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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2014

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

<u>A</u> _	For the	2014 calendar year, or tax year beginning ゴかい、こうけ , 2014, and endi	ing Dec	31	<u>, 20 / Y</u>
В	Check if	applicable C Name of organization Every Neighborhood Partnershi	Ď	D Employ	er identification number
П	Address		1	187~	581418B
Ξ					one number
片	Name ch	2044 E Alace	uite		
닏	Initial ret	Jm		227-6	100 -7310
	Final retur	n/terminated City or town, state or province, country, and ZIP or foreign postal code			
	Amende	return Fresno CA 93720		G Gross r	eceipts \$
ĪП	Annlicati	on pending F Name and address of principal officer Atie Papilla	H(a) is this a o	roun return for	subordinates? Yes No
	,	2044 E. Nees Fresno CA 93720			es included? Yes No
-					a list. (see instructions) $\bigcap A$
		npt status			•
		- mmm. enant weigh perpossions			number >
		rganization ☐ Corporation ☐ Trust ☐ Association 🗗 Other ► number 🕂 L Year of form	ation. Zoo7	M State	of legal domicile CA
P	art i	Summary			
_	1	Briefly describe the organization's mission or most significant activities: 70	facilitat	DAC	mers hiss
ø		between churches and elementary schools	and to	<u> </u>	mendine
Ĕ		neighborhoods. We mobilize volunteers from	·		erships to build a
Ĕ	۱ ۵				
Š	2	Check this box ▶ ☐ if the organization discontinued its operations or disposed	or more than	1 .	ILS HEL ASSELS.
Ğ	3	Number of voting members of the governing body (Part VI, line 1a)		3	6
න් ග	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	6
Ë	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	19
Activities & Governance	6	Total number of volunteers (estimate if necessary)		6	1700
Ac	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0
	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0
	<u> </u>	161	Prior Ye		Current Year
		Contributions and greats (Best VIII line 1b)	29,21,-		
e	8	Contributions and grants (Part VIII, line 1h)	27.21	0	753,676
Revenue	9				
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	181172		119
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
	12	Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	29/2,8	46	253,790
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			
	14	Benefits paid to or for members (Part IX, column (A), line 4)			
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	200,40	94	226,603
JSE	16a	Professional fundraising fees (Part IX, column (A), line 11e)			
Expenses		Total fundraising expenses (Part IX, column (D), line 25) ▶			
ű	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	53.00	<u>۵</u> 3	46,843
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		5	273,446
	19	Revenue less expenses. Subtract line 18 from line 12		79	< 19,656 >
	_	nevertue less expenses. Subtract line 10 from line 12	Beginning of Cu	`	End of Year
20 OF		T. I. (10 IV.) 40	<u> </u>		
age	20	Total assets (Part X, line 16)	153,5	<u> </u>	133,866
Net Assets (Fund Balanc	21	Total liabilities (Part X, line 26)			
<u>≠</u> 군	22	Net assets or fund balances. Subtract line 21 from line 20	153,5	22_	133.866
Pa	art II	Signature Block			, , , , , , , , , , , , , , , , , , ,
Un	der pena	ties of perjury, I declare that I have examined this return, including accompanying schedules and stat	ements, and to t	he best of	my knowledge and belief, it is
tru	e, correct	, and complete Declaration of preparer (other than officer) is based on all information of which prepar	er has any know	ledge	
Sig	jn	Signature of office	Da	te ,	
He			ö	2/6/1	5
•		Type or print name and title Acts Papilla, Executive Direct			
		THE THE PROPERTY OF THE PROPER	Date		PTIN
Pa	id	Topard Sagnature		Check	∟ ,
Pr	epare	r		self-em	pioyea
	e Onl	1	Firm	n's EIN ▶	
		Firm's address	Pho	ne no	· ···
Ма	y the IF	S discuss this return with the preparer shown above? (see instructions)	<u> </u>		Yes No
For	Paperv	york Reduction Act Notice, see the separate instructions. Cat.	No. 11282Y		Form 990 (2014)

