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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2008 calendar year, or tax year beginning 07/01, 2008, and ending

06/30, 2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization SHELTER PARTNERSHIP, INC.		D Employer identification number
		Doing Business As		95-3976214
		Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telephone number
		523 WEST SIXTH STREET		(213) 688-2188
		City or town, state or country, and ZIP + 4		G Gross receipts \$ 9,735,193.
		LOS ANGELES, CA 90014		H(a) Is this a group return for affiliates? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
		F Name and address of principal officer JOHN DEFAZIO		H(b) Are all affiliates included? Yes <input type="checkbox"/> No <input type="checkbox"/>
		523 W. 6TH STREET LOS ANGELES, CA 90014		If "No," attach a list (see instructions)
		I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
		J Website: ▶ N/A		
		K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1985 M State of legal domicile CA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities.		
	ALLEVIATING, PREVENTING AND ENDING HOMELESSNESS BY ASSISTING IN THE DEVELOP. OF SHORT-TERM AND TRANSITIONAL HOUSING PROGRAMS, AFFORDABLE HOUSING, AND SUPPORT SVCS FOR THE (POTENTIALLY) HOMELESS IN LA COUNTY		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	21
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	21
	5 Total number of employees (Part V, line 2a)	5	17
	6 Total number of volunteers (estimate if necessary)	6	60
Revenue	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	
	b Net unrelated business taxable income from Form 990-T, line 34	7b	
	8 Contribution and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	15,101,537.	9,223,714.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	68,410.	157,561.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	21,860.	12,827.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	408,090.	293,717.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	15,599,897.	9,687,819.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	10,937,900.	8,006,224.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		NONE
	16a Professional fundraising fees (Part IX, column (A), line 11a)	838,680.	970,581.
	b Total fundraising expenses, Part IX, column (B), line 25		57,000.
	Net Assets or Fund Balances	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	781,915.
18 Total expenses Add lines 13-17 (must equal Part IX, column (B), line 25)		12,558,495.	9,660,908.
19 Revenue less expenses. Subtract line 18 from line 12		3,041,402.	26,911.
20 Total assets (Part X, line 16)		Beginning of Year	End of Year
21 Total liabilities (Part X, line 26)		16,608,395.	16,931,261.
22 Net assets or fund balances Subtract line 21 from line 20		277,816.	573,771.
		16,330,579.	16,357,490.

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	Signature of officer	Date	
	Ruth Schwartz, Executive Director	May 3, 2010	
	Type or print name and title		
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed) address, and ZIP + 4	04/29/2010	Preparer's identifying number (see instructions)
	CRIZ MHM, LLC		P00182228
	2301 DUPONT DRIVE, SUITE 200 IRVINE, CA 92612	EIN	34-1885304
		Phone no	949-474-2020

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

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2008)

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission

SEE STATEMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes" describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code _____) (Expenses \$ 9,132,542, including grants of \$ _____) (Revenue \$ _____)

SEE FEDERAL FOOTNOTES: STATEMENTS 1-3

4b (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services (Describe in Schedule O)

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

4e Total program service expenses ► \$ 9,132,542. (Must equal Part IX, Line 25, column (B))

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4 X	
5 Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6 Did the organization maintain any donor advised funds or any accounts where 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, 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 hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11 X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12 X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X
14a Did the organization maintain an office, employees, or agents outside of the U S ?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17 X	
18 Did the organization report more than \$15,000 total 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 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b	X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	X

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X

Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns. Enter -0- if not applicable.	1a 9	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b NONE	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a 17	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	
6a	Did the organization solicit any contributions that were not tax deductible?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization, during the year, 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	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	

Form 990 (2008)

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section A. Governing Body and Management**

		Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body	1a	21
b	Enter the number of voting members that 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 organizational documents since the prior Form 990 was filed?	4	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6	Does the organization have members or stockholders?	6	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8	Did the organizations contemporaneously document the meetings held or written actions undertaken during the year by the following.		
a	The governing body?	8a	X
b	Each committee with authority to act on behalf of the governing body?	8b	X
9a	Does the organization have local chapters, branches, or affiliates?	9a	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X
13	Does the organization have a written whistleblower policy?	13	X
14	Does the organization have a written document retention and destruction policy?	14	X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		
a	The organization's CEO, Executive Director, or top management official?	15a	X
b	Other officers or key employees of the organization?	15b	X
Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☒ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► RUTH E. SCHWARTZ 523 W. 6TH STREET LOS ANGELES, CA 90014
213-688-2188

[illegible]

	Yes	No
3		X
4		X
5		X

Part VIII Statement of Revenue

95-3976214

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions) . .	1e	392,355.			
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	8,831,359.			
	g	Noncash contributions included in lines 1a-1f \$		5,832,517.			
	h	Total. Add lines 1a-1f ▶		9,223,714.			
	Program Service Revenue	Business Code					
2a		FEES & CONTRACTS FROM GOVT AGENCIES-CONS		157,561.	157,561.		
b							
c							
d							
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f ▶		157,561.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		12,827.			12,827.
	4	Income from investment of tax-exempt bond proceeds . . . ▶		NONE			
	5	Royalties ▶		NONE			
		(i) Real	(ii) Personal				
	6a	Gross Rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) ▶		NONE			
		(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss) ▶		NONE			
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a		337,890.			
	b	Less direct expenses b		47,374.			
	c	Net income or (loss) from fundraising events . STMT 3. ▶		290,516.			293,717.
	9a	Gross income from gaming activities See Part IV, line 19 a		3,201.			
	b	Less direct expenses b					
	c	Net income or (loss) from gaming activities . STMT 4. ▶		3,201.			
	10a	Gross sales of inventory, less returns and allowances a					
b	Less. cost of goods sold b						
c	Net income or (loss) from sales of inventory. ▶		NONE				
Miscellaneous Revenue			Business Code				
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d ▶		NONE				
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e ▶		9,687,819.	157,561.		306,544.	

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	8,006,224.	8,006,224.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	NONE			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	NONE			
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors, trustees, and key employees	100,911.	70,637.	23,210.	7,064.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	NONE			
7 Other salaries and wages	685,151.	457,743.	131,596.	95,812.
8 Pension plan contributions (include section 401 (k) and section 403(b) employer contributions) . .	44,654.	33,937.	1,786.	8,931.
9 Other employee benefits	62,102.	25,058.	35,012.	2,032.
10 Payroll taxes	77,763.	55,799.	13,629.	8,335.
11 Fees for services (non-employees)				
a Management	NONE			
b Legal	NONE			
c Accounting	NONE			
d Lobbying	NONE			
e Professional fundraising services See Part IV, line 17	57,000.			57,000.
f Investment management fees	NONE			
g Other	NONE			
12 Advertising and promotion	NONE			
13 Office expenses	33,592.	26,456.	1,994.	5,142.
14 Information technology	NONE			
15 Royalties	NONE			
16 Occupancy	116,819.	79,190.	22,213.	15,416.
17 Travel	25,048.	19,170.	1,643.	4,235.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings	NONE			
20 Interest	NONE			
21 Payments to affiliates	NONE			
22 Depreciation, depletion, and amortization . . .	228,612.	223,407.	3,073.	2,132.
23 Insurance	37,475.	28,681.	2,458.	6,336.
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a NEWSLETTER-----	14,813.			14,813.
b TELEPHONE-----	19,301.	12,771.	3,855.	2,675.
c OTHER-----	15,540.	15,413.	34.	93.
d PROFESSIONAL FEES-----	78,246.	32,394.	2,776.	43,076.
e TRAINING & EDUCATION-----	11,929.	9,130.	782.	2,017.
f All other expenses-----	45,728.	36,532.	1,110.	8,086.
25 Total functional expenses. Add lines 1 through 24f	9,660,908.	9,132,542.	245,171.	283,195.
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	180,912.	1	115,674.
	2 Savings and temporary cash investments	807,635.	2	620,458.
	3 Pledges and grants receivable, net		3	1,091,764.
	4 Accounts receivable, net	118,581.	4	143,340.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sales or use	9,405,641.	8	7,231,934.
	9 Prepaid expenses and deferred charges	22,987.	9	4,690.
	10a Land, buildings, and equipment cost basis	10a 8,219,399.		
	b Less accumulated depreciation. Complete Part VI of Schedule D.	10b 590,998.		
		5,976,659.	10c	7,628,401.
	11 Investments - publicly traded securities. STMT. 5	980.	11	NONE
	12 Investments - other securities. See Part IV, line 11.	95,000.	12	95,000.
	13 Investments - program-related. See Part IV, line 11.		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11.		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	16,608,395.	16	16,931,261.	
Liabilities	17 Accounts payable and accrued expenses	83,428.	17	89,915.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties. STMT. 6		23	483,856.
	24 Unsecured notes and loans payable.		24	
	25 Other liabilities. Complete Part X of Schedule D	194,388.	25	NONE
	26 Total liabilities. Add lines 17 through 25.	277,816.	26	573,771.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	6,517,100.	27	7,444,818.
	28 Temporarily restricted net assets	9,813,479.	28	8,912,672.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	16,330,579.	33	16,357,490.
	34 Total liabilities and net assets/fund balances	16,608,395.	34	16,931,261.

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b	Were the organization's financial statements audited by an independent accountant?	2b	X
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b	If "Yes," did the organization undergo the required audit or audits?	3b	

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

OMB No 1545-0047

2008

**Open to Public
Inspection**

Employer identification number

SHELTER PARTNERSHIP, INC.

95-3976214

Part I Reason for Public Charity Status (All organizations must complete this part) (see instructions)

The organization is not a private foundation because it is (Please check only **one** organization)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).** (Attach Schedule H)

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state. _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).** (see instructions)

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally Integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box _____

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? _____

(ii) A family member of a person described in (i) above? _____

(iii) A 35% controlled entity of a person described in (i) or (ii) above? _____

h Provide the following information about the organizations the organization supports

	Yes	No
11g(i)		X
11g(ii)		X
11g(iii)		X

[illegible]

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

Schedule A (Form 990 or 990-EZ) 2008

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	6,933,408.	6,058,364.	9,594,958.	15,101,537.	9,223,714.	46,911,981.
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	416,000.	576,000.	576,000.			1,568,000.
4 Total. Add lines 1-3	7,349,408.	6,634,364.	10,170,958.	15,101,537.	9,223,714.	48,479,981.
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						48,479,981.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	7,349,408.	6,634,364.	10,170,958.	15,101,537.	9,223,714.	48,479,981.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,152.	9,927.	16,531.	21,860.	12,827.	68,297.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						48,548,278.
12 Gross receipts from related activities, etc. (See instructions)					12	1,692,580.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	99.86 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	99.85 %
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "fact-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1-5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b.						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%
19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		

Part IV

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

This image shows a full page of white paper with horizontal dashed lines. The lines are evenly spaced and run across the entire width of the page, providing a guide for handwriting practice. There are no margins, text, or other markings on the paper.

