## EXTENDED TO FEBRUARY 16, 2016

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)

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

OMB No. 1545-0047

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

Αł	or the	ن 2014 calendar year, or tax year beginning	UL I, ZUI4 and	l ending 👢	JUN 30,	20T2	
В	Check if applicabl	C Name of organization			D Employ	er identifi	cation number
	Addre chang		NC.				
	Name chang	e Doing business as					976214
<u></u>	] nitial  return	Number and street (or P.O. box if mail is not del	•	Room/suite	E Telepho		
L.	Final return			695		<u> 213-</u>	688-2188
_	termin ated	City or town, state or province, country, and			G Gross rece	ipts\$	12,000,804.
<u>_</u>	Amen	DOS ANGELLES, CA 300/1			H(a) is this		
	Applic tion pendi				1		? Yes X No
		520 S. GRAND AVE., STE			7		ncluded? Yes No
		empt status: X 501(c)(3) 501(c)( )		or 527	-3		list. (see instructions)
		te: ► WWW.SHELTERPARTNERSHIP		-			n number 🕨
	orm of	1.3	ssociation Other	L Year	of formation;	1985  N	A State of legal domicile; CA
ГС		Summary Briefly describe the organization's mission or most	aignificant activities. COLT	חג מחמג	ייי זיייניינייני	COLVI	NTC
õ	I	HOMELESSNESS IN LOS ANGEL	· ·	MDUKAI	TAPTI	SOTAT.	TAG.
nar	I	Check this box  if the organization discor		ead of mare	than 25% o	fite not ac	
Activities & Governance		Number of voting members of the governing body				1 1	17
တိ	I	Number of independent voting members of the go					17
ع ئ		Total number of individuals employed in calendar y					18
ítie		Total number of volunteers (estimate if necessary)					545
疲		Total unrelated business revenue from Part VIII, co					0.
Ř		Net unrelated business taxable income from Form					0.
					Prior Ye		Current Year
ds.	8	Contributions and grants (Part VIII, line 1h)		<del></del>	18,341		
Ž,	l .				•	,084.	
Revenue	•	Investment income (Part VIII, column (A), lines 3, 4,				,118.	
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c				,627.	
	I	Total revenue - add lines 8 through 11 (must equal			18,636		
		Grants and similar amounts paid (Part IX, column (	* * *		9,653		
		Benefits paid to or for members (Part IX, column (A				0.	0.
g		Salaries, other compensation, employee benefits (I			1,046	,383.	1,096,258.
Expenses		Professional fundraising fees (Part IX, column (A), li				0.	0.
y pe		Total fundraising expenses (Part IX, column (D), line					
úì		Other expenses (Part IX, column (A), lines 11a-11d,			831	,395.	800,174.
	18	Total expenses. Add lines 13-17 (must equal Part I	X, column (A), line 25)		11,531		
		Revenue less expenses. Subtract line 18 from line	12		7,105	,226.	-1,436,700.
Net Assets or Fund Balances				Ве	ginning of Cur		End of Year
Salar	20	Total assets (Part X, line 16)			<u>28,045</u>		26,623,288.
nd E	21	Total liabilities (Part X, line 26)				<u>,252.</u>	110,974.
		Net assets or fund balances. Subtract line 21 from	line 20		27,949	<u>,014.</u>	26,512,314.
	ırt II	Signature Block					
		lties of perjury, I declare that I have examined this return,					y knowledge and belief, it is
rue,	correc	t, and complete. Declaration of pseparer (other than office	n) is based on all information of wi	hich preparer	has any know	ledge.	12/11
		Signature of officer	<b>1</b> 0		 Date	5-//	6416
Sigr					Dail	, ,	
dere	e	Type or print name and title					
		,	Dranoraria att	1 г	)ate	Check	PTIN
) <b>.</b> : . (		Print/Type preparer's name	Preparer's signature	'		if	<b></b> '
aid Fon		NAZ AFSHAR  Firm's name	FD T.T.D		Firm	self-employe	
	arer Only	Firm's name GURSEY   SCHNEID		00		ı's EIN 🛌	95-3309779
136	City		90067-1735	00	Dha	na no 211	0-552-0960
day.	the IE	S discuss this return with the preparer shown about				۱۱۰ ۱۱۷، ب	X Ves No

Form 990 (2014)

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 Х 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Х foreign organization? If "Yes," complete Schedule F, Parts II and IV 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 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, X column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 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 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....

Х

X

X

18

19

Form 990 (2014) SHELTER PARTNERSHT
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	million 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
_,	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		7.1.2.1.2.1 7.1.2.1.2.1	
20	instructions for applicable filing thresholds, conditions, and exceptions):	93.11766		
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	CIPCDAS.	X
a	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
00	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	21
29	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23	-22	
30		30		Х
	contributions? If "Yes," complete Schedule M	30		- 22
31	Did the organization liquidate, terminate, or dissolve and cease operations?	0.4		Х
	If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	00		v
	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
33		00		v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	65.		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	_		37
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		İ	7.7
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	_	Ψ,	
	Note. All Form 990 filers are required to complete Schedule O	38	X	004.1

Part V	Statements R	egarding	Other IRS	Filings and	Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V						]
					Yes	No	Ī
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	7	11.61			ş
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0				, ;
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gaming				
	(gambling) winnings to prize winners?			1c	X		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						Ī
	filed for the calendar year ending with or within the year covered by this return	2a	18				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	Х		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions						Ī
За				За		X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b			
	At any time during the calendar year, did the organization have an interest in, or a signature or other						
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		x	
b	If "Yes," enter the name of the foreign country:		,			1371.12	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccour	ts (FBAR).				÷
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5а		X	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactions.			5b		Х	
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c			
6a	B						_
•	any contributions that were not tax deductible as charitable contributions?			6a		Х	
b	If "Yes," did the organization include with every solicitation an express statement that such contribute		· ·				
~	were not tax deductible?			6b			
7	Organizations that may receive deductible contributions under section 170(c).						7
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices t	provided to the payor?	7a	Х	1 100 2 11 15	
				7b	Х		_
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w						_
•	to file Form 8282?			7c		x	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		Marano Gwlei			7
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontrac	et?	7e		Х	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti			7f		Х	
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	7g		Х	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		Х	_
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained						ī
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	8			
9	Sponsoring organizations maintaining donor advised funds.						à
а	Did the sponsoring organization make any taxable distributions under section 4966?		************	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b			_
10	Section 501(c)(7) organizations. Enter:						j
а	Initiation fees and capital contributions included on Part VIII, line 12	10a					Ć
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					5.7
11	Section 501(c)(12) organizations. Enter:						
	Gross income from members or shareholders	11a					
b	Gross income from other sources (Do not net amounts due or paid to other sources against						
	amounts due or received from them.)	11b					1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10411	}	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			11135			
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		<u></u>	_
	Note. See the instructions for additional information the organization must report on Schedule O.						1
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1					
	organization is licensed to issue qualified health plans	13b					
	Enter the amount of reserves on hand	13c		. Printing C	1.11		-
				14a		X	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O		14b			_

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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		* * * * * *	X
Sec	tion 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.	Firesolv Comment		
b	Enter the number of voting members included in line 1a, above, who are independent1b17			
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?	2	Х	1 1000000000000000000000000000000000000
_	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3		3		X
	of officers, directors, or trustees, or key employees to a management company or other person?	4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
6	Did the organization have members or stockholders?	ь	!	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_		<del>.</del>
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			٠,,
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	<u>X</u>	
b	Each committee with authority to act on behalf of the governing body?	d8	X	
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	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		- Na	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			4-4-60
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
•	The organization's CEO, Executive Director, or top management official	15a	Х	
a b	Other officers or key employees of the organization	15b	X	
IJ	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		vije i	
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		Marini Mentani	
ioa		16a	-14	Х
1-	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	102	101211	
b				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	46h		HARAS.
<u></u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CA	wallah	lo.	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and the section of the sectio	ıvaliaD	10	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request X 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	i iinan	cial	
	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:	••••		
	RUTH SCHWARTZ - 213-688-2188			
	520 S. GRAND AVENUE, SUITE 695, LOS ANGELES, CA 90071			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

• 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.

(A) Name and Title	(B) Average	(đo	not c	(C Pos heck	C) ition	1 than	one	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	hours per week (list any	offic			irecto	is bot or/trus	tee)	from the	from related organizations	other compensation
	hours for related	Individual trustee or director	eg Eg			Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	truste	al trus		3,66	эшы		(** 2, 1000 Miles)		and related
	below	vidual	Institutional trustee	8	Кеу етріоуее	hest co	TIE!			organizations
	line)	Ē	inst	Officer	Key	운동	Œ			
(1) ALAN ADLER	3.00	ν,				***************************************		0.	0.	0.
DIRECTOR	3.00	X				-		U •	V •	<u> </u>
(2) BRIAN CULLINAN	3.00	x						ο.	0.	0.
DIRECTOR (3) DANIEL MOREFIELD	3.00	22						<b>.</b>	<u> </u>	
DIRECTOR	3,00	x						0.	0.	0.
(4) GARY MEISEL	3.00									
DIRECTOR		Х				<u> </u>		0.	0.	0.
(5) JOHN DEFAZIO	5.00									
CHAIR		Х		Х				0.	0.	0.
(6) KEITH SHARP, ESQ.	3.00	ļ						_		
DIRECTOR		X						0.	0.	0.
(7) LOUISE OLIVER	3.00							_		•
SECRETARY	2 00	Х		Х				0.	0.	0.
(8) PETER BARKER	3.00							_	_	0
DIRECTOR	2 00	X						0.	0.	0.
(9) THOMAS LANE	3.00	х						0.	0.	0.
DIRECTOR	3.00	^				ļ		U .	V •	<del></del>
(10) WILLIAM WITTE	3.00	Х						0.	0.	0.
DIRECTOR (11) PATRICK FITZGERALD	3.00	21						<u> </u>	•	
DIRECTOR	3.00	х						0.	0.	0.
(12) RONALD M. GRIFFITH	3.00								11.111.1211	
DIRECTOR		х						0.	0.	0.
(13) KEVIN SULLIVAN	3.00									
TREASURER		Х		Х				0.	0.	0.
(14) JEFFREY KEAN	3.00									
DIRECTOR		X						0.	0.	0.
(15) ERICH KLEIN	3.00									_
DIRECTOR		X						0.	0.	0.
(16) LANCE SIMON	3.00	,,							<u>,</u>	0
DIRECTOR	2 00	Х						0.	0.	0.
(17) RODNEY SWAN	3.00	х						0.	0.	0.
DIRECTOR	<u> </u>	Δ				J		U •	U • }	Form <b>990</b> (2014)

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(A)	ustees, Key Em (B)	ploy	/ees		d Hi C)	ighe	st C	Compensated Employe (D)	es (continuea) (E)		(F)
Name and title	Average	Position (do not check more than one						Reportable	Reportable		Estimated
	hours per week	box	k, unle	ess pe	erson	is bot or/trus	th an	1	compensatio		amount of
	(list any	$\vdash$	1	T				from the	from related organization:		other compensation
	hours for	rdirec				屋		1	(W-2/1099-MIS		from the
	related	stee 0	rustee			pensat		(W-2/1099-MISC)			organization
	organizations below	ual tru	ionalt		ployee	t com	1.				and related organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	or me				organizations
(18) RUTH SCHWARTZ	40.00	✝			- XE.	<u> </u>	<u> </u>				
EXECUTIVE DIRECTOR		1		x				109,420.		0.	10,962.
(19) DIANN KIM, ESQ	3.00										
OFFICER (UNTIL 11/14)		_	ļ	X			ļ	0.		0.	0.
(20) G. ALLAN KINGSTON	3.00	-		l							0
OFFICER (UNTIL 9/14)	2 00	╀	-	X		-	-	0.		0.	0.
(21) JOHN WEISSENBACH	3.00	-		x				0.		0.	0.
OFFICER (UNTIL 6/15)		-	-	<u> </u> ^-				0.		٠.	<u> </u>
		1									
Auto				Ι		1	1				
		1									
		ــــــ	<u> </u>	ļ							
		-									
		$\vdash$		ļ		├	╁				
		1									
1b Sub-total	, I		1	<u> </u>	I	J	<u> </u>	109,420.		0.	10,962.
c Total from continuation sheets to Part								0.		0.	0.
d Total (add lines 1b and 1c)								109,420.		0.	10,962.
2 Total number of individuals (including but								eceived more than \$100	,000 of reportabl	e	
compensation from the organization											1
					,			1.1.4 1	1	ı	Yes No
3 Did the organization list any former office											3 X
line 1a? If "Yes," complete Schedule J for 4 For any individual listed on line 1a, is the											
and related organizations greater than \$1	-		-						0.94		4 X
5 Did any person listed on line 1a receive o									idual for services		
rendered to the organization? If "Yes," co											5 X
Section B. Independent Contractors											
1 Complete this table for your five highest of										pens	ation from
the organization. Report compensation for	or the calendar y	ear	endi	ing v	vitin	or w	rithir 		year.		(C)
(A) Name and busines	ss address	NI	ONI	R.				(B) Description of s	ervices	С	(C) ompensation
1.000			OTAL	<u> </u>							
									***************************************		
							***************************************				
							ļ				
							$\dashv$				<u></u>
2 Total number of independent contractors	(including but r	ot li	mite	d to	tho	se li	sted	d above) who received m	nore than		
\$100,000 of compensation from the orga					!	0					