Cat. No. 11282Y

Checklist of Required Schedules

Form **990** (2014)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	×	
2	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	-	<u> </u>	 -
	candidates for public office? If "Yes," complete Schedule C, Part I	3		×
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? <i>If "Yes," complete Schedule C, Part II</i>	4		Х
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 "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		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		×
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		×
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		×
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		У
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		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
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		×
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		×
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	-	×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	\neg	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	7	A

Form **990** (2014)

Part	IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		×
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		X
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		×
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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		X
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):	18. Jan 18.	200	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		X
31	conservation contributions? If "Yes," complete Schedule M	30		X
32	Part I	31		X
33	complete Schedule N, Part II	32		×
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		×
35a	or IV, and Part V, line 1	34 35a		ス
se 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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		х	

Ear 990 (2014)

	Check if Schedule O contains a response or note to any line in this Part V		<u> </u>	. [
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a O			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
_	reportable gaming (gambling) winnings to prize winners?	1c	ŋ	14
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.		ł	
	otatements, med for the calendar year ending with or within the year covered by this return	_#		
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	<u> </u>	<u> X</u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	n	LA_
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		1	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	d		X
	account)?	4a		12
b		-		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5		
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		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	0/	A
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	•		
.	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	-	<u> X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		n	A
7	gifts were not tax deductible?	6b		
a	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		×
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		ΤÌ
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		1	 ^
_	required to file Form 8282?	7c	n	A
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	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	†	×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	0	A
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	7	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	•		
	sponsoring organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			
a	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 . [10b n / A			
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders			
D	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		ヹ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Λ / A			
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		X
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which	2		
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	n	14

Statements Regarding Other IRS Filings and Tax Compliance

Part VI

Check if Schedule C contains a response or note to any line in this Part VI Section A, Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 1b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, fustee, or key employee have a family relationship or a business relationship with any other officer, directors, or trustees, or key employees to a management company or other person? 3 Did the organization become aware during the year of a significant diversion of the corpanization's assess? 5 Did the organization become aware during the year of a significant diversion of the organization's assess? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 9 Is there any officer, director, frustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's making address? if "Yes," provide the names and addresses in Schedule O. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code). 1b Yes officer, directory frustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization have witten policies and procedures governing the activities of such chapters, by the following: 1c Yes of	,	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
a 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. b Enter the number of voting members included in line 1a, above, who are independent: 2 Did any officer, director, frustee, or key employee have a family relationship or a business relationship with any other officer, director, frustee, or key employees to a management company or other person? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or fustees, or key employees to a management company or other person? 4 Did the organization bears way significant changes to its governing documents indoce the profer mg90 was filled? 5 Did the organization become aware during the year of a significant diversion of the organization is assets? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Section B. Policies from Section B. Tequests information about policies not required by the internal Revenue Code. 9 Section B. Policies from Section B. Tequests information about policies not required by the internal Revenue Code. 10a Did the organization have local chapters, branches, or affiliates? b If "Ves," did the organization have written policies and procedures governing the activities of such chapte			<u></u>	<u> </u>	<u>. K</u>
It be rear the number of voting members of the governing body at the end of the tax year. If there are maternal differences in voting rights among members of the governing body, or if the governing body delegated broad authorny to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 980 was filled? Did the organization have members or stockholders? Did the organization have members or stockholders? Did the organization have members, stockholders, or orther persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, 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: The governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Did the organization was a written persons are consistent with the organization of the persons and behalf of the governing body? Did the organization have local chapters, branches, or affiliates? Diff "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure thei	Secti	on A. Governing Body and Management			
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. Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? 3 Did the organization disease, or key employees to a management company or other person? 4 Did the organization become aware during the year of a significant diversion of the organization is any significant changes to its governing documents inso the prior from 990 was filled? 5 Did the organization become aware during the year of a significant diversion of the organizations assets? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or ornor members of the governing body? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 5 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 5 Did the organization ontemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 5 Did the organization factor, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization in single discount of the governing body? 5 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization have local chapters, branches, or affiliates? 5 Did the organization have local chapters, branches, or affiliates? 6 Did the organization have local chapters, branches, or affiliates? 7 December in Schedule O the process, if a		Estable sometime of college and the second s		Yes	No
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Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	Þ		15b		义
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?	16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	160		
List the states with which a copy of this Form 990 is required to be filed ► CALFOLA 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s available for public inspection. Indicate how you made these available. Check all that apply. □ Own website □ Another's website □ 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, financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ►	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			X
List the states with which a copy of this Form 990 is required to be filed ► CALFORALA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s available for public inspection. Indicate how you made these available. Check all that apply. □ Own website □ Another's website □ 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, financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: ►	Section		1100	M	<u>r_</u>
Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☐ 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, financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: ▶					
 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: 		Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501(c	c)(3)s	only)
financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records:	<u>^</u>				
	19	financial statements available to the public during the tax year.	·	•	, and
	20		cords:	>	_

