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**SCHEDULE O**  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service  
Name of the organization**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

**2011****Open to Public  
Inspection**

Employer identification number

Society of St. Vincent de Paul West Hills, Cty.

59-2237848

**01. Form 990 governing body review (Part VI, line 11)**

THE BOARD OF DIRECTORS REVIEWS THE FORM 990 PRIOR TO IT'S FILING

**02. Conflict of interest policy compliance (Part VI, line 12c)**EACH BOARD MEMBER IS REQUIRED TO READ THE CONFLICT OF INTEREST POLICY AND DISCLOSE ANY  
CONFLICTS, IF ANY**03. CEO, executive director, top management comp (Part VI, line 15a)**

THE EXECUTIVE DIRECTOR IS CURRENTLY AN UNCOMPENSATED POSITION

**04. Other officer or key employee compensation (Part VI, line 15b)**

THERE ARE NO OFFICER OR KEY EMPLOYEE THAT RECEIVE COMPENSATION

**05. Governing documents, etc, available to public (Part VI, line 19)**

GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST

CISL3C59PB

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July 26, 2013 LTR 2694C 0 R  
59-2237848 201209 67  
00024914

SOCIETY OF ST VINCENT DEPAUL  
WEST HILLS CTY  
12310 N NEBRASKA AVE  
TAMPA FL 33612



009700

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Nancy O'Leary  
Signature of officer or trustee

8-26-13  
Date

President  
Title