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Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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Information about Form 990 and its instructions is at [www.IRS.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 09-01-2014 , and ending 08-31-2015

B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	C Name of organization EAST SIDE HOUSE INC	D Employer identification number 13-1623989	
	Doing business as EAST SIDE HOUSE SETTLEMENT		
	Number and street (or P O box if mail is not delivered to street address) 337 ALEXANDER AVENUE	Room/suite	E Telephone number (718) 665-5250
	City or town, state or province, country, and ZIP or foreign postal code BRONX, NY 10454		G Gross receipts \$ 30,585,933
F Name and address of principal officer JOHN A SANCHEZ 337 ALEXANDER AVENUE BRONX, NY 10454		H(a) Is this a group return for subordinates? ☐ Yes ☒ No H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ☐	
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ☐ (insert no) ☐ 4947(a)(1) or ☐ 527			
J Website: WWW.EASTSIDEHOUSE.ORG			
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ☐		L Year of formation 1891 M State of legal domicile NY	

Part I

Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities PROVIDE SOCIAL SERVICES FOR UNDERPRIVILEGED YOUTH RESIDING IN THE MOTT HAVEN SECTION OF THE SOUTH BRONX. EAST SIDE HOUSE REMAINS COMMITTED TO IMPROVING QUALITY OF LIFE FOR CONSTITUENTS, FOCUSING EFFORTS IN EDUCATIONAL ATTAINMENT. THE EDUCATIONAL EFFORTS OF THE ORGANIZATION HAVE PARTICULARLY FOCUSED ON THE YOUNG PEOPLE OF MOTT HAVEN. THE ORGANIZATION'S SUCCESS IS ROOTED IN THE ACCOMPLISHMENTS OF ITS STUDENTS AND ARE GUIDED THROUGH EFFORTS OF ITS DEDICATED AND TALENTED STAFF.				
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets				
	3	Number of voting members of the governing body (Part VI, line 1a)	3	31		
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	31		
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	787		
	6	Total number of volunteers (estimate if necessary)	6	866		
	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		
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	13,101,080	Current Year
9		Program service revenue (Part VIII, line 2g)	1,169,883	1,394,355		
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,156,860	1,863,646		
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,908	-50,374		
12		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,431,731	19,075,751		
Expenses		13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	479,178	508,789	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	9,380,578	10,992,890		
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	90,000	91,200		
	b	Total fundraising expenses (Part IX, column (D), line 25) ☐ 525,144				
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,099,758	5,035,333		
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	14,049,514	16,628,212		
	19	Revenue less expenses. Subtract line 18 from line 12	1,382,217	2,447,539		
Net Assets or Fund Balances		Beginning of Current Year	End of Year			
	20	Total assets (Part X, line 16)	29,689,915	29,758,125		
	21	Total liabilities (Part X, line 26)	1,625,478	1,548,909		
	22	Net assets or fund balances. Subtract line 21 from line 20	28,064,437	28,209,216		

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer	2016-06-22 Date			
	JOHN A SANCHEZ EXECUTIVE DIRECTOR Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name GARRETT M HIGGINS	Preparer's signature GARRETT M HIGGINS	Date 2016-06-22	Check ☐ if self-employed	PTIN P00543209
	Firm's name ☐ PKF O'CONNOR DAVIES LLP			Firm's EIN ☐ 27-1728945	
	Firm's address ☐ 665 FIFTH AVENUE NEW YORK, NY 10022			Phone no (212) 286-2600	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

☒

1

Briefly describe the organization’s mission

EAST SIDE HOUSE IS A COMMUNITY RESOURCE IN SOUTH BRONX WE BELIEVE EDUCATION IS THE KEY THAT ENABLES ALL PEOPLE TO CREATE ECONOMIC AND CIVIC OPPORTUNITIES FOR THEMSELVES, THEIR FAMILIES AND THEIR COMMUNITY OUR FOCUS IS ON CRITICAL DEVELOPMENTAL PERIODS -- EARLY CHILDHOOD AND ADOLESCENCE -- AND CRITICAL JUNCTURES -- POINTS AT WHICH PEOPLE ARE DETERMINED TO BECOME ECONOMICALLY INDEPENDENT WE ENRICH, SUPPLEMENT AND ENHANCE THE PUBLIC SCHOOL SYSTEM AND PLACE COLLEGE WITHIN THE REACH OF MOTIVATED STUDENTS WE PROVIDE SERVICES TO FAMILIES IN ORDER FOR OTHER FAMILY MEMBERS TO PURSUE THEIR EDUCATIONAL GOALS WE PROVIDE TECHNOLOGY AND CAREER READINESS TRAINING TO ENABLE STUDENTS TO IMPROVE THEIR ECONOMIC STATUS AND LEAD MORE FULFILLING LIVES

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☒ Yes ☐ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 9,414,859 including grants of \$ 508,789) (Revenue \$ 1,394,355)

