** PUBLIC DISCLOSURE COPY **

Form 990 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.

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

OMB No. 1545-0047

2016 Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2016 calendar year, or tax year beginning JUL 1, 2016 and ending JUN 30, 2017

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/ terminated ☐ Amended return ☐ Application pending

C Name of organization
SHELTER PARTNERSHIP, INC.
Doing business as

D Employer identification number
95-3976214

Number and street (or P.O. box if mail is not delivered to street address) 520 S. GRAND AVE., SUITE 695
Room/suite 695

E Telephone number 213-688-2188

City or town, state or province, country, and ZIP or foreign postal code LOS ANGELES, CA 90071

G Gross receipts $ 8,773,713.

F Name and address of principal officer: JOHN DEFAZIO
520 S. GRAND AVE., STE 695, LOS ANGELES, CA

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.SHELTERPARTNERSHIP.ORG

H(c) Group exemption number ▶

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1985 M State of legal domicile: CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: COLLABORATIVELY SOLVING HOMELESSNESS IN LOS ANGELES COUNTY.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	17
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	17
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	16
	6 Total number of volunteers (estimate if necessary)	6	439
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	9,608,049.	8,455,575.
	9 Program service revenue (Part VIII, line 2g)	184,066.	200,951.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,052.	1,305.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	132.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,793,299.	8,657,831.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	9,021,366.	10,242,188.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,073,489.	1,000,355.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 177,875.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	681,625.	690,257.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,776,480.	11,932,800.
	19 Revenue less expenses. Subtract line 18 from line 12	-983,181.	-3,274,969.

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	25,649,028.	22,354,692.
	21 Total liabilities (Part X, line 26)	119,895.	100,528.
	22 Net assets or fund balances. Subtract line 21 from line 20	25,529,133.	22,254,164.

Part II Signature Block

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

Sign Here

▶ Signature of officer — Date

▶ JOHN DEFAZIO, CHAIR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
NAZ AFSHAR			☐	P00441843

Firm's name ▶ GURSEY | SCHNEIDER LLP — Firm's EIN ▶ 95-3309779

Firm's address ▶ 1888 CENTURY PARK EAST, SUITE 900
LOS ANGELES, CA 90067-1735 — Phone no. 310-552-0960

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
SHELTER PARTNERSHIP, INC. IS A NONPROFIT ORGANIZATION COLLABORATIVELY SOLVING HOMELESSNESS IN LOS ANGELES COUNTY THROUGH POLICY ANALYSIS, PROGRAM DESIGN, RESOURCE DEVELOPMENT, AND ADVOCACY IN SUPPORT OF AGENCIES AND LOCAL GOVERNMENTS THAT SERVE THE HOMELESS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ..... ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ..... ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses $ 11,199,483. including grants of $ 10,242,188.) (Revenue $)
MATERIALS ASSISTANCE - SEE SCHEDULE O

4b (Code:) (Expenses $ 416,452. including grants of $) (Revenue $ 200,951.)
PUBLIC POLICY/TECHNICAL ASSISTANCE - SEE SCHEDULE O

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ 11,615,935.

SEE SCHEDULE O FOR CONTINUATION(S)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	X	
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	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 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 Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	11			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 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, filed for the calendar year ending with or within the year covered by this return	2a	16			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		X
b	If "Yes," enter the name of the foreign country: ▶					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		X
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	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:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	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				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule 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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	17		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	17		
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			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 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:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		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

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

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

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) available for public inspection. Indicate how you made these available. Check all that apply.

