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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2014

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Ā	For the	2014 calend	ar year, or tax year beginning January 1 , 2014, and ending [ecembe	er 31 , 20 14					
В	Check if a	pplicable	C Name of organization D E	nployer i	dentification number					
	Address o	change	1 TO COLO EU MUETA ESPETANZA, MO.							
닏	Name cha	elephone r	number							
H	Initial retur	7	87-890-2274							
Ħ	Amended	roup Exe	emption							
		n pending	San Antonio, PR 00690	lumber	>					
G	Account	ting Method.	☐ Cash	k ▶ 🗌	if the organization is not					
	Website		requ		tach Schedule B					
<u>J</u> 1	Tax-exen	npt status (che	eck only one) ~ ☑ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 (Form	1 990, 99	90-EZ, or 990-PF)					
		organization								
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total asset	ts						
			v) are \$500,000 or more, file Form 990 instead of Form 990-EZ	<u> </u>	\$ 161,416					
P	art I		e, Expenses, and Changes in Net Assets or Fund Balances (see the inst							
		_ Check if	the organization used Schedule O to respond to any question in this Part I	<u>.</u> .	🗸					
	1	Contribution	ons, gifts, grants, and similar amounts received	1	161,416					
	2	Program se	ervice revenue including government fees and contracts	2						
	3	Membersh	ip dues and assessments	3						
	4	Investment	tincome	4						
	5a	Gross amo	ount from sale of assets other than inventory 5a							
	b	Less: cost]						
	С	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c								
	6	Gaming an	Gaming and fundraising events							
ne	а	Gross income from gaming (attach Schedule G if greater than \$15,000)								
Revenue	b	Gross inco	me from fundraising events (not including \$ of contributions							
Š	ł	from fundr	aising events reported on line 1) (attach Schedule G if the	Ì						
_	1	sum of suc	th gross income and contributions exceeds \$15,000) 6b							
	С	Less: direc	et expenses from gaming and fundraising events 6c 6c							
	d	Net incom	e or (loss) from gaming and fundraising events (add lines 6a and 6b and subtrac	t						
		line 6c) .		6d						
	7a	Gross sale	s of inventory, less returns and allowances							
	b	Less: cost	of goods sold]					
	С	Gross prof	it or (loss) from sales of inventory (Subtract line 7b from line a . 🗧 . 🚊	7c						
	8			8						
	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	161,416					
	10		I similar amounts paid (list in Schedule O)	10						
	11	Benefits pa	aid to or for members	11						
es	12	Salaries, of	ther compensation, and employee benefits	12	61,880					
use	13	Profession	al fees and other payments to independent contractors	13	23,824					
Expens	14	Occupancy	y, rent, utilities, and maintenance	14	7,294					
ŭ	15	Printing, pu	ublications, postage, and shipping	15	2,315					
	16		enses (describe in Schedule O)		63,796					
_	17	Total expe	enses. Add lines 10 through 16	17	159,109					
S	18		(deficit) for the year (Subtract line 17 from line 9)		2,307					
set	19		or fund balances at beginning of year (from line 27, column (A)) (must agree with							
Net Assets		end-of-yea	r figure reported on prior year's return)	19_	85,752					
e	20	Other char	ges in net assets or fund balances (explain in Schedule O)	20	1,294					
Ž	21		or fund balances at end of year. Combine lines 18 through 20		89,353					

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form 990-EZ (2014)

Pa	t II Balance Sheets (see the instructions	for Part II)				
	Check if the organization used Schedule	e O to respond to a	ny question in this	Part II		🗸
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			48,166		43,733
23	Land and buildings			48,476		42,080
24	Other assets (describe in Schedule O)		· · · · · -	89,713		107,310
25 26	Total assets			186,355 100,603		193,123
27	Net assets or fund balances (line 27 of colum		h line 21)	85,752		103,770 89,353
Par						
	Check if the organization used Schedule					Expenses
Wha	t is the organization's primary exempt purpose?	Vocational Worksho	ps, Foods for elderly	and homeless, et		uired for section c)(3) and 501(c)(4)
Desc	ribe the organization's program service accompleasured by expenses. In a clear and concise r	lishments for each o	f its three largest provided	rogram services,		nizations; optional for
	ons benefited, and other relevant information for e		c services provided	, the number of		
28					_	
						}
	(Grants \$) If this amoun	t includes foreign gra	ants, check here .	▶ □	28a	
29						1
					ı	1
	(Grants \$) If this amoun	t includes fersion are	nto chook horo		29a	
30	<u> </u>	t includes foreign gra			294	
00				,]
	(Grants \$) If this amoun	t includes foreign gra	ints, check here .	▶ □	30a	
31	Other program services (describe in Schedule O)					
		t includes foreign gra			31a	
	Total program service expenses (add lines 28a				32	
Par	List of Officers, Directors, Trustees, and Ke Check if the organization used Schedule					
-	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employ benefit plans, and deferred compensation	0	Estimated amount of their compensation
	Acevedo Nieves	 	, , , , , , , , , , , , , , , , , , , ,		+	
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		[

