and committees	1,982	2,142	-	4,124	858	4,505	-	5,363
Direct special event expenses	••	-	87,176	87,176	-	•••	50,392	50,392
Total expenses	4,305,267	139,106	232,435	4,676,808	3,937,096	155,132	206,958	4,299,186
Less: Direct special event expenses		-	(87,176)	(87,176)			(50,392)	(50,392)
Total expenses on statement								
of activities	\$ 4,305,267	\$ 139,106	\$ 145,259	\$ 4,589,632	\$ 3,937,096	\$ 155,132	\$ 156,566	\$ 4,248,794

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, 2019 and 2018

	2019		2018	
Cash Flows from Operating Activities				
Change in net assets	\$	299,681	\$	122,415
Adjustments to reconcile change in net assets				
to net cash provided (used) by operating activities:				
Depreciation		416		2,364
Realized and unrealized gain on investments		(13,850)		(19,638)
(Increase) decrease in operating assets:				
Grants receivable		40,540		(394,521)
Promises to give		4,844		(1,522)
Inventory		38		2,592
Prepaid expenses		(5,285)		(813)
Increase (decrease) in operating liabilities:				
Accounts payable		(21,413)		227,971
Accrued expenses and withholdings		14,363		10,392
Net Cash Provided (Used) by Operating Activities		319,334		(50,760)
Cash Flows from Investing Activities				
Purchase of investments		(81,228)		(101,584)
Net Cash Used by Investing Activities	<u> </u>	(81,228)		(101,584)
Net Increase (Decrease) in Cash		238,106		(152,344)
Cash, Beginning of Year	•••	319,379		471,723
Cash, End of Year	\$	557,485	\$	319,379

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 Coalition is required to report information regarding its consolidated financial position and activities according to two classes of net assets. A description of the net assets categories follows:

<u>Net assets without donor restrictions</u>: expendable funds that are not subject to donor-imposed stipulations or invested in land, building and equipment.

<u>Net assets with donor restrictions</u>: stipulated by donors for specific operating purposes or are restricted by time. These include donor restrictions requiring that the corpus to be invested in perpetuity and only the income be made available for 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.

<u>Cash</u>

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 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.

Note 1 - Significant Accounting Policies - Continued

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 reported at fair value. Fair value is 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. See Note 4 for further discussion of fair value measurements. Receipts of donated investments are recorded at the quoted market value of the investments at the time of receipt.

The ASC establishes a framework for measuring fair value based upon a hierarchy that prioritizes observable and unobservable inputs used to measure fair value as follows:

Level 1 – Quoted prices (unadjusted) in active markets that are accessible at the measurement date for identical assets or liabilities.

Level 2 – Observable inputs other than level 1 prices such as quoted prices for similar assets or liabilities; quoted prices for identical or similar assets or liabilities in inactive markets; or other inputs that are observable or can be corroborated by observable market data.

Level 3 – Unobservable inputs that are supported by little or no market activity and are significant to the fair value of the assets or liabilities. Level 3 includes values determined using pricing models, discounted cash flow methodologies, or similar techniques reflecting the Coalition's own assumptions.

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 that are restricted by the donor are reported as increases in net assets without donor restrictions if the restrictions expire in the same period in which the contributions are recognized. All other donor restricted contributions are reported as increases in net assets with donor restrictions. When a restriction expires because the contributed resources are spent in accordance with the donor's instructions or because of passage of time, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restriction.

Note 1 - Significant Accounting Policies - Continued

Contributions and Grants - Continued

In the absence of donor restrictions to the contrary, restrictions on contributions of property or equipment or on assets restricted to acquiring property or equipment expire when the property or equipment is placed in service.

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, 2019 and 2018 were \$166,044 and \$24,144, 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

The costs of providing the various programs and supporting activities have been summarized on a functional basis in the statements of functional expenses. Accordingly, costs have been allocated among the program and supporting services benefited. Directly identifiable expenses are charged to program and supporting services. The expenses that are allocated are compensation and benefits, occupancy, supplies, printing, postage, telephone, and depreciation, which are allocated on the basis of estimates of time and effort.

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.

Recently Issued Accounting Standards

For the year ended June 30, 2019, the Coalition adopted the Financial Accounting Standards Board's Accounting Standards Update (ASU) No. 2016-14 – *Not-for-profits (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities.* This update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return between not-for-profit entities. A new disclosure was added to provide clarity about the liquidity and availability of resources for the upcoming fiscal year (see Note 11). The changes required by the update have been applied retrospectively to all periods presented. A key change required by ASU 2016-14 are the net asset classes used in these financial statements. Amounts previously reported as unrestricted net assets are now reported as net assets without donor restrictions and amounts previously reported as temporarily restricted net assets are now reported as net assets with donor restrictions.