		Check if Schedule O conta	ains a res	ponse	or note to any lir		/p)		
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
इ इ	1 a	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues		1b	***************************************				
S, E		Fundraising events		1c	281,510.				
iifts ar A		Related organizations		1d					
%E		Government grants (contributi		1e	244,091.				
ŝ		All other contributions, gifts, grant	' 1	75	211,031.				
out.	•	similar amounts not included abov		1f	11,174,592.				
Ē	a	Noncash contributions included in lines		**	10,409,789.				
Sor	_	Total. Add lines 1a-1f				11,700,193,			
					Business Code	10.000			
Ð	2 a	CONSULTING SERVICES			541610	218,937.			
vic.	b				0.2.2.0.2.0	,,,,,,,			
Program Service Revenue	c				*****				
an eve	d				i i				
P.G	e								
Pro		All other program service reve	nue						
		Total. Add lines 2a-2f				218,937,			
	3	Investment income (including				223,557,			
	·	other similar amounts)				1,455.			1,455.
	4	Income from investment of tax							
	5	Royalties	•		•				
	Ū	, to justice	(i) R		(ii) Personal				
	คิล	Gross rents			1 (7, 5, 5, 5, 1, 5				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	b								
	c								
		Net rental income or (loss)			<u> </u>	William Variation and the transfer of the transfer of			
		Gross amount from sales of	(i) Sect		(ii) Other		a Principal de la filipia de la composición del composición de la	nteriore de la composition della composition del	
	,	assets other than inventory		1.137	1 7			HASSIA MILESTYÖVÜYÜ TÜLEN MEN MEN TÜNÜM	
	h	Less: cost or other basis		4,,,,,,,,,,	•				
	~	and sales expenses	:	208					
	c	Gain or (loss)		•					
		Net gain or (loss)				-71.			-71.
4.		Gross income from fundraising							
nue		including \$ 281	-						
s.		contributions reported on line				De Druit erskarig op de servere Gegerge, en des de perjetje sk			
ĕ		Part IV, line 18		2	79,082.				
Other Rever	b	Less: direct expenses				Transferred States (1984)			
0		Net income or (loss) from fund			<b>&gt;</b>	0.			
		Gross income from gaming ac							
		Part IV, line 19							
	b	Less: direct expenses							
		Net income or (loss) from gam							
		Gross sales of inventory, less							
		and allowances		8	1				
	b	Less: cost of goods sold							
		Net income or (loss) from sales							
		Miscellaneous Revenue			Business Code				
	11 a					, , , , , , , , , , , , , , , , , ,			
	b								
	c				-				
		All other revenue							
		Total, Add lines 11a-11d							
	12	Total revenue, See instructions.				11,920,514.	218,937,	0,	1,384.

Form 990 (2014) SHELTER PARTNERSHIP, INC.
Part IX Statement of Functional Expenses

	Check if Schedule O contains a respon	nse or note to any line in (A)	(B)	(C)	(D)
Dо . 7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations	44 460 500	44 460 500		
	and domestic governments. See Part IV, line 21	11,460,782.	11,460,782.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
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				Pathaus far ann an an an an an an
5	Compensation of current officers, directors,	110,000.	82,500.	11,000.	16,500
_	trustees, and key employees	110,000.	02,300.	11,000.	10,500
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	752,429.	551,609.	64,359.	136,461
8	Pension plan accruals and contributions (include	194;449*	331,003.	<u>0</u> = 1000 •	
ø	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	148,776.	107,151.	13,830.	27,795
10	Payroll taxes	85,053.	67,065.	4,574.	13,414
11	Fees for services (non-employees):	00,000	0,,000.		
a					
b	Legal	6,000.	3,564.	912.	1,524
	Accounting	22,775.	17,172.	2,098.	3,505
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
·	column (A) amount, list line 11g expenses on Sch O.)	17,745.	11,896.	2,190.	3,659
12	Advertising and promotion				
13	Office expenses	30,647.	22,934.	3,258.	4,455
14	Information technology				
15	Royalties				
16	Occupancy	147,594.	105,238.	15,860.	26,496
17	Travel	20,615.	16,395.	1,688.	2,532
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	306,615.	302,938.	1,623.	2,054
23	Insurance	26,630.	23,591.	1,117.	1,922.
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 0.)				
а	INVENTORY OBSOLESCENCE	133,625.	133,625.	0.	0.
b	TELEPHONE	15,174.	10,050.	2,262.	2,862
C	K.I.D.S	15,000.	15,000.	0.	0
d	WAREHOUSING	13,936.	13,936.	0.	0.40
е		43,818.	27,130.	8,848.	7,840
25	Total functional expenses. Add lines 1 through 24e	13,357,214.	12,972,576.	133,619.	251,019
26	Joint costs. Complete this line only if the organization			aresterone	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)	••••			Form <b>990</b> (2014)

Form 990 (2014)
Part X Balance Sheet

Part X	Balance Sheet			<u> </u>
	Check if Schedule O contains a response or note to any line in this Part X		<del></del>	
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	711,805.	1	605,751
2	Savings and temporary cash investments		2	250,000
3	Pledges and grants receivable, net		3	211,938
4	Accounts receivable, net			28,564
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L	with the control of the second	5	TO AND CONTROL OF THE
6	Loans and other receivables from other disqualified persons (as defined un			
"	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribu	-   -   -   -   -   -   -   -   -   -		
	employers and sponsoring organizations of section 501(c)(9) voluntary		1 - Ave de A	
	employees' beneficiary organizations (see instr). Complete Part II of Sch L	To the first and another state that are well-grown 18,	6	Anna Marian Apprelia for a formation and the contract of the c
, ,	Notes and loans receivable, net		7	
7	Inventories for sale or use			18,764,578
8		15 076		36,852
9	Prepaid expenses and deterred charges Land, buildings, and equipment: cost or other			
108	basis. Complete Part VI of Schedule D	g g		
,		7,003,134.	10c	6,725,605
b	Investments - publicly traded securities		111	0,125,005
11	Investments - other securities. See Part IV, line 11		12	
12	Investments - other securities, see Part IV, line 11 Investments - program-related. See Part IV, line 11	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13	
13			14	
14	Intangible assets Other posets See Part IV line 11		15	
15	Other assets. See Part IV, line 11  Total assets. Add lines 1 through 15 (must equal line 34)			26,623,288
16	Accounts payable and accrued expenses			110,974
17			18	110,574
18	Grants payable	E .	19	
19	Deferred revenue		20	
20	Tax-exempt bond liabilities		21	
21	Escrow or custodial account liability. Complete Part IV of Schedule D  Loans and other payables to current and former officers, directors, trustees		21	
22	key employees, highest compensated employees, and disqualified persons	Tananahar Patriatan da National da National		Alginariasz szántalás ez ett.
22			22	ja ja Cartotori agrava alluma. Pajaka jiga daga ka <u>ladi</u> an iba ara
]	Complete Part II of Schedule L		23	
23	Secured mortgages and notes payable to unrelated third parties		24	
24	Other liabilities (including federal income tax, payables to related third	••••	24	
25	parties, and other liabilities not included on lines 17-24). Complete Part X of			
			25	
26	Schedule D  Total liabilities. Add lines 17 through 25	96,252.		110,974
20	Organizations that follow SFAS 117 (ASC 958), check here ▶			
,	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	3,296,676.	27	3,090,339
28	Temporarily restricted net assets			23,421,975
29	Permanently restricted net assets		29	20/121/5/0
25	Organizations that do not follow SFAS 117 (ASC 958), check here ▶□			
	and complete lines 30 through 34.			
20	Capital stock or trust principal, or current funds		30	
30	Paid-in or capital surplus, or land, building, or equipment fund	÷	31	
31	Retained earnings, endowment, accumulated income, or other funds	1	32	
27 28 29 30 31 32	Total net assets or fund balances		33	26,512,314
33		00 045 066	34	26,623,288
34	Total liabilities and net assets/fund balances	20,045,200.	- 04	Form <b>990</b> (2014

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2014)

### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

(FOIM 990 OF 990-EZ)

**Public Charity Status and Public Support** 

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Nam	e of ti	ne organization					E		identification number
	1		TER PARTNE					9	<u>5-3976214                                    </u>
Pa	rt I	Reason for Public	Charity Status (	All organizations must c	omplete th	iis part.) Se	ee instructions.		
The	organi	zation is not a private found	fation because it is: (	(For lines 1 through 11, o	check only	one box.)	l		
1		A church, convention of ch	urches, or association	on of churches describe	d in sectio	on 170(b)(1	1)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii). (	Attach Schedule E.)					
3		A hospital or a cooperative	hospital service orga	anization described in s	ection 176	)(b)(1)(A)(i	ii).		
4		A medical research organiz	ation operated in co	njunction with a hospita	l describe	d in sectio	ın 170(b)(1)(A)(i	ii). Enter	the hospital's name,
		city, and state:	ONE WAY						
5		An organization operated f	or the benefit of a co	llege or university owne	d or opera	ted by a g	overnmental un	it describ	ed in
		section 170(b)(1)(A)(iv). (0	Complete Part II.)						
6		A federal, state, or local go	vernment or governn	nental unit described in	section 1	70(b)(1)(A)	)(v).		
7	X	An organization that norma	ılly receives a substa	ntial part of its support	from a gov	ernmental	l unit or from the	e general	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9		An organization that norma	ılly receives: (1) more	than 33 1/3% of its sup	port from	contribution	ons, member <mark>s</mark> h	ip fees, a	nd gross receipts from
		activities related to its exer	npt functions - subje	ct to certain exceptions	, and (2) no	o more tha	ın 33 1/3% of it:	s support	from gross investment
		income and unrelated busi	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	ired by the org	anization	after June 30, 1975.
		See <b>section 509(a)(2).</b> (Co	mplete Part III.)						
10		An organization organized	and operated exclus	ively to test for public sa	afety. See	section 50	09(a)(4).		
11		An organization organized	and operated exclus	ively for the benefit of, t	o perform	the functio	ons of, or to car	ry out the	purposes of one or
		more publicly supported or	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section	509(a)(2).	See section 50	<b>9(a)(3)</b> . C	heck the box in
		lines 11a through 11d that	describes the type o	of supporting organization	n and con	nplete lines	s 11e, 11f, and	11g.	
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its sup	ported org	ganization(s), ty	pically by	giving
		the supported organization	on(s) the power to re	gularly appoint or elect	a majority	of the dire	ctors or trustee	s of the s	upporting
		organization. You must o	complete Part IV, Se	ections A and B.					
b		Type II. A supporting org	anization supervised	for controlled in connec	tion with i	ts supporte	ed organization	(s), by ha	ving
		control or management of	f the supporting org	anization vested in the s	ame pers	ons that co	ontrol or manag	e the sup	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.					
C		Type III functionally inte	grated. A supporting	g organization operated	in connec	tion with, a	and functionally	integrate	ed with,
		its supported organizatio	n(s) (see instructions	s). You must complete	Part IV, Se	ections A,	D, and E.		
d		Type III non-functionally							
		that is not functionally inf	egrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement and	an attenti	veness
	<b></b>	requirement (see instruct	ions). <b>You must co</b> n	nplete Part IV, Sections	s A and D	and Part	V.		
е		Check this box if the orga	anization received a	written determination fro	om the IRS	that it is a	a Type I, Type II	, Type III	
		functionally integrated, or	• •						
f		the number of supported of							
g		de the following information	about the supporte	ed organization(s).  (ili) Type of organization	Viul le the c	rganization	(v) Amount of n	onoton	(vi) Amount of
	(1)	Name of supported organization	{II} €6N	(described on lines 1-9	listed	in your	i aummont (a	1	other support (see
		organization		above or IRC section		document?	Instruction		Instructions)
				(see instructions))	Yes	No			
									·
					···				

Schedule A (Form 990 or 990-EZ) 2014 SHELTER PARTNERSHIP, INC. 95-39762

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.)

Sec	ction A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total				
	Gifts, grants, contributions, and										
	membership fees received. (Do not			****							
	include any "unusual grants.")	9277578.	9027438.	10319159.	18341973.	11700193.	58666341.				
2	Tax revenues levied for the organ-										
	ization'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	9277578.	9027438.	10319159.	18341973.	11700193.	58666341.				
	The portion of total contributions										
_	by each person (other than a										
	governmental unit or publicly										
	supported organization) included						41				
	on line 1 that exceeds 2% of the						-				
	amount shown on line 11,	ann Sastin a bhia Sastin (176) Abhraich airt a chagail ag									
	column (f)						2605480.				
6	Public support. Subtract line 5 from line 4.						56060861.				
	ction B. Total Support	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·						
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total				
	Amounts from line 4	9277578.		10319159.	18341973.	11700193.					
	Gross income from interest,										
_	dividends, payments received on										
	securities loans, rents, royalties										
	and income from similar sources	2,031.	2,390.	2,204.	1,790.	1,455.	9,870.				
9	Net income from unrelated business	- /									
Ť	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.)	436.	250.		27,627.		28,313.				
11	Total support. Add lines 7 through 10						58704524.				
	Gross receipts from related activities,	etc. (see instruction	ons)		1	12					
	First five years. If the Form 990 is for					n 501(c)(3)					
	organization, check this box and stop										
Sec	ction C. Computation of Publi										
14	Public support percentage for 2014 (I	ine 6, column (f) di	vided by line 11, o	column (f))		14	95.50 %				
	Public support percentage from 2013					15	92.68 %				
	33 1/3% support test - 2014. If the o					ore, check this bo	ox and				
	stop here. The organization qualifies	•									
b	33 1/3% support test - 2013. If the o										
	and stop here. The organization quali										
17a	10% -facts-and-circumstances test										
	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"										
h	10% -facts-and-circumstances test	_	•								
~	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-circ						. —				
18	Private foundation. If the organization		-								
	The state of the s		<b>,</b> .,=								

# Schedule A (Form 990 or 990 EZ) 2014 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

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,					Control	
merchandise sold or services per-					***************************************	
formed, 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 bus-					D	
iness under section 513					a watering	
***************************************				<del>.  </del>		
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities			Printerior			
furnished by a governmental unit to						
the organization without charge						<del> </del>
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 (Subtractline 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						
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.)		<u></u>				<u></u>
14 First five years. If the Form 990 is for						
check this box and stop here					***	<u></u> ▶∐
Section C. Computation of Publ		T			1	
15 Public support percentage for 2014 (		•	****		1	%
16 Public support percentage from 2013					16	%
Section D. Computation of Inve	stment Incom	e Percentage				
17 Investment income percentage for 20	)14 (line 10c, colur	nn (f) divided by lir	ne 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						17 is not
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2013. If the						
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization		-				. —
zo - mivate ioungation, it the organizatio	m did not discult a	NON OILINIO 14, 13	ա, ու լու, ուլերի կ	CINC NON GIRD SEC III	GUGGEORG	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

### 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

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- 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.
- 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.
- 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.
- 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.
- 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).
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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.
- 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.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
  - 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.)