THE EDUCATION PROGRAM PROVIDES ACADEMIC INTERVENTION IN SCHOOLS AND IN THE COMMUNITY THROUGH AFTERSCHOOL SERVICES, COLLEGE PREPARATION, EMPLOYMENT SERVICES, TECHNOLOGY, AND HIGH SCHOOL EQUIVALENCY PREPARATION CLASSES THE PROGRAM SERVES APPROXIMATELY 5,000 CHILDREN PER DAY IN THE 2014-2015 ACADEMIC YEAR, OVER 650 STUDENTS GRADUATED FROM OUR COLLEGE ACCESS PROGRAMS, OF WHICH 300 GAINED COLLEGE ACCEPTANCE EDUCATION PROGRAMS INCLUDE THE FOLLOWING 1) AFTERSCHOOL PROGRAMS - THESE PROGRAMS ENABLES YOUNG STUDENTS TO BE BETTER PREPARED TO MEET THE CHALLENGES OF THE FUTURE THROUGH THE AFTER-SCHOOL PROGRAMS, EAST SIDE HOUSE SETTLEMENT IMPLEMENTS COMPREHENSIVE SERVICES IN A SAFE ENVIRONMENT THAT EMPHASIZES EDUCATIONAL PROSPERITY AND ACADEMIC SUCCESS AS A MEANS TO EVENTUAL ECONOMIC INDEPENDENCE 2) SUMMER DAY CAMP - THIS PROGRAM PROVIDES STUDENTS WITH THE OPPORTUNITY TO ATTEND A COMBINED ACADEMIC AND RECREATIONAL SUMMER DAY CAMP ENROLLED STUDENTS ARE PROVIDED WITH MORE LEARNING TIME IN AN ENVIRONMENT THAT IS PREDICATED ON HIGH EXPECTATIONS, SUPPORTIVE RELATIONSHIPS AND OPPORTUNITIES TO EXPAND THE STUDENTS' MINDS THE PROGRAM TARGETS STUDENTS IN GRADES 1-5 AND FOCUSES ON PROVIDING A POSITIVE SOCIAL AND ACADEMIC EXPERIENCE AT A CRITICAL DEVELOPMENT STATE WE STRIVE TO HELP STUDENTS SEE THE CONNECTIONS BETWEEN ACADEMIC DISCIPLINES AS THEY MOVE INTO DEPARTMENTALIZED INSTRUCTION 3) YOUTH AND ADULT EDUCATION (YAES) CLASSES - THIS PROGRAM PROVIDES BASIC EDUCATION AND CAREER EDUCATION TO STUDENTS AGES 17-24 IN AN EFFORT TO COMBAT THE LOW LITERACY RATE IN THE COMMUNITY, ASSIST COMMUNITY MEMBERS IN OBTAINING AN HSE DIPLOMA, AND GAIN ACCESS TO COLLEGE YAES SUCCESSFULLY ASSISTS INDIVIDUALS IN THEIR SOCIAL AND ACADEMIC GROWTH THE YAES PROGRAM PLACES A PARTICULAR FOCUS ON DISCONNECTED YOUTH 4) HIGH SCHOOL PROGRAMS- ESH HAS PARTNERSHIPS WITH 10 NEW YORK CITY DEPARTMENT OF EDUCATION HIGH SCHOOL WHICH OFFERS STUDENTS A RANGE OF SERVICES, INCLUDING ATTENDANCE IMPROVEMENT/DROP-OUT PREVENTION, COLLEGE AND POSTSECONDARY READINESS CLASSES, COLLEGE AND POSTSECONDARY EXPLORATION, INTERNSHIP PLACEMENTS, ENRICHMENT ACTIVITIES, ADVISORY SUPPORT, AND ASSISTANCE IN APPLYING FOR AND GAINING ACCEPTANCE INTO COLLEGE AND OTHER POSTSECONDARY OPTIONS 5) COMMUNITY TECHNOLOGY SERVICES - THE COMMUNITY TECHNOLOGY CENTER OFFERS COMPUTER-BASED INSTRUCTION TO MANY OF ITS EXISTING PROGRAM PARTICIPANTS INCLUDING EARLY CHILDHOOD, AFTERSCHOOL, YOUTH AND ADULT EDUCATION SERVICES (YAES) AND SENIORS IN ADDITION, COMPUTER TRAINING IS OFFERED FOR ALL EAST SIDE HOUSE SETTLEMENT STAFF IN ORDER TO STRENGTHEN ALL AROUND PROGRAM FOUNDATION 6) SOCIAL SERVICES - THE FOCUS OF EAST SIDE HOUSE SETTLEMENT IS EDUCATION FOR ADULTS AND CHILDREN THE SOCIAL SERVICES PROGRAM HELPS REMOVE THE OBSTACLES THAT INTERFERE WITH THE DEVELOPMENT AND PROGRESSION OF ESH PARTICIPANTS

4b

(Code) (Expenses \$ 3,543,878 including grants of \$) (Revenue \$)