Part				
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part		
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	33	Yes	No
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)	34	!	√
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)?	35a		1
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	35b		1
С	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	35c		1
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 N	36		✓
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?	37b		✓
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?	38a	_	✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	-		
39 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities	1		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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	40b		✓
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ▶			
42a		787-99		
b	Located at ► Jardines de Boriquen D-11 Aguadilla,PR ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over	006	Yes	No
b	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	162	No ✓
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		. ✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		, ,	► ∐
44.	Did the constitution maintain and decay addited founds double the cosmo If (Van II Farms 000) around he		Yes	No
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		✓
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		✓
C	Did the organization receive any payments for indoor tanning services during the year?	44c		✓
d	explanation in Schedule O	44d		✓
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		
b	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		/

Form 99	90-EZ (20	14)							F	age 4
46		e organization engage, directly or in didates for public office? If "Yes," c							Yes	No J
Part	VI 8	Section 501(c)(3) organizations All section 501(c)(3) organizations 50 and 51. Check if the organization used Sch	only s must answer que	stions 47–49b a	nd 52, and	d com			or line	es
47	Did th	e organization engage in lobbying If "Yes," complete Schedule C, Part	activities or have a		ction in eff		ring the t	i	Yes	No
48 49a b 50	Is the or Did the If "Yes Compl	organization a school as described in e organization make any transfers to b," was the related organization a se lete this table for the organization's yees) who each received more than	n section 170(b)(1)(A)(i o an exempt non-cha ction 527 organizatio five highest compen	i)? If "Yes," completed organization? sated employees	ete Schedu anization? (other than	officer	s, directo			
	(a) N	lame and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MI	contribu		employee d deferred	(e) Estimate other con		
None										
f 51	\$100,0	number of other employees paid over lete this table for the organization's 100 of compensation from the organ lame and business address of each independen	s five highest compenization. If there is no	ensated independe		ctors w		received Compensati		than
None										
d 52	Did th	number of other independent contra	_		. ►	s mus				
Under po	enalties o	eted Schedule A	eturn, including accompany	ying schedules and stat	ements, and t	to the bes	st of my kno	► ✓ Yes owledge and		
Sign Here	loct, and	Signature of officer	Wieves	ппалон от миноп ргера	No. 1140 arry N	5 Date	1141	2015	-	
Paid Prepa Use (arer Only	Print/Type preparer's name Miguel Soto Lopez Firm's name CPA Miguel Soto Lope Firm's address Jardines de Boriquen		1603	Date /3- 4-			- 1		73
May th		liscuss this return with the preparer					<u></u> ▶	Yes		No.

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

► Attach to Form 990 or Form 990-EZ.

Name of the organization

4947(a)(1) nonexempt charitable trust.

2014 Open to Public

Inspection

OMB No 1545-0047

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number Proyecto La Nueva Esperanza, Inc. 66-0565479 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III, Type functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-9 support (see other support (see document? above or IRC section instructions) instructions) (see instructions)) No Yes (A) (B) (C) (D) (E) Total

Schedu	ule A (Form 990 or 990-EZ) 2014						Page 2
Part	Support Schedule for Organiza	ations Descri	bed in Secti	ons 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(vi))
	(Complete only if you checked the						
	Part III. If the organization fails to						
Sect	ion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	504 704	444.004	202 500	222 222	404.440	4 047 007
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	524,764	444,634	383,560	333,233	161,416	1,847,607
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	524,764	444,634	383,560	333,233	161,416	1,847,607
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on	,			^		
	line 1 that exceeds 2% of the amount shown on line 11, column (f)	,	, , , ,				
6	Public support. Subtract line 5 from line 4.	^^			/		
	on B. Total Support					·	
Calen	idar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	524,764	444,634	383,560	333,233	161,416	1,847,607
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	524,764	444,634	383,560	333,233	161,416	1,847,607
11	Total support. Add lines 7 through 10	524,764	444,034	363,360	333,233	161,416	1,847,607
12	Gross receipts from related activities, etc.	(see instruction	ns)			12	
13	First five years. If the Form 990 is for the organization, check this box and stop her	e organization	's first, second			ar as a section	
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2014 (line 6	3, column (f) div	vided by line 1	1, column (f))		14	%
15	Public support percentage from 2013 Sch					15	%
16a	331/x3% support test—2014. If the organization qual	lifies as a publi	cly supported	organization			. ▶ □
b	331/3% support test—2013. If the organic check this box and stop here. The organi					15 is 33 ¹ / ₃ % o	or more, . ► □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part VI how the organization meets the "for organization	ets the "facts-a	ind-circumstar	nces" test, che	ck this box an	d stop here. Ex	kplaın in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizat						