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

► To be completed by organizations described below.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2008

Open to Public
Inspection

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization SHELTER PARTNERSHIP, INC.	Employer identification number 95-3976214
--	---

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.
See the instructions for Schedule C for details.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ► \$
- 3 Volunteer hours

Part I-B To be completed by all organizations exempt under section 501(c)(3).
See the instructions for Schedule C for details.

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).
See the instructions for Schedule C for details

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$
- 3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b ► \$
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part 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-

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

- A** Check ☐ if the filing organization belongs to an affiliated group.
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount Enter the amount from the following table in both columns														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		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	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		
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														
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)														
h	Subtract line 1g from line 1a. Enter -0- if line g is more than line a														
i	Subtract line 1f from line 1c. Enter -0- if line f is more than line c														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> 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 instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2008

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		X	
i Other activities? If "Yes," describe in Part IV	X		990.
j Total lines 1c through 1i			990.
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		X	

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details.

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a 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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5 and Part II-B, line 1i

Also, complete this part for any additional information

SEE PAGE 4

Part IV Supplemental Information (continued)

LOBBYING ACTIVITIES

FORM 990, SCHEDULE C, PART II-B, LINE 11

PROVIDING TECHNICAL ASSISTANCE TO SENATOR CEDILLO'S OFFICE ON HIS BILL SB

324. THE BILL ENCOURAGES LAW ENFORCEMENT AGENCIES TO WORK WITH THE

TRADEMARK OWNERS OF COUNTERFEIT GOODS TO DONATE THE GOODS TO CHARITIES

SERVING THE POOR. SB 324 WAS SIGNED BY THE GOVERNOR AND BECAME STATE

LAW ON JANUARY 1, 2010.

ORGANIZATION EMPLOYEE SPENT 18.06 HOURS OF HER LABOR TIME ON THIS

LEGISLATIVE ISSUE VALUED AT \$990.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

SHELTER PARTNERSHIP, INC.

Supplemental Financial Statements

► **Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number

95-3976214

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4 Number of states where property subject to conservation easement is located ► _____

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

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table.

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

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

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶ _____ %
 b Permanent endowment ▶ _____ %
 c Term endowment ▶ _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings		7,944,525.	388,288.	7,556,237.
c Leasehold improvements				
d Equipment		274,874.	202,710.	72,164.
e Other		NONE		NONE
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c))				7,628,401.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other _____		

Total. (Column (b) should equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value

Total. (Column (b) should equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value

Total. (Column (b) should equal Form 990, Part X, col (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
AGENCY ADVANCES	

Total. (Column (b) should equal Form 990, Part X, col (B) line 25.) ▶	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	9,687,819.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	9,660,908.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	26,911.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4-8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9.	10	26,911.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	9,687,819.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	9,687,819.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	9,687,819.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	9,660,908.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	9,660,908.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	9,660,908.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Part XIV Supplemental Information (continued)

This image shows a full page of white paper with horizontal dashed lines. The lines are evenly spaced and run across the entire width of the page, providing a guide for handwriting practice. There are no margins, text, or other markings on the paper.

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.** Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a

OMB No. 1545-0047

2008

**Open To Public
Inspection**

Name of the organization

SHELTER PARTNERSHIP, INC.

Employer Identification number

95-3976214

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | | | | | |
|----------|-------------------------------------|-------------------------|----------|-------------------------------------|---------------------------------------|
| a | <input checked="" type="checkbox"/> | Mail solicitations | e | <input checked="" type="checkbox"/> | Solicitation of non-government grants |
| b | <input type="checkbox"/> | Email solicitations | f | <input checked="" type="checkbox"/> | Solicitation of government grants |
| c | <input type="checkbox"/> | Phone solicitations | g | <input checked="" type="checkbox"/> | Special fundraising events |
| d | <input type="checkbox"/> | In-person solicitations | | | |

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? ☒ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
THE ERICKSON GROUP CONSULTANT	CAPITAL CAMPAIGN		X	764,211.	57,000.	
Total ▶				764,211.	57,000.	

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

CA,

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

	(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
	ANNUAL DINNER (event type)	(event type)	NONE (total number)	
Revenue				
1 Gross receipts	337,890.			337,890.
2 Less: Charitable contributions				
3 Gross revenue (line 1 minus line 2)	337,890.			337,890.
Direct Expenses				
4 Cash prizes				
5 Non-cash prizes				
6 Rent/facility costs				
7 Other direct expenses	47,374.			47,374.
8 Direct expense summary Add lines 4 through 7 in column (d)				(47,374.)
9 Net income summary Combine lines 3 and 8 in column (d)				290,516.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue				
1 Gross revenue				
Direct Expenses				
2 Cash prizes				
3 Non-cash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	Yes _____ % No	Yes _____ % No	Yes _____ % No	
7 Direct expense summary Add lines 2 through 5 in column (d)				()
8 Net gaming income summary Combine lines 1 and 7 in column (d)				

9 Enter the state(s) in which the organization operates gaming activities <u>CA</u>	Yes	No
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If "No," Explain		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," Explain		
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

		Yes	No
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility 13a %		
b	An outside facility 13b %		
14	Provide the name and address of the person who prepares the organization's gaming/special event books and records		
	Name ► _____		
	Address ► _____		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue? 15a		
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c	If "Yes," enter name and address		
	Name ► _____		
	Address ► _____		
16	Gaming manager information		
	Name ► _____		
	Gaming manager compensation ► \$ _____		
	Description of services provided ► _____		
	<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor		
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? 17a		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____		

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047

2008

**Open to Public
Inspection**

Name of the Organization

SHELTER PARTNERSHIP, INC.

Employer identification number

95-3976214

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN DEFAZIO										
CHAIR	5.	X		X				NONE	NONE	NONE
J. MARTIN WILLHITE										
VICE CHAIR	5.	X		X				NONE	NONE	NONE
DANIEL MOREFIELD										
TREASURER	5.	X		X				NONE	NONE	NONE
ALAN ADLER										
DIRECTOR	1.	X						NONE	NONE	NONE
PETER BARKER										
DIRECTOR	1.	X						NONE	NONE	NONE
ANN MARIE HICKAMBOTTOM										
DIRECTOR	1.	X						NONE	NONE	NONE
DIANN KIM, ESQ.										
DIRECTOR	1.	X						NONE	NONE	NONE
G. ALLAN KINGSTON										
DIRECTOR	1.	X						NONE	NONE	NONE
THOMAS LANE										
DIRECTOR	1.	X						NONE	NONE	NONE
MICHAEL MANIGAULT										
DIRECTOR	1.	X						NONE	NONE	NONE
DOUGLAS REED MAUGHAN										
DIRECTOR	1.	X						NONE	NONE	NONE
GARY MEISEL										
DIRECTOR	1.	X						NONE	NONE	NONE
MARK MOZILO										
DIRECTOR	1.	X						NONE	NONE	NONE
LOUISE OLIVER										
SECRETARY	1.	X		X				NONE	NONE	NONE
MARTI ORTIZ										
DIRECTOR	1.	X						NONE	NONE	NONE
WILIAM POULSEN										
DIRECTOR	1.	X						NONE	NONE	NONE
EDWARD RAMIREZ										
DIRECTOR	1.	X						NONE	NONE	NONE
DAVID SCHEPER										
DIRECTOR	1.	X						NONE	NONE	NONE
KEITH SHARP, ESQ.										
DIRECTOR	1.	X						NONE	NONE	NONE
JOHN WEISSENBAACH										
DIRECTOR	1.	X						NONE	NONE	NONE
WILLIAM WITTE										
DIRECTOR	1.	X						NONE	NONE	NONE

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

Schedule J-2 (Form 990) 2008

Name of the Organization

SHELTER PARTNERSHIP, INC.

Employer Identification number

95-3976214

Part I

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

[illegible]

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Non-Cash Contributions

► To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2008

**Open To Public
Inspection**

Name of the organization

SHELTER PARTNERSHIP, INC.

Employer identification number

95-3976214

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art-Works of art				
2 Art-Historical treasures				
3 Art-Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		5,829,852.	FAIR MARKET VALUE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities-Publicly traded				
10 Securities-Closely held stock				
11 Securities-Partnership, LLC, or trust interests				
12 Securities-Miscellaneous				
13 Qualified conservation 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				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (.)				
26 Other ► (.)				
27 Other ► (.)				
28 Other ► (.)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **1**

	Yes	No
30 a During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		X
32 a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

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

Schedule M (Form 990) 2008

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

FORM 990, SCHEDULE M, PART I, LINE 32B

DESCRIPTION OF THIRD PARTY USED TO SOLICIT NONCASH CONTRIBUTIONS

AS OF THE AGREEMENT DATED NOVEMBER 12, 2009 SHELTER PARTNERSHIP WILL

PROVIDE K.I.D.S. \$15,000 FOR EXPENSES ASSOCIATED WITH K.I.D.S.

SOLICITATION AND PROVISION TO SHELTER PARTNERSHIP, INC. OF A MINIMUM OF

\$250,000 IN CHILDREN'S GOODS OVER THE PERIOD (JULY 1, 2009 TO JUNE 30,

2010). THE TOTAL OF SUCH GOODS WILL BE RECEIVED BY SHELTER PARTNERSHIP BY

JUNE 30, 2010.

Department of the Treasury
Internal Revenue Service

► **Attach to Form 990.** To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

SHELTER PARTNERSHIP, INC.

Employer identification number

95-3976214

FORM 990, PART VI, SECTION A, LINE 10

REVIEW OF 990 BY ORGANIZATION'S GOVERNING BODY

THE RETURN FOR 2008 COULD NOT BE PRESENTED AND APPROVED BY BOARD OF

DIRECTORS BECAUSE THE 990 HAD TO BE FILED BEFORE THE NEXT MEETING.