	Yes	No
1		
2		
За		
3b		
V16/2/2017/0		
3c		
4a		
4b		
4b		.v.Ziven
		-
4c		
5a		
ka daga da i kadiga da i		
5b		
5c	2500000	
e R		NAMERE
6		
7	<u>, estru</u> a lan 1.5	13 5.0 W-F
8		111 100 101
9a		
9b		
9c		
10a		
	Sale.	
10b	-	
an ar aa	へ ヒマ\	0044

			Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the years	see instructi	ions)	ļ

The organization satisfied the Activities Test. Complete line 2 below.

The organization is the parent of each of its supported organizations. Complete line 3 below.

The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

Activities Test. Answer (a) and (b) below.

supported organizations played in this regard.

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.

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.

3 Parent of Supported Organizations. 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*.

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.

2b		
3a	1: ::	

Yes

Sch	edule A (Form 990 or 990 EZ) 2014 SHELTER PARTNERSHIP, IN	C.	(	95-3976214 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	on Nov. 20, 1970. See instr	uctions. All
	other Type III non-functionally integrated supporting organizations must co			
· •	Con A Advisa de National		(A) Dilan Vanu	(B) Current Year
Sec	tion A - Adjusted Net Income	(A) Prior 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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	Maria		
	instructions for short tax year or assets held for part of year):	7114		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other	111 4 31		
	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		
Sect	ion 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		

\_\_\_ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2014

instructions).

Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)					
Sect	ion D - Distributions	Current Year						
1	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								
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	he organization is responsive	<del>)</del>					
	(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							
	1	(i)	(ii)	(iii)				
		Excess Distributions	Underdistributions	Distributable				
Sect	ion E - Distribution Allocations (see instructions)		Pre-2014	Amount for 2014				
1	Distributable amount for 2014 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2014							
	(reasonable cause required-see instructions)							
3	Excess distributions carryover, if any, to 2014:							
а								
b								
С								
d								
е	From 2013							
f	Total of lines 3a through e							
g	Applied to underdistributions of prior years							
h	Applied to 2014 distributable amount							
i	Carryover from 2009 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							
С	Remainder. Subtract lines 4a and 4b from 4.							
5	Remaining underdistributions for years prior to 2014, if							
	any. Subtract lines 3g and 4a from line 2 (if amount							
	greater than zero, see instructions).							
6	Remaining underdistributions for 2014. Subtract lines 3h							
	and 4b from line 1 (if amount greater than zero, see							
	instructions).							
7	Excess distributions carryover to 2015. Add lines 3j							
	and 4c.							
8	Breakdown of line 7:							
а								
b								
С								
d	Excess from 2013							
e	Excess from 2014							

Schedule A (Form 990 or 990-EZ) 2014

Schedule A	(Form 990 or 990-EZ) 2014 SHELTE Supplemental Information. Pro	R PARTNERSHIP,	INC.	95-3976214 Page 8
Part VI				7a or 17b; and Part III, line 12.
	Also complete this part for any addition	al information. (See instruction	ons).	
		HA MA		
			15102510510511	
•				
				NAME OF TAXABLE PARTY.
<del> </del>				

#### SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)); Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
	SHELTER	PARTNERSHIP, II	NC.		95-397621 <b>4</b>
Pa	ort I-A Complete if the org	ganization is exempt un	der section 501(c)	or is a section 527 of	organization.
2 3	Provide a description of the organiz Political expenditures Volunteer hours			<b>&gt;</b>	\$
	ort I-B Complete if the org				h
1	Enter the amount of any excise tax	incurred by the organization ur	ider section 4955		<b></b>
	Enter the amount of any excise tax				
	If the organization incurred a section				
	Was a correction made?				tes LINO
Da Pa	o If "Yes," describe in Part IV. art I-C   Complete if the org	anization is exempt un	der section 501(c)	except section 501	(c)(3).
	Enter the amount directly expended				B
	Enter the amount of the filing organ				
_	exempt function activities				\$
3	Total exempt function expenditures				
·	line 17b				\$
4	Did the filing organization file Form				
	Enter the names, addresses and er				
-	made payments. For each organiza contributions received that were propolitical action committee (PAC). If	tion listed, enter the amount pa omptly and directly delivered to	id from the filing organi a separate political org	zation's funds. Also enter t janization, such as a separ	he amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
				1	

Schedule C (Form 990 or 990-EZ) 2014  Part II-A   Complete if the organization 501(h)).	SHELTE ganizatio	R PAR n is exei	TNERSHIP, I mpt under sectio	<u>NC .</u> n 501(c)(3) and fil	95-3 ed Form 5768 (e	976214 Page 2 lection under
	ation belong	s to an affi	liated group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and sha	-		=		•	
. — ' '			nd "limited control" pro	visions apply.		
Lim	its on Lobb ditures" me		nditures ınts paid or incurred.		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	luence nubli	c oninion (	grass roots lobbying)			
b Total lobbying expenditures to infl	-		•			
c Total lobbying expenditures (add						
d Other exempt purpose expenditur						
e Total exempt purpose expenditure						
f Lobbying nontaxable amount. Ent						
If the amount on line 1e, column (a)			bying nontaxable am			
Not over \$500,000	01 (0) 10.		the amount on line 1e	oure is.		
Over \$500,000 but not over \$1,00	000		00 plus 15% of the exc	ess over \$500 000		
Over \$1,000,000 but not over \$1,5			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17						
Over \$17,000,000	,000,000	\$225,000 plus 5% of the excess over \$1,500,000. \$1,000,000.				
0001 417,000,000		Ψ1,000,				
g Grassroots nontaxable amount (ei h Subtract line 1g from line 1a. If zei i Subtract line 1f from line 1c. If zen	ro or less, er o or less, en	nter -0 ter -0				
j If there is an amount other than ze	ero on either	line 1h or	line 1i, did the organiz	ation file Form 4720	<del>-</del>	
reporting section 4911 tax for this					L	Yes No
(Some organizations t	hat made a	section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all	of the five columns b	elow.
	Lobby	ying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount				NO PROGRESSION OF THE CONTROL		
b Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

## Schedule C (Form 990 or 990-EZ) 2014 SHELTER PARTNERSHIP, INC. 95-3976214 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description		a)	(b)	
of the lobbying activity.	Yes	No	Ame	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter	PRINCE SALEDIA			
or referendum, through the use of:				
a Volunteers?		X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			jerekin
c Media advertisements?		X		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?	i	X		
f Grants to other organizations for lobbying purposes?		Х		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		Х		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i Other activities?	7.7			2,000.
j Total. Add lines 1c through 1i	12.000-1-00-0-0-0	Aca, al ex		2,000.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		y de pining
b If "Yes," enter the amount of any tax incurred under section 4912	51505145.051001151			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), sec		(5), or se	ction	
501(c)(6).	` '			
5-1(-)(-)/-			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
Figure 3003 (articles) all (30% of filoro) adds received florideadelible by members:				J
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> </ul>		2 3	ction	
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> </ul>	tion 501(c)	2 3 (5), or se		ne 3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), sec</li> </ul>	tion 501(c)	2 3 (5), or se		ne 3, is
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	tion 501(c) ed "No," Ol	2 3 (5), or se R (b) Par		ne 3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> </ul>	tion 501(c) ed "No," Ol	2 3 (5), or se R (b) Par		ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	tion 501(c) ed "No," Ol	2 3 (5), or se R (b) Par		ne 3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carry over lobbying and political expenditures from the prior year?         Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."     </li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pol expenses for which the section 527(f) tax was paid).</li> </ul>	tion 501(c) ed "No," Ol	2 3 (5), or se R (b) Par		ne 3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carry over lobbying and political expenditures from the prior year?         Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."     </li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pol expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> </ul>	tion 501(c) ed "No," Ol	2 3 (5), or se R (b) Par		ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	tion 501(c) ed "No," Ol	2 3 (5), or se R (b) Par		ne 3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carry over lobbying and political expenditures from the prior year?         Part III-B             Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."     </li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> </ul>	tion 501(c) ed "No," Ol itical	2 3 (5), or se R (b) Par 1 2a 2b 2c		ne 3, is
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	tion 501(c) ed "No," Ol	2 3 (5), or se R (b) Par 1 2a 2b 2c		ne 3, is
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for the section 162(e) dues	tion 501(c) ed "No," Ol itical	2 3 (5), or se R (b) Par 1 2a 2b 2c		ne 3, is
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues lf notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the educes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	tion 501(c) ed "No," Ol itical excess d political	2 3 (5), or se R (b) Par 1 2a 2b 2c 3		ne 3, is
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carry over lobbying and political expenditures from the prior year?         Part III-B             Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."     </li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid).</li> <li>Current year</li> <li>Carryover from last year</li> <li>Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the edges the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?</li> </ul>	tion 501(c) ed "No," Ol itical excess d political	2 3 (5), or se R (b) Par 1 2a 2b 2c 3		ne 3, is
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## **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Inspection

Employer identification number

l ma	SHELTER PARTNERSHIP, INC	. Oller Similer Francis	95-39/6214
Pa	rt 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) l	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 fu	ınds
	are the organization's property, subject to the organization's exclusive le	egal control?	Yes
6	Did the organization inform all grantees, donors, and donor advisors in w	riting that grant funds can be used	only
	for charitable purposes and not for the benefit of the donor or donor adv	risor, or for any other purpose confe	erring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the organization a	nswered "Yes" to Form 990, Part IV	/, line 7.
1	Purpose(s) of conservation easements held by the organization (check a	il that apply).	
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historical	ly important land area
	Protection of natural habitat	Preservation of a certified l	nistoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conserv	ration contribution in the form of a c	conservation easement on the last
	day of the tax year.		
	,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		1 5
С	Number of conservation easements on a certified historic structure inclu		
d	Number of conservation easements included in (c) acquired after 8/17/0		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, extin		nization during the tax
	year >		
4	Number of states where property subject to conservation easement is lo	cated >	
5	Does the organization have a written policy regarding the periodic monitor	**	
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforci		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing co	onservation easements during the y	vear ▶ \$
8	Does each conservation easement reported on line 2(d) above satisfy the		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation easemer	nts in its revenue and expense state	ement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's finance	ial statements that describes the o	rganization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections of Art, His	torical 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 a	and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, edu	cation, or research in furtherance o	f public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these it	ems.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to r	eport 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 se	ervice, provide the following amounts
	relating to these items:		
	(i) Revenue included in Form 990, Part VIII, line 1		▶ \$
2	If the organization received or held works of art, historical treasures, or o		
	the following amounts required to be reported under SFAS 116 (ASC 95		
а	Revenue included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990, Part X		

Sche	dule D (Form 990) 2014 SHELTER	PARTNERSH	ΊΡ,	INC.				95-39	76214	. Pag	ge <b>2</b>
Pa	rt III Organizations Maintaining C	Collections of A	rt, His	storical Tr	reasures,	or Othe	r Simil	ar Asse	ts(contin	ued)	
3	Using the organization's acquisition, access	ion, and other record	ds, che	ck any of the	following tha	at are a sig	nificant	use of its	collection	items	
	(check all that apply):										
а	Public exhibition	(	d	Loan or exc	change progra	ams					
b	Scholarly research	•	, 🔲	Other							
С	Preservation for future generations										
4	Provide a description of the organization's c	ollections and expla	in how t	they further t	the organizati	ion's exen	not purpo	ose in Par	t XIII.		
5	During the year, did the organization solicit of	or receive donations	of art, h	nistorical trea	asures, or oth	er similar	assets				
	to be sold to raise funds rather than to be m								Yes		No
Pa	t IV Escrow and Custodial Arran	<b>igements.</b> Compl	ete if th	e organizatio	on answered	"Yes" to F	orm 990	, Part IV,	line 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization an agent, trustee, custod	lian or other interme	diary fo	r contributio	ns or other as	sets not i	ncluded		_		
	on Form 990, Part X?						,	L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table:							
									Amount		
С	Beginning balance						. 1c				
d	Additions during the year		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •			1d				
е	Distributions during the year						1e				<u>_</u>
f	Ending balance										
	Did the organization include an amount on F						y?	L	Yes		No
1 1 2 11 11	If "Yes," explain the arrangement in Part XIII										
Pa	t V Endowment Funds. Complete								Į		
		(a) Current year	(b) l	Prior year	(c) Two year	rs back (	d) Three y	rears back	(e) Four	years b	ack_
1a	Beginning of year balance										
b	Contributions										
C	Net investment earnings, gains, and losses		<b> </b>								
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur			ig, column (a	a)) held as:						
a	Board designated or quasi-endowment		_%								
	Permanent endowment	%									
С	Temporarily restricted endowment	%									
_	The percentages in lines 2a, 2b, and 2c should be a sh	•	. ,			1.6 11					
за	Are there endowment funds not in the posse	ession of the organiz	ation th	at are neid a	ına aamınıste	erea for the	e organiz	ation	Г		
	by: (i) unrelated organizations									res	No
	17										—
h	(ii) related organizations										
Δ Ω	Describe in Part XIII the intended uses of the				***************************************				3b		
Par	t VI Land, Buildings, and Equipm		WINGIL	iuius.	<del>.</del>						
<u>145.4.3378</u>	Complete if the organization answere		Part I\	/ line 11a S	see Form 990	Part X lir	ne 10				
	Description of property	(a) Cost or o		1	orother		cumulate	d	(d) Book	value	
	boompton or property	basis (investr		, , ,	(other)		eciation	۳	(u) Dook	vaido	
19	Land		7		• •						
	Buildings			8.82	9,461.	2 1	23,68	36-	6,705	.77	5
	Leasehold improvements			0,02	,	<u> </u>			-,,,,,	,	<del></del>
	Equipment		•	32	5,367.	3	05,53	37.	19	,83	0.
	Other	)					,			,	<u>- •</u>
	Add lines 1a through 1e. (Column (d) must e		X, colui	mn (B), line 1	10c.)			<b>&gt;</b>	6,725	,60	5.