THE EARLY CHILDHOOD HEAD START AND DAY CARE PROGRAM PROVIDES NURSERY SCHOOL ACTIVITIES INCLUDING COMPREHENSIVE PRESCHOOL EDUCATION AND SOCIAL PROGRAMS THE PROGRAM SERVES APPROXIMATELY 210 CHILDREN THE HEAD START/DAY CARE PROGRAM PROVIDES SERVICES TO CHILDREN AND THEIR PARENTS THAT DEVELOP THE COGNITIVE, SOCIAL, EMOTIONAL AND PHYSICAL SKILLS OF CHILDREN THE PROGRAM CREATES A SAGE AND HEALTHY ENVIRONMENT IN WHICH STAFF MEET THE NEEDS OF THE CHILDREN AND FAMILIES WITH RESPONSIBILITY, RESPECT, DIGNITY AND AUTHORITY, REGARDLESS OF NEED WE STRIVE FOR EACH CHILD AND PARENT TO DEVELOP A SENSE OF SELF, RESPONSIBILITY, AND RESPECT FOR HIM/HERSELF AS WELL AS OTHERS THIS PROGRAM EXISTS TO ENSURE THAT ALL FACETS OF A CHILD'S DEVELOPMENT, PHYSICAL, MENTAL, SOCIAL, AND EMOTIONAL ARE ENHANCED TO THEIR FULLEST POTENTIAL THERE ARE TWO IMPORTANT COMPONENTS THAT ARE DESIGNED TO ENSURE PROGRAM EFFECTIVENESS,1) THE EDUCATION COMPONENT WORKS WITH CHILDREN IN ORDER TO PROMOTE THEIR COGNITIVE AND SOCIAL DEVELOPMENT 2) THE SOCIAL SERVICES COMPONENT WORKS WITH PARENTS/GUARDIANS TO ASSIST THEM IN MEETING THE NEEDS OF THE ENTIRE FAMILY OUR PRESCHOOL AND TODDLER SERVICES ARE PROVIDED FOR CHILDREN 2-5 YEARS OF AGE CHILDREN AND FAMILIES RECEIVE A BROAD RANGE OF EDUCATIONAL, SOCIAL SERVICE, NUTRITIONAL AND PREVENTATIVE HEALTH SERVICES AS WELL AS SERVICES TO SUPPORT THEIR TRANSITION INTO THE PUBLIC SCHOOLS

4c

(Code) (Expenses \$ 867,330 including grants of \$) (Revenue \$)

EAST SIDE HOUSE SETTLEMENT OPERATES THREE SENIOR CENTERS IN THE MOTT HAVEN NEIGHBORHOOD THE SENIOR CENTERS PROVIDE HOT LUNCHESES AND OTHER ACTIVITIES SUCH AS CULTURAL EVENTS AND TRIPS FOR NEIGHBORHOOD SENIORS THE SENIOR CENTERS SERVE ABOUT 300 PEOPLE CRIME HAS DRIVEN MANY SENIOR CITIZENS INDOORS, FEARFUL OF VENTURING OUT OF THEIR APARTMENTS, PARTICULARLY IN THE EVENING THE ENSUING FEELING OF LONELINESS AND HELPLESSNESS CAN BE DEVASTATING WITH STAFF AND YOUTH VOLUNTEERS, EAST SIDE HOUSE SETTLEMENT MADE A DIFFERENCE IN THE LIVES OF THE ELDERLY THE NUMBER OF HOBBY CLUBS, SPECIAL EVENTS, HOLIDAY PARTIES, HEALTH PROGRAMS AND CARE AND GAME TOURNAMENTS THAT ARE OPERATING DURING THE WEEK INDICATES THE SENIORS' VARIED INTERESTS AN EXTENSIVE SCHEDULE OF DAYTRIPS IS ALSO OFFERED BY THE CENTER AND NEARLY 250 SENIORS EAT LUNCH AT THE CENTERS DAILY

See Additional Data

4d

Other program services (Describe in Schedule O)

(Expenses \$ 676,876 including grants of \$) (Revenue \$)

4e

Total program service expenses

14,502,943

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
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	No
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	No
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	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
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	No
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 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
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	No
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	No
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	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
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 Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
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	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b 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	No
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	No
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	No
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 Yes	
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 Yes	
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	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	39	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c			
2a		787	
2b		Yes	
3a			No
3b			
4a			No
5a			No
5b			No
5c			
6a			No
6b			
7a		Yes	
7b		Yes	
7c			No
7d			
7e			No
7f			No
7g			
7h			
8			
9a			
9b			
10a			
10b			
11a			
11b			
12a			
12b			
13a			
13b			
13c			
14a			No
14b			

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
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?		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	Yes	
b	Other officers or key employees of the organization		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
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?		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 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)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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
JOHN A SANCHEZ EXECUTIVE DIRECTOR