HOWEVER, THE ORGANIZATION'S MANAGEMENT REVIEWED THE RETURN AND VERIFIED

THAT THE AUDITOR/TAX PREPARER MADE THE NECESSARY CORRECTIONS/CHANGES

BEFORE IT WAS FILED.

Name of the organization

SHELTER PARTNERSHIP, INC.

Employer identification number

95-3976214

FORM 990, PART VI, SECTION B, LINE 15B

DETERMINATION OF COMPENSATION OF OFFICERS, DIRECTORS, MGMT & KEY EMPLOYEES

BOARD ASSESSMENT AND APPROVAL

Name of the organization

SHELTER PARTNERSHIP, INC.

Employer identification number

95-3976214

FORM 990, PAGE 6, PART VI, SECTION C, LINE 19

AVAILABILITY OF DOCUMENTS

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY &

FINANCIAL STATEMENTS ARE AVAILABLE TO PUBLIC UPON REQUEST.

AVAILABILITY OF DOCUMENTS

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

=====

SHELTER PARTNERSHIP, INC. IS DEDICATED TO ALLEVIATING, PREVENTING AND
ENDING HOMELESSNESS BY ASSISTING IN THE DEVELOPMENT OF SHORT-TERM AND
TRANSITIONAL HOUSING PROGRAMS, AFFORDABLE HOUSING, AND SUPPORTIVE
SERVICES FOR THE HOMELESS AND POTENTIALLY HOMELESS THROUGHOUT LOS
ANGELES COUNTY.

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS
=====

NAME AND ADDRESS -----	DESCRIPTION OF SERVICES	COMPENSATION -----
REEVE-KNIGHT CONSTRUCTION (CORP) 128 ASCOT DRIVE ROSEVILLE, CA 95661	CONSTRUCTION MANAGER	1,164,565.
J.S. EGAN 7740 W MANCHESTER AVE PLAYA DEL REY, CA 90293	ARCHITECTURE	113,197.

	TOTAL COMPENSATION	1,277,762. =====

FORM 990, PART VIII - FUNDRAISING EVENTS

DESCRIPTION	GROSS INCOME	DIRECT EXPENSES	NET INCOME
ANNUAL DINNER	337,890.	47,374.	290,516.
TOTALS	337,890.	47,374.	290,516.

FORM 990, PART VIII - GAMING ACTIVITIES
=====

DESCRIPTION -----	GROSS INCOME -----	DIRECT EXPENSES -----	NET INCOME -----
RAFFLE	3,201. -----		3,201. -----
TOTALS	3,201. =====		3,201. =====

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

=====

DESCRIPTION	COST OR FMV
-----	-----
EQUITY SECURITIES	FMV

TOTALS

FORM 990, PART X - SECURED MORTGAGES AND NOTES PAYABLE
=====

LENDER: CENTURY HOUSING CORPORATION

ORIGINAL AMOUNT: 600,000.

DATE OF NOTE: 10/31/2008

MATURITY DATE: 10/31/2010

REPAYMENT TERMS: BALANCE & 1 YR LIBOR + 3.5% INTEREST DUE 10/31/10

PURPOSE OF LOAN: TO FINANCE IMPROV FOR THE PARTNERSHIP'S WAREHOUSE

ENDING BALANCE DUE 483,856.
-----TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE 483,856.
=====

Form **4562**Department of the Treasury
Internal Revenue Service

(99)

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2008Attachment
Sequence No **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

SHELTER PARTNERSHIP, INC.

Identifying number

95-3976214

Business or activity to which this form relates

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

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

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		
7	Listed property Enter the amount from line 29	7
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8
9	Tentative deduction. Enter the smaller of line 5 or line 8	9
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12
13	Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 ▶	13

Note: Do not use Part II or Part III below for listed property. Instead, use Part V**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	228,612.

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

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶		

Section B - Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27 5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (See instructions.)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr	22	228,612.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable**Section A - Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?		Yes	No	24b If "Yes," is the evidence written?		Yes	No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25								
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

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

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

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

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

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2008 tax year (see instructions):					
43 Amortization of costs that began before your 2008 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

FEDERAL FOOTNOTES

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SINCE ITS FOUNDING IN 1985, SHELTER PARTNERSHIP HAS BEEN A LEADER IN THE FIGHT AGAINST HOMELESSNESS IN LOS ANGELES COUNTY. THE AGENCY ACCOMPLISHES ITS MISSION THROUGH THE FOLLOWING ACTIVITIES:

- SHELTER PARTNERSHIP'S LEADERSHIP IN CREATING COLLABORATIVE APPLICATIONS HAS GARNERED CRITICAL PUBLIC MONIES FOR THE COUNTY. SINCE 1994 ALONE, THE AREA HAS ACCESSED MORE THAN \$800 MILLION IN FEDERAL FUNDS.
- SHELTER PARTNERSHIP REINFORCES ITS PROVISION OF BASIC ASSISTANCE THROUGH THE IMMENSELY SUCCESSFUL S. MARK TAPER FOUNDATION SHELTER RESOURCE BANK PROJECT. SINCE 1989, THE AWARD-WINNING S. MARK TAPER FOUNDATION SHELTER RESOURCE BANK HAS SECURED MORE THAN \$164 MILLION WORTH OF NEW, HIGH-PRIORITY GOODS AND HAS DISTRIBUTED \$154 MILLION OF THESE GOODS, FREE OF CHARGE, TO MORE THAN 450 UNDUPLICATED AGENCIES/PROJECTS SERVING THE HOMELESS AND THE VERY POOR.
- SHELTER PARTNERSHIP'S DETAILED REPORTS, OFTEN COMMISSIONED BY LOCAL POLICYMAKERS, HAVE CONSISTENTLY RESULTED IN INVALUABLE AND UP-TO-DATE ASSESSMENTS OF THE AREA'S NEEDS AND RESOURCES.

FOR THE PERIOD JULY 1, 2008 TO JUNE 30, 2009

- UNDERTOOK THE MAJOR REHABILITATION OF SHELTER PARTNERSHIP'S S. MARK TAPER FOUNDATION SHELTER RESOURCE BANK, ENCOMPASSING 108,000 SQUARE FEET AND LOCATED IN THE CITY OF BELL ON A SIX-ACRE PARCEL. THE RENOVATED FACILITY FEATURES NEW OFFICES, A PEDESTRIAN ENTRYWAY, DOORS, ROOF, LIGHTING, FIRE SPRINKLERS, AND STRUCTURAL UPGRADES, AS WELL AS NEW PAINT INSIDE AND OUT. MANY GREEN MATERIALS AND FEATURES WERE WOVEN INTO THE RENOVATION.
- THROUGH OUR AWARD-WINNING S. MARK TAPER FOUNDATION SHELTER RESOURCE BANK, SHELTER PARTNERSHIP DISTRIBUTED \$7.8 MILLION IN NEW GOODS TO 227 AGENCIES AND PROJECTS THROUGHOUT LOS ANGELES COUNTY. WE ALSO SECURED \$6 MILLION IN NEW GOODS. THESE GOODS INCLUDE INFANT AND CHILDREN'S CLOTHING AND SHOES, DIAPERS AND TOYS, PERSONAL CARE PRODUCTS, PAPER PRODUCTS, CLEANING SUPPLIES, MEN'S AND WOMEN'S NEW CLOTHING, AND MORE.
- SINCE 1994, SHELTER PARTNERSHIP HAS ADMINISTERED THE SUPPORT FOR HOMELESS RE-ENTRY PROGRAM (SHORE) ON BEHALF OF THE CITY OF LOS ANGELES WITH RESOURCES FROM THE METROPOLITAN TRANSPORTATION AUTHORITY (MTA). TO DATE, OVER \$5.5 MILLION IN TRANSPORTATION TOKENS HAVE BEEN DISTRIBUTED TO THE MOST NEEDY IN OUR COMMUNITY. THIS INNOVATIVE PROGRAM, WHICH WE CONCEPTUALIZED AND DEVELOPED WITH THE LOS ANGELES TRANSPORTATION DEPARTMENT, CURRENTLY PROVIDES TRANSPORTATION TOKENS TO 19 COMMUNITY-BASED AGENCIES THROUGHOUT THE METRO LOS ANGELES AREA

FEDERAL FOOTNOTES (CONT'D)
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SERVING THE HOMELESS. DURING FISCAL YEAR 2008/09, 10,424 INDIVIDUALS WERE ASSISTED WITH 309,926 TRIPS. THE TRIPS WERE USED FOR JOBS, HOUSING, EDUCATION, BENEFITS, AS WELL AS APPOINTMENTS FOR MEDICAL, MENTAL HEALTH, AND LEGAL NEEDS.

- CONSULTED WITH THE CITY OF LOS ANGELES AND THE LOS ANGELES HOMELESS SERVICES AUTHORITY TO DESIGN AND IMPLEMENT A NEW \$29 MILLION HOMELESS PREVENTION AND RAPID RE-HOUSING PROGRAM THAT WAS FUNDED BY THE FEDERAL RECOVERY ACT, ARRA. THE PROGRAM PROVIDES FINANCIAL ASSISTANCE TO HOUSEHOLDS WHO ARE HOMELESS TO HELP THEM MOVE INTO HOUSING, AS WELL AS FINANCIAL ASSISTANCE TO HOUSEHOLDS AT RISK OF HOMELESSNESS TO RETAIN THEIR HOUSING OR MOVE INTO HOUSING THAT IS MORE AFFORDABLE FOR THEM.

- ASSISTED THE LOS ANGELES HOMELESS SERVICES AUTHORITY (LAHSA) IN PREPARING THE LOS ANGELES CONTINUUM OF CARE APPLICATION, THROUGH WHICH LAHSA RECEIVED OVER \$70 MILLION FROM HUD TO FUND HOMELESS SERVICES THROUGHOUT THE COUNTY AND THE CITY OF LOS ANGELES.

