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Department of the Treasury Internal Revenue Service

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)

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

Open to Public Inspection

A	For the 2012 o	alendar year, or tax year beginning $07/01/12$, and ending $06/30/3$	L3		
В	Check if applicable	C Name of organization		D Emplo	yer identification number
	Address change	Peaceful Paths, Inc.			
	Name change	Doing Business As			-1809014
_ F.	nıtıal return	Number and street (or P O box if mail is not delivered to street address)	Room/suite	•	one number
吕		2100 NW 53rd Avenue	A	352	<u>2-377-5690 </u>
י בַ	Terminated	City, town or post office, state, and ZIP code			
<i>f</i>	Amended return	Gainesville FL 32653		G Gross rec	eipts\$ 1,473,392
	Application pending	F Name and address of principal officer	H(a) Isthisag	roup return for	affiliates? Yes X No
		Theresa Beachy			<u> </u>
		2100 NW 53rd Avenue, Ste.A	H(b) Are all af		
		Gainesville FL 32653	- If - No	o," attach a list	(see instructions)
1	Tax-exempt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527	4		
		ww.peacefulpaths.org	H(c) Group ex		
	Form of organization		ear of formation 1	977	M State of legal domicile FI
2014 		ımmary			
70		escribe the organization's mission or most significant activities:			
ֆ 5		mission is to stop domestic violence and encourage	people 1	n our	
04 nance	comm	unities to make informed and healthy choices.			
FEB					
도 응		is box \(\bigsim \subseteq \square if the organization discontinued its operations or disposed of more than 25	% of its net ass	1 1	16
Q %		of voting members of the governing body (Part VI, line 1a)		3	15
SCANNED FEB 04 Activities & Governance		of independent voting members of the governing body (Part VI, line 1b)		4	<u>15</u> 37
2		nber of individuals employed in calendar year 2012 (Part V, line 2a)		5	70
ٳ؆ڮؚ		nber of volunteers (estimate if necessary)		6	
S		elated business revenue from Part VIII, column (C), line 12		7a	0
	b Net unre	lated business taxable income from Form 990-T, line 34	Prior Yea	7b	Current Year
	8 Contribu	tions and grants (Part VIII, line 1h)		5,604	1,406,266
Revenue	Ť	service revenue (Part VIII, line 2g) RECEIVED		2,846	3,878
8,6	_				0
ř		ent income (Part VIII, column (A), lines 3, 4, and 7d) venue (Part VIII, column (A), lines \$26d, 8ς Δ9c, 10c gand 11g)	2	4,048	32,204
	12 Total rev	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,06	2,498	1,442,348
	13 Grants a	nd similar amounts paid (Part IX, column (A), lines 1-3)	12	6,292	165,148
	14 Benefits	paid to or for members (Part IX, column A) in a N, UT			0
s	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10)	98	8,718	954,173
Expenses	16a Profession	onal fundraising fees (Part IX, column (A), line 11e)			0
흜	b Total fun	draising expenses (Part IX, column (D), line 25) ▶ 62,297			111
Ú	17 Other ex	penses (Part IX, column (A), lines 11a–11d, 11f–24e)		6,084	377,197
	18 Total exp	enses Add lines 13–17 (must equal Part IX, column (A), line 25)		1,094	1,496,518
	19 Revenue	less expenses. Subtract line 18 from line 12		1,404	-54,170
i o c			Beginning of Cur		End of Year
Net Assets or Fund Balances	20 Total ass	sets (Part X, line 16)		0,508	2,463,371
ret md	.21 Total liab	ulities (Part X, line 26)		8,849 1,659	335,882
		ts or fund balances. Subtract line 21 from line 20	2,10	1,659	2,127,489
		gnature Block			
		perjury, I declare that I have examined this return, including accompanying schedules and stateme omplete Declaration of preparer (other than officer) is based on all information of which preparer h			owledge and belief, it is
_		1/2		14	7/14
Sig		agnature of effice		Date .	
Hei			tive Dir	rector	<u> </u>
		Type or print name and title	T		Date
Da:-	. '	e preparer's name Preparer's sugnature	Date	Check	If PTIN
Paid	Daror Breph	en H Kattell		/14 self-em	
	parer Firm's na		F	irm's EIN	01-0822046
U38	-	808B NW 16th Ave dress Gainesville, FL 32601	-		352_305 CECE
-	Firm's ac		<u></u>	hone no	352-395-6565
		ss this return with the preparer shown above? (see instructions) uction Act Notice, see the separate instructions.			X Yes No Form 990 (2012)
DAA	raperwork Ked	שכנוטוז אנו מטונים, ספס נווס ספףפופוס וווסנוטנוטווס.	917-2	20	Form 33U (2012)
			JI 1-6		Į.

om 990 (2012) Peaceful Paths	, Inc.	59-1809014	Page 2
Part III Statement of Program S	Service Accomplishmen tains a response to any qu		
1 Bnefly describe the organization's missio			
Our mission is to stop communities to make in			people in our
			