337 ALEXANDER AVENUE
BRONX, NY 10454 (718) 665-5250

Check if Schedule O contains a response or note to any line in this Part VII ☐

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

[illegible]

Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	599,269	0	65,704

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶4

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
SELECT CONTRACTING 420 VETERANS BLVD CARLSTADT, NJ 07072	EVENT CONTRACTOR	532,840
SHARP COMMUNICATIONS INC 450 MADISON AVE 24TH FL NEW YORK, NY 10017	PUBLIC RELATIONS	357,403
CANARD INC 503 WEST 43RD ST NEW YORK, NY 10036	EVENT CATERER	273,517
CATHERINE SWEENEY SINGER, PO BOX 575 LENOX HILL STATION NEW YORK, NY 10021	WINTER ANTIQUES SHOW CONSULTANT	152,500
MEDIAEDGE TME CIA LLC 16008 COLLECTIONS CENT CHICAGO, IL 60693	EVENT DESIGN	120,523

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶5

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a1,641,659	15,868,124			
	b	Membership dues	1b				
	c	Fundraising events	1c1,438,340				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e11,283,137				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f1,504,988				
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f					
Program Service Revenue	2a AFTER SCHOOL PROGRAMS		Business Code 611710	1,394,355	1,394,355		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		1,394,355			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		473,176			473,176
	4	Income from investment of tax-exempt bond proceeds . .					
	5	Royalties					
	6a	Gross rents	(i) Real				
			(ii) Personal				
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
			9,708,752				
	b	Less cost or other basis and sales expenses	8,318,282	1,390,470			1,390,470
	c	Gain or (loss)	1,390,470				
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including \$ 1,438,340 of contributions reported on line 1c) See Part IV, line 18	a3,125,854	-66,046			-66,046
	b	Less direct expenses	b3,191,900				
	c	Net income or (loss) from fundraising events . .					
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities . .					
	10a	Gross sales of inventory, less returns and allowances	a				
	b	Less cost of goods sold	b				
	c	Net income or (loss) from sales of inventory . .					
	Miscellaneous Revenue		Business Code	15,672			15,672
	11a	MISCELLANEOUS INCOME	900099				
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d		15,672			
	12	Total revenue. See Instructions		19,075,751	1,394,355	0	1,813,272

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

☒

Do not include amounts reported on lines 6b, 7b, 8b, 9b, 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.				
2	Grants and other assistance to domestic individuals. See Part IV, line 22.	508,789	508,789		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	246,047	218,725	27,322	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	8,912,581	8,057,444	736,065	119,072
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	131,236	112,044	19,192	
9	Other employee benefits.	731,286	688,698	35,186	7,402
10	Payroll taxes.	971,740	860,783	97,549	13,408
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	5,610	5,610		
c	Accounting.	65,000		65,000	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.	91,200			91,200
f	Investment management fees.	170,285		170,285	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	531,424	483,768	42,656	5,000
12	Advertising and promotion.	289,147	1,500	2,191	285,456
13	Office expenses.	778,687	534,495	243,389	803
14	Information technology.	12,462	12,462		
15	Royalties.				
16	Occupancy.	104,832	68,076	36,756	
17	Travel.	221,969	214,934	7,035	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	2,950	2,904		46
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	54,269		54,269	
23	Insurance.	149,940	131,298	18,642	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	ADMINISTRATIVE COST	873,108	834,332	36,019	2,757
b	PROGRAM ACTIVITIES	777,559	777,559		
c	FOOD	692,537	683,968	8,569	
d	REPAIRS & MAINTENANCE	277,776	277,776		
e	All other expenses	27,778	27,778		
25	Total functional expenses. Add lines 1 through 24e.	16,628,212	14,502,943	1,600,125	525,144
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 following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		6,070,366	1	5,645,082
	2	Savings and temporary cash investments		1,453,839	2	1,990,214
	3	Pledges and grants receivable, net		1,681,462	3	2,963,461
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	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	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		767,164	9	769,933
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a2,308,477			
	b	Less accumulated depreciation	10b2,076,876	266,538	10c	231,601
	11	Investments—publicly traded securities		19,441,418	11	18,144,859
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		9,128	15	12,975
	16	Total assets. Add lines 1 through 15 (must equal line 34)		29,689,915	16	29,758,125
Liabilities	17	Accounts payable and accrued expenses		316,888	17	207,700
	18	Grants payable			18	
	19	Deferred revenue		810,305	19	922,453
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		498,285	25	418,756
	26	Total liabilities. Add lines 17 through 25		1,625,478	26	1,548,909
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		19,360,071	27	19,795,704
	28	Temporarily restricted net assets		2,936,388	28	2,645,534
	29	Permanently restricted net assets		5,767,978	29	5,767,978
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		28,064,437	33	28,209,216
	34	Total liabilities and net assets/fund balances		29,689,915	34	29,758,125

