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Return of Organization Exempt From Income Tax

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

2011 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

<u> </u>	For the 2	011 cale	<u>endar year, or tax year beginnin</u>	ig January 1	, 2011 , ai	<u>nd endin</u>	g D	ecemb	er 31	, 20 11		
В	Check if ap	plicable:	C Name of organization Proyecto	La Nueva Esperanza, li	nc.			D	Employe	er Identification number		
	Address ch	nange	Doing Business As							66-0565479		
	Name char	nae	Number and street (or P O box if	mail is not delivered to stree	address)	Room/su	te	E	Telephor	ne number		
	Initial return	•	Po Box 603							787-890-2274		
	Terminated	rminated City or town, state or country, and ZIP + 4										
	Amended r	mended return San Antonio, PR 00690 G Gross receipts \$										
	Application	pending	F Name and address of principal offi	icer: Idalia Acevedo N	ieves		H(a)	s this a gr	oup return	for affiliates? 🗌 Yes 🗹 No)	
							Н(ь) /	Are all at	ffiliates in	ncluded? 🗌 Yes 🗹 No)	
1	Tax-exemp	t status	✓ 501(c)(3)) () ◀ (insert no) 🔲	4947(a)(1) or	527		If "No,"	' attach a	a list (see instructions)		
J	Website:	>					H(c) (Group e	xemption	n number ►		
K	Form of org	janization	✓ Corporation ☐ Trust ☐ Assoc	ciation ☐ Other ►	L Year	r of format	ion. 1	993	M State	of legal domicile: PR		
P	art I	Summ	nary									
	1 B	riefly de	escribe the organization's mis	sion or most significal	nt activities:			•			_	
4.] 1	he orga	nization provides tutoring to s	tudents, vocational wor	kshops, food	s for eld	erly and	homel	ess pec	ople and		
Activities & Governance			o low income people pay their u									
Ë	i											
Š	2 0	heck th	nis box ▶□ if the organization	n discontinued its oper	rations or dis	sposed c	of more	than 2	5% of	its net assets.		
Ğ	3 N	lumber	of voting members of the gov	erning body (Part VI, I	ine 1a) . .				3			
တ္	1		of independent voting members						4		_	
Ìŧ			mber of individuals employed						5		36	
Ę	6 T	otal nur	mber of volunteers (estimate i	f necessary)					6		_	
4	1		related business revenue from		line 12 .				7a		_	
			lated business taxable incom						7b		_	
				TEIVEL) [Pri	or Year	•	Current Year		
	8- c	ontribu	tions and grants (Part VIII,			- 5	24,173	444,60	 38			
Ž	9 P	rogram	service revenue (Part VIII) lin	e 20 106 2 0 2012	🗀					_		
Revenue			ent income (Part VIII, column									
Œ			venue (Part VIII, column (A), lii		🗅			591	2	26		
	12 T	otal rev	enue-add lines 8 through 11	(must equal Part VIII), c	olum្ជីត (A), lin	e 12)		5	24,764	444,63	34	
			nd similar amounts paid (Part									
	•		paid to or for members (Part			[_	
00	li .		other compensation, employee		nn (A), lines 5	5–10)		2	39,581	167,91	15	
T	1		onal fundraising fees (Part IX,	· · · · · · · · · · · · · · · · · · ·					70,406	59,61	16	
SECURIOR TO	1		draising expenses (Part IX, co			8			5.c. x3			
2 0	1		penses (Part IX, column (A), li)	-			08,122	217,25	_	
Ī	1		penses. Add lines 13-17 (mus		•) . F		5	18,109	444,78	_	
כ	1		e less expenses. Subtract line			´			6,655	(15	0)	
- Sec. 1						E	Beginning	of Curre	nt Year	End of Year		
	20 T	otal ass	sets (Part X, line 16)			[3	72,524	352,29	<u>-</u>	
Ass B	21 T		oilities (Part X, line 26)			[09,078	288,95		
Net Asset	22 N	let asse	ets or fund balances. Subtract	line 21 from line 20		. [63,446	63,33	32	
	art II	Signa	ture Block		·	•			•			
Ur	nder penaltie	es of perju	ury, I declare that I have examined this	s return, including accompar	nying schedules	and stater	nents, and	d to the	best of n	my knowledge and belief, if	t ıs	
tru	ie, correct, a	and comp	elete Declaration of preparer (other the	an officer) is based on all info	rmation of whic	h preparer	has any k	nowled	ge			
			Idalia alle	uldo (Nilula				8	19	2012		
Sig	gn	Sign	nature of officer					Date				
He	ere		Idalia Ace	vedo Nieu	es							
		Тур	e or print name and title			_					_	
Pa	aid	Print/Ty	ype preparer's name	Preparer's signature		∕ Dã	te i		Check	7 if PTIN	_	
	eparer	Miguel	l Soto Lopez				176		self-emp			
	se Only	Firm's r	name CPA Miguel Soto Lo	pez		Firm's	EIN ▶	66-0573775	_			
U	oe Omy		address ► Po Box 3711 Aguadi	IIa, PR 00605			-	Phone		787-997-6227		
Ma	y the IRS		s this return with the prepare	r shown above? (see i	nstructions)			<u> </u>		· · Yes No	<u>, </u>	
For	r Paperwo	rk Redu	uction Act Notice, see the separ	rate instructions.		Cat N	o 11282Y	,		Form 990 (20	11)	