Note 1 - Significant Accounting Policies - Continued

Reclassifications

Certain reclassifications have been made to the 2018 financial statement presentation to correspond to the current year's format. Net assets and changes in net assets are unchanged due to these reclassifications.

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, 2019 and 2018 was approximately \$129,300 and \$54,000, 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 2019. 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, 2019 and 2018, 74% and 79%, 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, 2019 and 2018, respectively:

	2019			2018		
Metro United Way	\$	14,383	\$	19,227		

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:

Inrealized

					U	neanzeu
	F	air Value	C	Cost Basis		s/(Losses)
June 30, 2019						
Money market	\$	21,451	\$	21,451	\$	-
Mutual funds - ETF		18,362		17,978		384
Mutual funds - equities		414,304		378,179		36,125
Mutual funds - fixed income		29,001		29,000		1
	\$	483,118	\$	446,608	\$	36,510
		<u>(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>				
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
		4 <u>44444</u>			<u></u>	
	\$	388,040	\$	336,076	\$	51,964

Following is a description of the valuation methodologies used for assets at fair value. There have been no changes in the methodologies used to determine fair value at June 30, 2019 and 2018.

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.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Coalition believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Note 5 - Property and Equipment

Property and equipment and total accumulated depreciation are as follows:

		2019	2018		
Property and equipment Less accumulated depreciation		18,276 (14,484)	\$	18,276 (14,068)	
	\$	3,792	\$	4,208	

Note 6 - Net Assets with Donor Restrictions

Net assets with donor restrictions are restricted to certain programs or by the passage of time and consist of the following:

	2019			2018
Continuum of Care Program,				
Metro United Way	\$	14,383	\$	19,227
Community Foundation		25,000		-
Event sponsors		4,500		16,500
Expanded services grant		50,000		50,000
Rx: Housing Grant		18,000		5,811
Program Income from Tenants	46,392		46,392	
	\$	158,275	\$	113,454

Note 7 - 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, 2019 and 2018 were \$40,630 and \$54,115, respectively.

Note 8 - 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, 2019, are as follows:

Due Fiscal Year Ending June 30,	Amount
2020 2021 2022 2023	\$ 144,223 72,199 43,094 11,000
	\$ 270,516

Rent expense for the years ended June 30, 2019 and 2018 was \$167,422 and \$175,630, respectively.

Note 9 - 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 net ticket income is included in other income in the statements of activities and is presented as follows:

	 2019		2018
Ticket revenue Ticket expense	\$ 406,636 (394,314)	\$	401,007 (392,847)
Net ticket income	 12,322	\$	8,160

Note 10 - Federal Awards

During the years ended June 30, 2019 and 2018, 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, 2019 and 2018 totaling \$2,883,228 and \$2,750,935, respectively, to sub-recipients who provide programs that assist the homeless.

Note 11 - Liquidity and Availability

The following table reflects the Coalition's financial assets as of June 30, 2019, reduced by amounts not available for general expenditure within one year. Financial assets are considered unavailable when illiquid, not convertible to cash within one year, or funds donors set aside for a specific purpose.

Financial assets	
Cash	\$ 557,485
Grants receivable	406,816
Promises to give	14,383
Investments	 483,118
Total financial assets	1,461,802
Less those unavailable for general expenditure	
within one year:	
Restricted for specified programs	 (158,275)
Total financial assets available for general	
expenditure within one year	\$ 1,303,527

In addition to financial assets available to meet general expenditures over the year, the Coalition operates with a balanced budget and anticipates covering its general expenditures by: collecting sufficient program and other revenues, utilizing resources from current and prior year's gifts, and appropriating the return on its investments, as needed.

Note 12 - 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, 2022, with early adoption permitted. The Coalition is currently evaluating the effect that the new standard will have on its financial statements.

Accounting Standards Update 2018-08, Not-for-Profit Entities (Topic 958)

In June 2018, the FASB issued ASU No. 2018-08, *Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made (Topic 958),* to assist entities in (1) evaluating whether transactions should be accounted for as contributions (nonreciprocal transactions) within the scope of Topic 958, Not-for-Profit Entities, or as exchange (reciprocal) transactions subject to other guidance and (2) determining whether a contribution is conditional. The ASU will be effective for the Coalition for the year ending June 30, 2020. The Coalition is currently evaluating the effect that the new standard will have on its financial statements.