- IMPROVED THE LOS ANGELES COUNTY COMMUNITY DEVELOPMENT COMMISSION (CDC) CITY OF INDUSTRY SPECIAL NEEDS HOUSING PROGRAM BID PROCESS BY DRAFTING PROVISIONS REQUIRING SERVICES IN PROJECTS WITH SPECIAL NEEDS POPULATIONS MIXED WITH OTHER LOW-INCOME HOUSEHOLDS, TIGHTENING REQUIREMENTS FOR SERVICES PLANS AND SERVICES BUDGETS, AND INCLUDING FOR THE FIRST TIME PROJECT BASED VOUCHERS SO DEVELOPMENTS FUNDED UNDER THE BID PROCESS CAN LEASE TO THE LOWEST INCOME HOMELESS APPLICANTS.

- UNDERTOOK A STUDY FOR THE LOS ANGELES COUNTY COMMUNITY DEVELOPMENT COMMISSION, "SURVEY OF SPECIAL NEEDS HOUSING PROJECTS FUNDED BY THE HOUSING AUTHORITY OF THE COUNTY OF LOS ANGELES" WHICH EVALUATED THE LEVEL OF SERVICES, OPERATING SUBSIDIES AND RESERVE BALANCES OF SPECIAL NEEDS HOUSING PROJECTS FUNDED BY THE COUNTY.

- COMPLETED AND MADE PRESENTATIONS-AT THE LOCAL, STATE AND NATIONAL LEVEL--OF OUR STUDY, "IS MIXED POPULATION HOUSING A SOLUTION TO HOMELESSNESS?" WHICH CONSISTS OF FIVE CASE STUDIES - THREE IN CALIFORNIA AND TWO IN NEW YORK-OF MIXED-POPULATION HOUSING SPECIFICALLY FOR BOTH FORMERLY HOMELESS AND LOW-INCOME HOUSEHOLDS. THIS GROUNDBREAKING REPORT IS INTENDED TO FURTHER THE UNDERSTANDING OF DEVELOPERS, PROPERTY MANAGERS, SOCIAL SERVICE AGENCIES, AND PUBLIC OFFICIALS ON THE EFFICACY OF DEVELOPING SUCH HOUSING.

- IN CONJUNCTION WITH THE CORPORATION FOR SUPPORTIVE HOUSING COMPLETED A HOMELESSNESS SERVICES PLAN FOR THE SAN GABRIEL VALLEY

FEDERAL FOOTNOTES (CONT'D)
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COUNCIL OF GOVERNMENTS AND THEIR 31 PARTICIPATING CITIES.

- INITIATED A FIRST OF ITS KIND PROJECT THAT RESULTED IN 35 HOMELESS OLDER ADULTS SECURING PERMANENT, SUPPORTIVE HOUSING. THE PROJECT INVOLVED REACHING OUT TO HOUSING DEVELOPERS FOR SENIORS AND ADVOCATING FOR THEM TO ACCEPT HOMELESS OLDER ADULTS AND PROVIDE ACCOMMODATIONS FOR HOMELESS OLDER ADULTS DURING THE APPLICATION PROCESS. WE MATCHED THESE DEVELOPERS UP WITH HOMELESS SHELTERS AND HOMELESS SERVICE AGENCIES IN THEIR COMMUNITY AND EDUCATED THEM ON THE APPLICATION PROCESS AND THE NECESSITY TO PROVIDE FOLLOW-UP SERVICES TO THEIR CLIENTS. THIS WAS ONE OF THE MAJOR INITIATIVES PROPOSED IN OUR HOMELESS OLDER ADULTS STRATEGIC PLAN RELEASED IN MARCH 2008.
- SHELTER PARTNERSHIP'S TECHNICAL ASSISTANCE HAS LED TO SEVEN NEW PERMANENT, SUPPORTIVE HOUSING PROJECTS IN DEVELOPMENT OR PREDEVELOPMENT WITH A TOTAL OF 200 UNITS RESERVED FOR HOMELESS OLDER ADULTS IN THE LOS ANGELES AREA. THIS WAS A SECOND MAJOR INITIATIVE PROPOSED IN THE HOMELESS OLDER ADULTS STRATEGIC PLAN.
- BEGAN A MAJOR ONGOING INITIATIVE TO ASSIST NEW IMAGE EMERGENCY SHELTER, THE LARGEST OVERNIGHT SHELTER IN THE CITY OF LOS ANGELES WITH MORE THAN 450 MEN AND WOMEN NIGHTLY, SECURE AFFORDABLE, PERMANENT SUPPORTIVE HOUSING ON BEHALF OF THEIR CLIENTS-MANY OF WHOM ARE CHRONICALLY HOMELESS WITH MULTIPLE DISABILITIES.
- REVIEWED SIX STATE-MANDATED LOCAL HOUSING ELEMENTS PREPARED BY JURISDICTIONS IN LOS ANGELES COUNTY AND PROVIDED EXTENSIVE COMMENTS ON: 1) THE JURISDICTION'S PLAN TO MEET ITS REGIONAL HOUSING NEED ALLOCATION, SPECIFICALLY FOR EXTREMELY LOW-INCOME HOUSEHOLDS; 2) THE REGULATION OF HOUSING FOR PEOPLE WITH DISABILITIES; AND 3) THE IMPLEMENTATION OF SENATE BILL 2 THAT ADDRESSES THE NEED TO PLAN FOR EMERGENCY SHELTERS AND PERMANENT, SUPPORTIVE HOUSING FOR THE HOMELESS. AS A RESULT, THESE LOCAL GOVERNMENTS ARE ADDRESSING THESE CONCERNS TO ASSURE THAT THEIR HOUSING ELEMENTS MEET STATE LAW.
- CO-SPONSORED WITH URBAN LAND INSTITUTE OF LOS ANGELES (ULI) IN THE EDUCATIONAL INITIATIVE, 1000 HOMES, AN EFFORT OF ULI'S YOUNG PROFESSIONAL'S TO CREATE A GROUNDSWELL OF SUPPORT FOR THE DEVELOPMENT OF PERMANENT SUPPORTIVE HOUSING IN LOS ANGELES COUNTY.
- ASSISTED NUMEROUS PERMANENT, SUPPORTIVE HOUSING DEVELOPERS WITH IDENTIFYING SOCIAL SERVICES RESOURCES AND OPERATING SUBSIDIES.
- DURING THE FISCAL YEAR, WE PROVIDED INDIVIDUAL TECHNICAL ASSISTANCE TO 374 INDIVIDUALS/AGENCY CONTACTS.

Agency Distribution Analysis**7/1/2008...6/29/2009****SHELTER PARTNERSHIP, INC.**

Agency Name	Agency #	Invoice #	Date	Amount
1736 Family Crisis Center	A2	13117	9/19/08	\$7,831 04
				\$7,831.04
A Community of Friends	A289	13142	9/23/08	\$12,634.06
		13327	12/3/08	\$35,233 66
		13504	5/20/09	\$13,717 68
				\$61,585.41
A Place Called Home	A547	12993	8/14/08	\$51,645 40
				\$51,645.40
African Community Resource Center, The	A356	13087	9/16/08	\$7,094.35
		13325	12/2/08	\$4,073.54
		13522	5/20/09	\$5,189 81
				\$16,357.70
AIDS Project Los Angeles	A545	13166	9/23/08	\$5,741 77
		13312	12/2/08	\$20,819.70
				\$26,561.47
AIDS Service Center	A433	13014	9/8/08	\$7,531 32
		13210	11/18/08	\$18,974 60
		13487	5/15/09	\$9,147 13
				\$35,653.04
Alcoholism Center for Women	A156	13544	5/21/09	\$5,244.66
				\$5,244.66
Alexandria House	A282	13020	9/8/08	\$5,036 75
		13319	12/2/08	\$10,334 13
		13484	5/15/09	\$1,523 76
				\$16,894.65
Amity Foundation of California	A479	13355	12/4/08	\$30,062.53
				\$30,062.53
Another Chance Outreach Ministry, Inc.	A491	13388	3/5/09	\$490 50
				\$490.50
Antelope Valley Domestic Violence Council	A9	13095	9/17/08	\$7,289 21
		13279	11/25/08	\$14,374 74
				\$21,663.96

Agency Distribution Analysis

7/1/2008...6/29/2009

SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
Asian American Drug Abuse Program	A512	13371	12/12/08	\$109,216 10
				\$109,216.10
Aviva Respite Shelter	A10	13108	9/18/08	\$4,340 36
		13222	11/18/08	\$2,487 86
		13497	5/18/09	\$3,630.80
				\$10,459.02
Azusa Street Mission	A540	13566	4/24/09	\$52,375 89
				\$52,375.89
B.R.I.D.G.E.S., Inc.	A12	13077	9/15/08	\$7,996.11
		13284	11/25/08	\$17,043.08
		13412	4/28/09	\$3,802.63
				\$28,841.82
Beacon House Assoc. of San Pedro	A314	13001	9/5/08	\$2,795 87
		13264	11/21/08	\$20,233 94
		13498	5/18/09	\$4,952.90
				\$27,982.71
Beacon Housing Inc.	A409	13019	9/8/08	\$14,374 63
		13200	11/13/08	\$31,986 02
		13433	5/11/09	\$11,294.72
				\$57,655.36
Beacon Light Mission	A13	13025	9/9/08	\$3,826.63
		13208	11/18/08	\$15,499.27
		13419	5/11/09	\$1,460 59
				\$20,786.49
Beyond Shelter	A1	13160	9/23/08	\$3,137.51
		13267	11/21/08	\$9,474.99
		13528	5/21/09	\$15,790.42
				\$28,402.92
Bible Tabernacle	A240	13143	9/23/08	\$5,291.72
		13302	11/26/08	\$15,691 72
				\$20,983.43
Bienestar Human Services, Inc.	A468	13112	9/18/08	\$2,461.99
		13216	11/18/08	\$37,535.94

