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17/12

72-1612665

Form 990-EZ **Short Form**
Return of Organization Exempt From Income Tax

Under section 501(c)(3), 527, or 4947(a)(1) of the Internal Revenue Code (except for a trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For the 2012 calendar year, or tax year beginning 2012, and ending 20

A For the 2012 calendar year, or tax year beginning 2012, and ending 20

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

C Name of organization: **Know Your Neighbor BlackWatch**
D Employer identification number: **72-1612665**
E Telephone number:
F Group Exemption Number:
G Accounting Method: ☒ Cash ☐ Accrual Other (specify):
H Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)
I Website:
J Tax-exempt status (check only one): ☒ 501(c)(3) ☐ 501(c)(4) ☐ 501(c)(29) ☐ 4947(a)(1) or ☐ 527
K Check ☐ If the organization is not a section 509(a)(2) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000, A Form 990-EZ or Form 990 return is not required though Form 990 N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.
L Attach Schedules B, C, and D to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 28, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I ☐

1	Contributions, gifts, grants, and similar amounts received	1	6
2	Program service revenue including government fees and contracts	2	7
3	Membership dues and assessments	3	8
4	Investment income	4	9
5a	Gross amount from sale of assets other than inventory	5a	10
5b	Less: cost or other basis and sales expenses	5b	11
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	12
6	Gaming and fundraising events	6	13
6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	14
6b	Gross income from fundraising events not including \$ of contributions from fundraising events reported on line 1 (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	15
6c	Less: direct expenses from gaming and fundraising events	6c	16
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	17
7a	Gross sales of inventory, less returns and allowances	7a	18
7b	Less: cost of goods sold	7b	19
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	20
8	Other revenue (describe in Schedule O)	8	21
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	22
10	Grants and similar amounts paid (list in Schedule O)	10	23
11	Benefits paid to or for members	11	24
12	Salaries, other compensation, and employee benefits	12	25
13	Professional fees and other payments to independent contractors	13	26
14	Occupancy, rent, utilities, and maintenance	14	27
15	Printing, publications, postage, and shipping	15	28
16	Other expenses (describe in Schedule O)	16	29
17	Total expenses. Add lines 10 through 16	17	30
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	31
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	32
20	Other changes in net assets or fund balances (explain in Schedule O)	20	33
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	34

For Paperwork Reduction Act Notice, see the separate instructions. Cat No 15442 Form 990-EZ 2012

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Part II Balance Sheets (see the instructions for Part II)Check if the organization used Schedule O to respond to any question in this Part II ☐

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	764	56400
23 Land and buildings	0	0
24 Other assets (describe in Schedule O)	0	0
25 Total assets		
26 Total liabilities (describe in Schedule O)		
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)		

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III ☐

What is the organization's primary exempt purpose?

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(2) trusts; optional for others)
28	
29 Grants \$ ☐ If this amount includes foreign grants, check here	28a 0
30 Grants \$ ☐ If this amount includes foreign grants, check here	28a 0
31 Other program services (describe in Schedule O) Grants \$ ☐ If this amount includes foreign grants, check here	30a 0
32 Total program service expenses (add lines 28a through 31a)	31a 0

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Form 990-B, 990-BES, 990-BE, or 990-BE-1)	(d) Health benefits contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Joyce Davidson		0	0	0
George Freeman		0	0	0
Pam Coleman		0	0	0
Benjamin Davidson		0	0	0

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46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.

Yes No
46 ☒ ☐

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI.

☐

47 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.

Yes No
47 ☐ ☒

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.

Yes No
48 ☐ ☒

49a Did the organization make any transfers to an exempt non-charitable related organization?

Yes No
49a ☐ ☒

b If "Yes," was the related organization a section 527 organization?

Yes No
49b ☐ ☒

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Form W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NA				

f Total number of other employees paid over \$100,000.

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$60,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$60,000	(b) Type of service	(c) Compensation
NA		

d Total number of other independent contractors each receiving over \$100,000.

52 Did the organization complete Schedule A? (Note: All section 501(c)(3) organizations and 4947(a)(1) non-exempt charitable trusts must attach a completed Schedule A.)

Yes No
52 ☐ ☒

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.

Sign Here Joyce Davidson Date 5-15-14
Type or print name and title Joyce Davidson Director

Paid Preparer Use Only
Print preparer's name _____ Preparer's signature _____ Date _____ Check ☐ if self-employed PTIN _____
Firm's name _____ Firm's EIN _____
Firm's address _____ Phone no. _____
May the IRS discuss this return with the preparer shown above? See instructions. Yes ☐ No ☒

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Part V Other information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		X
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		X
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule M		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	
b Did the organization file Form 1120-POL for this year?		
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
b If "Yes," complete Schedule L, Part I, and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts included on line 9 for public use of club facilities	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d Section 501(c)(3) and 501(c)(6) organizations. Enter amount of tax on line 40c reimbursed by the organization		
e All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8866-T		
41 List the states with which a copy of this return is filed		
42a The organization's books are in care of		
Located at		
b 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)? If "Yes," enter the name of the foreign country	42b	X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country	42c	X
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 9041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	X
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	X
c Did the organization receive any payments for indoor tanning services during the year?	44c	X
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	X
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	X
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	X

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