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

	-
Pane	•

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

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

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

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

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

☐ Check this box if neither the organization noi	any relate	d orga	aniz	atio	n c	ompe	nsa	ted any curren	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any	(do n	ot ch	Pos neck s pe	tion more	than on the thick the thic	one an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Tim Goetz								_		
Buard Chairman		×						0	0	0
(2) Brad Bell Board Member	11	×						0	0	0
(3) Dorrin Person Board Member	1	×						0	S	0
(4) Bill Smittemp Board Member	(×						0	0	O
(5) Wards Holderman Board member	1	۴						0	0	Ø
(6) Eric Hanson Board member	1	۴						0	G	0
M Artie PAD. lla Executive Director	40			×	×	×		49,000	0	0
(8) Carol Young Communications Director	40				×			30,180	0	0
(9) Ariana Martinez Outragh Director	40				×			28,347	0	0
(10) KiA Lee Outrech Director	20				×			19,630	0	0
(11)										
(12)										
(13)									- · · · · · -	
(14)			П			-				

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yees			lighes	st C	ompensated E	mployees	(contin	ued)	_
	(A) Name and title	(B) Average hours per week (list any	box,	unles	Pos neck s pe d a d	rson	e than o is both or/trust	an ee)	(D) Reportable compensation from	(E) Reportation compensation related	n from	(F) Estimated amount of other	
		hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizati (W-2/1099-I	ons	compensation from the organization and related organizations	
(15)													
(16)													
(17)									<u> </u>				
(18)													
(19)													
(20)											1		
(21)													
(22)		· · · · · · · · · · · · · · · · · · ·									$\neg \uparrow$		
(23)												<u> </u>	
(24)													
(25)						-							
1b c d	Sub-total	VII, Sectio						\ \ \	127,157	0		© 0	
2	Total number of individuals (including but reportable compensation from the organi						above) w		ore than \$1	00,000		
3	Did the organization list any former of employee on line 1a? If "Yes," complete S	ficer, direc						mp	loyee, or high	est compe	nsated	1 1-4 2-5 3 7 1	lo ×
4	For any individual listed on line 1a, is the organization and related organizations individual											,	· ·
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or inc			×
	on B. Independent Contractors												
1	Complete this table for your five highest of compensation from the organization. Repyear.												
	(A) Name and business add	ress							(B) Description of se	ervices		(C) Compensation	
-	- JUNE			_			-		10			1A	
	100.								111		4	∨ t-¹	_
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who		~	