Agency Distribution Analysis

7/1/2008...6/29/2009

SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
		13532	5/21/09	\$12,403.46
				\$52,401.39
Burbank Temporary Aid Center	A231			
		13000	9/5/08	\$8,328.85
		13189	11/13/08	\$21,143.97
		13503	5/20/09	\$11,338.38
				\$40,811.20
Calif. Council for Veterans Affairs, Inc	A225			
		13045	9/10/08	\$6,876.74
		13348	12/4/08	\$11,234.50
		13555	5/21/09	\$9,331.00
				\$27,442.23
CANGRESS	A430			
		12995	8/25/08	\$2,855.86
				\$2,855.86
Catholic Rainbow Outreach	A23			
		13028	9/9/08	\$10,135.55
		13453	5/13/09	\$7,822.42
				\$17,957.96
CC-Angel's Flight	A8			
		13122	9/19/08	\$634.32
		13224	11/18/08	\$6,245.06
		13516	5/20/09	\$2,427.04
				\$9,306.42
CC-Good Shepherd/Homeless Women	A49			
		13161	9/23/08	\$2,982.25
		13280	11/25/08	\$10,544.94
		13527	5/20/09	\$2,403.33
				\$15,930.51
CC-Lancaster Community Shelter	A184			
		13107	9/18/08	\$3,205.70
		13287	11/25/08	\$5,293.28
		13414	4/28/09	\$1,570.83
				\$10,069.81
CC-Loaves & Fishes I	A215			
		13103	9/18/08	\$6,272.57
		13270	11/21/08	\$14,051.86
		13506	5/20/09	\$4,801.53
				\$25,125.97
CC-Long Beach Family Shelter	A72			
		13127	9/22/08	\$4,245.56
		13226	11/18/08	\$26,426.97
		13514	5/20/09	\$11,046.80

Agency Distribution Analysis**7/1/2008...6/29/2009****SHELTER PARTNERSHIP, INC.**

Agency Name	Agency #	Invoice #	Date	Amount
				\$41,719.33
CC-San Gabriel Region	A65			
		13035	9/9/08	\$7,454.45
		13237	11/19/08	\$33,070.52
		13426	5/11/09	\$14,915 45
				\$55,440.43
CC-St. Margaret's Center	A41			
		13097	9/17/08	\$3,587.75
		13293	11/25/08	\$19,995 12
		13444	5/12/09	\$6,610 35
				\$30,193.22
Center for Pacific Asian Families	A24			
		13056	9/15/08	\$1,365 24
		13273	11/25/08	\$3,428.27
		13535	5/21/09	\$1,028 98
				\$5,822.48
Central City Action Committee	A353			
		13363	12/8/08	\$5,595.76
				\$5,595.76
Central City Neighborhood Partners	A474			
		13353	12/4/08	\$31,838.43
				\$31,838.43
Champions of Caring Connections, Inc.	A549			
		13582	6/12/09	\$34,712.79
				\$34,712.79
Chicana Action Service Center	A135			
		13104	9/18/08	\$17,655 84
		13342	12/4/08	\$22,298 81
		13548	5/21/09	\$16,353 09
				\$56,307.74
Child & Family Guidance Center	A417			
		13361	12/8/08	\$5,595 76
				\$5,595.76
Children of the Night	A253			
		13037	9/10/08	\$1,083 28
		13253	11/21/08	\$434.88
				\$1,518.16
Children's Network International	A302			
		12991	8/6/08	\$1,930.80
		13156	9/17/08	\$107 92
		13182	10/30/08	\$1,950.00
		13394	3/19/09	\$209,994 75

Agency Distribution Analysis 7/1/2008...6/29/2009 SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
				\$213,983.47
Christian Food Center	A326			
		12988	7/29/08	\$17,448 74
		13169	9/25/08	\$19,992 60
		13351	11/25/08	\$30,757.09
		13384	2/17/09	\$13,264 80
		13567	4/23/09	\$77,086 40
		13569	5/8/09	\$53,723.84
		13578	5/29/09	\$8,984.28
				\$221,257.75
Christian Outreach Appeal	A203			
		13079	9/16/08	\$15,057.95
		13218	11/18/08	\$30,472 61
		13494	5/18/09	\$10,457 72
				\$55,988.28
Chrysalis Center	A29			
		13011	9/8/08	\$5,617 29
		13286	11/25/08	\$15,176 27
		13427	5/11/09	\$8,326 26
				\$29,119.82
City of Los Angeles Office of Controller	A513			
		13180	10/27/08	\$15,324 48
		13354	12/4/08	\$54,303 27
				\$69,627.75
City of Refuge	A560			
		13580	6/11/09	\$115,009 00
				\$115,009.00
Clare Foundation	A30			
		13023	9/9/08	\$6,046 74
		13198	11/13/08	\$20,323 90
		13417	4/30/09	\$3,679.95
				\$30,050.59
Common Ground	A316			
		13136	9/22/08	\$3,330 93
		13349	12/4/08	\$1,631 91
		13461	5/13/09	\$2,993 36
				\$7,956.20
Compton Welfare Rights Org.	A149			
		13022	9/9/08	\$4,489 45
		13204	11/14/08	\$18,252.38
				\$22,741.83
Cory's Kitchen, Inc.	A548			
		12998	9/2/08	\$24,219.36

Agency Distribution Analysis
7/1/2008...6/29/2009
SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
		13367	12/11/08	\$5,298.96
				\$29,518.32
Covenant House	A233			
		13007	9/8/08	\$8,642.28
		13188	11/13/08	\$36,109.48
		13424	5/11/09	\$2,968 89
				\$47,720.65
Crossroads, Inc.	A546			
		13066	9/15/08	\$6,528 51
		13206	11/14/08	\$8,041 70
		13473	5/13/09	\$13.29
				\$14,583.50
Crown Jewel Club, Inc.	A505			
		13357	12/8/08	\$6,575 48
				\$6,575.48
David & Margaret Home, The	A516			
		13061	9/15/08	\$5,325.07
		13250	11/21/08	\$12,907 07
		13447	5/12/09	\$3,992 31
				\$22,224.45
Didi Hirsch Comm. Mental Health Ctr	A68			
		13126	9/22/08	\$6,727 78
		13339	12/3/08	\$14,162.28
		13537	5/21/09	\$10,673.97
				\$31,564.02
Disposed Goods (damaged &/or expired)	A531			
		12990	7/31/08	\$965 40
		12994	8/21/08	\$189,363 00
		13170	9/25/08	\$4,600 00
		13401	3/30/09	\$11,605 56
				\$206,533.96
Door of Hope	A37			
		13100	9/17/08	\$1,072 98
		13263	11/21/08	\$1,359 52
		13446	5/12/09	\$398.97
				\$2,831.47
Dovetail Ministries	A235			
		13364	12/10/08	\$182,092.66
		13393	3/19/09	\$129,013.63
		13400	3/24/09	\$120,929.21
		13568	5/7/09	\$11,299 95
				\$443,335.45

Agency Distribution Analysis**7/1/2008...6/29/2009****SHELTER PARTNERSHIP, INC.**

Agency Name	Agency #	Invoice #	Date	Amount
Downtown Women's Center	A143			
		13324	12/2/08	\$14,163 78
		13534	5/21/09	\$2,635.73
				\$16,799.51
Dream Center	A551			
		13356	12/4/08	\$37,013 10
				\$37,013.10
East San Gabriel Valley Coalition/Homeless	A308			
		12999	9/5/08	\$4,848.73
		13184	11/13/08	\$14,537.71
		13403	4/28/09	\$8,415.15
				\$27,801.59
Ecumenical Council of Pasadena Area	A317			
		13366	12/12/08	\$3,708 26
				\$3,708.26
Eimago, Inc.	A492			
		13234	11/13/08	\$44,101 20
				\$44,101.20
Elizabeth House	A393			
		13048	9/10/08	\$803 78
		13457	5/13/09	\$2,964 44
				\$3,768.22
Faithful Service Outreach	A248			
		13027	9/9/08	\$8,626 91
		13251	11/21/08	\$25,585.10
				\$34,212.01
Family Violence Tamar Hope House	A276			
		13271	11/21/08	\$24,733 81
				\$24,733.81
Filipino American Service Group	A144			
		13033	9/9/08	\$1,551.98
		13276	11/25/08	\$9,313 93
		13425	5/11/09	\$2,755 23
				\$13,621.13
First African Methodist Episcopal Church	A268			
		13358	12/8/08	\$73,092.41
				\$73,092.41
Flossie Lewis Center	A431			
		13120	9/19/08	\$5,211 73
		13507	5/20/09	\$8,233 57
				\$13,445.30
Fred Jordan Mission	A44			
		12987	7/31/08	\$190,113 35

Agency Distribution Analysis 7/1/2008...6/29/2009
SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
		13129	9/22/08	\$24,190.24
		13282	11/21/08	\$86,710.63
		13374	12/15/08	\$10,305 76
		13397	3/24/09	\$5,886.00
		13405	4/28/09	\$44,872.17
		13564	4/30/09	\$15,367.14
		13573	5/28/09	\$109,615 88
				\$487,061.17
Friends of SCLARC, Inc.	A558			
		13572	5/28/09	\$16,282 51
				\$16,282.51
Gateways Hospital & Mental Health Center	A494			
		13016	9/8/08	\$2,531 70
		13305	12/2/08	\$4,496 63
				\$7,028.33
Gay & Lesbian Adol .Soc. Svcs. / GLASS	A139			
		13041	9/10/08	\$21,196.14
		13187	11/13/08	\$19,602 85
				\$40,798.99
Gay & Lesbian Commun-Youth	A151			
		13460	5/13/09	\$676 80
				\$676.80
Girls Today Women Tomorrow	A490			
		13565	4/28/09	\$9,199.08
				\$9,199.08
Glendale Healthy Kids	A556			
		13362	12/8/08	\$2,503 96
				\$2,503.96
Gospel Missions of America	A52			
		13071	9/15/08	\$1,708 34
		13272	11/24/08	\$3,359.21
		13512	5/20/09	\$2,951 33
				\$8,018.88
Gramercy Housing Group	A334			
		13036	9/9/08	\$2,222 96
		13230	11/19/08	\$5,848 12
		13411	4/28/09	\$4,706 25
				\$12,777.33
Gramercy Place Shelter	A67			
		13151	9/23/08	\$3,056.11
		13321	12/2/08	\$15,401 69
		13530	5/21/09	\$6,131 34
				\$24,589.13