, Schedul	, e D (Form 990) 2014 <b>SHELTER PAR</b> 5	NERSHIP.	INC.	95-	-3976214 Page
	/II Investments - Other Securities.				•
	Complete if the organization answered "Yes" t				
	cription of security or category (including name of security)	(b) Book value	(c) Method of	valuation: Cost or end-	of year market value
(1) Fina	ncial derivatives				
	ely-held equity interests				
(3) Othe	er				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)				· · · · · · · · · · · · · · · · · · ·	
(H)					
	ol. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part \	/III Investments - Program Related.				
	Complete if the organization answered "Yes" t				
	(a) Description of investment	(b) Book value	(c) Method of	valuation: Cost or end	of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Co	ol. (b) must equal Form 990, Part X, col. (B) line 13.) 🕨				
Part I					
	Complete if the organization answered "Yes" t		, line 11d. See Form 990	Part X, line 15.	
	(a) [	Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (C	Column (b) must equal Form 990, Part X, col. (B) line  Other Liabilities.	15.)		<u>▶l</u>	
	Complete if the organization answered "Yes" t	o Form 990, Part IV		m 990, Part X, line 25.	
1.	(a) Description of liability		(b) Book value		
(1)	Federal income taxes				
(2)					

(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

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

#### PART X, LINE 2:

SHELTER PARTNERSHIP, INC. IS A TAX-EXEMPT CORPORATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 23701(D) OF THE REVENUE AND TAXATION CODE OF THE STATE OF CALIFORNIA. SHELTER PARTNERSHIP, INC. DOES NOT HAVE ANY REVENUE WHICH IT BELIEVES WOULD SUBJECT IT TO UNRELATED BUSINESS INCOME TAXES. MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN AND HAS CONCLUDED THAT AS OF JUNE 30, 2015, THERE WERE NO UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN. ACCORDINGLY, NO INTEREST OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS WERE ACCRUED IN THE FINANCIAL STATEMENTS. AT JUNE 30, 2015, THE OPEN TAX YEARS FOR SHELTER PARTNERSHIP, INC. WERE 2010 TO 2014.

Schedule D (Form 990) 2014 Part XIII Supplemental Info	SHELTER	PARTNERSHIP,	INC.	95-3976214 Page 5
Part XIII Supplemental Info	ormation (contin	ued)		
			······································	

#### **SCHEDULE G**

(Form 990 or 990-EZ)

Name of the organization

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.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Inspection ► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990. Employer identification number

SHELTER	<u>PARTNERSHIP, INC.</u>				95-3976	214
Part I Fundraising Activities required to complete this part	. Complete if the organization answert.	ered "\	es" to	Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
<ol> <li>Indicate whether the organization rais a Mail solicitations</li> <li>Mail solicitations</li> <li>Internet and email solicitations</li> <li>Phone solicitations</li> <li>In-person solicitations</li> <li>Did the organization have a written of key employees listed in Form 990, F</li> <li>If "Yes," list the ten highest paid ind compensated at least \$5,000 by the</li> </ol>	e Solicita f Solicita g Special  or oral agreement with any individual cart VII) or entity in connection with prividuals or entities (fundraisers) purs	tion of tion of fundra (inclu- profess	non-g gover aising ding o ional f	overnment grants rnment grants events fficers, directors, true fundraising services?	stees or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fund have of or cor contrib	Did raiser ustody atrol of utions?	(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			
·						
Total			<b>•</b>			
<ol><li>List all states in which the organization or licensing.</li></ol>	n is registered or licensed to solicit o	contrib	utions	or has been notified	it is exempt from re	gistration
· · · · · · · · · · · · · · · · · · ·						

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. (c) Other events (a) Event #1 (b) Event #2 (d) Total events FRITZ ANNUAL (add col. (a) through DINNER HONORARIUM col. (c)) (total number) (event type) (event type) 352,392. 5,850. 2,350 360,592. Gross receipts 2,350 273,310. 5,850. 281,510. 2 Less: Contributions 79.082 79,082. Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Expenses Rent/facility costs 48,899. 48,899. Direct Food and beverages 8 Entertainment \_\_\_\_\_ 30,183 Other direct expenses 30,183. 79,082. 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) 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. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue Cash prizes Direct Expenses Noncash prizes Rent/facility costs 5 Other direct expenses ..... Yes Yes Yes 6 Volunteer labor 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? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain: \_\_\_

Schedule G (Form 990 or 990-EZ) 2014 SHELTER PARTNERSHIP, INC.

95-3976214 Page 2

Sch	edule G (Form 990 or 990-EZ) 2014 SHELTER PARTNERSHIP, INC. 95-	3976	214	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
	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 activity conducted in:			
a	The organization's facility	13a		%
b	An outside facility	13b		9/
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			
	Doddiption of 301 vices provided P			
			****	
	Director/officer Employee Independent contractor			
	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	<b></b> ,	Yes	☐ No
h	retain the state gaming license?  Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	——	103	
D	organization's own exempt activities during the tax year > \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III,	lines 9,	9b, 10	b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	·		
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Schedule G	(Form 990 or 990-EZ)	SHELTER	PARTNERSHIP,	INC.	95-3976214 Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Info	rmation (contin	ued)		
	1100				

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

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

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

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

OIMB NO. 1343-004/	2014	Open to Public	Inspection
		· · · .	10

No

Employer identification number 95-3976214 X Yes criteria used to award the grants or 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 INC SHELTER PARTNERSHIP, Part I General Information on Grants and Assistance Name of the organization

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. Com recibient that received more than \$5 000 Part II can be dunitizated if additional snace is needed.	Domestic Organ		c Governments. Co	omplete if the orga	anization answered "Y	<b>Domestic Governments.</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any additional space is needed.	IV, line 21, for any
1 (a) Name and address of organization or government	(a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, PMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
1736 FAMILY CRISIS CENTER 21707 HAWTHORNE BLVD., #300 TORRANCE, CA 90503	95-3989251	<u>501(C)(3)</u>	0.	24,611.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
A COMMUNITY OF FRIENDS 9130 S. FIGUEROA STREET LOS ANGELES, CA 90003	95-4203106	501(C)(3)	O	68,084.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
A NEW WAY OF LIFE P.O. BOX 875288 LOS ANGELES, CA 90002	95-4782503	501(c)(3)	0	5,943.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ACCESS CENTER OPCC 1453 16TH STREET SANTA MONICA, CA 90404	95-6143865	501(C)(3)	0	31,949.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ACCESS CENTER PATH 340 N. MADISON AVENUE LOS ANGELES, CA 90004	95-3950196	501(C)(3)	0	11,580.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
AFFORDABLE LIVING FOR THE AGING, INC 2029 CENTURY PARK EAST, STE.4393 - LOS ANGELES, CA 90067	95-3301874	501(0)(3)	o	FAIR 23 046, VALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
<ul> <li>2 Enter total number of section 501(c)(3) and government organizations</li> <li>3 Enter total number of other organizations listed in the line 1 table</li> </ul>	and government o	suo	listed in the line 1 table				209.

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

Schedule I (Form 990) (2014)

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	States (Schedule I (Form 990), Part II.)	
INC.	ments and Organizations in the United	
ARTNERSHIP,	Assistance to Goverr	
SHELTER PA	of Grants and Other	
Schedule I (Form 990)	Part II Continuation	

Taking Committee of Carles Assistance to Covermients and Organizations in the Office Stockhold (Commission), Fall in	Assistance to do	Veriments and Organ	וובמנוסווא ווו מופ ס	inco salates (soli	due I (Folia 890), Fai	(t II.)	
(a) Name and address of organization or government	(a)	(c) INC section if applicable	(a) Amount or 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
AIDS PROJECT LOS ANGELES 611 SOUTH KINGSLEY DRIVE LOS ANGELES, CA 90005	95-3842506	501(C)(3)	0.	57,439.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
AIDS SERVICE CENTER 65 N. RAYMOND AVENUE, STE.240 PASADENA, CA 91103	95-4165358	501(C)(3)	.0	20 841.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ALCOHOLISM CENTER FOR WOMEN 1147 SOUTH ALVARADO STREET LOS ANGELES, CA 90006	23-7428537	501(C)(3)		49,093.	FAIR MARKET VALUE	VARLOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ALEGRIA THE SALVATION ARMY 2737 SUNSET BLVD. LOS <u>ANGELES</u> , CA 90026	94-1156347	501(C)(3)	0	FAIR 16,763.VALUE	FAIR MARKET	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ALEXANDRIA HOUSE 426 S. ALEXANDRIA AVENUE LOS ANGELES, CA 90020	95-4809755	501(C)(3)	0	32,519.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ALL PEOPLE'S CHRISTIAN CENTER 822 EAST 20TH STREET LOS ANGELES, CA 90011	95-2669400	501(C)(3)	0	15,357.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
AMISTAD DEL LOS ANGELES AMITY FOUNDATION - 3745 S. GRAND AVENUE - LOS ANGELES, CA 90007	77-0418201	S01(C)(3)	0.	45,577.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ANGEL'S FLIGHT CATHOLIC CHARITIES OF LOS ANGELES - 357 S. WESTLAKE AVENUE - LOS ANGELES CA 90057	85-1690973	501(C)(3)	0	44,064.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE ROMELESS.
AVIVA FAMILY AND CHILDREN'S SERVICES - 7120 FRANKLIN AVENUE - LOS ANGELES, CA 90046	95-1693616	501(C)(3)	0	FAIR 22,932,VALUE	FAIR MARKET VALJUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
							Schedule I (Form 990)

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Schedule I (Form 990) SHELTER PARTNERSHIP, INC.  Part II   Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	PARTNERSHIP,	P, INC.	nizations in the Ur	ited States (Sche	edule I (Form 990), Par		95-3976214 Page 1-
(a) Name and address of organization or government	( <b>b)</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
B.R.I.D.G.E.S., INC. 1977 GAREY AVENUE, STE.6 POMONA, CA 91767	95-3077722	S01(C)(3)	0	10,413.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BABYZBABY 6435 WILSHIRB BLVD. LOS ANGELES, CA 90048	95-4302067	501(c)(3)	0	9 000	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BEACON HOUSE ASSOC, OF SAN PEDRO 1003 SOUTH BEACON ST. SAN PEDRO, CA 90731	23-7376148	501(C)(3)	0	37,369,	FAIR MARKET 369,VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BEACON LIGHT MISSION SOUTHERN CALIFORNIA FLOATING CHRISTIAN ENDEAVOR ASSN 525 N. BROAD AVENUE - WILMINGTON, CA 90744	95-1661697	501(C)(3)	0	11,907.	FAIR MARKET .VALUE	VARIOUS GOODS	TO ASSIST THE BNTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BEHAVIORAL HEALTH SERVICES, INC. 15519 CRENSHAW BLVD. GARDENA, CA 90249	95-2838006	S01(C)(3)	.0	12,619.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BELL SHELTER THE SALVATION ARMY 5600 RICKENBACKER RD, BLDG, 2A-B <u>BELL, CA</u> 90201	95-1656360	501(C)(3)	0	92,653.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BEYOND SHELTER / PATH 5101 SOUTH BROADWAY LOS ANGELES, CA 90037	95-4197075	501(C)(3)	0	34,080.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BIBLE TABERNACLE 1761 WASHINGTON WAY VENICE, CA 90291	95-2978913	501(C)(3)	ó	73,661.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BIENESTAR HUMAN SERVICES, INC. 5326 E. BEVERLY BLVD. LOS ANGELES, CA 90022	95-4505737	501(C)(3)	.0	FAIR 74,617.VALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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Schedule I (Form 990) SHELTER PARTNERSHIP, INC.

Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

ratin Continuation of drafts and other Assistance to Governments and Organizations in the Onited States (Schedule (Form 990), Fat III,	Assistance to Go	vernments and Organ	izations in the Un	ned States (Sche	dule I (Form 990), Far	ĭ II.)	
(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
BIENVENIDOS CHILDEN'S CENTER, INC. 316 WEST 2ND STREET, SUITE 800 LOS ANGELES, CA 90012	95-4042883	501(C)(3)	.0	102,654.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BLUE BUTTERFLY VILLAGE VOLUNTEERS OF AMERICA - 1556 W. PALOS VERDES NORTH - SAN PEDRO, CA 90710	95-1691330	501(C)(3)	0	22,322,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BRIDGE TO HOME P.O. BOX 802978 SANTA CLARITA, CA 91380	95-4587823	501(C)(3)	*0	14,690.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CASA GUADALUPE LOS ANGELES HOUSE OF RUTH - 605 N. CUMMINGS STREET - LOS ANGELES, CA 90033	95-3411454	501(C)(3)	0	16,546.	PAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CASA YOUTH SHELTER 10911 REAGAN STREET LOS ALAMITOS, CA 90720	95-3218061	501(C)(3)	0	32,396.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CATHOLIC RAINBOW OUTREACH 11419 CARMENITA WHITTIER, CA 90605	95-3096644	501(C)(3)	•0	69,219.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CENTER FOR PACIFIC ASIAN FAMILIES 543 NORTH FAIRFAX AVE., #108 LOS ANGELES, CA 90036	95-3532351	501(C)(3)	0	7, 337.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CHICANA SERVICE ACTION CENTER 315 W. 9TH ST. STE #101 LOS ANGELES, CA 90015	95-2770796	501(C)(3)	0	40,464.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CHILD & FAMILY CENTER 21545 CENTE POINTE PKWY SANTA CLARITA, CA 91350	95-4705370	501(C)(3)	0.	FAIR 27,157,VALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
							Schedule I (Form 990)

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Schedule I (Form 990) SHELTER PARTNERSHIP, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	PARTNERSHIP	P, INC.	in the Ur	ited States (Sch	odrija I (Form 990). Par		95-3976214 Page 1-
(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
CHILDHELP, INC. 14700 MANZANITA ROAD BEAUMONT, CA 92223	95-2884608	501(C)(3)	0.	67,797.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CHILDREN OF THE NIGHT 14530 SYLVAN STREET VAN NUYS, CA. 91411	95-3130408	501(C)(3)	O	20,216.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CHILDREN'S INSTITUTE, INC. 2121 W. TEMPLE STREET LOS ANGELES, CA 90026	95-1641424	501(C)(3)	0	34,183.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CHILDREN'S BUREAU OF SOUTHERN CA 1910 MAGNOLIA AVENUE LOS ANGELES, CA 90007	95-1690975	501(C)(3)	0	18,376.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CHILDREN'S HUNGER FUND 13931 BALBOA BLVD. SYLMAR, CA 91342	95-4335462	501(C)(3)	0	142,220,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CHOISS PERMANENT SUPPORTIVE HOUSING ALLIANCE FOR HOUSING AND HEALING - 825 COLORADO BLVD., STE.100 - LOS ANGELES. CA 90041	95-4147364	501(C)(3)	,0	21,976.	FAIR MARKET 976.VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CHRISTIAN FOOD CENTER MCCOBB MINISTRIES - 1101 E. WASHINGTON BLVD LOS ANGELES, CA 90021	95-4049610	501(C)(3)	0	423,707.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CHRISTIAN OUTREACH APPEAL 515 EAST 3RD STREET LONG BEACH, CA 90802	33-0008271	501(C)(3)	0	157,203.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CHRYSALIS CENTER 516 SOUTH MAIN ST. LOS ANGELES, CA 90013	95-3972624	501(C)(3)	0.	50,732.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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INC.	ments and Organizations in the United States (Sched
SHELTER PARTNERSHIP, INC	of Grants and Other Assistance to Govern
Schedule I (Form 990)	Part II Continuation of (

(a) Name and address of organization or government	( <b>b</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
CITY OF LOS ANGELES OFFICE OF CONTROLLER - 200 N. MAIN STREET, ROOM 1200 - LOS ANGELES, CA 90012	95-8000735	501(C)(3)	0	42,058,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CLARE FOUNDATION 909 PICO BOULEVARD SANTA MONICA, CA 90405	23-7076166	501(C)(3)	0	7,343.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
COALITION FOR RESPONSIBLE COMMUNITY DEVELOPMENT - 3101 S. GRAND AVENUE - LOS ANGELES, CA 90007	20-2445113	501(C)(3)	0	32,622.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
COMMON GROUNDVENICE FAMILY CLINIC 2401 LINCOLN BLVD. SANTA MONICA, CA 90405	95-2769432	501(C)(3)	0	9,331.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
COMMUNITY ENGAGEMENT FOUNDATION, INC P.O. BOX 91335 - LOS ANGELES, CA 90009	45-1366233	501(C)(3)	0	9,289,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
COMMUNIDAD CESAR CHAVEZ LA FAMILY HOUSING - 207 NORTH BREED STREET - LOS ANGELES, CA 90033	95-3920560	501(C)(3)	0	42,375.	FAIR MARKET VALUE	VARLOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CORENERSTONE SAN FERNANDO VALLEY COMMUNITY MENTAL HEALTH CTR, INC 14660 OXNARD STREET - VAN NUYS, CA.91411	95-6194487	501(C)(3)	0	16,098.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
COVENANT HOUSE 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	13-3391210	501(C)(3)	0	28, 447.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CROSSROADS, INC. P.O. BOX 15 CLAREMONT, CA 91711	95-2925985	501(C)(3)	0	FAIR 8,186.VALUE	FAIR MARKET VALUE	WARLOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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6214 Page 1	(h) Purpose of grant or assistance	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE GOMELESS.	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE
95-3976214		TO ASSIST RESOURCES HOMELESS.	TO ASSIS' RESOURCE: HOMELESS	TO ASSIST RESOURCES HOMELESS.	TO ASSIS' RESOURCE: HOMELESS	TO ASSIS' RESOURCE
	(g) Description of non-cash assistance	VARIOUS GOODS	VARIOUS GOODS	VARIOUS GOODS	VARIOUS GOODS	
edule I (Form 990), Pa	(f) Method of valuation (book, FMV, appraisal, other)	FAIR MARKET	FAIR MARKET VALUE	FAIR MARKET VALUE	FAIR MARKET VALUE	FAIR MARKET
i <b>ted States</b> (Sche	(e) Amount of non-cash assistance	6,682.	50 031	FAIR : 110,005,VALUE	90,823.	FALR
izations in the Ur	(d) Amount of cash grant	0	0	0	0	
P, INC.	(c) IRC section if applicable	501(C)(3)	501(C)(3)	501(C)(3)	501(C)(3)	
ARTNERSHI Assistance to Go	(b) EIN	45-2443162	95-4232535	95-4313200	95-1816023	
Schedule I (Form 990) SHELTER PARTNERSHIP, INC.   Part II   Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	(a) Name and address of organization or government	DANA MIDDLE SCHOOL THE LOS ANGELES FUN FOR PUBLIC EDUCATION - 1501 S. CABRILLO AVENUE - SAN PEDRO, CA 90731	DAVID & MARGARET HOME 1350 THIRD STREET LA VERNE CA 91750	DEEP GREEN HOUSING & COMMUNITY DEVELOPMENT - 400 W. 9TH STREET, SUITE 100 - LOS ANGELES, CA 90015	DIDI HIRSCH COMM. MENTAL HEALTH CTR 4760 S. SEPULVEDA BLVD CULVER CITY, CA 90230	DOOR OF HOPE P.O. BOX 90455

Schedule I (Form 990) HOMELESS.

TO ASSIST THE ENTITY WITH

RESOURCES TO SUPPORT THE

VARIOUS GOODS

FAIR MARKET

5 708 VALUE

95-1792275 501(C)(3)

TO ASSIST THE ENTITY WITH

RESOURCES TO SUPPORT THE

HOMELESS.

VARIOUS GOODS

AIR MARKET

VALUE

84,459

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501(C)(3)

95-1803686

EAST HOLLYWOOD TOY GIVEAWAY

LOS ANGELES CA 90028

4903 FOUNTAIN AVENUE

LOS ANGELES, CA 90026

2301 BELLEVUE AVENUE

DREAM CENTER

TO ASSIST THE ENTITY WITH

RESOURCES TO SUPPORT THE

HOMELESS.

ARIOUS GOODS

FAIR MARKET

VALUE

10,553

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501(C)(3)

95-1691330

DOWNTOWN DROP IN CENTER VOLUNTEERS OF AMERICA - 628 S. SAN JULIAN STREET - LOS ANGELES, CA 90014 TO ASSIST THE ENTITY WITH

RESOURCES TO SUPPORT THE

HOMELESS.

ARIOUS GOODS

AIR MARKET

VALUE

56,276

501(c)(3)

31-1597223

442 S. SAN PEDRO STREET DOWNTOWN WOMEN'S CENTER

LOS ANGELES, CA 90013

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Schedule   (Form 990) SHELTER P.	PARTNERSHIP,	P, INC.					95-3976214 Page 1-
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the Ur	ited States (Sch	edule I (Form 990), Pa	(ii)	***************************************
(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
EAST SAN GABRIEL VALLEY COALITION FOR THE HOMELESS - 1345 TURNBALL CANYON ROAD - HACIENDA HTS, CA 91715	95-4508436	501(C)(3)	0	86,117.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
EAST VALLEY BOYS & GIRLS CLUB 503 N. GLENDORA AVE. LA PUENTE, CA 91744	95-2935952	501(c)(3)	0.	6,164.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ECUMENICAL COUNCIL OF PASADENA AREA CHURCHES - P.O. BOX 41125 - PASADENA, CA 91114	95-1644608	501(C)(3)	0	10,053,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BLIZABETH HOUSE 760 SANTA BARBARA STREET PASADENA, CA 91101	95-4451243	501(C)(3)	0	36,846.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
EMERGENCY HOUSING PROGRAM ASCENCIA 1851 TYBURN STREET GLENDALE, CA 91204	20-4233822	501(C)(3)	0	5,247.	FAIR MARKET VALUB	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
EMPLOYMENT SUCCESS PROGRAM WOMEN HELPING WOMEN - 1800 EAST MCFADDEN AVENUE. STE. 1A - SANTA ANA, CA 92705	33-0576900	S01(C)(3)	0	22,426.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ESSENCE OF LIGHT 744 WEST 111TH STREET LOS ANGELES, CA 90044	80-0069684	501(C)(3)	0	60,975,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ETTIE LEE YOUTH & FAMILY SERVICES 5146 N. MAINE AVENUE BALDWIN PARK, CA 91706	95-1949862	501(C)(3)	0	28,969	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
EULA'S HOUSE 220 W. 49TH STREET LOS ANGELES, CA 90037	20-8198574	501(C)(3)	0	FAIR . 69,714.VALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS,

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INC.	rnments and Organ	
SHELTER PARTNERSHIP,	ssistance to Govern	
SHELTER P2	of Grants and Other A	
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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule   (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the Ur.	nted States (SCR	edule I (Form 990), Pai	) H ::)	
(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
FACTS EDUCATION FUND 1137 E. REDONDO BLVD. INGLEWOOD, CA 90302	75-2971264	501(C)(3)	0	9 9 9 9 9	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
TENC SWISE 827 SS C	95-0691013	501(C)(3)	.0		MARKET	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FAMILY VIOLENCE PROJECT - TAMAR HOUSEJEWISH FAMILY SERVICES LOS ANGELES - 13949 VENTURA BLVD, #320 - SHERMAN OAKS, CA 91423	95-0691013	501(C)(3)	0	593	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FILIPINO AMERICAN SERVICE GROUP 135 NORTH PARK VIEW STREET LOS ANGELES, CA 90026	95-3714064	501(c)(3)	°	71,857.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FIRST TO SERVE, INC. 1017 W. 50TH STREET LOS ANGELES, CA 90037	91-2167028	501(C)(3)	0	14,310.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FLORENCE CRITTENTON SERVICES OF ORANGE COUNTY - 801 E. CHAPMAN AVENUE. SUITE 203 - FULLERTON, CA 92831	95-2492427	501(C)(3)	0	11,710.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FLOSSIE LEWIS CENTER BEHAVIORAL HEALTH SERVICES - 351 E. 6TH STREET - LONG BEACH, CA 90802	95-2838006	501(C)(3)	0	66,222.	FAIR MARKET VALUE	VARLOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FOOTHILL FAMILY SERVICE 2500 EAST FOOTHILL BLVD. #300 PASADENA, CA 91107	95-1690990	501(0)(3)	0	14,986.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FOSTER CARE COUNTS 11111 SANTA MONIA BLVD. SUITE 1650 LOS ANGELES, CA 90025	45-4619493	501(C)(3)	0	FAIR 319,696,VALUE	FAIR MARKET.	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS
							Schedule I (Form 990)

Schedule I (Form 990) SHELTER PARTNERSHIP, INC. Part II Continuation of Grants and Organizations in the United States (Schedule I (Form 990),	PARTNERSHIP er Assistance to Gove	P, INC. vernments and Organ	nizations in the U	nited States (Scho		9 Part II.)	15-3976214 Page 1
(a) Name and address of organization or government	(a) 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
FOSTER CHILDREN'S RESOURCE CENTER 19441 BUSINESS CENTER DRIVE #110 NORTHRIDGE, CA 91324	95-1641960	501(C)(3)	•0	16,910.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FRED JORDAN MISSIONS P.O. BOX 12345 COVINA, CA 91352	95-6000110	501(C)(3)	0	138,080.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FREEHAB THE TEEN PROJECT 8140 SUNLAND BLVD. SUN VALLEY, CA 91352	30-0421837	S01(C)(3)	0	32,801.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
GATEWAYS HOSPITAL & MENTAL HEALTH CENTER - 444 N. HOOVER STREET - LOS ANGELES, CA 90004	95-1691011	501(C)(3)	0.	8,333.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
GLENDALE CORPS THE SALVATION ARMY 320 W. WINDSOR ROAD GLENDALE. CA 91204	95-1156347	5 <u>01(</u> C)(3)	0	9.270.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
GOOD SHEPARD CENTER FOR HOMELESS WOMEN CATHOLIC CHARITIES OF LOS ANGELES - 1671 BEVERLY BLVD LOS ANGELES, CA 90026	95-1690973	501(C)(3)	0	15,241	FAIR MARKET	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
GOSPEL MISSIONS OF AMERICA P.O. BOX 8473 ROWLAND HEIGHTS, CA 91748	95-4828635	501(C)(3)	O	7,142	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
GRACE RESCUE CENTER, INC. 44611 YUCCA AVENUE LANCASTER, CA 93534	95-4309251	501(C)(3)	0	27 928	FAIR MARKET.	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
GRAMBRCY HOUSING GROUP 1824 4TH AVENUE LOS ANGELES, CA 90019	95-4396861	501(C)(3)	0	7,374	FAIR MARKET 7,374,YALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.  Schedule!(Form 990)