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII									
						(A) Total revenue	(B) Related of exempt function revenue		(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns		1a	٥				
e a	b	Membership dues .		1b	0	1		į	l
8 E	С	Fundraising events .		1c	0	1			
a ii	d	Related organizations		1d	0	1			
S, E	e	Government grants (cont		1e	Ö			1	
نَجَ جَ	f	All other contributions, git	,	-		1			
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts not incl		1f	253,676				
₹ 5	۱ ۵	Noncash contributions include			_D	1			
کی تو	h	Total. Add lines 1a-1f				253,676			1
	 "	Totali Add IIICS Ta Ti		• •	Business Code	237/6/6		- 	
Program Service Revenue	2a					ł			+ <u>-</u>
چ	b						Υ -	- $ -$	 Q
9						-	 		
Ž	C	-			\				
<i>∞</i>	d	***************************************		-					-
<u>ra</u>	e	All ather presents as a							
<u>o</u>	'	All other program serv				0			1
	<u>g</u> 3	Total. Add lines 2a-2f Investment income (<u> </u>			
	"	and other similar amou				114			
	4	Income from investment	•			10			
	5	_		•	•				
	3	noyailles	(i) Real	• •	(ii) Personal				
	6a	Gross rents	0		Ø				
						-			
	b	Less: rental expenses	0		0	ł	1		
	C	Rental income or (loss) Net rental income or (l				<u> </u>			
	d 7a	Gross amount from sales of	(i) Securiti	 es	▶ (ii) Other				
	,,	assets other than inventory	0		6	}			}
	ь	Less: cost or other basis							1
		and sales expenses .	0		0				
	С	Gain or (loss)	5		0				
	d	Net gain or (loss) .			•	0			
	_	rect gain or (1000) .		• •					
Other Revenue	8a	Gross income from fur events (not including \$							
Re		of contributions reported			0				
ē		See Part IV, line 18 .		· a					
ŧ	b	Less: direct expenses		. b	0				
	С	Net income or (loss) from			events . >	.0			
	9a	Gross income from gar			6				
		See Part IV, line 19 .		- 1	0				
	ь	Less: direct expenses							
	C	Net income or (loss) from			vities ▶	6			
	10a	Gross sales of invertures and allowances	s	a	0				
	ь	Less: cost of goods so							
	<u> </u>	Net income or (loss) from Miscellaneous Re		inve		0			
	44-	Miscellaneous Re	venue		Business Code				
	11a			ı				 . . 	
	b								
	٠ ر	All other revenue .							
	d e	Total. Add lines 11a-1		۱	\mathcal{C}_{\bullet}				
	12	Total revenue. See in:				253,790		 	
				•		1223, 110			Eom QQ (2014)

Part IX	Statement	of	Function	al Expen	ses
---------	-----------	----	-----------------	----------	-----

Sectión 501(c)(3) and	1 501(c)(4) organizations m	iust complete all columns.	. All other organizations m	nust complete column (A).
-----------------------	-----------------------------	----------------------------	-----------------------------	---------------------------

Check if Schedule O contains a response or note to any line in this Part IX							
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses		
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	O	\circ				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			,		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0					
4 5	Benefits paid to or for members Compensation of current officers, directors,	0			^		
6	trustees, and key employees	127,157			Ψ		
7	persons described in section 4958(c)(3)(B) Other salaries and wages	56,634					
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	Ö					
9 10 11	Other employee benefits	23,842					
a b	Management	0					
d d	Accounting	0					
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	0					
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0 2847					
12 13 14	Advertising and promotion	1,577					
15 16	Royalties	0					
17 18	Travel	0					
19 20	Conferences, conventions, and meetings Interest	2,876					
21 22	Payments to affiliates	0					
23 24	Insurance	14,416					
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)						
a b	Engerproting SATURDAY Sports Community Outreach	3,102					
c d e	All other expenses	4,893					
25	Total functional expenses. Add lines 1 through 24e	273,446					
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		6	0	6		
	following SOP 98-2 (ASC 958-720)				Enm QQN (2014)		