Form 99	00 (2011)			Page 2
Part		Accomplishments esponse to any question in this Part		
1	Briefly describe the organization's mission			
2	Did the organization undertake any sign prior Form 990 or 990-EZ?]Yes ☑No
3	If "Yes," describe these new services on Did the organization cease conducting services?	g, or make significant changes in he]Yes ☑ No
4	If "Yes," describe these changes on Sch Describe the organization's program se expenses. Section 501(c)(3) and 501(c) grants and allocations to others, the total	rvice accomplishments for each of its (4) organizations and section 4947(a)	(1) trusts are required to report	s measured by the amount of
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	Other program services (Describe in Sci	hedule O.)		
4e	(Expenses \$ including € Total program service expenses ▶		\$)	• •

'art I	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	√ /	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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	✓	<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u>·</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
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		<u>✓</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓_
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		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	.11b		✓_
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> </u>
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e 11f		√
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	✓	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14 a		14a		<u> </u>
b	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
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, Parts II and IV	15		✓_
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, Parts III and IV	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a		20a		✓_
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		✓
		For	n 990	(2011)

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		√ √
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a - 28b	-	√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		√
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	_	

Form **990** (2011)

Part									
	Check if Schedule O contains a response to any question in this Part V	• •	Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a		175						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable								
c	Did the organization comply with backup withholding rules for reportable payments to vendors and								
	reportable gaming (gambling) winnings to prize winners?								
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 36								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	√						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		34	1					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1					
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		1					
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	30° 013	136 5					
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			300					
-		- <u>\$</u>	7	-					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		V					
b	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		1					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	100		-					
74	organization solicit any contributions that were not tax deductible?	6a							
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).	3,500.	N. A.	25 F					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	3.25	1990,20 22 24 24	8,					
	and services provided to the payor?	7a							
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	-		1					
	required to file Form 8282?	7c	- 806.00	✓					
d	If "Yes," indicate the number of Forms 8282 filed during the year	100		غُرِنتُا					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		√					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1					
9 h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		V					
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	2. 2	Salai.	\$ 2.					
J	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			36.4 Z					
	organization, have excess business holdings at any time during the year?	8	ع عدد ا	1					
9	Sponsoring organizations maintaining donor advised funds.	\$	735 F	, ,,,					
а	Did the organization make any taxable distributions under section 4966?	9a		1					
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1					
10	Section 501(c)(7) organizations. Enter:	, , ,	, j						
а	Initiation fees and capital contributions included on Part VIII, line 12	3.5%		i, 4					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]		100	- *					
11	Section 501(c)(12) organizations. Enter:	1.30	45	1					
а	Gross income from members or shareholders		450	1 ;					
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	32,0		٠,,					
10-	against amounts due or received from them.)	12a	1.450.0	 -					
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	Ko 3	23	-					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			, ,					
ıs a	Is the organization licensed to issue qualified health plans in more than one state?	13a	F., 5.5.	† · •					
u	Note. See the instructions for additional information the organization must report on Schedule O.	2, 3,	5						
b	Enter the amount of reserves the organization is required to maintain by the states in which	1. ":							
	the organization is licensed to issue qualified health plans		1						
С	Enter the amount of reserves on hand	7 4 1 1	(A)						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a							
h	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b	1	1					