Note 13 - Subsequent Events

Management has evaluated subsequent events for recognition or disclosure in the financial statements through January 5, 2020, which was the date at which the financial statements were available to be issued.

Additional Information

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The Coalition for the Homeless, Inc. Schedule of Expenditures of Federal Awards For the Year Ended June 30, 2019

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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	\$	\$ 105,200
Total CDBG - Entitlement Grants Cluser		-	105,200
Emergency Solutions Grant	14.231	32,100	32,100
Continuum of Care Program	14.267	2,851,128	3,543,785
Total U.S. Department of Housing and Urban Deveopm	rent	2,883,228	3,681,085
Total Expenditures of Federal Awards		\$ 2,883,228	\$ 3,681,085

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The Coalition for the Homeless, Inc. Notes to Schedule of Expenditures of Federal Awards For the Year Ended June 30, 2019

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, 2019. 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, 2019 and 2018, 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 January 5, 2020.

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 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.

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Baldwin CPAS, PLLC

Louisville, Kentucky January 5, 2020



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, 2019. 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, 2019.

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 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 of the purpose of the effectiveness of the Coalition for the Homeless, Inc.'s 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 compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance is a deficiency 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 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 January 5, 2020 The Coalition for the Homeless, Inc. Schedule of Findings and Questioned Costs For the Year Ended June 30, 2019

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

- 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

\$ 3,543,785

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	КҮ
File Date	5/22/1986
Organization Date	5/22/1986
Last Annual Report	1/7/2020
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	<u>Vaughn Payne</u>
CEO	<u>Natalie Harris</u>
Vice Chairman	<u>Maria Schaefer</u>
Secretary	<u>Andy Patterson</u>
Treasurer	Caroline Heine
Director	<u>Vaughn Payne</u>
Director	Caroline Heine
Director	<u>Andy Patterson</u>
Director	Natalie Harris
Director	<u>Jennifer Baldwin</u>
Director	<u>Maria Schaefer</u>
CFO	<u>Jennifer Baldwin</u>

Individuals / Entities listed at time of formation

Director	LARRY OTTO
Director	JIM GILMORE
Director	TERESA WATSON
Director	<u>REV MIKE ELLIOTT</u>
Director	BLANCHE COOPER
Incorporator	LARRY OTTO
Incorporator	JIM GILMORE
Incorporator	ALPHONSO O'NEIL WHITE

Images available online

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

Annual Report	1/7/2020	1 page	<u>PDF</u>
Annual Report Amendment	3/11/2019	1 page	PDF
Annual Report	2/5/2019	1 page	<u>PDF</u>
Annual Report	1/17/2018	1 page	<u>PDF</u>
Annual Report	2/8/2017	1 page	PDE

https://web.sos.ky.gov/ftshow/(S(zgimgzo4j30kplh5dzul1jhd))/default.aspx?path=ftsearch&id=0215424&ct=09&cs=99999&ce=uyetAxwzHzGyIM7mEd... 1/3

Welcome to Fasttrack Organization Search

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Annual Report	2/9/2016	1 page	<u>PDF</u>	
Annual Report	2/6/2015	1 page	<u>PDF</u>	
Annual Report	1/27/2014	1 page	<u>PDF</u>	
Annual Report	1/11/2013	1 page	PDF	
Principal Office Address	1/11/2012 12:32:24 PI	M1 page	<u>PDF</u>	
Change				
Annual Report	1/11/2012	1 page	<u>PDF</u>	
Registered Agent	1/25/2011 12:02:01 PI	M1 page	PDF	
name/address change	• •			
Annual Report	1/25/2011	1 page	PDF	
Annual Report	1/21/2010	1 page	PDF	
Annual Report	3/30/2009	1 page	PDF	
Annual Report	8/11/2008	1 page	PDF	
Annual Report	2/20/2007	1 page	tiff	<u>PDF</u>
Annual Report	1/31/2006	1 page	PDF	
Annual Report	2/11/2005	1 page	PDF	
Annual Report	8/25/2003	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/2/2002	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	8/15/2001	1 page	tiff	<u>PDF</u>
Annual Report	7/6/2000	4 pages	tiff	<u>PDF</u>
Annual Report	8/17/1999	5 pages	<u>tiff</u>	<u>PDF</u>
Statement of Change	7/21/1999	1 page	<u>tiff</u>	<u>PDF</u>
<u>Letters</u>	1/28/1999	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	9/2/1998	5 pages	<u>tiff</u>	PDF
Statement of Change	7/3/1997	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1997	3 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1996	3 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1995	2 pages	tiff	<u>PDF</u>
Statement of Change	5/26/1994	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	4/20/1994	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	4/5/1993	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	3/25/1992	1 page	<u>tiff</u>	<u>PDF</u>
Statement of Change	3/16/1992	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1991	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1990	3 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1989	2 pages	<u>tiff</u>	PDF
Articles of Incorporation	5/22/1986	7 pages	<u>tiff</u>	<u>PDF</u>
Articles of Incorporation	5/22/1986	7 pages	<u>tiff</u>	PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	1/7/2020 11:18:08 AM	1/7/2020 11:18:08 AM	
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	1/27/2014	