	n 990 (20				Page 11
Р	art X		<u> </u>		
		Check if Schedule O contains a response or note to any line in this Pa	<u>rt X </u>	<u> </u>	<u> </u>
		·	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	79621	1	33,841
	2	Savings and temporary cash investments	73. 901	2	100,015
	3	Pledges and grants receivable, net	77,0	3	0
	4	Accounts receivable, net	٥	4	0
	5	Loans and other receivables from current and former officers, directors,	<u> </u>	+	
		trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	<u> </u>
		· •	0	1 3	٥
	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	6	6	
e e	۱ ـ	- · · · · · · · · · · · · · · · · · · ·		7	<u> </u>
Assets	7	Notes and loans receivable, net	0	+ +	
•	8	Inventories for sale or use	<u> </u>	8	0
	9	Prepaid expenses and deferred charges		9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b O	0	10c	O
	11	Investments—publicly traded securities	0	11	Ø
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	\bigcirc	13	Ø
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	 8	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	153,522	16	133,866
_	17	Accounts payable and accrued expenses	0	17	6
	18	Grants payable	0	18	0
	19	Deferred revenue	- 0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
10	22	Loans and other payables to current and former officers, directors,	<u> </u>	 - 	
Liabilities	22	trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		00	
ĕ				22	- 8
	23	Secured mortgages and notes payable to unrelated third parties	<u> </u>	23	
	24	Unsecured notes and loans payable to unrelated third parties	0	24	
	25	Other liabilities (including federal income tax, payables to related third		1 1	
		parties, and other liabilities not included on lines 17-24). Complete Part X	0	1 _	n
		of Schedule D	_	25	0
	26	Total liabilities. Add lines 17 through 25	٥	26	0
Ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
ă	27	Unrestricted net assets	0	27	O
3al	28	Temporarily restricted net assets	0	28	0
Ð	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
8	30	Capital stock or trust principal, or current funds	<u> </u>	30	0
set	31	Paid-in or capital surplus, or land, building, or equipment fund	9	31	$-\frac{\mathcal{S}}{\mathcal{S}}$
AS	32	Retained earnings, endowment, accumulated income, or other funds .	0	32	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
et'	33	Total net assets or fund balances	153,522	33	133,866
Ž	34	Total liabilities and net assets/fund balances	153,522	34	133,866
_		Total navintes and het assets/fund valances	177,300	<u>, ~~ </u>	Form 990 (2014)

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? If the organization changed either its oversight process or selection process during the tax year, explain in

Form **990** (2014)

Schedule O.