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	19,075,751
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,628,212
3	Revenue less expenses Subtract line 2 from line 1	3	2,447,539
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	28,064,437
5	Net unrealized gains (losses) on investments	5	-2,275,888
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-26,872
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	28,209,216

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
2c	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 Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

Additional Data

Software ID:
Software Version:
EIN: 13-1623989
Name: EAST SIDE HOUSE INC

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code	) (Expenses \$	676,876	including grants of \$	) (Revenue \$	)
THE JOB-PLUS PROGRAM AT MILL BROOK COMMUNITY CENTER IS AN EVIDENCE-BASED EMPLOYMENT PROGRAM TARGETING PUBLIC HOUSING RESIDENTS IN THE MILL BROOK HOUSING COMPLEX EAST SIDE HOUSE SETTLEMENT PROVIDES RESIDENTS WITH JOB TRAINING AND PLACEMENT, FINANCIAL COUNSELING, HSE CLASSES, AND SUPPORTIVE SERVICES SINCE APRIL 1, 2014, ESH HAS REACHED OVER 1500 PEOPLE					

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PHILIP L YANG JR CHAIRPERSON	1 00	X		X				0	0	0
(1) PETER D STANDISH CHAIRPERSON (THRU 05/2015)	1 00	X		X				0	0	0
(2) THOMAS H REMIEN PRESIDENT	1 00	X		X				0	0	0
(3) DOLORES O'BRIEN MILLER VICE PRESIDENT	1 00	X		X				0	0	0
(4) COURTNEY BOOTH CHRISTENSEN VICE PRESIDENT	1 00	X		X				0	0	0
(5) RICHARD E KOLMAN TREASURER	1 00	X		X				0	0	0
(6) STEPHANIE B CLARK SECRETARY	1 00	X		X				0	0	0
(7) WILLIAM S ELDER BOARD MEMBER	1 00	X						0	0	0
(8) WENDY HOLMES BOARD MEMBER	1 00	X						0	0	0
(9) THADDEUS GRAY BOARD MEMBER	1 00	X						0	0	0
(10) SVEN E HSIA BOARD MEMBER	1 00	X						0	0	0
(11) STEPHEN J KETCHUM BOARD MEMBER	1 00	X						0	0	0
(12) RUTH H SMITHERS BOARD MEMBER	1 00	X						0	0	0
(13) ROBERT PONDISCIO BOARD MEMBER	1 00	X						0	0	0
(14) ROBERT L MEYER BOARD MEMBER	1 00	X						0	0	0
(15) EMILY KENO BOARD MEMBER	1 00	X						0	0	0
(16) MICHAEL R LYNCH BOARD MEMBER	1 00	X						0	0	0
(17) MARVENA EDMOND BOARD MEMBER	1 00	X						0	0	0
(18) MAJORIE JOHNSON HEWETT BOARD MEMBER	1 00	X						0	0	0
(19) LUCINDA BALLARD BOARD MEMBER	1 00	X						0	0	0
(20) KAREN KEMP GLOVER BOARD MEMBER	1 00	X						0	0	0
(21) JOAN P YOUNG BOARD MEMBER	1 00	X						0	0	0
(22) HON EUGENE OLIVERJR BOARD MEMBER	1 00	X						0	0	0
(23) GEORGE G KING BOARD MEMBER	1 00	X						0	0	0
(24) FAY GAMBEE BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(26) EMILY ISRAEL PLUHAR BOARD MEMBER	1 00	X						0	0	0
(1) ELIZABETH DONNEM SIGETY BOARD MEMBER	1 00	X						0	0	0
(2) CHARLES F SMITHERS BOARD MEMBER	1 00	X						0	0	0
(3) ARIE L KOPELMAN BOARD MEMBER	1 00	X						0	0	0
(4) ANDREW P SIFF BOARD MEMBER	1 00	X						0	0	0
(5) AIDA BASSE BOARD MEMBER	1 00	X						0	0	0
(6) DEBRA DEL VECCHIO BOARD MEMBER	1 00	X						0	0	0
(7) AMY CASANOVA BOARD MEMBER (THRU 05/2015)	1 00	X						0	0	0
(8) DAVID L DUFFY BOARD MEMBER (THRU 05/2015)	1 00	X						0	0	0
(9) JOHN A SANCHEZ EXECUTIVE DIRECTOR	35 00			X				220,914	0	29,213
(10) JOSUE RODRIGUEZ CHIEF OPERATING OFFICER	35 00					X		138,800	0	11,895
(11) DANIEL DIAZ ASSOCIATE EXECUTIVE DIRECTOR	35 00					X		118,786	0	23,961
(12) WALTER CORTES CONTROLLER	35 00					X		120,769	0	635

SCHEDULE A
(Form 990 or 990EZ)

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 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

Name of the organization EAST SIDE HOUSE INC	Employer identification number 13-1623989
---	--

Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

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).**

7

☒

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 33 1/3% 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 33 1/3% 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

a

☐

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.**

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.**

d

☐

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.**

e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f

Enter the number of supported organizations _____

g

Provide the following information about the supported organization(s)