Agency Distribution Analysis 7/1/2008...6/29/2009 SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
Harbor Interfaith Shelter	A54			
		13131	9/22/08	\$3,726.18
		13317	12/2/08	\$14,974.52
		13499	5/18/09	\$9,463.22
				<hr/>
				\$28,163.91
Harbor View House, Inc.	A55			
		13085	9/16/08	\$3,079.26
		13240	11/19/08	\$4,536.61
		13469	5/13/09	\$757.01
				<hr/>
				\$8,372.88
Harbour-San Fernando Valley	A152			
		13081	9/16/08	\$6,197.76
		13213	11/18/08	\$8,738.39
		13458	5/13/09	\$3,610.65
				<hr/>
				\$18,546.80
Harvest Home	A453			
		13278	11/25/08	\$7,202.14
		13472	5/13/09	\$1,001.41
				<hr/>
				\$8,203.54
Hathaway - Sycamores Child & Family	A517			
		13132	9/22/08	\$3,199.83
		13315	12/2/08	\$11,309.98
		13539	5/21/09	\$12,982.36
				<hr/>
				\$27,492.17
Haven Hills, Inc.	A56			
		13092	9/17/08	\$2,247.86
		13307	12/2/08	\$8,372.20
		13515	5/20/09	\$2,589.01
				<hr/>
				\$13,209.06
Haven House	A57			
		13021	9/9/08	\$5,464.25
		13202	11/13/08	\$9,854.32
		13418	4/30/09	\$6,135.09
				<hr/>
				\$21,453.66
Hillview Mental Health Ctr.	A60			
		13089	9/17/08	\$10,145.49
		13277	11/25/08	\$15,878.41
		13463	5/13/09	\$6,301.77
				<hr/>
				\$32,325.66
Hollywood Community Housing Corporation	A369			
		13068	9/15/08	\$3,839.53
		13257	11/21/08	\$23,259.69
				<hr/>
				\$27,099.22

Agency Distribution Analysis**7/1/2008...6/29/2009****SHELTER PARTNERSHIP, INC.**

Agency Name	Agency #	Invoice #	Date	Amount
Hollywood Sunset Community Clinic	A217			
		13347	12/4/08	\$13,851.24
		13475	5/13/09	\$6,788 86
				\$20,640.09
Hollywood Wilshire YMCA (A Brighter Future)	A267			
		13069	9/15/08	\$889.06
		13292	11/25/08	\$1,148.71
		13533	5/21/09	\$261 42
				\$2,299.19
Homeless Health Care Los Angeles	A197			
		13040	9/10/08	\$1,986 76
		13191	11/13/08	\$2,359 12
		13407	4/28/09	\$783.60
				\$5,129.48
Homes for Life Foundation	A138			
		13123	9/19/08	\$1,874 15
		13249	11/21/08	\$2,027 48
		13437	5/11/09	\$3,736 49
				\$7,638.12
House of Mercy	A84			
		13010	9/8/08	\$6,732 80
		13197	11/13/08	\$7,514 81
		13440	5/12/09	\$1,652 89
				\$15,900.50
House of Ruth, Claremont	A64			
		13153	9/23/08	\$3,370.38
		13554	5/21/09	\$4,215.25
				\$7,585.63
House of Yahweh	A238			
		13299	11/26/08	\$10,808 89
		13563	5/21/09	\$8,885 11
				\$19,694.00
Independent Living Center	A36			
		13073	9/15/08	\$14,711.72
		13231	11/19/08	\$37,168 73
		13466	5/13/09	\$16,856 54
				\$68,736.99
Jenesse Centers	A66			
		13185	11/13/08	\$16,307 33
		13404	4/28/09	\$7,275.43
				\$23,582.76
Joint Efforts, Inc.	A469			
		13106	9/18/08	\$7,197 83

Agency Distribution Analysis

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SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
		13306	12/2/08	\$12,848 40
		13482	5/15/09	\$9,397 66
				\$29,443.88
Journey House	A506			
		13072	9/15/08	\$5,815.95
		13196	11/13/08	\$10,775.49
		13409	4/28/09	\$2,805.16
				\$19,396.61
Jovenes, Inc.	A245			
		13118	9/19/08	\$2,545 82
		13297	11/26/08	\$12,698 03
		13479	5/13/09	\$1,686 97
				\$16,930.82
JWCH Institute, Inc.	A209			
		13091	9/17/08	\$4,592 30
		13323	12/2/08	\$13,245 07
		13478	5/13/09	\$1,837 99
				\$19,675.36
Ketchum-Downtown YMCA	A444			
		12985	7/16/08	\$4,201.25
				\$4,201.25
King Drew Place of Family	A109			
		13002	9/5/08	\$10,269.17
				\$10,269.17
KYDS Inc.	A559			
		13576	5/28/09	\$11,889 26
				\$11,889.26
L.A. SHARES	A336			
		13171	9/26/08	\$70,167 00
				\$70,167.00
LAFH-Comunidad Cesar Chavez	A75			
		13029	9/9/08	\$6,421.13
		13239	11/19/08	\$13,534.11
		13471	5/13/09	\$7,929.09
				\$27,884.33
LAFHC-Valley Shelter Inc.	A125			
		13030	9/9/08	\$10,826.68
		13220	11/18/08	\$22,073.63
		13395	3/24/09	\$6,783 02
		13428	5/11/09	\$13,612 71
				\$53,296.04
Lamp Community	A76			
		13082	9/16/08	\$4,353 52

Agency Distribution Analysis 7/1/2008...6/29/2009 SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
		13247	11/21/08	\$25,372.69
		13536	5/21/09	\$418.80
				<u>\$30,145.01</u>
Las Familias del Pueblo	A73			
		13044	9/10/08	\$2,502 38
		13345	12/4/08	\$4,716 24
		13550	5/21/09	\$2,337 51
				<u>\$9,556.13</u>
Little Tokyo Service Center, Inc.	A452			
		13099	9/17/08	\$1,553.95
		13300	11/26/08	\$2,523.56
		13467	5/13/09	\$2,318 41
				<u>\$6,395.92</u>
Live Again Recovery Homes	A375			
		13125	9/19/08	\$3,158 42
		13223	11/18/08	\$4,558 71
				<u>\$7,717.13</u>
Long Beach Multi Service Center	A319			
		13075	9/15/08	\$5,466 88
		13227	11/19/08	\$10,683.58
		13553	5/21/09	\$3,124.95
				<u>\$19,275.41</u>
Long Beach Rescue Mission	A557			
		13380	12/18/08	\$4,482 56
				<u>\$4,482.56</u>
Los Angeles County Alliance of Boys & Girls	A515			
		13385	2/24/09	\$83,335 38
				<u>\$83,335.38</u>
Los Angeles House of Ruth	A63			
		13004	9/5/08	\$9,641 73
		13192	11/13/08	\$22,167 96
		13445	5/12/09	\$13,956 01
				<u>\$45,765.70</u>
Los Angeles Housing Partnership, Inc.	A561			
		13581	6/11/09	\$11,766 32
				<u>\$11,766.32</u>
Los Angeles Mission	A77			
		13111	9/18/08	\$23,101.32
		13177	10/13/08	\$3,152 16
		13281	11/25/08	\$43,808.05
		13398	3/24/09	\$1,471 50
		13477	5/13/09	\$4,884.24
		13570	5/18/09	\$13,802.10

Agency Distribution Analysis

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SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
		13574	5/28/09	\$14,803.83
				\$105,023.20
Los Angeles Youth Network	A78			
		13065	9/15/08	\$5,457.51
		13209	11/18/08	\$10,251.29
		13510	5/20/09	\$4,434.43
				\$20,143.23
Lutheran Social Services	A81			
		13128	9/22/08	\$11,519.80
		13314	12/2/08	\$9,257.86
		13436	5/11/09	\$2,536.69
				\$23,314.35
Mary Lind Recovery Centers	A83			
		13090	9/17/08	\$14,537.80
		13262	11/21/08	\$36,993.38
		13529	5/20/09	\$2,067.77
				\$53,598.95
Maternal and Child Health Access	A534			
		13008	9/3/08	\$2,084.35
		13391	3/19/09	\$1,058.19
				\$3,142.54
MEND	A471			
		13178	10/21/08	\$11,357.94
		13376	12/16/08	\$6,238.94
				\$17,596.88
Midnight Mission	A85			
		12984	7/15/08	\$4,050.40
		13088	9/17/08	\$33,387.91
		13193	11/13/08	\$92,678.60
				\$130,116.91
Missionary Brothers of Charity / Casa San	A164			
		13067	9/15/08	\$5,492.43
		13269	11/21/08	\$3,001.62
		13434	5/11/09	\$2,211.55
				\$10,705.60
MJB Transitional Recovery, Inc.	A254			
		13094	9/17/08	\$6,061.77
		13295	11/26/08	\$16,661.70
		13459	5/13/09	\$4,276.00
				\$26,999.47
National Mental Health Assn./Los Angeles Co.	A221			
		13096	9/17/08	\$5,428.91
		13258	11/21/08	\$39,349.25

Agency Distribution Analysis

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SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
		13500	5/18/09	\$12,554.28
				\$57,332.44
New Directions	A242			
		13074	9/15/08	\$6,833.65
		13211	11/18/08	\$24,271.34
		13501	5/18/09	\$5,958.19
				\$37,063.17
New Economics for Women/La Posada	A274			
		13141	9/23/08	\$6,161.28
		13316	12/2/08	\$35,418.27
		13513	5/20/09	\$15,646.16
				\$57,225.71
New Image	A227			
		13058	9/15/08	\$24,669.38
		13167	9/18/08	\$2,074.54
		13176	10/8/08	\$2,890.92
		13181	10/28/08	\$2,943.00
		13338	12/3/08	\$49,097.57
		13369	12/11/08	\$7,995.52
		13379	12/18/08	\$10,574.28
		13383	2/17/09	\$4,905.00
		13392	3/20/09	\$18,136.34
		13432	5/11/09	\$30,729.13
				\$154,015.68
OPCC-Access Center	A89			
		13144	9/23/08	\$7,158.94
		13332	12/3/08	\$11,634.00
		13556	5/21/09	\$4,973.50
				\$23,766.45
OPCC-Daybreak	A148			
		13145	9/23/08	\$2,534.65
		13333	12/3/08	\$3,757.17
		13557	5/21/09	\$3,592.47
				\$9,884.29
OPCC-Safe Haven	A522			
		13146	9/23/08	\$691.14
		13334	12/3/08	\$4,669.89
		13558	5/21/09	\$1,958.96
				\$7,319.99
OPCC-SAMOSHEL	A484			
		13147	9/23/08	\$2,329.97
		13335	12/3/08	\$737.34
		13559	5/21/09	\$2,056.36