2 Did the organization undertake any signif prior Form 990 or 990-EZ? If "Yes," describe these new services on		e year which were not listed on the	Yes X No
3 Did the organization cease conducting, o services?	r make significant changes in ho	w it conducts, any program	Yes X No
If "Yes," describe these changes on Sche Describe the organization's program servexpenses. Section 501(c)(3) and 501(c)(4) the total expenses, and revenue, if any, for	ice accomplishments for each of l) organizations are required to	report the amount of grants and allocated	
4a (Code:)(Expenses \$ Family Violence Counse victim advocates and information, resource	seeks to build a	program provides s cooperative netwo	support groups and ork to supply
4b (Code:) (Expenses \$ Crisis Shelter Programmediate danger. Other food, clothing, personant transportation and merceive additional inserved)	her services ind hal and househol dical care. Sur	e emergency shelte lude but are not l d products, safety vivors whose stay	er to victims in imited to providing planning,
4c (Code:)(Expenses \$ Transitional Housing supportive services to domestic violence and	o women and their	de long term, low i r children who are	(Revenue \$) .ncome housing and e survivors of nen, 5 children)
4d Other program services. (Describe in Sch		\	
(Expenses \$ 4e Total program service expenses ▶	including grants of \$ 1,323,975) (Revenue \$	
AA			Form 990 (2012

			_	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			_
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			v
_	"Yes," complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
•	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	445		v
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11b		<u> </u>
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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	11f	_X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	<u> </u>	
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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
l4a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		
D	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	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, Parts III and IV	16		X
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	ا 🚛		₩.
20-	If "Yes," complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
<u> </u>	n 169 to mic 200, are the organization attach a copy of its addition mandal statements to this feture.	_00		

Form 990 (2012) Peaceful Paths, Inc.

Part IV 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		1.55	
	in the United States 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 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	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	L	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 lines 24b			
	through 24d and complete Schedule K If "No," go to line 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	L	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	
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	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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest 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,			
	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		<u> </u>
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		<u> </u>
C	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		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		1	
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34	<u> </u>	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	<u> </u>
b	If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2	35b	ļ	<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable			•
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
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,			v
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		- T	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	1 (2012)
		F	441	E /0040

Pa	Check if Schedule O contains a response to any question in this Part V			
	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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	7		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	7		
	reportable gaming (gambling) winnings to prize winners?	1c		
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 37			
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 (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	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 instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			X
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 5c		Λ
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	8		
•	organization, have excess business holdings at any time during the year?	-		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		İ
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part-VIII, line 12, for public use of club facilities	7]	:	
11	Section 501(c)(12) organizations. Enter:	\neg 1	:	
а	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.)	-		
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	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
þ	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans 13b	-		
C	Enter the amount of reserves on hand [13c] Did the assemblation receives any navements for indeed temping converse during the tay year?	14a		X
14a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		^
<u>_b</u>	II 165, Tido it filed a 1 offit 120 to report tilede paymente: it 116, provide all explanation in deficience o			

59-1809014 Form 990 (2012) Peaceful Paths, Inc. Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 15 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. 15 1b 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 X 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization 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 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 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. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 X Did the organization have a written document retention and destruction policy? 14 14 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 Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, 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 X with a taxable entity during the year? 16a 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? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the

352-377-5690

2100 NW 53rd Avenue, Ste. A

FL 32653

organization:

Gainesville

Sharon Emery

Form 990 (2012)	Peaceful	Paths,	Inc.		!
				 	_

59-1809014

Page 7

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any	bo off	x, unle icer a	Pos check ess pe	rson	than or is both a or/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-211039-MI3C)	from the organization and related organizations
(1) Brian Scarborous	j h	1				\Box				
	1.00									
Director	0.00	X				Ш		0	0	0
(2) JoAnn Wilkes		1								
	1.00	1								
Director	0.00	X				Ш		0	0	0
(3) Paula Varnes-Fu			•							
	1.00									
Director	0.00	X						0	0	0
(4) James Ferrer			ŀ			1				
	1.00									
Director	0.00	X				\sqcup		0	0	0
(5) Jay Dutton		1								
	1.00									
Past President	0.00	X	<u> </u>		L.	$\sqcup \bot$		0	0	0
(6) Janet Larson		1								
	1.00	1							_	
Director_	0.00	X	<u> </u>		_	\sqcup		0	0	0
(7) Ferneise Nix			Ī						,	
_	1.00	1	ŀ						_	_
Director	0.00	X	<u> </u>	_	<u> </u>	 		0	0	0
(8) Rita Parrot										
_	1.00	1							_	
Director	0.00	X		_		┦		0	0	0
(9) Joseph Johnson										
	1.00	1	İ						_	
Director	0.00	X	_	_		╀╌┼		0	0	0
(10) Pam Burns	1									
_	1.00			,,					_	_
Treasurer	0.00	X	_	X	├	╀╌┤		0	0	0
(11) Barry Warren	1 1 00				1					
71	1.00								^	_
Director	0.00	X			L			0	0	5 990