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response to any question in this Part VI	See ins	structi	ions.
Section	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent. 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		✓
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	1	
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint	5 6	√	√
b	one or more members of the governing body?	7a 7b	√	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			Barrier of
a b 9	The governing body?	8a 8b 9		
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	nue C		
		-	Yes	No
- 10a - b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10a		√
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		✓
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	a fragi	130 3	200
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b		√
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		✓
13	Did the organization have a written whistleblower policy?	13		✓
14 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?			* 9
а	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		1
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 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	3,5	✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		**************************************
Secti	on C. Disclosure	100	—	1 4
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3)s	only)
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	of inte	rest p	oolicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	÷	

Page	7

Form	agn	ሰንበ1	11
rom	990	1201	1)

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

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

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

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

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

☐ Check this box if neither the organization no	r any relate	d org	aniz	atio	n c	ompe	nsa	ited any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per	(C) Position (do not check more than box, unless person is bo officer and a director/true				than o	one n an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employее	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Idalia Acevedo Nieves						-				
Directora	40	1						26,958	0	0
(2)										
(3)										
(4)										
(5)										
(6)										
(7)				-						
(8)										
(9)										
(10)										
(11)										
(12)	-									
(13)										
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and title		(B) (C) Position (do not check more th box, unless person is officer and a director/					an	(D) Reportable compensation from	on compensatio	n from	Esti amo	(F) mated ount of ther
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-N	ons	composition from the compositi	ensation m the nization related nizations
(15)				-									
(16)													
(17)								-					
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)			====	-		-			-				
(25)									-				
1b c d	Sub-total	VII, Sectio	n A				•	> > >					
2	Total number of individuals (including but reportable compensation from the organi	not limited						e) w	ho received m	ore than \$1	00,00	0 of	
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	oloyee, or high	est compe	nsate	d 🤼	Yes No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual												
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or inc	lividua	al 💮	· · · · · · · · · · · · · · · · · · ·
Section	on B. Independent Contractors						_						•
1	Complete this table for your five highest compensation from the organization. Repyear.												
	(A) (B) (C) Name and business address Description of services Compensation							ation					
								_					_
2	Total number of independent contractor							th	nose listed ab	ove) who	3 ³ ,413		پ.

Part	VIII	Statement of Reve	nue					
	#1			M believe	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns						
Grants	b	Membership dues .						
ls, (Am	С	Fundraising events .						
Giff	d	Related organizations						
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (con						
	f	All other contributions, gr		ļ				
ibu Yth		and similar amounts not inc		444,608				
ontr id (g	Noncash contributions includ						
	h	Total. Add lines 1a-1	<u>f</u>		444,608	Service Control	* () - () - () - () () () () () (
Program Service Revenue				Business Code				
eve	2a	***************************************						
e B	b							
Şi	C							
Sel	d							
ä	е						—	
.go	f	All other program sen		L		2 2000 000		F 000
	g	Total. Add lines 2a-2	f					
	3	Investment income	(including divid	ienas, interest,				
		and other similar amo	•					
	4	Income from investment						<u> </u>
	5	Royalties	(ı) Real	(ii) Personal		* 3000000000000000000000000000000000000		
			(I) Heal	(II) Personal				
	6a	Gross rents						
	b	Less: rental expenses						
	C	Rental income or (loss)				A 2 4 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		The state of the second of the
	_d	Net rental income or ((i) Securities	(ii) Other	100 181 ACCOS (ACOS)	-127 c 2 1, 200 (MACA)	22 Car 1140 C S 18	* * * * * * * * * * * * * * * * * * * *
	7a	Gross amount from sales of	(i) Securities	(ii) Other			- 2	
	١.	assets other than inventory						
	b	Less: cost or other basis				CONTRACT OF STREET		
		and sales expenses .						
	С	Gain or (loss)				San Salas		
	d	Net gain or (loss) .		· · · · ·	SOUTH LOCAL			
<u>•</u>	0-	Gross income from fu	androining					
eune	8a	events (not including \$	muraising					
-		, ,	nd on line 1e)					
Æ		of contributions reported See Part IV, line 18 .				75.2		
Other Re	١.						3.50	
δ	b	Less: direct expenses		events . ►			20 March 1990	<u> </u>
	C	Net income or (loss) f Gross income from ga		events .	- 50F -FN-8 828889-	200 m 2 m 200 m 20		30AM W34 0 1
	38		aming activities.					
	_	Less: direct expenses	-					
	b	Net income or (loss) f				1000000	3 25 23	
	_	Gross sales of in			AND ELECTRONICS.		The skill in a	Trace Willy Sign S
	100	returns and allowance		,				
	ь	Less: cost of goods s		<u></u>	1-3/2008			
	C	Net income or (loss) f			1535 3545 St. 1545 C. 1	[27]		1 Ta Milla Succe Sellin and al Miller
	-	Miscellaneous P		Business Code				*** \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	11a	Interest		26	26			184 - 184 - 184 - 184 - 184 - 184 - 184 - 184 - 184 - 184 - 184 - 184 - 184 - 184 - 184 - 184 - 184 - 184 - 184
	b							
	C							<u> </u>
	d	All other revenue .						
	e	Total. Add lines 11a-	11d	>	26	St. Color	100 miles	229000
	12	Total revenue. See in		•	444,634			