[X] 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 financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ALAN ADLER DIRECTOR	3.00	X						0.	0.	0.
(2) BRIAN CULLINAN DIRECTOR	3.00	X						0.	0.	0.
(3) DANIEL MOREFIELD DIRECTOR	3.00	X						0.	0.	0.
(4) JOHN DEFAZIO CHAIR	5.00	X		X				0.	0.	0.
(5) KEITH SHARP, ESQ. DIRECTOR	3.00	X						0.	0.	0.
(6) LOUISE OLIVER SECRETARY	3.00	X		X				0.	0.	0.
(7) PETER BARKER DIRECTOR	3.00	X						0.	0.	0.
(8) THOMAS LANE DIRECTOR	3.00	X						0.	0.	0.
(9) WILLIAM WITTE DIRECTOR	3.00	X						0.	0.	0.
(10) RONALD M. GRIFFITH DIRECTOR	3.00	X						0.	0.	0.
(11) KEVIN SULLIVAN TREASURER	3.00	X		X				0.	0.	0.
(12) JEFFREY KEAN DIRECTOR	3.00	X						0.	0.	0.
(13) ERICH KLEIN DIRECTOR	3.00	X						0.	0.	0.
(14) LANCE SIMON DIRECTOR	3.00	X						0.	0.	0.
(15) RODNEY SWAN DIRECTOR	3.00	X						0.	0.	0.
(16) ANDREA GIBSON DIRECTOR	3.00	X						0.	0.	0.
(17) GAIL Q. GIBSON DIRECTOR	3.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) RUTH SCHWARTZ EXECUTIVE DIRECTOR	40.00			X				110,000.	0.	12,000.
1b Sub-total								110,000.	0.	12,000.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								110,000.	0.	12,000.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 1

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	307,839.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	185,000.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	7,962,736.				
	g Noncash contributions included in lines 1a-1f: $ 7,259,180.						
	h Total. Add lines 1a-1f			8,455,575.			
Program Service Revenue		Business Code					
	2a CONSULTING SERVICES	541610		200,951.	200,951.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			200,951.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			1,594.			1,594.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
		(i) Real	(ii) Personal				
	6a Gross rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory	14,997.					
	b Less: cost or other basis and sales expenses	15,286.					
	c Gain or (loss)	-289.					
	d Net gain or (loss)			-289.			-289.
	8a Gross income from fundraising events (not including $ 307,839. of contributions reported on line 1c). See Part IV, line 18	a 100,596.					
	b Less: direct expenses	b 100,596.					
	c Net income or (loss) from fundraising events			0.			
	9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
	Miscellaneous Revenue	Business Code					
	11a						
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
	12 Total revenue. See instructions.			8,657,831.	200,951.	0.	1,305.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	10,242,188.	10,242,188.		
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				
5 Compensation of current officers, directors, trustees, and key employees	120,472.	92,700.	10,668.	17,104.
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	670,216.	515,711.	59,349.	95,156.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	129,740.	104,540.	9,329.	15,871.
10 Payroll taxes	79,927.	64,440.	6,128.	9,359.
11 Fees for services (non-employees):				
a Management				
b Legal	11,222.	7,014.	2,151.	2,057.
c Accounting	17,657.	14,171.	1,782.	1,704.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	25,107.	13,707.	9,751.	1,649.
12 Advertising and promotion				
13 Office expenses	30,812.	25,137.	3,176.	2,499.
14 Information technology				
15 Royalties				
16 Occupancy	114,406.	87,472.	13,695.	13,239.
17 Travel	16,841.	13,050.	1,695.	2,096.
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	316,845.	309,718.	3,906.	3,221.
23 Insurance	23,686.	21,464.	1,136.	1,086.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a INVENTORY OBSOLESCENCE	38,046.	38,046.		
b K.I.D.S	15,000.	15,000.		
c TELEPHONE	14,696.	10,970.	2,053.	1,673.
d TAXES AND ASSESSMENTS	12,166.	12,065.	52.	49.
e All other expenses	53,773.	28,542.	14,119.	11,112.
25 **Total functional expenses.** Add lines 1 through 24e	11,932,800.	11,615,935.	138,990.	177,875.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	574,870.	1	501,835.
	2	Savings and temporary cash investments	250,000.	2	250,000.
	3	Pledges and grants receivable, net	9,797.	3	97,775.
	4	Accounts receivable, net	52,070.	4	73,627.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	18,273,875.	8	15,252,820.
	9	Prepaid expenses and deferred charges	6,840.	9	7,300.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 9,227,416.			
	b	Less: accumulated depreciation — 10b: 3,056,081.	6,481,576.	10c	6,171,335.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	25,649,028.	16	22,354,692.
Liabilities	17	Accounts payable and accrued expenses	119,895.	17	100,528.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	119,895.	26	100,528.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☒ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	3,112,662.	27	2,995,717.
	28	Temporarily restricted net assets	22,416,471.	28	19,258,447.
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	25,529,133.	33	22,254,164.
	34	Total liabilities and net assets/fund balances	25,649,028.	34	22,354,692.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,657,831.
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,932,800.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,274,969.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	25,529,133.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	22,254,164.