Part VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	оуве	s, a	nd Highest Compensated	Employees (continued)		
(A) Name and title	(B) Average hours per week (list any hours for	off	x, unle ficer a	Pos check ess pe nd a d	rson i irecto	than o	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	Esti amo o comp fro	(F) imated ount of other ensation m the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		and	nization related nizations
(12) Lynne Vaughan	1.00										
President	0.00	$ \mathbf{x} $		x				0	o		C
(13) Lauren Poe											
tti Durad Jank	1.00	.		.							,
Vice President (14) Marsha Brackins	0.00	X	├	X	├	\vdash		0	0		
(14)Marbia Bracking	1.00										
Director	0.00	x						0	0		
(15)Leslie Hoffman											
Cognotomi	1.00	x		x				0	o		c
Secretary (16) Theresa Beachy	0.00	┢┸	<u> </u>	^	 	-		<u> </u>	<u> </u>		
(10) 211 21 21 21 21 21 21 21 21 21 21 21 21	40.00				Ī						
Executive Director	0.00	ļ	ļ	X	_			93,446	0		3,807
(17)											
(18)											
(19)				-							
1b Sub-total	· · · · · · · · · · · · · · · · · · ·						•	93,446			3,807
 Total from continuation she d Total (add lines 1b and 1c) 	ets to Part VII,	Secti	ion /	4			>	93,446			3,807
Total number of individuals (in reportable compensation from				thos	e lıs	ted a	bov	· · · · · · · · · · · · · · · · · · ·	\$100,000 in		
3 Did the organization list any fo	-			trust	ee l	kev e	mpl	ovee or highest compensa	ated		Yes No
employee on line 1a? If "Yes," For any individual listed on line organization and related organ	complete Sche e 1a, is the sum	dule of re	J for port	suc able	h inc	lividu pens	ial satio	n and other compensation	from the	3	X
individual	iizalions greater	uiai	ιφι	0,00	0,1	1 16	5 , C	complete Schedule 3 for su	CII	4	<u> </u>
5 Did any person listed on line 1 for services rendered to the or									· individual	5	x
Section B. Independent Contracto			-				-				
 Complete this table for your five compensation from the organi 										ear.	
Name and	(A) business address							Descrip	(B) tion of services		(C) Compensation
											
							\vdash				
2 Total number of independent	contractors (incl	udınç	g but	not	limit	ed to	tho	se listed above) who			,
received more than \$100,000	or compensation	ıırol	iii (N	e org	arıız	auon			0	<u> </u>	Form 990 (201:

ı, é	rt V	III Statement of Reve Check if Schedule		ains a response to	any question in thi	is Part VIII.		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats ts	1a	Federated campaigns	1a	82,905				
srar our	b	Membership dues	1b			1		
S, C	С	Fundraising events	1c	9,220		1		
ar	d	Related organizations	1d			I		
imi	6	Government grants (contributions)	1e	1,030,668		1		
er S	f	All other contributions, gifts, grants,				1		
텵		and similar amounts not included above	1f	283,473				
ont	g		-1f \$	99,420	1 406 266	1		
O B	<u>h</u>	Total. Add lines 1a-1f			1,406,266			
eun	2a	Training		Busn Code	3,428	3,428		
Rev	b	BIP Fees			450	450		
ice	c	DIF Feeb					_	
Šez	d							
E E	е							
Program Service Revenue Contributions, Gifts, Grants	f	All other program service reve	nue					
<u>-</u>	g	Total. Add lines 2a-2f		>	3,878			<u></u>
	3	Investment income (including	dividend	s, interest,				
	_	and other similar amounts)						
	4	Income from investment of tax	-exempt	bond proceeds				
	5	Royalties (ı) Real	1	(II) Personal				
	6a		704	(ii) i cisoriai		1		
	b		302					
	C		402					
	d	Net rental income or (loss)		•	31,402	Ī		31,402
	7a Gross amount from sales of assets (i) Securities (ii) G		(II) Other					
		other than inventory						
	b	Less cost or other						
		basis & sales exps						
		Gain or (loss)				•		
		Net gain or (loss)		•				
ne	ва	Gross income from fundraising eve	220					
Other Revenue		(not including \$ 9,) of contributions reported on line 1c						
R.		See Part IV, line 18	a	8,544				
ther	ь	Less direct expenses	ь	7,742		1		
Ŏ		Net income or (loss) from fund	ت Iraising e		802			802
		Gross income from gaming activities						
		See Part IV, line 19	a					
	b	Less direct expenses	ь_					
		Net income or (loss) from garr	ing activ	rities 🕨				
	10a	Gross sales of inventory, less						
		returns and allowances	a -			1		
		Less cost of goods sold	b a of inve	entory		İ		
		Net income or (loss) from sale Miscellaneous Revenue	s or mve	Busn. Code				
	11a	THE SCHOOL TO VOI INC.			Ì	†		
	b							
	c					-		
	d	All other revenue						
	е	Total. Add lines 11a-11d						
	12	Total revenue. See instruction	ns.	>	1,442,348	3,878	0	32,204

	990 (2012) Peaceful Paths, 1		59-180	9014	Page 10
Pa	rt IX Statement of Functional Expe	enses		<u> </u>	
Secti	on 501(c)(3) and 501(c)(4) organizations must cor			lete column (A)	
	Check if Schedule O contains a respon				
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
_7b	8b, 9b, and 10b of Part VIII.	<u> </u>	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	10,200	10,200		
2	Grants and other assistance to individuals in	754 040	154 040		
	the U.S. See Part IV, line 22	154,948	154,948		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	102 463	41 206	20 602	41 204
_	trustees, and key employees	103,463	41,386	20,693	41,384
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	737,344	680,320	56,536	488
7	Other salanes and wages	131,344	080,320	30,330	400
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	50,708	42,512	6,109	2 097
9	Other employee benefits	62,658	54,772	4,970	2,087 2,916
10 11	Payroll taxes Fees for services (non-employees):	02,030	J1,112	4,510	2,310
	Management				
a b	Legal				
c	Accounting	12,250		12,250	
4	Lobbying	12,230		22,230	
	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				<u></u> .
	(A) amount, list line 11g expenses on Schedule O)	82,159	81,405	485	269
12	Advertising and promotion	2,852	2,567		285
13	Office expenses	56,985	52,760	1,365	2,860
14	Information technology	•	•		
15	Royalties				
16	Occupancy	72,912	72,437	300	175
17	Travel	16,744	15,892	852	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	15,760	13,554	1,418	788
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	73,580	70,246	1,667	1,667
23	Insurance	22,283	21,222	4 -56	605
24	Other expenses Itemize expenses not covered		İ		
	above (List miscellaneous expenses in line 24e. If		1		
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	Fundraising Supplies	8,414			8,414
b	Dues & Subscriptions	7,176	6,171	646	<u>359</u>
c	Misc	3,113	1,255	1,858	
d	Training	1,691	1,505	186	
е	All other expenses	1,278	823	455	
25	Total functional expenses. Add lines 1 through 24e	1,496,518	1,323,975	110,246	62,297
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here ▶ ☐ if				
DAA	following SOP 98-2 (ASC 958-720)		<u> </u>		5000
DAA					Form 990 (2012)