(i)Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar 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.")	9,400,560	10,403,414	12,889,111	13,101,080	15,868,124	61,662,289
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	9,400,560	10,403,414	12,889,111	13,101,080	15,868,124	61,662,289
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						61,662,289

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	9,400,560	10,403,414	12,889,111	13,101,080	15,868,124	61,662,289
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	537,361	501,645	1,063,562	485,876	473,176	3,061,620
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.)	5,118	70,625	65,741	4,200	15,672	161,356
11 Total support Add lines 7 through 10						64,885,265
12 Gross receipts from related activities, etc. (see instructions)					12	12,762,225
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	95.030 %
15 Public support percentage for 2013 Schedule A, Part II, line 14	15	94.300 %
16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
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—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		

Part IIISupport 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.)

Section A. Public Support						
Calendar 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 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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support						
Calendar 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, royalties and income from similar sources						
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's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

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.)

Section A. All Supporting Organizations

	Yes	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.	1	
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 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.	3a	
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	
c 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 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	
c 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 designated in the organization's organizing document?	5b	
c 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 II 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	
b 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 .	9c	
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.	10a	
b 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	
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	
c 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	

Part IV

Supporting Organizations (continued)

Section 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.		
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.		

Section 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 the supported organization(s).		

Section 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?		
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).		
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.		

Section 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 instructions)			
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.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 <u>Activities Test</u> Answer (a) and (b) below.		Yes	No
a 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 <u>Parent of Supported Organizations</u> Answer (a) and (b) below.			
a 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? Provide details in Part VI.	3a		
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		

Part V – Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete 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)	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)	1	
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 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	
7	☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid 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 the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section 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			
a From 2009.			
b From 2010.			
c From 2011.			
d From 2012.			
e 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 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c 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 From 2010.			
b From 2011.			
c From 2012.			
d From 2013.			
e From 2014.			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	OTHER REVENUE - 2010 AMOUNT \$ 5,118 2011 AMOUNT \$ 70,625 2012 AMOUNT \$ 65,741 2013 AMOUNT \$ 4,200 2014 AMOUNT \$ 15,672

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization EAST SIDE HOUSE INC	Employer identification number 13-1623989
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Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4

Number of states where property subject to conservation easement is located ► _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1

► \$ _____

(ii) Assets included in Form 990, Part X

► \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenue included in Form 990, Part VIII, line 1

► \$ _____

b

Assets included in Form 990, Part X

► \$ _____

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3
- Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a

☐

Public exhibition

d

☐

Loan or exchange programs

b

☐

Scholarly research

e

☐

Other

c

☐

Preservation for future generations
- 4
- Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5
- During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
- ☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a
- Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
- ☐ Yes

☐ No
- b
- If "Yes," explain the arrangement in Part XIII and complete the following table
- | | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance
- 2a
- Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
- ☐ Yes

☐ No
- b
- If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII
- ☐

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	8,077,146	7,515,765	7,492,999	7,200,746	6,837,468
b Contributions					
c Net investment earnings, gains, and losses	-149,317	929,477	438,742	587,204	698,736
d Grants or scholarships	114,219	368,096	415,976	242,296	142,393
e Other expenditures for facilities and programs				52,655	193,065
f Administrative expenses					
g End of year balance	7,813,610	8,077,146	7,515,765	7,492,999	7,200,746

- 2
- Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶ 73 820 %

c

Temporarily restricted endowment ▶ 26 180 %
- The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a
- Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations

3a(i)

☐ Yes

☐ No

(ii) related organizations

3a(ii)

☐ Yes

☐ No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

☐

☐
- 4
- Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		1,142,202	980,130	162,072
c Leasehold improvements				
d Equipment		1,166,275	1,096,746	69,529
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶				231,601

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	16,962,253
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-2,275,888
b	Donated services and use of facilities	2b	332,675
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	-1,943,213
3	Subtract line 2e from line 1	3	18,905,466
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	170,285
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	170,285
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	19,075,751

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	16,790,602
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	332,675
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	332,675
3	Subtract line 2e from line 1	3	16,457,927
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	170,285
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	170,285
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	16,628,212

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
PART V, LINE 4	THE ORGANIZATION MAINTAINS VARIOUS DONOR-RESTRICTED FUNDS WHOSE PURPOSE IS TO PROVIDE LONG-TERM SUPPORT FOR ITS CHARITABLE PROGRAMS
PART X, LINE 2	THE ORGANIZATION RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT TO BE SUSTAINED. MANAGEMENT HAS DETERMINED THAT THE ORGANIZATION HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE. THE ORGANIZATION IS NO LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING JURISDICTIONS FOR TAX PERIODS PRIOR TO AUGUST 31, 2012.