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Schedule   (Form 990) SHELTER PARTNERSHIP, INC.	Part II   Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II

(a) Name and address of organization or government	(a)	(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
HARBOR INTERFAITH SHELTER 670 w. 9TH STREET SAN PEDRO, CA 90731	33-0031099	501(C)(3)	0	61,577.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HARBOR VIEW HOUSE, INC. 921 SOUTH BEACON STREET SAN PEDRO, CA 90731	95-2391226	501(C)(3)	*0	10,311.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HARVEST HOME 2118 WILSHIRE BLVD. PMB 358 SANTA MONICA, CA 90403	95-4079490	501(C)(3)	0.	10,552.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HATHAWAY - SYCAMORES CHILD FAMILY SERVICES - 840 N, AVENUE 66 - LOS ANGELES, CA 90042	95-1691005	501(C)(3)	0	15,873.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HAVEN HILLS, INC. P.O. BOX 260 CANOGA PARK, CA 91305	95-3196247	501(C)(3)	*0	41,616.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HAVEN HOUSE JEWISH / FAMILY SERVICES LA - P.O. BOX 50007 - PASADENA, CA 91115	95-1691013	501(C)(3)	0	24,810.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HEART OF COMPASSION 600 S. MAPLE AVENUE MONTEBELLO, CA 90640	42-1573926	501(C)(3)	0	953,351.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HILLSIDES 940 AVENUE 6 PASADENA_CA 91105	95-1644002	501(C)(3)	0	12,568,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HILLVIEW MENTAL HEALTH CTR. 12450 VAN NUYS BLVD. #200 PACOIMA, CA 91331	95-3928411	501(C)(3)	ő	FAIR 19,180.VALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.  Schedule I (Form 990)

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95-39 Schedule I (Form 990) SHELTER PARTNERSHIP, INC.

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	( <b>d</b> ) 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
HOLLYWOOD COMMUNITY HOUSING CORPORATION - 5020 WEST SANTA MONICA BLVD HOLLYWOOD, CA 90029	95-4198215	501(C)(3)	0	63,084.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HOMELESS HEALTH CARE LOS ANGELES 2330 BEVERLY BLVD. LOS ANGELES, CA 90028	95-4074970	501(C)(3)	,0	66,557.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HOOK UP RESOURCE CENTER 923 W. WHITTIER BLVD. WHITTIER, CA 90640	45-5004342	S01(c)(3)	0.	FAIR 41,595,VALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HOPE OF THE VALLEY RESCUE MISSION 8165 SAN FERNANDO ROAD SUN VALLEY, CA 91352	27-2053273	501(C)(3)	0	FAIR 203,334.VALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HOFE THROUGH HOUSING FOUNDATION/NCORE - 9065 HAVEN AVENUE, STE.100 - RANCHO CUCAMONGA, CA 91730	33-0802554	501(C)(3)	o	6,141.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS,
HOUSE OF MERCY 812 N. ALVARADO ST. LOS ANGELES, CA 90026	95-4102800	S01(C)(3)	0	9.341.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HOUSE OF RUTH, CLAREMONT P.O. BOX 459 CLAREMONT, CA 91711	95-3276033	501(C)(3)	0	37,327.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HUNTINGTON PARK THE SALVATION ARMY 2965 E. GAGE AVE. HUNTINGTON PARK, CA 90255	95-1156347	501(C)(3)	0.	238,628.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
IMMANUEL HOUSING, INC. 1800 E. 85TH STREET LOS ANGELES, CA 90001	95-4502941	501(0)(3)	0	FAIR 80,589.WALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
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Schedule   (Form 990) SHELTER PARTNERSHIP, INC.  Part II   Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule   (Form 990), Part II.)	PARTNERSHIP,	P, INC.	nizations in the Ur	nited States (Sche	edule I (Form 990), Pa		95-3976214 Page 1
(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
INDEPENDENT LIVING CENTER 14407 GILMORE STREET #101 VAN NUYS, CA 91401	95-3026060	501(C)(3)	0	9,573.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
INLAND VALLEY HOPE PARTNERS 1753 NORTH PARK AVENUE #20 POMONA, CA 91768	95-2674837	501(C)(3)	0	22,477.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS,
JENESSE CENTERS 3761 STOCKER STREET, STE 100 LOS ANGELES, CA 90008	95-3652529	501(C)(3)	0	29,975.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
JOINT EFFORIS, INC. 590 W. 8TH STREET SAN PEDRO, CA 90731	95-2838006	501(C)(3)	0	123,323.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
JOURNEY HOUSE 1232 N. LOS ROBLES AVENUE PASADENA, CA 91104	95-3838636	501(C)(3)	0	48,969.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
JOVENES, INC. 1208 PLEASANT AVE. LOS ANGELES, CA 90033	95-4342434	501(C)(3)	0	. 55, 050	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
JWCH INSTITUTE, INC. 5650 JILLSON STREET COMMERCE, CA 90040	95-2289916	501(C)(3)	0	9,167.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LA ON CLOUD 9 333 W. 66TH STREET LOS ANGELES, CA 90003	46-4560088	501(C)(3)	0	17,716.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LAMP COMMUNITY 526 SAN PEDRO STREET LOS ANGELES, CA 90013	95-3993742	501(C)(3)	0	21,636.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
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Schedule I (Form 990) SHELTER PARTNERSHIP, INC.  Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	PARTNERSHIP er Assistance to Gove	.P, INC.	nizations in the Ur	nited States (Sch	edule I (Form 990), Pa		95-3976214 Page 1-
(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
LAS FAMILIAS DEL PUEBLO 307 E. 7TH STREET LOS ANGELES, CA 90014	95-3660735	501(C)(3)	0	9,462.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LIFE ENRICHMENT WORLDWIDE MINISTRIES - 823 W. MANCHESTER AVENUE - LOS ANGELES, CA 90044	27-0955733	501(c)(3)	0	19,624.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LIVE AGAIN RECOVERY HOMES 38215 N. SAN FARCISQUITO CYN RD. SAUGUS, CA. 91390	95-4053779	501(C)(3)	0,0	74,035.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LOAVES & FISHES ICATHOLIC CHARITIES OF LOS ANGELES - 4322 SAN FERNANDO ROAD - GLENDALE, CA 91204	95-1690973	501(C)(3)	0	23,843.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LONG BEACH COMMUNITY ACTION PARTNERSHIP - 3012 LONG BEACH BOULEVARD - LONG BEACH, CA 90807	95-3401090	501(C)(3)	0	42,107.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS,
LONG BEACH FAMILY SHELTER CATHOLIC CHARITIES OF LOS ANGELES - 123 E. 14TH STREET - LONG BEACH, CA 90813	95-1690973	501(C)(3)	0	57,241.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LONG BEACH MULTI SERVICE CENTER LONG BEACH CARES - 1301 WEST 12TH STREET - LONG BEACH, CA 90813	95-6000733	501(c)(3)	0	31,728,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMBLESS,
LONG BEACH POLICE FOUNDATION P.O. BOX 15418 LONG BEACH, CA 90803	33-0835185	501(C)(3)	0	8, 295,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LONG BEACH RESCUE MISSION P.O. BOX 1969 LONG BEACH, CA 90801	95-2741506	501(c)(3)	0	FAIR 42,984.VALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
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ARTNERSH	Assistance to G
SHELTER PARTNERSHIP, INC	of Grants and Other
Schedule I (Form 990)	Part II Continuation

raiting Commission of drams and Other Assistance to Governments and Organizations in the Online States (Schedule   [Form 990], Part II.)	Assistance to do	vernments and Organ	izauoris in ene Or	lited States (Schie	sadie i (Form 99U), Par	t II.)	
(a) Name and address of organization or government	( <b>b)</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
LONG BEACH COUNTY ALLIANCE OF BOYS & GIRLS CLUBS - 3939 ATLANTIC AVENUE, SUITE 215 - LONG BEACH, CA 90807	13-5562976	501(C)(3)	0	103,863.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LOS ANGELES MISSION 303 EAST 5TH STREET LOS ANGELES, CA 90013	95-3134049	501(C)(3)	*0	111,617.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LOS ANGELES YOUTH NETWORK 7033 W. SUNSET BLVD. LOS ANGELES. CA 90028	95-3953979	501(C)(3)	0	27,488.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LUTHERAN SOCIAL SERVICES 21430 STRATHERN STREET CANOGA PARK, CA 91401	95-2225798	501(C)(3)	0	84,849.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MARY LIND RECOVERY CENTERS 155 BIMINI PLACE LOS ANGELES, CA 90004	95-6061190	50 <u>1(C)(</u> 3)	0	137,734.	PAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MARYVALE 7600 E. GRAVES AVENUE ROSEMEAD, CA 91770	95-3889412	501(c)(3)	0	. 655, 69	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MCKINLEY CHILDREN'S CENTERS 762 W. CYPRESS STREET SAN DIMAS, CA 91773	95-2016696	501(C)(3)	o	72,070	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MEND 10641 N. SAN FERNANDO ROAD PACOIMA, CA 91331	23-7306337	501(C)(3)	0	238,494.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MENTAL HEALTH AMERICA 456 BLM AVENUE LONG BEACH, CA 90802	95-1881491	501(C)(3)	0	FAIR 19,980,VALUE	MARKET	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
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Schedule i (Form 990) SHELTER PARTINERSHIP, INC.  Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990),	PARTNERSHIP,	P, INC.	nizations in the Un	nited States (Sche	edule I (Form 990), Pai	9 Part II.)	95-3976214 Page 1.
(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
MENTAL HEALTH AMERICA (LANCASTER) 506 WEST JACKSON STREET LANCASTER, CA 93534	95-1881491	501(C)(3)	0.	23,665,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MIDNIGHT MISSION 601 S. SAN PEDRO STREET LOS ANGELES, CA 90014	95-1691293	501(C)(3)	0	294,460,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
NEW DIRECTIONS, INC. 1611 PLUMMER ST. VA BLDG 4 NORTH HILLS, CA 91343	95-4242745	501(C)(3)	0	12,251.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
NEW ECONOMICS FOR WOMEN/LA POSADA 303 SOUTH LOMA DRIVE LOS ANGELES, CA 90017	95-3969029	501(C)(3)	0	35,705.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
NEW IMAGE 401 E. OCEAN BLVD. STE 705 LONG BEACH, CA 90802	33~0404729	501(C)(3)	0	11,367.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
OLIVE CREST 17800 WOODRUFF AVENUE BELLFLOWER, CA 90706	95-2877102	501(C)(3)	0	6,054,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
OPTIMIST YOUTH HOMES & FAMILY SERVICES - 6957 N. FIGUEROA STREET - LOS ANGELES, CA 90041	95-1643340	501(C)(3)	0	FAIR 39,062,VALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
OSBORNE PLACE SAN FERNANDO VALLEY CMHC, INC 14515 HAMLIN STREET - VAN NUYS, CA 91405	95-6194487	501(C)(3)	0	65,690.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
OUR SAVIOUR CENTER 4368 SANTA ANITA AVENUE EL MONTE, CA 91731	95-1765149	501(¢)(3)	0	13,062.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.  Schedule I (Form 990)