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization	Employer identification number
SHELTER PARTNERSHIP, INC.	95-3976214

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

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

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____

10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

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

f Enter the number of supported organizations .....

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10319159.	18341973.	11700193.	9583049.	8456880.	58401254.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	10319159.	18341973.	11700193.	9583049.	8456880.	58401254.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						7790820.
6 **Public support.** Subtract line 5 from line 4.						50610434.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	10319159.	18341973.	11700193.	9583049.	8456880.	58401254.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,204.	1,790.	1,455.	1,486.	1,594.	8,529.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		27,627.		132.		27,759.
11 **Total support.** Add lines 7 through 10						58437542.

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ..... ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	86.61 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	91.02 %

16a **33 1/3% support test - 2016.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ..... ▶ ☒

b **33 1/3% support test - 2015.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ..... ▶ ☐

17a **10% -facts-and-circumstances test - 2016.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ..... ▶ ☐

b **10% -facts-and-circumstances test - 2015.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ..... ▶ ☐

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

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

(Complete only if you checked the box on line 10 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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2016** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2015** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in Part VI when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in Part VI what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.*	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).*

a ☐ The organization satisfied the Activities Test. *Complete line 2 below.*

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

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

			Yes	No
2	Activities Test. *Answer (a) and (b) below.*			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	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.*	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*	3b		

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

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d **Total** (add lines 1a, 1b, and 1c)	1d		
e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4 Enter greater of line 2 or line 3	4	
5 Income tax imposed in prior year	5	
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions	
7	**Total annual distributions.** Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions	
9	Distributable amount for 2016 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7	**Excess distributions carryover to 2017.** Add lines 3j and 4c			
8	Breakdown of line 7:			
a				
b	Excess from 2013			
c	Excess from 2014			
d	Excess from 2015			
e	Excess from 2016			

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

** PUBLIC DISCLOSURE COPY **

Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at *www.irs.gov/form990* .

OMB No. 1545-0047

2016

Name of the organization	Employer identification number
SHELTER PARTNERSHIP, INC.	95-3976214

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year ..... ▶ $ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization	Employer identification number
SHELTER PARTNERSHIP, INC.	95-3976214

Part I **Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 2,228,138.	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
2		$ 1,230,063.	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
3		$ 488,732.	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
4		$ 464,859.	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
5		$ 458,058.	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
6		$ 339,790.	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
SHELTER PARTNERSHIP, INC.	95-3976214

Part I **Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		$ 265,200.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
8		$ 310,882.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
9		$ 247,743.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
10		$ 196,894.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization: SHELTER PARTNERSHIP, INC.