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 127,355 116,499 1 Cash-non-interest bearing 2 2 Savings and temporary cash investments 195,813 184,006 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Complete Part II of Schedule L 6 Loans and other 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). Complete Part II of Schedule L Assets 7 Notes and loans receivable, net Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or 2,839,211 other basis Complete Part VI of Schedule D 10a 2,207,240 676,445 2,162,766 **b** Less: accumulated depreciation 10b 11 Investments—publicly traded securities 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 14 Intangible assets 100 100 15 15 Other assets. See Part IV, line 11 2,530,508 2,463,371 16 Total assets. Add lines 1 through 15 (must equal line 34) 97,572 99,270 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, -iabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 251,277 236,612 23 Secured mortgages and notes payable to unrelated third parties 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 348,849 335,882 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ Balances complete lines 27 through 29, and lines 33 and 34. 2,015,010 2,011,961 27 Unrestricted net assets 166,649 115,528 Temporarily restricted net assets Net Assets or Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ complete lines 30 through 34. Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 2,181,659 2,127,489 Total net assets or fund balances 33 2,463,371 2,530,508 Total liabilities and net assets/fund balances

Form **990** (2012)

om	1 990 (2012) Peaceful Paths, Inc. 59-1809014				Pa	ge 12
Pa	rt XI Reconciliation of Net Assets		_			
	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			42,	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,			<u>518</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		- 5	5 4 ,	<u>170</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,	, 18	31,	<u>659</u>
5	Net unrealized gains (losses) on investments	_ 5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	2,	, 12	27,4	489
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			1	.	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			l		
	Schedule O			I	. 1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		Li	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			I		
	reviewed on a separate basis, consolidated basis, or both			I		
	Separate basis Consolidated basis Both consolidated and separate basis			ı		
b	Were the organization's financial statements audited by an independent accountant?		Li	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			ı		
	separate basis, consolidated basis, or both:			ı		
	X Separate basis Consolidated basis Both consolidated and separate basis			I	.	
C	If "Yes" to line 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	
	If the organization changed either its oversight process or selection process during the tax year, explain in			Ī		
	Schedule O.			I	. [
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?		<u>L:</u>	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits] ;	3b	X	

Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

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

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Peaceful Paths, Inc

Employer identification number 59-1809014

			Peacerur Pat	ns, inc.					23.	<u>- 100</u>	9014			
P	art I	Reas	on for Public Charity	Status (All organizations	must co	mplete	this pa	art.) Se	e inst	ructio	ns.			
The	orga	nization is not	a private foundation because	se it is (For lines 1 through 11,	check only	y one box	.)			-				
1		A church, coi	nvention of churches, or ass	sociation of churches described	ın sectioi	170(b)(1	I)(A)(i).							
2	П	A school des	cribed in section 170(b)(1)	(A)(ii). (Attach Schedule E.)										
3	П			ce organization described in se	ction 170	(b)(1)(A)(iii).							
4	Ħ	•	·	d in conjunction with a hospital			•)(1)(A)(i	ii). Ente	er the h	ospital's	name	a .	
-		city, and state	,	co.,				/\ · /\ · 4\.	,		p		.,	
5		•		of a college or university owned	or operat	ed by a d	overnme	ntal uni	t descri	hed in				
3	Ш	_			or operat	eu by a g	Oveninie	illai ulli	(uescii	Dea III				
_			(b)(1)(A)(iv). (Complete Part			10/L\/4\/A	M- A							
0	7	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												
7	X	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		_		1) more than 33 1/3% of its sup						_	oss			
				npt functions—subject to certain										
		support from	gross investment income a	nd unrelated business taxable ir	ncome (le	ss section	511 tax	() from b	usines	ses				
		acquired by t	he organization after June 3	30, 1975. See section 509(a)(2)	. (Comple	te Part III	.)							
10		_	=	exclusively to test for public safe										
11				exclusively for the benefit of, to										
		purposes of o	one or more publicly support	ted organizations described in s	ection 509	9(a)(1) or	section	509(a)(2	2). See	section	ו			
		509(a)(3). Ch	eck the box that describes	the type of supporting organizat	on and co	mplete lii	nes 11e	through	11h.					
		а 📙 Туре	l b Type II	c Type III–Function	ally integr	ated	d	Тур	e III–No	on-funct	tionally ir	ntegra	ited	
е		By checking	this box, I certify that the org	ganization is not controlled direc	tly or indi	ectly by o	ne or m	ore disc	jualified	person	ıs			
		other than for	undation managers and other	er than one or more publicly sup	ported or	ganızatior	ns descr	ibed in s	ection	509(a)(1)			
		or section 50	9(a)(2).											
f		If the organiz	ation received a written dete	ermination from the IRS that it is	a Type I,	Type II,	or Type	III suppo	orting					
		organization,	check this box											
g		Since August	t 17, 2006, has the organiza	tion accepted any gift or contrib	ution from	any of th	ne							
Ī		following per	rsons?											
		(i) A persor	n who directly or indirectly of	ontrols, either alone or together	with perso	ons descr	ibed in (ıı) and					Yes	No
		(ni) belov	w, the governing body of the	supported organization?							ſ	11g(i)		
			member of a person descri	• •								11g(ii)		
			·	described in (i) or (ii) above?							T I	11g(iii)		
h			· ·	the supported organization(s).							•			
	i) Nam	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did v	ou notify	(vi)	s the	(vii) A	mount /	of monet	larv
•		janization		(described on lines 1-9	1 ' '	sted in your	the organ	ization in	organizat	ion in col		supp		
				above or IRC section	governing	document?	col (i) supi	or your cort?		zed in the S ?				
				(see instructions))	Yes	No	Yes	No	Yes	No	1			
(A)														
,														
(B)														
,														
(C)										_				
		_												_
(D)														
					<u> </u>									
(E)														
_														
Tota	al		ŧ.				-		1					