Agency Distribution Analysis
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SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
				\$5,123.67
OPCC-Sojourn Services	A105			
		13148	9/23/08	\$2,920 14
		13336	12/3/08	\$1,851 52
		13560	5/21/09	\$4,389.35
				\$9,161.02
OPCC-Turning Point	A122			
		13149	9/23/08	\$1,804 70
		13337	12/3/08	\$4,920 48
		13561	5/21/09	\$4,422 45
				\$11,147.63
Operation Love Ministries, Inc.	A514			
		13235	11/13/08	\$17,706.20
				\$17,706.20
Optimist Youth Homes & Family Services	A510			
		13015	9/8/08	\$4,749 95
		13268	11/21/08	\$11,221 26
		13390	3/20/09	\$2,696 59
		13431	5/11/09	\$6,349 68
				\$25,017.48
Our Saviour Center	A198			
		13009	9/8/08	\$6,137.34
		13285	11/25/08	\$21,181.27
		13485	5/15/09	\$5,221 26
				\$32,539.86
Pacific Clinics	A373			
		13080	9/16/08	\$19,183.69
		13244	11/19/08	\$29,160 37
		13359	12/9/08	\$12,534.32
		13468	5/13/09	\$6,688.18
				\$67,566.56
Palms Residential Care Facility	A439			
		13101	9/18/08	\$9,764 29
		13246	11/21/08	\$14,577.24
		13523	5/20/09	\$7,524 45
				\$31,865.98
Para Los Ninos	A91			
		13155	9/23/08	\$12,058 77
		13344	12/4/08	\$13,923.32
		13511	5/20/09	\$3,824 31
				\$29,806.40
Parents of Watts	A92			
		13113	9/18/08	\$4,169.13

Agency Distribution Analysis

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SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
		13462	5/13/09	\$8,202 82
				\$12,371.95
Partners of Parks, Long Beach Police Toy	A420			
		13372	12/12/08	\$8,646 12
				\$8,646.12
Passageways	A352			
		13173	10/7/08	\$26,183 62
				\$26,183.62
PATH Achieve Glendale	A508			
		13050	9/10/08	\$7,493 22
		13265	11/21/08	\$3,672 56
		13430	5/11/09	\$1,921 50
				\$13,087.28
Path Ventures	A552			
		13373	12/15/08	\$9,579 85
				\$9,579.85
PATH-Access Center	A94			
		12986	7/22/08	\$1,851 83
		13051	9/15/08	\$13,728 52
		13190	11/13/08	\$26,918.69
		13386	2/26/09	\$490.50
		13464	5/13/09	\$6,925 68
				\$49,915.22
PAWS/LA	A365			
		13172	10/6/08	\$25,907.04
				\$25,907.04
Peace & Joy Care Center	A270			
		13012	9/8/08	\$10,463.88
		13205	11/14/08	\$20,274.34
		13492	5/15/09	\$6,336 25
				\$37,074.46
Pedro Pet Pals, Inc.	A550			
		13179	10/21/08	\$25,907 04
				\$25,907.04
People Helping People	A296			
		13047	9/10/08	\$9,866.45
		13186	11/13/08	\$18,333.02
		13375	12/15/08	\$6,999 76
		13508	5/20/09	\$10,897.38
				\$46,096.61
People In Progress	A82			
		13164	9/23/08	\$3,500.73
		13266	11/21/08	\$12,873.96

Agency Distribution Analysis

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SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
		13495	5/18/09	\$8,112.86
				\$24,487.54
Phoenix House	A441			
		12983	7/16/08	\$10,321.57
				\$10,321.57
Pomona Neighborhood Center, Inc.	A307			
		13256	11/21/08	\$14,147.41
		13449	5/12/09	\$2,726.08
				\$16,873.49
Pomona Valley Council of Churches	A96			
		13137	9/22/08	\$3,144.40
		13309	12/2/08	\$5,044.21
		13543	5/21/09	\$3,512.82
				\$11,701.43
Portals	A97			
		13154	9/23/08	\$3,920.20
		13346	12/4/08	\$7,295.26
		13562	5/21/09	\$2,101.88
				\$13,317.33
Prayer Time Mission (Higher Goals Inc.)	A256			
		13013	9/8/08	\$3,594.55
		13238	11/19/08	\$10,025.02
		13455	5/13/09	\$5,147.08
				\$18,766.65
Project New Hope	A141			
		13005	9/5/08	\$10,428.02
		13241	11/19/08	\$32,316.16
		13382	1/15/09	\$400.00
		13547	5/21/09	\$16,353.41
				\$59,497.59
Project Pace	A445			
		12982	7/15/08	\$7,058.90
		13377	12/17/08	\$4,395.88
				\$11,454.78
Prototypes	A280			
		13157	9/23/08	\$13,214.67
				\$13,214.67
Proyecto Pastoral	A219			
		13162	9/23/08	\$11,925.09
		13294	11/26/08	\$37,442.83
		13552	5/21/09	\$20,358.58
				\$69,726.50

Agency Name	Agency #	Invoice #	Date	Amount
Rainbow Services Ltd.	A99			
		13119	9/19/08	\$3,266 10
		13290	11/25/08	\$2,664 14
		13423	5/11/09	\$4,573 38
				<hr/> \$10,503.62
Rio Hondo Temporary Home	A114			
		13110	9/18/08	\$6,259.60
		13215	11/18/08	\$6,177.28
		13521	5/20/09	\$4,159.31
				<hr/> \$16,596.19
Safe House/ Friends Research Institute	A368			
		13062	9/15/08	\$1,211.30
		13228	11/18/08	\$408 90
		13442	5/12/09	\$252.48
				<hr/> \$1,872.68
Salvation Army - Alegria (Bethesda House)	A360			
		13124	9/19/08	\$2,500.13
		13274	11/25/08	\$11,185 57
		13481	5/15/09	\$8,443 20
				<hr/> \$22,128.90
Salvation Army - Bell Shelter	A212			
		12980	7/1/08	\$7,782.16
		12989	7/30/08	\$3,465 40
		13109	9/18/08	\$3,182 80
		13252	11/21/08	\$14,118 48
		13365	12/10/08	\$6,493 47
		13387	2/27/09	\$7,000.11
		13389	3/16/09	\$7,985.47
		13402	4/13/09	\$3,835 84
		13443	5/12/09	\$1,727.52
		13577	5/29/09	\$3,727 60
				<hr/> \$59,318.85
Salvation Army - Glendale Corps	A183			
		13130	9/22/08	\$1,926.96
		13328	12/3/08	\$4,563 62
		13524	5/20/09	\$2,716 41
				<hr/> \$9,206.99
Salvation Army - Harbor Light Center	A101			
		13018	9/8/08	\$27,849 39
		13225	11/18/08	\$37,951.24
		13517	5/20/09	\$13,014.47
				<hr/> \$78,815.10

Agency Distribution Analysis 7/1/2008...6/29/2009

SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
Salvation Army - Huntington Park	A70			
		13135	9/22/08	\$2,742.33
		13490	5/15/09	\$2,781.96
				\$5,524.29
Salvation Army - Long Beach (Trans. Living	A391			
		13060	9/15/08	\$6,820.44
		13243	11/19/08	\$9,765.76
		13408	4/28/09	\$5,825.54
				\$22,411.74
Salvation Army - Santa Fe Springs -	A244			
		13003	9/5/08	\$8,256.46
		13229	11/18/08	\$8,324.57
		13526	5/20/09	\$9,373.00
				\$25,954.04
Salvation Army - The Way In	A265			
		13121	9/19/08	\$2,995.99
		13289	11/25/08	\$7,297.50
		13525	5/20/09	\$3,144.60
				\$13,438.09
Salvation Army - West L.A. "Haven"	A262			
		13152	9/23/08	\$6,392.90
		13275	11/25/08	\$12,616.88
		13415	4/28/09	\$3,802.40
				\$22,812.18
Salvation Army - Westwood Transitional	A287			
		13054	9/15/08	\$4,891.94
		13201	11/13/08	\$2,988.15
		13410	4/28/09	\$2,571.25
				\$10,451.35
Salvation Army - Whittier Corp	A102			
		13059	9/15/08	\$2,220.26
		13313	12/2/08	\$9,147.01
		13474	5/13/09	\$4,760.18
				\$16,127.45
Salvation Army - Zahn Center	A103			
		13052	9/15/08	\$4,522.31
		13283	11/25/08	\$30,266.15
		13483	5/15/09	\$14,239.15
				\$49,027.60
San Fernando Valley Community Mental	A306			
		13034	9/9/08	\$8,389.09
		13545	5/21/09	\$1,114.74
				\$9,503.83

Agency Distribution Analysis**7/1/2008...6/29/2009****SHELTER PARTNERSHIP, INC.**

Agency Name	Agency #	Invoice #	Date	Amount
San Fernando Valley Rescue Mission	A438			
		13163	9/23/08	\$8,680 88
		13326	12/3/08	\$15,345 61
		13399	3/24/09	\$981 00
		13439	5/11/09	\$10,710 51
				<hr/>
				\$35,718.00
San Gabriel Valley Center	A535			
		13039	9/10/08	\$13,795 96
		13320	12/2/08	\$13,930.74
		13546	5/21/09	\$5,374 13
				<hr/>
				\$33,100.83
Santa Clarita Cold Weather Program	A343			
		13368	12/12/08	\$11,184.96
				<hr/>
				\$11,184.96
Santa Clarita Valley Food Pantry	A418			
		12996	8/28/08	\$19,992.92
				<hr/>
				\$19,992.92
SCHARP	A458			
		13031	9/9/08	\$5,301 13
		13242	11/19/08	\$17,706 76
		13406	4/28/09	\$6,619 08
				<hr/>
				\$29,626.97
Sea Possible	A266			
		12997	8/28/08	\$47,041 40
				<hr/>
				\$47,041.40
Serra Project	A301			
		13245	11/19/08	\$14,948 69
		13549	5/21/09	\$3,794.61
				<hr/>
				\$18,743.31
Shelter Partnership	A218			
		12981	7/8/08	\$3,329 52
		13232	11/10/08	\$159 92
		13236	11/13/08	\$3,638 40
		13318	11/25/08	\$2,381 70
		13396	3/20/09	\$380 16
		13575	5/28/09	\$1,673 88
				<hr/>
				\$11,563.58
Sheriff's Youth Foundation	A554			
		13352	12/4/08	\$154,468 40
		13378	12/17/08	\$4,395 88
				<hr/>
				\$158,864.28
Skid Row Development Corp./Transition	A119			
		13102	9/18/08	\$16,183 43