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).

	Check if Schedule O contains a respon	se to any question		<u> </u>	<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21			State Control	
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	167,915	132,653	35,262	
9 10 11	Other employee benefits	19,314	15,258	4,056	
a b c	Management	59,6161	59,616		
d e= f g	Professional fundraising services. See Part IV, line 17-Investment management fees		The second of th		
12 13 14	Advertising and promotion	220 4,819		220 4,819	
15 16 17	Royalties				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest	72		72	
21	Payments to affiliates	40.000	40 744	4 050	
22	Depreciation, depletion, and amortization .	12,370	10,514 14,048		
23 24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If	16,925	14,040	2,011	Activity of the state of the st
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)			in the second	
а	Supplies	45,069	45,069		<u> </u>
b	Auto	5,498	5,498		
С	Utilities	8,064	7,258		
d	Contributions	92,863	92,863	 	
е	All other expenses	12,039	10,077	1,962	
25	Total functional expenses. Add lines 1 through 24e	444,784	392,854	51,930	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

P	art X	Balance Sheet			
			(A) Beginning of year	-	(B) End of year
	1	Cash-non-interest-bearing	18,970	1	28,732
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	279,470	3	248,277
	4	Accounts receivable, net	8,846	4	5,886
s	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		<u>.</u> 5	i i i
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	435	9	2,894
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b	51,437	10c	53,099
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11	13,003	12	13,040
	13	Investments program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	363	15	363
	16	Total assets. Add lines 1 through 15 (must equal line 34)	372,524	16	352,291
	17	Accounts payable and accrued expenses	29,608	17	40,682
	18	Grants payable		18	
	19	Deferred revenue	279,470	19	248,277
	-20	Tax-exempt bond liabilities		_20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			
	00		200.070	25	200 050
_	26	Total liabilities. Add lines 17 through 25	309,078	26	288,959
ces		lines 27 through 29, and lines 33 and 34.		**** ·	
<u>a</u>	27	Unrestricted net assets	63,446		63,332
Ba	28	Temporarily restricted net assets		28	
Б	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.		` ` ` ` ` `	
şţ	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
t A	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Š	33	Total net assets or fund balances	63,446	_	63,332
	34	Total liabilities and net assets/fund balances	372,524	34	352,291

Page	1	2

Par	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	· .	
1	Total revenue (must equal Part VIII, column (A), line 12)		44	4,634
2	Total expenses (must equal Part IX, column (A), line 25)			4,784
3	Revenue less expenses. Subtract line 2 from line 1			(150)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		6	3,446
5	Other changes in net assets or fund balances (explain in Schedule O)	-		36
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))		6	3,332
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>		<u> </u>
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	ī	Yes	No
2a b c	Were the organization's financial statements compiled or reviewed by an independent accountant? Were the organization's financial statements audited by an independent accountant?	2b	✓	1
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:	,		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
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?	າ 3 a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			•
			n <u>99</u> 0	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