[illegible]

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization EAST SIDE HOUSE INC	Employer identification number 13-1623989
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Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☒ Mail solicitations	e ☒ Solicitation of non-government grants
b ☒ Internet and email solicitations	f ☒ Solicitation of government grants
c ☐ Phone solicitations	g ☒ Special fundraising events
d ☐ In-person solicitations	
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 JC GEEVER 32 BROADWAY SUITE 301 NEW YORK, NY 10004	CORPORATE FUNDRAISER		No	1,301,047	91,200	1,209,847
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				1,301,047	91,200	1,209,847

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

NY

.....

.....

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		WINTER ANTIQUES SHOW (event type)	AUTO SHOW (event type)	(total number)	(add col (a) through col (c))
Revenue	1	Gross receipts	3,848,997	715,197	4,564,194
	2	Less Contributions . . .	1,054,015	384,325	1,438,340
	3	Gross income (line 1 minus line 2)	2,794,982	330,872	3,125,854
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs . . .	635,801	79,530	715,331
	7	Food and beverages . .	170,699		170,699
	8	Entertainment	2,000	5,000	7,000
	9	Other direct expenses .	2,287,998	10,872	2,298,870
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Subtract line 10 from line 3, column (d) ▶			

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses . . .			
	6	Volunteer labor	Yes % No	Yes % No	Yes % No
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Subtract line 7 from line 1, column (d) ▶			

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11

Does the organization conduct gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activities conducted in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14

Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name 

Address 

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization  \$ and the amount of gaming revenue retained by the third party  \$

c

If "Yes," enter name and address of the third party

Name 

Address 

16 Gaming manager information

Name 

Gaming manager compensation  \$

Description of services provided 

☐ Director/officer ☐ Employee ☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$

Part IV

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Return Reference	Explanation
SCHEDULE G, PART I, LINE 2B, COLUMN (V)	J C GEEVER WILL MANAGE THE ORGANIZATION'S FOUNDATION AND CORPORATE GRANTS PROGRAMS BY (1) EDITING/WRITING PROPOSALS SEEKING FUNDING FOR CURRENT PROGRAMS AND SERVICES AND UNRESTRICTED SUPPORT, (2) CONDUCTING PROSPECTIVE RESEARCH TO RENEW SUPPORT FROM PRIOR DONORS AND IDENTIFYING POTENTIAL SUPPORTERS, (3) DEVELOPING STRATEGIES FOR INITIAL APPROACHES TO FOUNDATIONS, CULTIVATION OF EXISTING FUNDERS OR APPOINTMENT WITH REPRESENTATIVE OF FUNDING SOURCES, (4) GUIDING THE ORGANIZATION ON INITIATION OF CONTRACTS, SUBMITTING FUNDING REQUEST, PROPOSAL FOLLOW UP AND ADDITIONAL REPORTS THAT MAY BE REQUESTED BY FUNDERS THE ORGANIZATION AGREES TO PAY A FIXED MONTHLY FEE OF \$6,700 FOR THE CONTRACTED PERIOD WITH J C GEEVER, INC A SEPARATE ITEMIZED EXPENSE INVOICE FOR EXPENSES INCURRED BY J C GEEVER NOT TO EXCEED \$5,000 FOR THE CONTRACT PERIOD THE ORGANIZATION DISTINGUISHES BETWEEN PAYMENT FOR CONSULTING FEES AND EXPENSE REIMBURSEMENT WITH J C GEEVER, INC BASED ON SPECIFIC CONTRACT ARRANGEMENTS AND SEPARATE INVOICING FOR EXPENSES REIMBURSED

Schedule I
(Form 990)

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

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

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

OMB No 1545-0047

2014

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization
EAST SIDE HOUSE INC

Employer identification number
13-1623989

Part I

General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

▶

3

Enter total number of other organizations listed in the line 1 table

▶

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIP	22	37,300			
(2) INTERNSHIPS	550	470,867			

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	SCHOLARSHIPS EAST SIDE HOUSE SETTLEMENT PROVIDES A RANGE OF SCHOLARSHIP AWARDS TO GRADUATES OF ITS PROGRAMS WHO ARE ENTERING COLLEGE OR OTHER POSTSECONDARY TRAINING STUDENTS ARE REQUIRED TO SUBMIT APPLICATIONS TO RECEIVE SCHOLARSHIP SUPPORT THESE APPLICATIONS ARE REVIEWED BY THE SCHOLARSHIP COMMITTEE WHO SCORES AND AWARDS THE SCHOLARSHIPS SCHOLARSHIP FUNDS ARE AWARDED TO THE STUDENTS VIA THEIR SCHOOL INTERNSHIPS QUALIFIED STUDENTS ARE PROVIDED PAID WORK EXPERIENCE THROUGH INTERNSHIP PLACEMENTS EAST SIDE HOUSE SETTLEMENT STAFF MONITOR STUDENT PARTICIPATION AND PROGRESS WITHIN THE INTERNSHIP PLACEMENTS AND AWARD STUDENTS STIPENDS UPON MEETING KEY PREDETERMINED MILESTONES

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990.