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.)

<u>Sec</u>	tion A. Public Support									
Caler	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,413,865	1,317,864	1,305,768	2,035,604	1,406,266	7,479,367			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
4	Total. Add lines 1 through 3	1,413,865	1,317,864	1,305,768	2,035,604	1,406,266	7,479,367			
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)						10.040			
	Public support. Subtract line 5 from line 4						19,343 7,460,024			
<u>6</u>	tion B. Total Support				i	l	7,460,024			
	ndar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
7	Amounts from line 4	1,413,865	1,317,864	1,305,768	2,035,604	1,406,266	7,479,367			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar			60,731						
	sources	38,701	3,351	60,731	57,141	54,704	214,628			
9	Net income from unrelated business activities, whether or not the business is regularly carned on	321	6,797	5,924		802	13,844			
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						7,707,839			
12	Gross receipts from related activities, etc	(see instructions)				12	10,372			
13	First five years. If the Form 990 is for the	•	second, third, fou	ırth, or fifth tax yea	r as a section 501	(c)(3)				
	organization, check this box and stop here	-	•	•			▶ □			
Sec	tion C. Computation of Public Su		age							
14	Public support percentage for 2012 (line 6	, column (f) divided	by line 11, colum	n (f))		14	96.78%			
15	Public support percentage from 2011 Scho	edule A, Part II, line	14			15	96.64%			
16a	33 1/3% support test—2012. If the organi	ization did not chec	k the box on line '	13, and line 14 is 3	3 1/3% or more, o	heck this				
	box and stop here. The organization quali	fies as a publicly si	upported organiza	tion			▶ X			
b	33 1/3% support test—2011. If the organi	ization did not chec	k a box on line 13	or 16a, and line 1	5 is 33 1/3% or mo	ore,				
	check this box and stop here. The organize	zation qualifies as a	publicly supporte	d organization			▶ ∐			
17a	10%-facts-and-circumstances-test-201	•								
	10% or more, and if the organization meet									
	Part IV how the organization meets the "fa organization	cts-and-circumstar	ices" test. The org	anızatıon qualıfies	as a publicly supp	oorted	▶ 🗌			
b	10%-facts-and-circumstances test—201	1. If the organization	on did not check a	box on line 13, 16	a, 16b, or 17a, an	d 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 me	ets the "facts-and-	circumstances" te	st The organizatio	n qualifies as a pu	iblicly				
	supported organization						▶ 🗌			
18	Private foundation. If the organization did	d not check a box o	n line 13, 16a, 16l	o, 17a, or 17b, che	ck this box and se	ee	▶ □			
	instructions									

5	q	_	1	Ω	n	q	n	1	4

Page 3

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.)

Sec	tion A. Public Support	quality arraor a	to tooto notou k	polow, piedee e	ompioto i dit ii			
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012		(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 through 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 \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b	· · · · · · · · · · · · · · · · · · ·						
8	Public support (Subtract line 7c from line 6.)							
	tion B. Total Support							
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012		(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							
С	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, check this box and stop here	-	t, second, third, fo	urth, or fifth tax yea	ar as a section 50	1(c)(3)	•	▶ □
Sec	tion C. Computation of Public Su	pport Percen	tage					
15	Public support percentage for 2012 (line 8	, column (f) divided	d by line 13, colum	nn (f))		L	15	%
16	Public support percentage from 2011 Scho						16	%_
	tion D. Computation of Investme		<u> </u>				<u> </u>	
17	Investment income percentage for 2012 (In			s, column (f))		F-	17	%
18 10a	Investment income percentage from 2011			a 14 and line 15 :-	more than 22 1/2	-	18	%_
19a	33 1/3% support tests—2012. If the orga 17 is not more than 33 1/3%, check this be							▶ □
b	33 1/3% support tests—2011. If the orga		=		-		nd	_
_	line 18 is not more than 33 1/3%, check th							▶ □
20	Private foundation. If the organization did				-	-		>

Schedule A (Form 990 or 990-EZ) 2012 Peaceful Paths, Inc.