https://web.sos.ky.gov/ftshow/(S(zgimgzo4j30kplh5dzul1jhd))/default.aspx?path=ftsearch&id=0215424&ct=09&cs=99999&ce=uyetAxwzHzGyIM7mEd... 2/3

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		2:59:52 PM	2:59:52 PM
	Annual report	1/11/2013	1/11/2013
	Annual report	12:34:01 PM	12:34:01 PM
	Annual report	1/11/2012	1/11/2012
	Annual report	12:40:16 PM	12:40:16 PM
	Principal office change	1/11/2012	1/11/2012
	rincipal office change	12:32:24 PM	12:32:24 PM
	Registered agent address change	1/25/2011	1/25/2011
	Registered agent address change	12:02:01 PM	12:02:01 PM
	Annual report	1/25/2011	1/25/2011
	Annual report	11:58:11 AM	11:58:11 AM
	Annual report	1/21/2010	1/21/2010
	Annual report	2:56:23 PM	2:56:23 PM
	Annual report	3/30/2009	3/30/2009
	Annual report	9:46:38 AM	9:46:38 AM
	Annual report	8/11/2008	8/11/2008
	Annual report	12:00:58 PM	12:00:58 PM
	Annual report	2/20/2007	2/20/2007
	Annual report	7:34:13 AM	2/20/2007
	Annual report	1/31/2006	1/31/2006
	Annual report	12:03:34 PM	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
		2/1/1999	2/1/1999
	•	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</u> <u>Documents</u> to the Corporate Records Branch at 502-564-5687.

 Annual Report	12/31/2004 2:06:18 PM	41 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
Annual Report	8/17/1999	5 pages
Statement of Change	7/21/1999	1 page
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Statement of Change	7/3/1997	1 page
Annual Report	7/1/1997	3 pages
Annual Report	7/1/1996	3 pages
Annual Report	7/1/1995	1 page
Statement of Change	5/26/1994	1 page
Annual Report	4/20/1994	1 page
Annual Report	4/5/1993	1 page
Annual Report	3/25/1992	1 page
Statement of Change	3/16/1992	1 page
Annual Report	7/1/1991	2 pages
Annual Report	7/1/1990	3 pages
Annual Report	7/1/1989	2 pages
Articles of Incorporation	5/22/1986	6 pages

Request for Taxpayer Identification Number and Certification

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

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.		
	The Coalition for the Homeless, Inc.		
	2 Business name/disregarded entity name, if different from above		
on page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Che following seven boxes.	_	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	Individual/sole proprietor or 🗹 C Corporation 🗌 S Corporation 🗍 Partnership single-member LLC	Trust/estate	Exempt payee code (if any)
typ ctio	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partner	ship) ▶	
Print or type. Specific Instructions	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner.		Exemption from FATCA reporting code (if any) 501(c)(3)
eci	Other (see instructions) ►		(Applies to accounts maintained outside the U.S.)
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name a	nd address (optional)
See	1300 S. 4th Street, St. 250		
0,	6 City, state, and ZIP code		
	Louisville, KY 40208		
	7 List account number(s) here (optional)		
Par	t I Taxpayer Identification Number (TIN)		
	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to av		urity number
eside	p withholding. For individuals, this is generally your social security number (SSN). However, for nt alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other s, it is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>		
TN, la		or	
lote.	If the account is in more than one name, see the instructions for line 1. Also see What Name	and Employer	identification number

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

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

4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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

Sign Signature of U.S. person ►	Date > 8	13,	2020	
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General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

 Form 1099-DIV (dividends, including those from stocks or mutual funds)

 Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)

 Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)

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- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property) Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.