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

	Every Neighborl	nood to	rtnership			87-081	1198
Pai	t I Reason for Public Cha			complet	e this pa	art.) See instructio	ns.
he d	organization is not a private founda	ation because it	is: (For lines 1 through	11, chec	k only on	e box.)	
1	A church, convention of churc	hes, or associat	ion of churches descril	oed in se	ction 170)(b)(1)(A)(i).	
2	☐ A school described in section	170(b)(1)(A)(ii).	(Attach Schedule E.)				
3	☐ A hospital or a cooperative ho						
4	A medical research organization	on operated in c	onjunction with a hosp	ital desci	ribed in s	ection 170(b)(1)(A)(iii). Enter the
	hospital's name, city, and stat						
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned or	operate	d by a governmenta	al unit described in
6 7	☐ A federal, state, or local gover ☐ An organization that normally described in section 170(b)(1)	receives a sub-	stantial part of its supp	in sectio port from	n 170(b) (a goverr	(1)(A)(v). nmental unit or from	the general public
8	☐ A community trust described i	ın section 170(t	o)(1)(A)(vi). (Complete F	Part II.)			
9	An organization that normally receipts from activities related support from gross investme acquired by the organization a	d to its exempt ent income and	functions—subject to unrelated business t	certain (axable ır	exception acome (le	ns, and (2) no more ess section 511 tax	than 331/3% of its
10	☐ An organization organized and	d operated exclu	sively to test for public	safety. S	See secti	on 509(a)(4).	
11	An organization organized and one or more publicly supported the box in lines 11a through 11	operated exclused organizations	sively for the benefit of, described in section 5 0	to perfori)9(a)(1) oi	n the fund section	ctions of, or to carry 509(a)(2). See secti	on 509(a)(3). Check
a	Type I. A supporting organization organization. You must con	s) the power to r	egularly appoint or ele-	led by its ct a majo	supporte rity of the	ed organization(s), ty e directors or trustee	pically by giving s of the supporting
t	Type II. A supporting organic control or management of the organization(s). You must c	ne supporting or	ganization vested in th				
C	its supported organization(s	ated. A support) (see instruction	ing organization operat ns). You must comple t	ed in cor t e Part I V	nection v , Sectio i	with, and functionally ns A, D, and E .	y integrated with,
C	Type III non-functionally in that is not functionally integi requirement (see instruction	rated. The orgar	nization generally must	satisfy a	distribute	on requirement and	ed organization(s) an attentiveness
•	Check this box if the organia functionally integrated, or Ty						I, Type III
f							🔼
ç	Provide the following information		ported organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			(coo monoconomy	Yes	No		
A)							
B)							
C)							
D)							
E)				_			<u>.</u>
Γota	al				_		
	Demonstration Assaultance		- 4	N- 4400EF	-	Cabadala A ff	^^ ~ ~

Part II

Part	II Support Schedule for Organiza	ations Descr	ibed in Secti	ions 170(b)(1)(A)(iv) and 1	170(b)(1)(A)(v	i)
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support		1	T			
	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.")	199,196	322,00	267,699	292,701	253,676	1,335,26
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			1)
4	Total. Add lines 1 through 3	199,196	322,000	267,688	292,701	253,676	1,335,261
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						
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	199,196	322,000	267,688	292,701	253,676	1,335,26
9	Net income from unrelated business activities, whether or not the business is regularly carried on		23	137	145	114	419
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		20072	_		_	_
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the organization, check this box and stop he	he organizatıor	n's first, secon				
Sooti	on C. Computation of Public Suppor				· · · · · ·	- · · · · · · · · · · · · · · · · · · ·	· · · · <u> </u>
14	Public support percentage for 2014 (line	<u></u>		1 column (fl)		14 \$8.	4 %
15	Public support percentage for 2014 (inter-	• • • • • • • • • • • • • • • • • • • •	-			15 54.6	
16a 331/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
b	331/3% support test—2013. If the organ check this box and stop here. The organ					e 15 is 33 ¹ / ₃ %	or more,
17a	10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza Explain in Part VI how the organization m supported organization	ition meets the neets the "fact	e "facts-and-ci s-and-circums	ircumstances" tances" test. 1	test, check the organization	nis box and st	, and line top here. a publicly
18	Private foundation. If the organization d instructions	id not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	▶ ∐ see ▶ □