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

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

	ir tiro organization tano to quality	dilde: tile te	CIO HOTOL DOI	- 111, p 41- 5 - 1		,	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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]		1	1	1	1
	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	ļ <u>-</u>		ļ 	 		
С 8	Add lines 7a and 7b				<u> </u>		
٥	line 6.)	, ,					
Secti	on B. Total Support	L	<u> </u>	1	<u></u>		
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	(-, -, -, -, -, -, -, -, -, -, -, -, -, -	1 22,		1-7-22-2	<u> </u>	<u> </u>
10a							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	:					
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
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 he	•			, or fifth tax ye		
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2014 (line		-	3, column (f))		15	%
16	Public support percentage from 2013 Sci			<u> </u>	<u> </u>	16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2014 (• • •	•		17	%
18	Investment income percentage from 2013					18	%
19a	331/3% support tests—2014. If the organ						
_	17 is not more than 331/3%, check this box	~	=				 -
b	331/3% support tests—2013. If the organization 18 is not more than 331/2%, shock this						
00	line 18 is not more than 331/3%, check this Private foundation. If the organization di		_				
20	Filvate fourtoation. If the organization of	u not check a	DOX OIL III IE 14	, ושמ, טו ושט, נ	SIIGUN IIIIG DUX	and see monu	ctions ▶ 📙

Part IV Supporting Organizations

Section A All Cupporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. An	Supporting	j Organiza	แบบเอ			

- Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No." describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation, If historic and continuing relationship, explain. 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. За b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Зс 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below. 4a b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. 4b Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document). 5a b Type I or Type II only. Was any added or substituted supported organization part of a class already 5b designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990). 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990). 8 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. 9a Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. 9b
 - c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

9c

10a

10b

Part	Supporting Organizations (continued)			· .
		<u></u>	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations			·
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	,	
2	Did the organization operate for the benefit of any supported organization other than the supported	 		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	<u></u>	L
Secti	on C. Type II Supporting Organizations			
	Many and the filter of the second the first of the second that the second to the second the second the second that the second the second the second that the second the second that the second		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		'	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.			
Cook		3		
	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	5).
a	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	oo inc	tructi	onel
С		00 1113		
2	Activities Test. Answer (a) and (b) below.	,l	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes, " explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	30		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
Ь	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must co	tru mple	st on Nov. 20, 1970. See ete Sections A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	8		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) Section B - Minimum Asset Amount	8	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		, , , , , , , , , , , , , , , , , , ,	
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	10		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		<u></u>
7 Check here if the current year is the organization's first as a non-functional instructions).	y-in	tegrated Type III supporti	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organ	izations (continued)				
Sect	Section D - Distributions						
1_	Amounts paid to supported organizations to accomplish						
2	Amounts paid to perform activity that directly furthers exe						
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purp	ooses of supported orga	nizations	ļ			
4	Amounts paid to acquire exempt-use assets			-			
5_	Qualified set-aside amounts (prior IRS approval required)						
	Other distributions (describe in Part VI). See instructions.						
	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which	ch the organization is res	sponsive				
9	(provide details in Part VI). See instructions. Distributable amount for 2014 from Section C, line 6						
10			 				
	Line 8 amount divided by Line 9 amount	<u> </u>	(ii)	(iii)			
S:	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2014	Distributable Amount for 2014			
1	Distributable amount for 2014 from Section C, line 6		<u> </u>				
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)	, »					
3_	Excess distributions carryover, if any, to 2014:						
a	***	^.	·	· ·			
b		`		<u> </u>			
C	{						
d							
е	From 2013						
f_	Total of lines 3a through e						
<u>g</u> _	Applied to underdistributions of prior years						
<u>h</u> _	Applied to 2014 distributable amount						
<u> </u>	Carryover from 2009 not applied (see instructions)						
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2014 from Section						
	D, line 7: \$		·	<u></u>			
ab	Applied to underdistributions of prior years Applied to 2014 distributable amount						
	Remainder, Subtract lines 4a and 4b from 4.						
-5	Remaining underdistributions for years prior to 2014, if						
	any. Subtract lines 3g and 4a from line 2 (if amount						
	greater than zero, see instructions).						
6	Remaining underdistributions for 2014. Subtract lines 3h						
	and 4b from line 1 (if amount greater than zero, see						
	instructions).						
7	Excess distributions carryover to 2015. Add lines 3j and 4c.						
8	Breakdown of line 7:						
a							
b	× <						
C	<u> </u>						
d	Excess from 2013						
е	Excess from 2014						

ichedule A (Form 990 or 990-EZ) 2014 Page 8								
Part VI	Supplemental Information. 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.)	ŀ							
									

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Proyecto La Nueva Esperanza, Inc. 66-0565479 Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances Line16 The amount of \$63,796 in other expenses are consists of payroll \$7,151, bank charges \$1,484, supplies \$23,550, licenses \$782, auto \$ 4,703, contributions \$12,551, insurance \$3,315, depreciation \$9,846, other taxes \$5 and miscellaneous \$409. Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances Line 20 The amount of \$1,294 belonging to the unrealized gain from the New Covenant. Part II Balance Sheets Line 24 The amount of \$107,310 in other assets are consists of accounts receivable \$12,014, grants and contracts receivable \$94,124, prepaid expenses \$747 and other assets \$425. Part II Balance Sheets Line 26 The amount of \$103,770 in total liabilities are consists of bank overdraft \$34, accounts payable \$2,500, accrued expenses \$2,388, refundable advances \$4,724 and commitments \$94,124.