59-1809014

Page 4

Part 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).

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ 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.

OMB No 1545-0047

Open to Public Inspection

P	eaceful Paths, Inc.		59-1809014
	Organizations Maintaining Donor Advised Fu organization answered "Yes" to Form 990, Part I		·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(7)	
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	t the assets held in donor advised	
•	funds are the organization's property, subject to the organization's exc		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in		
•	only for charitable purposes and not for the benefit of the donor or don		
	conferring impermissible private benefit?	or davisor, or for any other purpose	Yes No
P	The Conservation Easements. Complete if the organic	nization answered "Yes" to Form	
1	Purpose(s) of conservation easements held by the organization (check		
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically in	nportant land area
	Protection of natural habitat	Preservation of a certified histor	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a cons	ervation
	easement on the last day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure inc	luded in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/	` '	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organiza	ation during the
	tax year ▶		3
4	Number of states where property subject to conservation easement is	located >	
5	Does the organization have a written policy regarding the periodic mon		
	violations, and enforcement of the conservation easements it holds?	,g,g	☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	cing conservation easements during the	
•	>		,
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	conservation 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 section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation easem	ents in its revenue and expense stateme	
•	balance sheet, and include, if applicable, the text of the footnote to the	•	
	organization's accounting for conservation easements.	•	
P	計劃 Organizations Maintaining Collections of Art,	Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to F	Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), r	ot 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 furth	herance of
	public service, provide, in Part XIII, the text of the footnote to its finance	ial statements that describes these items	5.
b	If the organization elected, as permitted under SFAS 116 (ASC 958), t	o report in its revenue statement and bal	ance sheet
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	herance 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, pi	rovide the
	following amounts required to be reported under SFAS 116 (ASC 958)	relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990, Part X		▶ \$
	Paperwork Reduction Act Notice, see the Instructions for Form 990	•	Schedule D (Form 990) 2012

Sched	ule D (Form 990) 2012 Peaceful	Paths, In	c	!	59-1809014	Page 2
Par	t	ng Collections o	f Art, Historical T	reasures, o	r Other Similar Asset	s (continued)
	Using the organization's acquisition, acces collection items (check all that apply):	sion, and other recor	ds, check any of the fo	llowing that are	a significant use of its	
a [Public exhibition	d 🗌	Loan or exchange pro	ograms		
ь [Scholarly research	е 🗌	Other			
c [Preservation for future generations					
4	Provide a description of the organization's	collections and expla	in how they further the	organization's	exempt purpose in Part	
	XIII.					
5	During the year, did the organization solicit	or receive donations	of art, historical treasu	ıres, or other sir	milar	
	assets to be sold to raise funds rather than					Yes No
Par	Escrow and Custodial A line 9, or reported an amo	_	•	nization ansv	wered "Yes" to Form 9	90, Part IV,
1a	Is the organization an agent, trustee, custo			or other assets	not	
	included on Form 990, Part X?		diary for contained and it	0. 00.0. 00000		Yes No
	If "Yes," explain the arrangement in Part X	III and complete the f	ollowing table			
_			one ming table			Amount
С	Beginning balance				1c	
	Additions during the year				1d	
	Distributions during the year				1e	
	Ending balance				1f	
	Did the organization include an amount on	Form 990, Part X, lin	e 21?		<u></u>	Yes No
	If "Yes," explain the arrangement in Part X			rovided in Part	XIII	
Par	*********					
	<u> </u>	(a) Current year	(b) Pnor year	(c) Two years		(e) Four years back
1a	Beginning of year balance					
	Contributions				-	·
	Net investment earnings, gains, and		1			
	losses					
d	Grants or scholarships					
	Other expenditures for facilities and					
	programs					
	Administrative expenses					
	End of year balance					
_	Provide the estimated percentage of the cu	irrent vear end baland	ce (line 1g. column (a))	held as:		
	Board designated or quasi-endowment ▶	%	(-),	,		
	Permanent endowment ▶ %	,				
c ·	Temporarily restricted endowment ▶	%				
	The percentages in lines 2a, 2b, and 2c sh	ould equal 100%.				
	Are there endowment funds not in the poss		ation that are held and	administered for	or the	
	organization by:	•				Yes No
((i) unrelated organizations					3a(i)
((ii) related organizations					3a(ii)
	If "Yes" to 3a(ıı), are the related organization	ons listed as required	on Schedule R?			3b
	Describe in Part XIII the intended uses of t	-				
Par				e 10.	-	-
	Description of property	(a) Cost or other			(c) Accumulated	(d) Book value
		(investment) (oth	er)	depreciation	
1a	Land		9	31,677		931,67
b	Buildings			07,817	515,974	1,191,843
	Leasehold improvements					
d l	Equipment .			99,717	160,471	39,240
е	Other					
Total	Add lines 1a through 1e (Column (d) mus	t acual Farm 000 Ba	rt V saluma (D) line 1	0(a))		2 162 764