Agency Name	Agency #	Invoice #	Date	Amount
		13303	12/2/08	\$79,437 60
		13489	5/15/09	\$4,291 43
				\$99,912.46
Skid Row Housing Trust	A290			
		13024	9/9/08	\$13,041 11
		13219	11/18/08	\$21,676 78
		13579	6/8/09	\$1,630.80
				\$36,348.68
Southern California Alcohol & Drug Programs	A396			
		13086	9/16/08	\$11,494 57
		13214	11/18/08	\$35,961 35
		13486	5/15/09	\$16,866 32
				\$64,322.23
Southern California Alcohol & Drug Programs	A59			
		13032	9/9/08	\$657.99
		13221	11/18/08	\$962 46
		13509	5/20/09	\$635.73
				\$2,256.19
SRO Housing	A108			
		13055	9/15/08	\$4,296 47
		13329	12/2/08	\$36,919 44
		13420	5/11/09	\$6,992 86
				\$48,208.78
St. Anne's Residential Facility	A477			
		13165	9/23/08	\$2,647 43
		13174	10/7/08	\$18,851 84
		13233	11/13/08	\$36,857 36
		13480	5/15/09	\$6,528 31
				\$64,884.94
St. Christopher Church	A537			
		13150	9/23/08	\$1,716 75
		13183	11/13/08	\$6,024.62
				\$7,741.38
St. Francis Center	A110			
		13115	9/19/08	\$9,343 84
		13175	10/8/08	\$3,127 36
		13308	12/2/08	\$22,431.22
		13519	5/20/09	\$11,853 83
				\$46,756.25
St. Joseph's Center	A111			
		13076	9/15/08	\$13,741 36
		13298	11/26/08	\$48,306 74
		13441	5/12/09	\$12,465 79

Agency Distribution Analysis

7/1/2008...6/29/2009

SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
				\$74,513.89
St. Vincent Shelter	A207			
		13057	9/15/08	\$2,245.30
		13199	11/13/08	\$8,228.79
		13476	5/13/09	\$5,121.02
				\$15,595.12
St. Vincent's Cardinal Manning Center	A112			
		13017	9/8/08	\$3,202.01
		13296	11/26/08	\$8,352.66
		13413	4/28/09	\$4,257.04
				\$15,811.71
Step Up On Second	A175			
		13133	9/22/08	\$1,680.96
		13322	12/2/08	\$3,087.05
		13541	5/21/09	\$1,713.55
				\$6,481.55
Su Casa Family Domestic Abuse Network	A115			
		13158	9/23/08	\$5,693.18
		13330	12/3/08	\$9,458.92
		13429	5/11/09	\$2,719.56
				\$17,871.67
Substance Abuse Foundation of Long Beach	A294			
		13078	9/16/08	\$15,578.79
		13203	11/14/08	\$27,203.57
		13438	5/11/09	\$9,497.06
				\$52,279.42
Temple Israel	A346			
		13370	12/12/08	\$9,729.06
				\$9,729.06
Testimonial Community Love Center	A255			
		13140	9/23/08	\$3,188.17
		13310	12/2/08	\$12,851.88
		13540	5/21/09	\$7,019.60
				\$23,059.65
The Mildred Cursh Foundation	A486			
		13381	12/19/08	\$2,510.84
				\$2,510.84
The Saban Free Clinic	A413			
		13288	11/25/08	\$37,688.55
		13502	5/18/09	\$11,337.27
				\$49,025.82
Travelers Aid Society of Los Angeles	A120			
		13043	9/10/08	\$2,990.79

Agency Distribution Analysis

7/1/2008...6/29/2009

SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
		13340	12/3/08	\$1,118.31
		13551	5/21/09	\$2,575.99
				\$6,685.09
Triangle Christian Services, Inc.	A121			
		13114	9/18/08	\$4,856.81
		13291	11/25/08	\$21,338.43
		13505	5/20/09	\$7,227.50
				\$33,422.73
Truevine Community Outreach	A234			
		13006	9/5/08	\$6,375.01
		13212	11/18/08	\$10,236.67
		13448	5/12/09	\$4,730.73
				\$21,342.41
U.S. Veterans Initiative	A293			
		13042	9/10/08	\$10,767.53
		13259	11/21/08	\$18,114.70
		13416	4/30/09	\$10,561.35
				\$39,443.58
U.S. Veterans/Long Beach	A344			
		13038	9/10/08	\$4,440.40
		13350	12/4/08	\$8,032.31
		13465	5/13/09	\$1,914.93
				\$14,387.64
UCLA Unicamp	A555			
		13360	12/4/08	\$4,278.10
				\$4,278.10
Union Rescue Mission	A35			
		13063	9/15/08	\$13,857.78
		13168	9/19/08	\$47,078.52
		13194	11/14/08	\$26,942.01
		13451	5/12/09	\$9,404.38
				\$97,282.69
Union Rescue Mission-Hope Gardens	A536			
		13064	9/15/08	\$11,369.85
		13195	11/14/08	\$43,512.38
		13452	5/12/09	\$11,702.10
				\$66,584.33
Union Station Foundation	A150			
		13139	9/22/08	\$89.50
		13341	12/4/08	\$3,294.96
		13542	5/21/09	\$526.35
				\$3,910.81

Agency Distribution Analysis 7/1/2008...6/29/2009

SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
United Friends of the Children	A275			
		13093	9/17/08	\$3,556.86
		13255	11/21/08	\$8,231.90
		13422	5/11/09	\$1,239.64
				<hr/>
				\$13,028.40
Upward Bound House	A286			
		13053	9/15/08	\$7,028.44
		13496	5/18/09	\$7,616.55
				<hr/>
				\$14,644.99
Venice Community Housing Corporation	A499			
		13070	9/15/08	\$5,858.65
		13217	11/18/08	\$5,797.83
		13520	5/20/09	\$4,827.10
				<hr/>
				\$16,483.57
Vista Del Mar Child & Family Services	A520			
		13084	9/16/08	\$14,203.16
		13331	12/3/08	\$18,790.92
		13571	5/20/09	\$3,930.18
		13538	5/21/09	\$2,180.30
				<hr/>
				\$39,104.56
Volunteers of America Downtown Drop In Ctr	A318			
		13098	9/17/08	\$12,719.31
		13421	5/11/09	\$13,421.96
				<hr/>
				\$26,141.27
Walden House	A377			
		13026	9/9/08	\$12,139.31
		13304	12/2/08	\$30,384.90
		13488	5/15/09	\$7,275.74
				<hr/>
				\$49,799.95
Weingart Center Association	A131			
		13134	9/22/08	\$11,719.10
		13311	12/2/08	\$43,621.95
		13518	5/20/09	\$11,399.47
		13583	6/12/09	\$1,721.60
				<hr/>
				\$68,462.11
West Covina Community Services Center	A313			
		12992	8/13/08	\$7,441.89
		13254	11/21/08	\$38,123.08
		13491	5/15/09	\$9,715.27
				<hr/>
				\$55,280.24
Whittier Area First Day Coalition	A304			
		13159	9/23/08	\$5,356.61
		13343	12/4/08	\$20,486.25

Agency Distribution Analysis
7/1/2008...6/29/2009
SHELTER PARTNERSHIP, INC.

Agency Name	Agency #	Invoice #	Date	Amount
		13531	5/21/09	\$9,975 41
				\$35,818.27
WLCAC-Homeless Assistance Program	A130			
		13083	9/16/08	\$7,204 21
		13261	11/21/08	\$10,011 88
		13470	5/13/09	\$7,788 06
				\$25,004.15
WLCAC-Satellite Housing Program	A146			
		13105	9/18/08	\$9,421 62
		13301	11/26/08	\$21,991 18
		13493	5/18/09	\$6,090 14
				\$37,502.94
Women's & Children's Crisis Shelter	A133			
		13138	9/22/08	\$1,055 94
		13207	11/14/08	\$8,182.12
		13450	5/12/09	\$8,651.23
				\$17,889.30
WomenShelter of Long Beach	A136			
		13049	9/10/08	\$6,043 68
		13248	11/21/08	\$20,740 32
		13454	5/13/09	\$7,824 84
				\$34,608.84
YWCA of the Harbor Area & South Bay	A507			
		12979	7/1/08	\$12,865.98
		13584	6/12/09	\$958 80
				\$13,824.78
YWCA-Glendale	A95			
		13116	9/19/08	\$5,277 24
		13435	5/11/09	\$1,822 89
				\$7,100.12
YWCA-Wings	A137			
		13260	11/21/08	\$1,555 78
		13456	5/13/09	\$1,041 74
				\$2,597.52
Total Agencies Reported	228			\$8,003,642.80

Application for Extension of Time To File an
Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

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

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

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

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization	Employer identification number
	SHELTER PARTNERSHIP, INC.	95-3976214
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	523 WEST SIXTH STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	LOS ANGELES, CA 90014	

Check type of return to be filed (file a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- The books are in the care of ► RUTH E. SCHWARTZ

Telephone No. ► 213 688-2188

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 02/15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ☐ calendar year _____ or
 ► ☒ tax year beginning 07/01, 2008, and ending 06/30, 2009.

2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	NONE
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	NONE
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	NONE

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

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization	Employer identification number
	SHELTER PARTNERSHIP, INC.	95-3976214
	Number, street, and room or suite no. If a P O box, see instructions	For IRS use only
	523 WEST SIXTH STREET	
	City, town or post office, state, and ZIP code For a foreign address, see instructions	
	LOS ANGELES, CA 90014	

Check type of return to be filed (File a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in the care of **RUTH E. SCHWARTZ**

Telephone No **213 688-2188**

FAX No

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is

for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a

list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **05/15/2010**

5 For calendar year _____, or other tax year beginning **07/01/2008**, and ending **06/30/2009**

6 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension **ADDITIONAL TIME IS NEEDED IN ORDER TO GATHER**

THE INFORMATION NECESSARY TO PREPARE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	8a	\$	NONE
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	NONE
c Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$	NONE

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature 

Title

Date **02/08/2010**

CBIZ MHM, LLC
2301 DUPONT DRIVE, SUITE 200
IRVINE, CA 92612

Form **8868** (Rev 4-2009)