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

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2014

Open to Public Inspection

Name of the organization
EAST SIDE HOUSE INC

Employer identification number
13-1623989

Part I

Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☒ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c	No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	No
b Any related organization? If "Yes," to line 5a or 5b, describe in Part III.	5b	No
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	No
b Any related organization? If "Yes," to line 6a or 6b, describe in Part III.	6b	No
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JOHN A SANCHEZ, EXECUTIVE DIRECTOR	(i)	220,914	0	0	25,093	4,120	250,127	0
	(ii)	0	0	0	0	0	0	0
2 JOSUE RODRIGUEZ, CHIEF OPERATING OFFICER	(i)	138,800	0	0	11,835	60	150,695	0
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

OMB No 1545-0047

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Open to Public
Inspection

Name of the organization EAST SIDE HOUSE INC	Employer identification number 13-1623989
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990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 2	
FORM 990, PART VI, SECTION A, LINE 2	CHARLES AND RUTH SMITHERS HAVE A FAMILY RELATIONSHIP
FORM 990, PART VI, SECTION B, LINE 11	THE EAST SIDE HOUSE FORM 990 IS REVIEWED BY THE FINANCE COMMITTEE AS PART OF THE AUDIT REVIEW PROCESS. ONCE THE FORM IS RECEIVED BY EAST SIDE HOUSE, IT IS DISTRIBUTED ELECTRONICALLY TO THE BOARD OF DIRECTORS FOR THEIR REVIEW. ONCE THE REVIEW IS FINALIZED, THE FORM 990 IS FILED WITH THE IRS. AFTER FILING IT IS MADE AVAILABLE ON THE ORGANIZATION'S WEBSITE.
FORM 990, PART VI, SECTION B, LINE 12C	ALL BOARD MEMBERS AS WELL AS SENIOR STAFF INCLUDING ALL MANAGERS AND SUPERVISORS ARE REQUIRED TO SIGN AN ANNUAL CONFLICT OF INTEREST FORM. POTENTIAL CONFLICTS ARE REVIEWED/ASSESSED BY THE EXECUTIVE DIRECTOR AND IF A DETERMINATION THAT A POSSIBLE CONFLICT EXISTS HE REFERS THE MATTER TO THE PRESIDENT AND EXECUTIVE COMMITTEE OF THE BOARD. INDIVIDUALS WHO MAY HAVE A CONFLICT OF INTEREST IN ANY BUSINESS OR OTHER MATTER ARE PRECLUDED FROM PARTICIPATING IN THAT ISSUE.
FORM 990, PART VI, SECTION B, LINE 15A	UNITED NEIGHBORHOOD HOUSES (UNH) IS THE FEDERATION OF SETTLEMENT HOUSES IN NYC AND AS A MEMBER OF UNH PROVIDES PERIODIC SALARY SURVEY INFORMATION. SURVEY RESULTS ARE SHARED WITH BOARD LEADERSHIP AND SALARY DECISIONS ARE MADE BY THE FINANCE COMMITTEE WHEN THEY APPROVE THE ANNUAL BUDGET WHICH IS THEN PRESENTED TO THE FULL BOARD FOR APPROVAL AND IS DOCUMENTED IN THE BOARD MINUTES. THE LAST COMPENSATION REVIEW OCCURRED IN SEPTEMBER 2015.
FORM 990, PART VI, SECTION C, LINE 19	EAST SIDE HOUSE ANNUALLY POSTS ITS FILED FORM 990 AND CHAR 500 REPORTS ON ITS WEBSITE. IN ADDITION, THE RETURN IS POSTED ON GUIDESTAR.ORG AND OTHER SIMILAR TYPES OF WEBSITES. ALL OTHER DOCUMENTATION, SUCH AS THE COMPANY'S 1023 AND GOVERNING DOCUMENTS, IS PROVIDED UPON WRITTEN REQUEST.
FORM 990, PART IX, LINE 11G	CONTRACT SERVICE PROGRAM SERVICE EXPENSES 322,228 MANAGEMENT AND GENERAL EXPENSES 42,656 FUNDRAISING EXPENSES 5,000 TOTAL EXPENSES 369,884 PAYROLL PROCESSING PROGRAM SERVICE EXPENSES 62,758 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 62,758 WRITING/EDITOR CONSULTANTS PROGRAM SERVICE EXPENSES 25,333 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 25,333 STRATEGIC PLANNING CONSULTANTS PROGRAM SERVICE EXPENSES 35,994 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 35,994 PROGRAM ENRICHMENT CONSULTANTS PROGRAM SERVICE EXPENSES 37,455 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 37,455
FORM 990, PART XI, LINE 9	ACTUARIAL PENSION ADJUSTMENT -26,872
FORM 990, PART XII, LINE 2C	THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT. THIS PROCESS DID NOT CHANGE FROM THE PRIOR YEAR.