66-0565479 Proyecto La Nueva Esperanza, Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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). 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 331/3% 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 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated d ☐ Type III-Other a 🗌 Type I **b** Type II e By checking this box. I certify that the organization is not controlled directly or indirectly by one or more disgualified 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). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting 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 Yes No (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (I) Name of supported (iv) Is the organization (ii) EIN (iii) Type of organization (v) Did you notify (vii) Amount of (vi) Is the (described on lines 1-9 the organization in organization in col. support organization governing document? col. (i) of your (i) organized in the above or IRC section US? (see instructions)) support? Yes Yes Yes No No No (A) (B) (C) (D) (E)

Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and	(4) 200.	(2, 2000	(0, 2000	(0) =0.10	- 107	
•	membership fees received. (Do not	1					
	include any "unusual grants.")	260,387	273,450	449,907	524,764	444,634	1,953,142
2	Tax revenues levied for the						_
_	organization's benefit and either paid					1	
	to or expended on its behalf						
3	The value of services or facilities		-				
	furnished by a governmental unit to the	1	l				
	organization without charge						
4	Total. Add lines 1 through 3	260,387	273,450	449,907	524,764	444,634	1,953,142
5	The portion of total contributions by	3377 3.3		5 - 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	14 12 TO 1	18.22 B	
3	each person (other than a						
	governmental unit or publicly		5. 1888 1. 1888	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	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.	*	Bress State			1.77	
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	260,387	273,450	449,907	524,764	444,634	1,953,142
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources					ĺ	
9 -	Net income from unrelated business	-					
	activities, whether or not the business	ł	}		}		
	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	1988 (Carlo)	F	一、类量20%。	YAZY TA	1.50 N. A.	1,953,142
12	Gross receipts from related activities, etc	. (see instructi	ons)			12	
13	First five years. If the Form 990 is for the	he organizatior	n's first, secon	d, third, fourth	i, or fifth tax ye	ear as a section	n 501(c)(3)
	organization, check this box and stop he	re			<u>.</u>	. <u>.</u>	<u> ▶</u> 🗸
Secti	on C. Computation of Public Suppo	rt Percentag	е				
14	Public support percentage for 2011 (line	6, column (f) d	ivided by line 1	1, column (f))		14	%
15	Public support percentage from 2010 Sc					15	%
16a	331/3% support test-2011. If the organi						eck this
	box and stop here. The organization qualifies as a publicly supported organization						
b	331/3% support test-2010. If the organ					15 is 33¹/₃% o	or more,
	check this box and stop here. The organ	ization qualifie	s as a publicly	supported org	ganization .		. ▶ 🗆
17a	10%-facts-and-circumstances test-2	011. If the orga	anization did n	ot check a box	on line 13, 16	a, or 16b, and i	ine 14 is
	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in						
	Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported						
	organization						
b	10%-facts-and-circumstances test-2						
	15 is 10% or more, and if the organiza						
	Explain in Part IV how the organization n				he organizatio	n qualifies as a	publicly
	supported organization						. ▶ 🗆
18	Private foundation. If the organization d						
	instructions				<u> </u>	· · · · ·	· <u> </u>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	A D 1 11 O			···/			
	on A. Public Support	T	·				(0 T.)
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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	•	ļ			ĺ	
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an					1	
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
D	received from other than disqualified		1				
	persons that exceed the greater of \$5,000		1				
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	MARCH REE	7757821.2273	. i Milliosri	3.4 - 3 4.5	1000	
	line 6.)	100 mg 1 / 10 / 10 / 10 / 10 / 10 / 10 / 10 /					
Section	on B. Total Support	List an instant > 1 to in	1 10 70 10 10 10 10 10 10 10 10 10 10 10 10 10	_ ////////////////////////////////////	SW 1227 - 1 12	1	
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011 _	(f) Total
9	Amounts from line 6	(4) 2001	(2) 2000	(0) = 000	(,	(5, 25	(,)
10a	Gross income from interest, dividends,	· · · ·					
iva	payments received on securities loans, rents,	ļ					
	royalties and income from similar sources .	<u>}</u>					
b	Unrelated business taxable income (less					 	
, ,	section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	Add lines 10a and 10b			· · · · · · · · · · · · · · · · · · ·			
C 11	Net income from unrelated business						
11	activities not included in line 10b, whether						
	or not the business is regularly carried on					1	
40					<u> </u>	 	
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 t	he organization	n's first, secon	d. third. fourth	ı. or fifth tax v	ear as a section	1 501(c)(3)
• •	organization, check this box and stop he	_					
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2011 (line			3. column (fl)		15	%
16	Public support percentage from 2010 Sc						%
	on D. Computation of Investment In						
17	Investment income percentage for 2011			y line 13, colui	mn (f))	17	%
18	Investment income percentage from 201						%
19a	331/3% support tests—2011. If the organ	nization did no	t check the box	c on line 14, a	nd line 15 is n	nore than 331/39	
	17 is not more than 331/3%, check this box	and stop here	. The organizati	on qualifies as	a publicly supp	orted organization	on . ▶ 🗆
b	331/3% support tests-2010. If the organi						
-	line 18 is not more than 331/3%, check this	box and stop I	here. The organ	ization qualifies	as a publicly s	supported organi	zation ► 🗌
20	Private foundation. If the organization d						

art IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	Page
••		-
		-
••		.
		 -

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number

Proyecto La Nueva Esperanza, Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) . Aggregate grants from (during year) . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure ☐ Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 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) -- d --Number of conservation easements included-in (c) acquired after 8/17/06; and not on a-2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: ▶ \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X

Part	III Organizations Maintaining	Collections of	Art, His	torical 7	Treasures	, or O1	her Similar A	Assets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and o						
а	☐ Public exhibition		d	☐ Loan	or exchang	ge prog	rams	
b	☐ Scholarly research							
c								
4	Provide a description of the organiza		and expl	ain how t	hev further	the ord	anization's ex	empt purpose in Part
	XIV.				,		,	
5	During the year, did the organization	solicit or receive	donation	ns of art	historical ti	reasure	s or other sim	ilar
•	assets to be sold to raise funds rather							
Part								
Lair					janization	allowe	ied ies toi	onn 990, rait iv,
	line 9, or reported an amour						ether essets	
1a								
	included on Form 990, Part X?							· ∐ Yes ∐ No
b	If "Yes," explain the arrangement in P	art XIV and comp	lete the fo	ollowing t	able:	r		
								Amount
C	Beginning balance					10	;	
d	Additions during the year					10	i <u> </u>	
е	Distributions during the year					16)	
f	Ending balance					11	!	
2a	Did the organization include an amou							. Tyes No
	If "Yes," explain the arrangement in P							
Pari			zation a	swered	"Yes" to !	Form 9	90 Part IV lir	ne 10
		(a) Current year		or year			(d) Three years ba	
1a	Beginning of year balance	(-,,	1	7	, , , ,		.,,	
	·	ļ			-			2011 1879 - 1879 - 18 800 2011 1879 - 1870 - 188 800
b	Contributions	·	 		 			St. 55.4 * * 55.7
С	Net investment earnings, gains, and		1		}			
	losses		ļ		 			5 7 To 10 February 25
d	Grants or scholarships		ļ					<u> </u>
е	Other expenditures-for facilities and	—··· – ·- –					·· -	
	programs							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
f	Administrative expenses						<u>-</u>	
g	End of year balance				<u></u>			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2	Provide the estimated percentage of	the current year e	nd baland	ce (line 1g	g, column (a	a)) held	as:	
а	Board designated or quasi-endowme	nt ▶	%					
b	Permanent endowment ▶	%						
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2		00%.					
За	Are there endowment funds not in th			zation the	at are held	and ad	ministered for	the
	organization by:	•	•					Yes No
	(i) unrelated organizations							. 3a(i)
	(ii) related organizations					•		. 3a(ii)
b	If "Yes" to 3a(ii), are the related organ			on Sched	lule R2			. 3b
4	Describe in Part XIV the intended use		•					
Part								
T alt	Description of property	(a) Cost or o			or other basis	(0)	Accumulated	(d) Book value
	Description of property	(a) Cost or c			other)		epreciation	(a) Book value
	Lond	-	•	 		10. 800	. , , , , , , , , , , , , , , , , , , ,	
1a	Land	.				100 gm	- , m. > 30, 13"	
Ь	Buildings	•		 		 		
C	Leasehold improvements	•		 	38,153		11,152	27,001
d	Equipment	·			59,134	 	42,771	16,363
e	Other	<u>·</u>		<u> </u>	70,522		60,788	9,735
Total.	Add lines 1a through 1e. (Column (d) r	nust equal Form 9	90, Part	X, columi	n (B), line 10	0(c).)	<u>.</u> ▶	53,099