Part	Support Schedule for Organiza	ations Descr	ibed in Sect	ion 509(a)(2)			
	(Complete only if you checked the	ne box on line	9 of Part I o	r if the organ	ization failed		der Part II.
	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part I	H.)	
	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.") Gross receipts from admissions, merchandise						
2	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				1	,*	
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			1 1	7		
	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			1			
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from		*			~ v. v.	
	line 6.)		-				
	on B. Total Support			,	· · ·		
	dar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,		Į				
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975				1	1	
_					 _ 		
C	Add lines 10a and 10b				 .∧ \ 	1	
11	Net income from unrelated business activities not included in line 10b, whether				$ V \setminus V $		
	or not the business is regularly carried on		İ		• ` ` `		
12	Other income. Do not include gain or	-	-	 		-	
12	loss from the sale of capital assets		1				
	(Explain in Part VI.)			l l			
13	Total support. (Add lines 9, 10c, 11,					 	
. •	and 12.)	ļ				1	
14	First five years. If the Form 990 is for t	he organizatio	n's first, secor	nd. third. fourt	h, or fifth tax v	ear as a section	on 501(c)(3)
	organization, check this box and stop he					•	``▶ □
Secti	on C. Computation of Public Suppo			-		-· - ·	
15	Public support percentage for 2014 (line			13, column (f))		15	%
16	Public support percentage from 2013 Sc						%
	on D. Computation of Investment Ir						
17	Investment income percentage for 2014			oy line 13, colu	ımn (f))	17	%
18	Investment income percentage from 201	3 Schedule A,	Part III, line 17	,		18	%
19a	33¹ദ% support tests—2014. If the organ						
	17 is not more than 331/3%, check this box						
b	33¹ദ% support tests—2013. If the organi						
	line 18 is not more than 331/3%, check this			•			
_20	Private foundation. If the organization of	lid not check a	box on line 14	1, 19a, or 19b,	check this box	and see instr	uctions 🕨 🗌

Part IV Supporting 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.)

0000	on A. All Supporting Organizations	_	Voc	No
1	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.		res	NO
2	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	1		
За	organization was described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	2		
b	(b) and (c) below. 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.	3a 3b		
С	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.	3c		
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 decising 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		
С	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.			
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).	4c 5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	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		
7	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		
8	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				
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interestyn any entity in which	9a		
С	the supporting organization had an interest? If "Yes," provide detail in Part VI . 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 .	9b		
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	9c		
b	organizations)? If "Yes," answer (b) below.	10a		-
J	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.)	10b	 	

Part I	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
₹ a	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		
b	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		
	bh 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 supported 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		
Section	on C. Type II Supporting Organizations			
			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			
01:	the supported organization(s).	1	l .	
Section	on D. All Type III Supporting Organizations		Yes	Na
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		res	No
•	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	<u> </u>	· ·
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		1	
	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.	<u> </u>		
Cooti	on E. Type III Functionally-Integrated Supporting Organizations	3		<u> </u>
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s):
а	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.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	see ins	structi	ons).
2	Activities Test. Answer (a) and (b) below.		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.	-	 	
1.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	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. <i>Answer (a) and (b) below.</i>	120	1	
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	1		
-	trustees of each of the supported organizations? Provide details in Part VI.	3a	1	ļ
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
~	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b	1	i — '

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying			
other Type III non-functionally integrated supporting organizations must co	mpl	ete Sections A through E.	
Section A CAdjusted 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)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(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	1c		
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 ato line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	A		
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		
	_	tograted Type III support	ng organization (ass
7 Check here if the current year is the organization's first as a non-functional instructions).	y-ii	itegrated Type in support	ing organization (see

Part		s) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts hald to acquire exempt-use assets	· · · · · · · · · · · · · · · · · · ·		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	h the organization is res	ponsive	
	(provide details in Rart VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а		X		· · · · · · · · · · · · · · · · · · ·
b		X		
С		\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
d				
е	From 2013	\\		
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 nat applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section			
-	D, line 7:		i	
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	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				
С				
d	Excess from 2013			
ее	Excess from 2014			

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Form 990 or 990-EZ or to provide any additional information.

► 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.

Open to Public Inspection

Name of the organization Every Neighborhoul	Portnership	Employer identification number 87-0814198
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PAY VI		
#11 A1B - OUT 990	and other forms were	e reviewed by
our Board chairman an	1 A volunteer CPA	then distributed
to entire board men	bers.	
#12c - At each board	meeting we review	Any conflicts
of interest that ma	, be applicable At	my time, it
Anything needs to be	discussed or asked	<i>i</i>) +i
communicated in par	som, by phone or en	o.e.le
#19 - All govering do	cuments, policies And	Francia?
#19 - All governing dos statements are prov	rided upon request	And At our
office. Financial repo	uts And 990 are	posted an
our website.	·	