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Schedule I (Form 990) SHELTER PARTNERSHIP, INC.  Part II   Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	PARTNERSHIP,	P, INC.	nizations in the Ur	nited States (Sch	edule I (Form 990), Par		95-3976214 Page 1
(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
PACIFIC CLINICS 2550 E. FOOTHILL BLVD. PASADENA. CA 91107	95-1644034	501(c)(3)	0.	185,763.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
PACIFIC LODGE YOUTH SERVICES 4900 SERRANDIA AVENUE WOODLAND HILLS, CA 91364	95-1691300	<u>501</u> (c)(3)	0	8,790	FAIR MARKET 790.VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS,
PARENTS OF WATTS 10828 LOU-DILLON AVENUE LOS ANCELES, CA 90059	95-3894168	501(C)(3)	0	75,859.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
PATHWAYS TO HOME VOLUNTBERS OF AMERICA - 3600 WILSHIRE BLVD., SUITE 1500 - LOS ANGELES, CA 90017	95-1691330	501(C)(3)	.0	106, 400.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
PENNY LANE CENTERS 15317 RAYEN STREET NORTH HILLS, CA 91343	95-2633765	501(C)(3)	O	165,360.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
POMONA NEIGHBORHOOD CENTER, INC. 999 WEST HOLF, SUITE D POMONA, CA 91768	95-3900690	501(C)(3)	0	20,800.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
PROJECT NEW HOPE 1004 ECHO PARK AVENUE LOS ANGELES, CA 90026	27-4555998	501(C)(3)	0	24,876.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
PROTOTYPES 845 E. ARROW HWY POMONA, CA 91767	95-4092046	501(C)(3)	0	73,388.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
RAINBOW SERVICES LTD. 453 W. 7TH STREET SAN PEDRO, CA 90731	95-3855705	501(c)(3)	0	FAIR: 8,184.VALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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Schedule I (Form 990) SHELTER PARTNERSHIP, INC.	Part II   Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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(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
SAN FERNANDO VALLEY RESCUE MISSION 8714 DARBY AVE. NORTHRIDGE. CA 91325	23-7278002	501(C)(3)	0	FAIR :	МАКБТ	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS
1 7 8 8	95-17 A B C C C C C C C C C C C C C C C C C C	501(0)(3)		PAIR	MARKET		TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE
SAN GABRIEL VALLEY CENTER 11046 VALLEY MALL EL MONTE, CA 91731	94-2301551	501(C)(3)	C	60 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	MARKET	TANTOOS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE
	94-1156347	501(C)(3)	0		MARKET	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SCHARP 2610 INDUSTRY WAY, SUITE A LYNWOOD, CA 90262	95-4482413	501(C)(3)	0	25,294.V	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SEA POSSIBLE 3763 E. FOURTH STREET LOS ANGELES, CA 90063	95-4399127	501(C)(3)	.0	156,581.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SHELTER PARTNERSHIP - OUTREACH 523 W. SIXTH STREET, STE.616 LOS ANGELES, CA 90014	95-3976214	501(C)(3)	0	FAIR 30,654.VALUE	MARKET	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SHERIFF'S YOUTH FOUNDATION 211 WEST TEMPLE STREET, 8TH FLOOR LOS ANGELES, CA. 90012	95-4047797	501(C)(3)	0	FAIR : 63,750, VALUE	MARKET	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SHIELDS FOR FAMILIES 11601 S. WESTERN AVENUE LOS ANGELES, CA 90047	95-4336420	<u>501(C)(3)</u>	0	FAIR 37,116.WALUE	MARKET	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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Schedule I (Form 990) SHELTER PARTNERSHIP, INC.  Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	PARTNERSHIP er Assistance to Gove	P, INC.	rizations in the Ur	ited States (Sch	edule I (Form 990), Pa		95-3976214 Page 1
(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
SKID ROW DEVELOPMENT CORP./TRANSITION HOUSE - 307 S. CENTRAL AVENUE - LOS ANGELES, CA 90013	95-3288131	501(C)(3)	0	.906,85	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SKID ROW HOUSING TRUST 1317 E. SEVENTH STREET LOS ANGELES, CA 90021	95-4205316	501(0)(3)	0	42,422.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SOJOURN SERVICES OPCC 1453 16TH STREET SANTA MONICA, CA 90404	95-6143865	501(C)(3)	0	5,521.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SOUTHERN CALIFORNIA ALCOHOL & DRUG PROGRAMS - 11500 PARAMOUNT BLVD. - DOWNEY, CA 90241	23-7228780	501(C)(3)	0	58,194.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SPECIAL SERVICES FOR GROUPS/HOP 5715 S. BROADWAY LOS ANGELES, CA 90037	95-1716914	501(C)(3)	.0	60.796.	FAIR MARKET 796.VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SRO HOUSING 1055 W, 7TH STREET LOS ANGELES, CA <u>90017</u>	95-3909215	501(C)(3)	0	71,048,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS,
ST. ANNE'S RESIDENTIAL FACILITY 155 N. OCCIDENTAL BLVD. LOS ANGELES, CA 90026	95-1691306	501(C)(3)	0	15,214.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ST. FRANCIS CENTER 1835 SOUTH HOPE STREET LOS ANGELES, CA 90015	95-4479271	S01(C)(3)	0.	49,852.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ST. JOSEPH'S CENTER 204 HAMPTON DRIVE VENICE, CA 90291	95-3874381	501(C)(3)	0	148,644.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.  Schedule I (Form 990)

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Schedule I (Form 990) SHELTER PARTNERSHIP, INC. Part II Continuation of Grants and Other Assistance to Governments an	PARTNERSHIP er Assistance to Gover	P, INC.	nizations in the Un	ited States (Sch	d Organizations in the United States (Schedule I (Form 990), Part II.)	9	5-3976214 Page 1-
(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
ST. MARGARET'S CENTER CATHOLIC CHARITIES OF LOS ANGELES - 10217 INGLEWOOD AVENUE - LENNOX, CA 90304	95-1690973	501(C)(3)	0	22,067.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ST. VINCENT SHELTER 621 WEST ADAMS BOULEVARD LOS ANGELES, CA 90007	53-0196617	501(C)(3)	.0	52,485.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ST. VINCENT'S CARDINAL MANNING CENTER - 231 WINSTON STREET - LOS ANGELES, CA 90013	95-1644622	501(C)(3)	.0	6,538.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
STUDENT AND COMMUNITY SERVICES PARA LOS NINOS - 500 LUCAS AVENUE - LOS ANGELES, CA 90017	95-3443276	501(C)(3)	Ö	116,794.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SU CASA-ENDING DOMESTIC ABUSE 3840 WOODRUFF AVENUE, SUITE 203 LONG BEACH, CA 90808	95-3495175	501(C)(3)	0	30,497.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SUBSTANCE ABUSE FOUNDATION OF LONG BEACH - 1041 REDONDO AVENUE - LONG BEACH, CA 90804	33-0355130	501(C)(3)	0	33,173,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
TCLC CRISIS HOUSING TESTIMONIAL COMMUNITY LOVE CENTER - 5721 S. WESTERN AVENUE - LOS ANGELES, CA 90062	95-4376926	501(C)(3)	0	52,873,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
TEMPLE ISRAEL 5200 LANKERSHIM BLVD. STE 850 NORTH HOLLYWOOD, CA 91601	23-7383024	501(C)(3)	0	11,517.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
THE BIDDY MASON CHARITABLE FOUNDATION - 2249 SO. HARVARD BLVD LOS ANGELES, CA 90018	95-6142291	501(C)(3)	0	FAIR 8,036,VALUE	MARKET	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.  Schedule I (Form 990)

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nedule I (Form 990) SHELTER PARTNERSHIP, INC.  Int II   Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	

(a) Name and address of organization or government	(b) EiN	if applicable cash grant assistance (book, FMV, book, FMV, assistance (book, FMV, appraisal, other)	(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
THE CINDERELLA PROJECT - A PLACE CALLED HOME - 2830 SOUTH CENTRAL AVENUE - LOS ANGELES, CA 90011	85-4427291	501(C)(3)	0	5.146.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
THE GIVING SPIRIT 11908 MONTANA AVENUE #205 LOS ANGELES CA 90049	61-1405121	501(C)(3)	0	33,396.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
THE LOS ANGELES COUNTY COMMUNITY DEVELOPMENT FOUNDATION - 700 WEST MAIN STREET - ALHAMBRA, CA 91801	77~0469732	501(C)(3)	0	62,425.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
THE SABAN FREE CLINIC 8405 BEVERLY BLVD. LOS ANGELES, CA 90048	95-2539105	501(C)(3)	0	35,986.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
THE WHOLE CHILD 10155 COLIMA ROAD WHITTIER, CA 90603	95-2031148	501(C)(3)	0	13,491,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
TRIANGLE CHRISTIAN SERVICES, INC. 9122 S. SAN PEDRO STREET LOS ANGELES, CA 90003	95-4171039	501(C)(3)	0.	56,227.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
INCUI NORMAN LEWIS VALLEI SHELIEK LA FAMILY HOUSING - 7843 LANKERSHIM BLVD, - NORTH HOLLYWOOD, CA 91605	95-3920560	501(C)(3)	.0	71,765.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
TRUEVINE COMMUNITY OUTREACH 5238 CLARK ST. LYNWOOD, CA 90262	95-4340619	501(C)(3)	0	113,551.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
U.S. VETERANS INTIATIVE 733 S. HINDRY AVENUE INGLEWOOD, CA 90301	95-4382752	501(C)(3)	*0	FAIR 19,567.NALUE	MARKET	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
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Schedule I (Form 990) SHELTER PARTINERSHIP, INC. PART II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	PARTNERSHIP er Assistance to Gove	.P, INC.	nizations in the Ur	ited States (Sch	edule I (Form 990), Par		95-3976214 Page 1
(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
U.S. VETERANS/LONG BEACH 2001 RIVER AVENUE LONG BEACH, CA 90810	95-4382752	501(¢)(3)	°,	69,202.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
UNION RESCUE MISSION 545 S. SAN PEDRO STREET LOS ANGELES, CA 90013	95-1709293	501(C)(3)	0	214,272.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
UPWARD BOUND HOUSE 1020 12TH STREET SANTA MONICA, CA 90403	95-4288926	501(C)(3)	0	26,139.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
VALLEY OASIS EMERGENCY SHELTER P.O. BOX 2980 LANCASTER, CA 93539	95-3582588	501(C)(3)	0	19,113.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
VENICE COMMUNITY CENTER - NEW DIRECTIONS, INC 720 ROSE AVENUE - VENICE, CA 90291	95-4200761	501(C)(3)	0	47,139.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
VILLAGE FAMILY SERVICES 6736 LAUREL CANYON BLVD. #200 NORTH HOLLYWOOD, CA 90016	95-4625826	501(C)(3)	0	14,664.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
VIOLENCE INTERVENTION PROGRAM 1721 GRIFFIN AVENUE LOS ANGELES, CA 90031	30-0017808	501(C)(3)	o	5,019.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WALDEN HOUSE HEALTH RIGHT 360 149 W. 22ND STREET LOS ANGELES, CA 90007	94-6129071	501(C)(3)	o	108,381.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WEINGART CENTER ASSOCIATION 566 S. SAN PEDRO ST. LOS ANGELES, CA 90013	95-6054617	501(C)(3)	0	FAIR 55.917.VALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.  Schedule I (Form 990)

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1	(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
WEST COVINA ACCESS & OUTREACH CENTER VOLUNTEERS OF AMERICA - 1760 WEST CAMERON AVENUE, STE.104 - WEST COVINA, CA 91790	95-1691330	501(C)(3)	0.	84,569.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WEST HOLLYWOOD COMMUNITY HOUSING CORPORATION - 7530 SANTA MONICA BLVD WEST HOLLYWOOD, CA 90046	95-4122368	501(C)(3)	00*	41,370,	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WEST L.A. HAVEN THE SALVATION ARMY 11301 WILSHIRE BLVD., BLDG 207, RM. LOS ANGELES, CA 90073	94-1156347	501(Ç)(3)	0	7,888.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WESTWOOD TRANSITIONAL VILLAGE THE SALVATION ARMY - 1401 S. SEPULVEDA BLVD LOS ANGELES CA 90025	95-1656360	501(C)(3)	.0	31,759.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WHITTIER AREA FIRST DAY COALITION 12426 WHITTIER BLVD., 2ND FLOOR WHITTIER, CA 90602	93-1141844	501(C)(3)	0	21,742.	FAIR MARKET	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS,
WHITTIER CORP THE SALVATION ARMY P.O. BOX 954 WHITTIER, CA 90608	94-1156347	501(C)(3)	0	20,895.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WLCAC- HOMELESS ASSISTANCE PROGRAM 958 E. 108TH STREET LOS ANGELES, CA 90059	95-2412869	501(C)(3)	0	60,638.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WOMEN ORGANIZING RESOURCES, KNOWLEDGE AND SERVICES - 795 N. AVENUE 50 - LOS ANGELES, CA 90042	95-4680440	501(C)(3)	0	94,856.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WOMEN'S & CHILDREN'S CRISIS SHELTER - 13203 HADLEY STREET, STE,103 - WHITTIER, CA 90601	95-3315186	501(C)(3)	0	FAIR 22,832.VALUE	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.  Schedule   (Form 990)

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SHELTER PARTNERSHIP, INC. strants and Organizations in the United States (Schedule I (Form 990), Part II.)
SHELTER PAR?

Fart II. Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule   Form 990), Part II.)	Assistance to Go	vernments and Organ	Izations in the Un	ined States (ച	edule i (rorm ssu), rai	T II.)	
(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
WOMEN SHELTER OF LONG BEACH P.O. BOX 32107 LONG BEACH, CA 90832	95-1644058	501(C)(3)	°	37,630.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WORKING DREAMS 118 S. BEVERLY DRIVE, STE.222 BEVERLY HILLS. CA 90212	45-1208361	501(C)(3)	. 0	63 P	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
1 2.7 52 - 1.71	95-4440220	501(C)(3)	0	8,678,		VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
YWCA OF THE HARBOR AREA & SOUTH BAY - 437 WEST 9TH STREET - SAN PEDRO, CA 90731	95-1691337	501(C)(3)	0	16,858.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ZAHN CENTER THE SALVATION ARMY 832 W. JAMES M. WOOD BLVD. LOS ANGELES. CA 90015	95-1656360	501(C)(3)	0	65,598.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
							Schedule I (Form 990)

Schedule I (Form 990) (2014) (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. 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. (d) Amount of non-cash assistance (c) Amount of cash grant SITE VISITS AS APPROPRIATE (b) Number of recipients (a) Type of grant or assistance APPLICATION REVIEW, PART I, LINE 2: 432102 10-15-14 Part III

Page 2

95-3976214

INC.

SHELTER PARTNERSHIP,

Schedule I (Form 990) (2014)

## SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

**Noncash Contributions** 

OMB No. 1545-0047

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.lrs.gov/form990.

Open To Public Inspection

Name of the organization

INC.