Part VII	Investments-Other Securities	. See Form 990, Part X,	
(a	Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financia	l derivatives		
	held equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D) (E)			
(F)			
(G)			
(H)			
(I)			
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 12.)		第17日外の後にして、多3日本中ではなって対象に関いる。
Part VIII	Investments-Program Related	J. 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
(1)			
(2)			
(3)			
(4)			
(5)			
_(6)			
(7)			
(8)			
<u>(9)</u> (10)			
	(b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets. See Form 990, Pa	art X, line 15.	
		a) Description	(b) Book value
(1)			
(2)			
_(3)		**···	
(4)			
(5)		<u></u>	
(6)			
<u>(7)</u>			
(8)			
<u>(9)</u> (10)			
Total. (Colu	ımn (b) must equal Form 990, Part X, c	ol. (B) line 15.)	
Part X	Other Liabilities. See Form 990,		
1.	(a) Description of liability	(b) Book value	
(1) Federal	l income taxes		
(2)			Territoria de Caraciano de Cara
(3)		<u></u>	
(4)			
(5)			
(6)			
(7)			
(8)			
(10)			
(10)			
	(b) must equal Form 990, Part X, col. (B) line 25.)		
- Junio Josianini	(-) adam : a and : are of ook (b) min tol)	I	Franciscon to the description of the market and the second of the second

Schedu	e D (Form 990) 2011			Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Staten	nents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	
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 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine		10	
	XII Reconciliation of Revenue per Audited Financial Stateme			urn
1	Total revenue, gains, and other support per audited financial statements		1	T
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			<u>a</u>
a	Net unrealized gains on investments	2a		
-	Donated services and use of facilities			45
b				
C	Recoveries of prior year grants			
ď	Other (Describe in Part XIV.)		20	A
e	Add lines 2a through 2d			·
3	Subtract line 2e from line 1		3 3	2
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4-		×
а	Investment expenses not included on Form 990, Part VIII, line 7b		-	
b	Other (Describe in Part XIV.)			1
_C	Add lines 4a and 4b			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			
	XIII Reconciliation of Expenses per Audited Financial Statem			eturn
1	Total expenses and losses per audited financial statements		1 (% 5)	<u>.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1	200	
а	Donated services and use of facilities	2a	-	
- b -	Prior year adjustments		- 3	 — —
С	Other losses			
d	Other (Describe in Part XIV.)			
е	Add lines 2a through 2d			9
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		e de la composição de l	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)			
C	Add lines 4a and 4b		40	;
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)	5	
Part				
Comp	lete this part to provide the descriptions required for Part II, lines 3, 5, and	9; Part III, lines 1a and 4;	Part I	V, lines 1b and 2b;
	, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII,	, lines 2d and 4b. Also cor	nplete	this part to provide
any a	dditional information.			
				~~~~~~~
				••

Schedule D (Fo	rm 990) 2011	Page 5
Part XIV	Supplemental Information (continued)	

#### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

2011

Employer identification number

Open to Public Inspection

OMB No 1545-0047

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

Proyecto La Nueva Esperanza, Inc.	66-0565479
Page 5, Part V Statements Regarding Other IRS Filings and Tax Compliance, Line 3	
All contributions received during this year for Proyecto La Nueva Esperanza, Inc. are related to their a	activities.
·	
Page 6, Part VI Governance, Management and Disclosure, Section A Governing Body and Management	nt, Line 3
The Board of Directors delegated the administration of the organization to the executive director.	
Page 6 Part VI Governance, Management and Disclosure, Section A Governing Body and Managemen  The Board of Directors elects new members through voting at meetings. The decisions of Proyecto L	
taken by the Board of Directors.	a wueva Esperanza, m.c. are
······	
<del></del>	
······	