Part VII	<u>Investments</u>	Other Securities. See Form 990	, Part X, line 12.		
		of security or category	(b) Book value	(c) Method o	f valuation
-	(including	name of security)		Cost or end-of-ye	ar market value
(1) Financial	denvatives				
(2) Closely-ho	eld equity interests				
(3) Other					
(A)					-
(B)					
(C)				-	
(D)					
(E)					
(F)					
(G)					
(H)					
(1)					
	n (b) must equal Form	n 990, Part X, col. (B) line 12)			
Part VIII		Program Related. See Form 990). Part X. line 13.	<u> </u>	
		on of investment type	(b) Book value	(c) Method o	f valuation
	., .	•		Cost or end-of-ye	
(1)					
(2)					
(3)					
(4)	· -	V 			
(5)					
(6)			·- ·-	<u>-</u>	
(7)		<u></u>	 -		_,,,,
(8)					
(9)					
(10)	n (h) must savel Fa-	2000 Part V and (P) line (2)			
Part IX		n 990, Part X, col. (B) line 13.) ► See Form 990, Part X, line 15.			
FAILEN	Other Assets.	(a) Description			(h) Book velve
(1)		(a) Description			(b) Book value
(1)					
(2)				- · · · · ·	
(3)					
(4)	_		 		
(5)					
(6)	_				
(7)					
(8)					
(9)					
(10)					
		n 990, Part X, col. (B) line 15.)		<u> </u>	
Part X		s. See Form 990, Part X, line 25.			
1.		nption of liability	(b) Book value	-	
	income taxes			1	
(2)	_ _				
_(3)					
_(4)]	
(5)]	
(6)]	
(7)					
(8)					
(9)]	
(10)]	
(11)				1	
	n (b) must equal Form	n 990, Part X, col (B) line 25.)		1	
		art XIII, provide the text of the footnote to	the organization's financia	al statements that reports the	organization's
		nder FIN 48 (ASC 740). Check here if the			X

Sche	dule D (Form 990) 2012 Peaceful Paths, Inc.		59-180901	4	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per Ret	turn	
1	Total revenue, gains, and other support per audited financial statements	-	. –	1	1,478,250
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b	12,600		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	23,302		
е	Add lines 2a through 2d			2e	35,902
3	Subtract line 2e from line 1			3	1,442,348
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,442,348
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten	nents With	Expenses per R	Return	
1	Total expenses and losses per audited financial statements			1	1,532,420
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	12,600	.	
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII)	2d	23,302		
е	Add lines 2a through 2d		į	2е	35,902
3	Subtract line 2e from line 1		Į	3	1,496,518
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		İ	
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,496,518

Part XIII 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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Part X - FIN 48 Footnote

The Corporation is exempt from income taxes according to provisions of Section 501(c)(3) of the Internal Revenue Code and does not earn any unrelated business taxable income. Therefore, no provision for income taxes is reflected in the accompanying financial statements. The Corporation holds no uncertain tax positions and, therefore, has no policy for evaluating them. The Corporation's Form 990, Return of Organization Exempt from Income Taxes, is subject to examination by the IRS, generally for three years after the date filed.

Part XI, Line 2d - Revenue Amounts Included in Financials - Other

Expense associated with rental property \$ 23,302

Part XII, Line 2d - Expense Amounts Included in Financials - Other

Expense associated with rental property \$ 23,302

Schedule D (Form 990) 2012 Peaceful Paths, Inc.
Part XIII Supplemental Information (continued)

59-1809014

Page 5

10

Total

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

OMB No 1545-0047

Department of the Treasury organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

See separate instructions. Internal Revenue Service Employer identification number Name of the organization Peaceful Paths, Inc. 59-1809014 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Solicitation of government grants Internet and email solicitations Special fundraising events Phone solicitations In-person solicitations d 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 services? 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 (iii) Did fund-(v) Amount paid to (vi) Amount paid to raiser have (or retained by) (i) Name and address of individual (iv) Gross receipts (or retained by) custody or (ii) Activity from activity organization or entity (fundraiser) fundraiser listed in control of contributions' col (1) Yes No 2 3

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

Peaceful Paths, Inc. Schedule G (Form 990 or 990-EZ) 2012 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List

			ss receipts greater		.			—	
			(a) Event #1 Guest Chef (event type)		(b) Event #2		(c) Other events None (total number)	_	(d) Total events (add col (a) through col (c))
<u> </u>			(oron typo)		(event type)		((00) ((0))	\dashv	
Revenue	1	Gross receipts	1	7,764					17,764
_	2	Less: Contributions		9,220					9,220
	3	Gross income (line 1 minus line 2)		8,544					8,544
\dashv		<u></u>						$\neg \dagger$	
	4	Cash prizes							
	5	Noncash prizes				_			
Ses	6	Rent/facility costs		5,250	·				5,250
Direct Expenses	7	Food and beverages		1,443					1,443
Sirect	8	Entertainment		500					500
	9	Other direct expenses		549					549
		·				•	·		7 740
		Direct expense summary. Net income summary. Co							7,742 802
Pa		III Gaming. Com	plete if the organiza	ation answe	red "Yes" to Form	990, Part	IV, line 19, or re	porte	d more
		than \$15,000 c	on Form 990-EZ, lin	<u>e 6a. </u>	(b) Pull tabs/instant			1	
<u>g</u>					(=)		(c) Other gaming		(d) Total gaming (add
ש ו			(a) Bingo		bingo/progressive bing	go	(c) Other gaining		(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue	(a) Bingo		bingo/progressive bing	go	(c) Other garming		
\dagger			(a) Bingo		bingo/progressive bin	go	(c) Oner gaining		
\dagger	2	Cash prizes	(a) Bingo		bingo/progressive bin	go	(c) Oner gaining		
Expenses	2		(a) Bingo		bingo/progressive bin	go	(c) Oner gaining		
Direct Expenses Reve	2	Cash prizes	(a) Bingo		bingo/progressive bin	go	(c) Oner gaining		
t Expenses	2 3 4	Cash prizes Noncash prizes	(a) Bingo		bingo/progressive bin	go	(c) Oner gaining		
t Expenses	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs	Yes No	%	Yes	%	Yes No	%	
t Expenses	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes No		Yes		Yes	%	
t Expenses	2 3 4 5 6 7	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary	Yes No . Add lines 2 through 5	n column (d)	Yes No		Yes		
t Expenses	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary	Yes No . Add lines 2 through 5	n column (d)	Yes No		Yes		