SHELTER PARTNERSHIP

Employer identification number 95-3976214

Pai	TI Types of Property		,			
		(a) Check if applicable		(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	
1	Art - Works of art		nems continuted	1 Offit 550, Fait VIII, line Tg		
2	Art - Historical treasures					
3	Art - Fractional interests					
4	Books and publications		<u> Aleksanian ja kan</u>			
5	Clothing and household goods	X		10,408,652.	EVID MVDKED	WAT.IIE
6	Cars and other vehicles	22		10,400,002.	LWIN BRUIGHT	VALUE
7	Boats and planes					
8	Intellectual property					
9	Securities - Publicly traded	X	1	1 137	FAIR MARKET	7727.7757
10	Securities - Closely held stock			1,107.	PAIN MARKET	VALIOE
11	Securities - Partnership, LLC, or					
11	trust interests					
12	Securities - Miscellaneous					
13	Qualified conservation contribution -					
	Historic structures					
14	Qualified conservation contribution - Other					
15	Real estate - Residential					
16	Real estate - Commercial					
17	Real estate · Other					
18	Collectibles					
19	Food inventory					
20	Drugs and medical supplies					
21	Taxidermy					
22 -	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts				***************************************	
25	Other ()					
26	Other • ()					
27	Other • ()					
28_	Other (					
29	Number of Forms 8283 received by the organiz	ation during	the tax year for c	ontributions		
	for which the organization completed Form 828	33, Part IV, D	Donee Acknowledg	ement 29		
						Yes No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throug	gh 28, that it	
	must hold for at least three years from the date	of the initia	I contribution, and	which is not required to be	used for	
	exempt purposes for the entire holding period?	·				30a X
	If "Yes," describe the arrangement in Part II.					
	Does the organization have a gift acceptance p	-	•	-	utions?	31 X
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash		
	contributions?					32a X
	If "Yes," describe in Part II.					
	If the organization did not report an amount in o	column (c) fo	or a type of proper	ty for which column (a) is ch	ecked,	
	describe in Part II.			***************************************	. 1	

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE M, LINE 32B:
THE ORGANIZATION USES AN OUTSIDE BROKER TO SELL DONATED STOCK.

## **SCHEDULE 0**

(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.

OMB No. 1545-0047

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

Open to Public Inspection

Name of the organization

SHELTER PARTNERSHIP, INC.

Employer identification number 95-3976214

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:									
SINCE OUR FOUNDING IN 1985, SHELTER PARTNERSHIP HAS BEEN A LEADER IN									
THE FIGHT AGAINST HOMELESSNESS IN LOS ANGELES COUNTY. THE AGENCY									
ACCOMPLISHES ITS MISSION THROUGH THESE ACTIVITIES:									
-THROUGH ITS AWARD-WINNING S. MARK TAPER FOUNDATION SHELTER RESOURCE									
BANK, SHELTER PARTNERSHIP PROVIDES ESSENTIAL RESOURCES TO FRONT-LINE									
AGENCIES AND HOUSING PROGRAMS. SINCE 1989, THE S. MARK TAPER									
FOUNDATION SHELTER RESOURCE BANK HAS SECURED OVER \$222 MILLION AND									
DISTRIBUTED OVER \$203 MILLION OF NEW, HIGH-PRIORITY GOODS, FREE OF									
CHARGE, TO MORE THAN 575 UNDUPLICATED AGENCIES/PROJECTS SERVING THE									
HOMELESS AND POOR POPULATIONS. THESE NEW, NON-FOOD GOODS, ASSIST THE									
AGENCIES IN MANAGING THEIR OPERATING COSTS AND IMPROVES THE									
QUALITY-OF-LIFE FOR THE HOMELESS AND POOR HOUSEHOLDS.									
-SHELTER PARTNERSHIP'S EXPERTISE AND GUIDANCE TO PUBLIC AGENCIES AND									
NON-PROFIT PROVIDERS RESULTS IN SIGNIFICANT IMPROVEMENTS TO PROGRAM									
DESIGN AND IMPLEMENTATION OF REGIONAL PROGRAMS SERVING HOUSEHOLDS WHO									
EXPERIENCE HOMELESSNESS OR ARE AT-RISK OF HOMELESSNESS. THIS INCLUDES									
HOMELESS INDIVIDUALS WITH SPECIAL NEEDS AND DISABILITIES (INCLUDING									
PERSONS WITH MENTAL ILLNESS, PERSONS WITH SUBSTANCE ADDICTIONS, PERSONS									
LIVING WITH HIV/AIDS, AND PERSONS WITH CHRONIC PHYSICAL AILMENTS), AND									
HOMELESS FAMILIES (INCLUDING TRANSITIONAL AGE YOUTH WITH YOUNG									
CHILDREN, VICTIMS OF DOMESTIC VIOLENCE, AND INDIVIDUALS AND FAMILIES									
RECETVING WELFARE ASSISTANCE).									

-SHELTER PARTNERSHIP'S POLICY AND PLANNING REPORTS, OFTEN COMMISSIONED

BY LOCAL POLICYMAKERS, HAVE CONSISTENTLY PROVIDED INVALUABLE ANALYSES

AND ASSESSMENTS OF LOS ANGELES COUNTY'S NEEDS AND RESOURCES, AND

RESULTED IN SIGNIFICANT ADDITIONAL FUNDING AND IMPROVED PROGRAM

COORDINATION AND ALIGNMENT.

-SHELTER PARTNERSHIP'S LEADERSHIP IN CREATING COLLABORATIVE

APPLICATIONS HAS GARNERED CRITICAL PUBLIC MONIES FOR LOS ANGELES COUNTY

FRONT-LINE HOUSING AND SERVICE PROVIDERS. SINCE 1994, LOS ANGELES

COUNTY HAS ASSISTED THE COMMUNITY IN ACCESSING MORE THAN \$1 BILLION IN

FEDERAL FUNDS.

-ADMINISTERING A FIRST-OF-ITS-KIND PROJECT THAT HAS THUS FAR RESULTED

IN 300 HOMELESS OLDER ADULTS SECURING AFFORDABLE PERMANENT HOUSING BY

TRACKING APPLICATION OPPORTUNITIES IN 130 AFFORDABLE HOUSING

PROPERTIES. THE PROJECT INVOLVES REACHING OUT TO HOUSING DEVELOPERS

FOR SENIORS AND ADVOCATING FOR THEM TO ACCEPT HOMELESS OLDER ADULTS AND

PROVIDE ACCOMMODATIONS FOR HOMELESS OLDER ADULTS DURING THE APPLICATION

PROCESS. WE MATCH THESE DEVELOPERS WITH HOMELESS SHELTERS AND HOMELESS

SERVICE AGENCIES IN THEIR COMMUNITIES AND EDUCATE THEM ON THE

APPLICATION PROCESS AND THE NECESSITY TO PROVIDE FOLLOW-UP SERVICES TO

THEIR CLIENTS. THIS WAS ONE OF THE MAJOR INITIATIVES PROPOSED IN OUR

2008 HOMELESS OLDER ADULTS STRATEGIC PLAN.

-SHELTER PARTNERSHIP'S TECHNICAL ASSISTANCE IN THE PRODUCTION OF
HOUSING APPROPRIATE TO HOMELESS OLDER ADULTS HAS LED TO TWELVE NEW

-ASSISTED THE LOS ANGELES HOMELESS SERVICES AUTHORITY AND THE COUNTY OF LOS ANGELES CEO'S OFFICE TO IMPLEMENT A COORDINATED AND COMMUNITY-BASED SYSTEM TO PROVIDE TARGETED RAPID REHOUSING AND HOUSING STABILITY SERVICES FOR HOMELESS AND AT-RISK FAMILIES. THIS HOMELESS FAMILY

SOLUTIONS SYSTEM ASSISTED OVER 3,100 FAMILIES IN THE 2014-2015 YEAR.

-ADVISED THE LOS ANGELES HOUSING AND COMMUNITY INVESTMENT DEPARTMENT

(HCIDLA) IN ITS ADMINISTRATION OF THE HOUSING OPPORTUNITIES FOR PERSONS

WITH AIDS (HOPWA) PROGRAM, INCLUDING REVISING PROGRAM GUIDELINES AND

FACILITATING MEETINGS. ASSISTED HCIDLA IN WRITING THE RFP, APPLICATION

AND SCORING TOOLS FOR A REDESIGNED HOPWA PROGRAM.

-SINCE 1994, SHELTER PARTNERSHIP HAS ADMINISTERED THE SUPPORT FOR
HOMELESS RE-ENTRY PROGRAM (SHORE) ON BEHALF OF THE CITY OF LOS ANGELES
WITH RESOURCES FROM THE METROPOLITAN TRANSPORTATION AUTHORITY (METRO).

THIS INNOVATIVE PROGRAM, WHICH WE CONCEPTUALIZED AND DEVELOPED WITH THE
CITY TRANSPORTATION DEPARTMENT, CURRENTLY PROVIDES TRANSPORTATION

TOKENS TO 19 COMMUNITY-BASED AGENCIES THROUGHOUT THE METRO LOS ANGELES
AREA SERVING THE HOMELESS. DURING FISCAL YEAR 2014-2015, 8,614

INDIVIDUALS WERE ASSISTED WITH 245,866 TOKENS AND NEARLY 13,000 "TAP

CARDS" OR PASSES. THE TOKENS AND TAP CARDS WERE USED FOR JOBS,
HOUSING, EDUCATION, BENEFITS, AS WELL AS APPOINTMENTS FOR MEDICAL,
MENTAL HEALTH, AND LEGAL NEEDS.

-CONTINUED WORKING THE UNITED WAY'S HOME FOR GOOD INITIATIVE,

PARTICIPATING IN THE HOMELESS ANALYTIC COLLABORATIVE, POLICY GROUP,

ADVOCATES UNITED, AND THE LANDLORD ENGAGEMENT SUBCOMMITTEE.

-REVIEWED SERVICE PLANS FOR PROPOSALS TO THE LOS ANGELES COUNTY

COMMUNITY DEVELOPMENT COMMISSION'S AFFORDABLE RENTAL HOUSING PROGRAM

AND THE STATE OF CALIFORNIA HOUSING AND COMMUNITY DEVELOPMENT

DEPARTMENT'S MULTIFAMILY HOUSING PROGRAM AND VETERANS HOUSING AND

Name of the organization Employer identification number SHELTER PARTNERSHIP, INC. 95-3976214 -PROVIDED TECHNICAL ASSISTANCE TO AGENCIES AND SYSTEMS OF CARE FOR HOMELESS VETERANS, INCLUDING THE SUPPORTIVE SERVICES FOR VETERAN FAMILIES COLLABORATIVE, THE LA VETERANS COLLABORATIVE, AND THE UNITED WAY HOME FOR GOOD HOMELESS VETERANS LEADERSHIP TEAM AND VETERANS SURGE TEAM. -AS A VOLUNTEER MEMBER, ACTIVELY PARTICIPATED IN THE PLANNING OF THE LA COUNTY DEPARTMENT OF MENTAL HEALTH'S MENTAL HEALTH SERVICES ACT HOUSING ADVISORY BOARD AND ANNUAL HOUSING INSTITUTE, INCLUDING HELPING ORGANIZING AND PRESENTING AT SEVERAL OF THE WORKSHOPS. -TRAINED HOMELESS SERVICE PROVIDERS IN REACHING OUT TO HOUSING PROVIDERS AND SUPPORTING THEIR CLIENTS THROUGH THE PERMANENT APPLICATION PROCESS AT THE LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH HOUSING INSTITUTE AND THE CSH MOVING ON INITIATIVE TRAINING SERIES. -PARTICIPATED IN VARIOUS OTHER PLANNING PROCESSES, INCLUDING THE COUNTY'S HOMELESS INITIATIVE. -AS AN APPOINTED MEMBER BY THE LA COUNTY BOARD OF SUPERVISORS, ACTIVELY PARTICIPATED IN THE GENERAL RELIEF RESTRUCTURING COMMITTEE. FORM 990, PART VI, SECTION A, LINE 2: TWO OF THE ORGANIZATION'S OFFICERS HAVE A BUSINESS RELATIONSHIP AS PARTNERS IN A LAW PRACTICE.

Schedule O (Form 990 or 990-EZ) (2014) Page 2 Name of the organization Employer identification number SHELTER PARTNERSHIP, INC. 95-3976214 FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS REVIEWED BY THE AUDIT COMMITTEE AND BROUGHT TO THE FULL BOARD FOR APPROVAL BEFORE IT IS ELECTRONICALLY FILED. FORM 990, PART VI, SECTION B, LINE 12C: ALL DIRECTORS AND EMPLOYEES ARE REQUIRED TO DISCLOSE ANNUALLY INTEREST THAT COULD GIVE RISE TO CONFLICTS. THIS PROCESS IS OVERSEEN AND ENFORCED BY THE EXECUTIVE DIRECTOR. FORM 990, PART VI, SECTION B, LINE 15: DETERMINATION OF COMPENSATION OF OFFICERS, DIRECTORS, MANAGEMENT AND KEY EMPLOYEES IS BASED ON A BOARD ASSESSMENT OF COMPARABLE COMPENSATION DATA BASED ON INDUSTRY INFORMATION. THIS REVIEW AND APPROVAL PROCESS IS DOCUMENTED CONTEMPORANEOUSLY AT THE TIME OF THE APPROVAL. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART IV, SECTION C, LINE 19 THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REOUEST. THE ORGANIZATION'S FORM 990 IS AVAILABLE FOR PUBLIC VIEWING ON WWW.GUIDESTAR.ORG.

Schedule O (Form 990 or 990-EZ) (2014) Page:										
Name of the organization SHELTER PARTNERSHIP, INC.									Employer identification number 95-3976214	
THE	AUDIT	OVERSIGHT	COMMITTEE	HAS	NOT	CHANGED	ITS	PROCESS	SINCE THE	
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