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b if "Yes," exp	laın	
-----------------	------	--

Ш	168	\Box	MO

Yes No

11 12	Does the organization operate gaming activities with nonmembers?			
17			Yes	∐ No
-	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity		□ v	
40	formed to administer chantable gaming?	1 1	Yes	∐ No
	Indicate the percentage of gaming activity operated in:	425		0/
	The organization's facility	13a 13b		<u> </u>
	An outside facility	[130]		70
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ▶			
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming			
	revenue?		Yes	∐ No
b		and the		
	amount of gaming revenue retained by the third party ▶ \$			
С	If "Yes," enter name and address of the third party			
	Name ▶			
	Address ▶			
16	Gaming manager information			
	Name ▶			
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make chantable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or		_	_
	spent in the organization's own exempt activities during the tax year ▶ \$			
Par				
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applic	able. Also complete	this	
	part to provide any additional information (see instructions).			

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SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Peaceful Paths, Inc.

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Open to Public Inspection 2012

Employer identification number

59-1809014

OMB No 1545-0047

Š Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, (h) Purpose of grant or assistance X Yes Education non-cash assistance (g) Description of Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 10,200 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable 59-1707627 GOV General Information on Grants and Assistance (p) EIN Enter total number of other organizations listed in the line 1 table the selection criteria used to award the grants or assistance? (1) Board of Trustees Santa Fe College FL 32606 (a) Name and address of organization or government 3000 NW 83rd Street Gainesville 3 <u>@</u> 3 3 9 3 8 6

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

Schedule I (Form 990) (2012)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. 59-1809014 Schedule | (Form 990) (2012) Peaceful Paths, Inc.

Page 2

	Part III can be duplicated if additional space is needed	ional space is needed.				
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, Poscription of non-cash assistance FMV, appraisal, other)
1 Emer	Emergency Assistance	150		99,420	Est of FMV	Supplies
2 Tran	2 Transportation/other serv	501	55,528			
က						
4	_					
ıcı						
9						
7						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	nplete this part to prov	ide the information re	equired in Part I, line	2, Part III, column (b), and	any other additional

residents and other clients. Bus passes, gas cards and occasional cab Clothing and other supplies are provided on an emergency basis to the fares are provided for emergency transportation primarily to shelter Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds residents. No follow-up is provided.

invoices and program reports and works with clients involved in the Grants to Santa Fe College are monitored by an employee who reviews program.

SCHEDULE M (Form 990)

Noncash Contributions

Complete If the organizations answered "Yes" on Form

990, Part IV, lines 29 or 30
Attach to Form 990.

OMB No 1545-0047

2012

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Peaceful Paths, Inc.

Employer identification number 59 - 1809014

P	Part I Types of Property		77 21101	, ,,				
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of determinin	g		
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution am	ounts		
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods	Х		99,420	Estimated FMV			
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		. <u>-</u>					
14	Qualified conservation							
4-	contribution—Other							
15	Real estate—Residential				-			
16 47	Real estate—Commercial							
17 18	Real estate—Other Collectibles							
19	Food inventory			 -		-		
20	Drugs and medical supplies		· · · · · · · · · · · · · · · · · · ·					
21	Taxidemy							
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 organiz	ation during the tax yea	r for contributions for		-		
	which the organization completed Fo	_			29 0			
							Yes	No
30a	During the year, did the organization	receive by	contribution any proper	ty reported in Part I, lines 1	1–28 that			
	it must hold for at least three years fi	rom the da	te of the initial contributi	on, and which is not require	ed to be			
	used for exempt purposes for the en	tire holding	penod?			30a		X
b	If "Yes," describe the arrangement in	Part II						
31	•							ĺ
	contributions?							X
32a								
	contributions?		•			32a		X
b	If "Yes," describe in Part II							_
33	If the organization did not report an a	amount in o	column (c) for a type of p	property for which column (a	a) is checked,			
	describe in Part II.			<u> </u>		<u> </u>		<u>L</u>

Schedule M (Form 990) (2012)

90) (2012) Peaceful Paths, Inc. 59-1809014

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

2012 Open to Public Inspection

OMB No 1545-0047

Name of the organization

Peaceful Paths, Inc.

Employer identification number 59-1809014

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Copies of the Form 990 are emailed to the finance committee (executive board) and are reviewed at the following board meeting prior to filing.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Board members sign a conflict of interest statement when they join the

board and any conflicts are addressed if they arise.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The Executive Director is evaluated annually by the Executive Committee.

The decision regarding compensation is made by this group and presented to the full board for informational purposes.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing Documents are made available by request.