Employer identification number: 95-3976214

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	MISC CLOTHING AND SHOES	$ 2,228,138.	04/05/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	VARIOUS HOUSEHOLD GOODS	$ 1,230,063.	05/02/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	MISC CLOTHING AND SHOES	$ 488,732.	08/26/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
4	VARIOUS HOUSEHOLD GOODS	$ 464,859.	07/18/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
5	ATHLETIC SHOES	$ 458,058.	05/23/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
6	VARIOUS HOUSEHOLD GOODS	$ 339,790.	05/17/17

Name of organization	Employer identification number
SHELTER PARTNERSHIP, INC.	95-3976214

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
7	MISC CLOTHING	$ 265,200.	12/12/16
8	VARIOUS CLOTHES, TOYS AND GAMES	$ 310,882.	11/15/16
9	VARIOUS HOUSEHOLD GOODS	$ 247,743.	12/07/16
10	VARIOUS CHILDREN'S CLOTHING AND TOYS	$ 196,894.	05/08/17
		$	
		$	

Name of organization: SHELTER PARTNERSHIP, INC.

Employer identification number: 95-3976214

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

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.*

OMB No. 1545-0047

2016

Open to Public Inspection

If the organization answered "Yes," on 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," on 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," on 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) organizations: Complete Part III.

Name of organization	Employer identification number
SHELTER PARTNERSHIP, INC.	95-3976214

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures ▶ $

3 Volunteer hours for political campaign activities

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(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-.

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
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					

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 on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 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 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		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?	X		1,000.
f Grants to other organizations for lobbying purposes?	X		6,000.
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		4,500.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		500.
i Other activities?		X	
j Total. Add lines 1c through 1i			12,000.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
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), section 501(c)(5), or section 501(c)(6).**

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."**

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

THE ORGANIZATION WROTE LETTERS, E-MAILS, MADE PHONE CALLS AND POSTED ON FACEBOOK AND TWITTER ON A FEW LOCAL, STATE AND FEDERAL LEGISLATIVE PROPOSALS. SPECIFIC FOCUS ON THE COUNTY MEASURE H WHICH PROVIDES $355 MILLION ANNUALLY FOR 10 YEARS FOR SERVICES AND RENTAL ASSISTANCE TO THE HOMELESS.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization
SHELTER PARTNERSHIP, INC.

Employer identification number
95-3976214

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

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

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

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

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____
(ii) Assets included in Form 990, Part X ▶ $ _____

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

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____
b Assets included in Form 990, Part X ▶ $ _____

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Temporarily restricted endowment ▶ _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		8,838,547.	2,707,705.	6,130,842.
c Leasehold improvements				
d Equipment		388,869.	348,376.	40,493.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				6,171,335.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(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. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 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.)* ▶	

2. 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]

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	8,657,831.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	8,657,831.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	8,657,831.

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	11,932,800.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	11,932,800.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	11,932,800.

Part XIII Supplemental Information.

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

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, 2017, 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, 2017, THE OPEN TAX YEARS FOR SHELTER PARTNERSHIP, INC. WERE 2012 TO 2016.

Part XIII Supplemental Information *(continued)*

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

SHELTER PARTNERSHIP, INC.

Employer identification number

95-3976214

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

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

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(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
Total ▶						

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

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

		(a) Event #1 ANNUAL DINNER (event type)	(b) Event #2 10K RUN (event type)	(c) Other events 2 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	380,507.	10,778.	17,150.	408,435.
	2 Less: Contributions	279,911.	10,778.	17,150.	307,839.
	3 Gross income (line 1 minus line 2)	100,596.			100,596.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	56,032.			56,032.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	44,564.			44,564.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				100,596.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				0.

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility 13a %

b An outside facility 13b %

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

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

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

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

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $ _____

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

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

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

Part IV **Supplemental Information** *(continued)*

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization
SHELTER PARTNERSHIP, INC.

Employer identification number
95-3976214

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... [X] Yes [ ] No

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

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

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 noncash assistance	(h) Purpose of grant or assistance
1736 FAMILY CRISIS CENTER 21707 HAWTHORNE BLVD #300 TORRANCE, CA 90503	95-3989251	501(C)(3)	0.	42,083.	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)	0.	98,407.	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.	12,447.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
A SENSE OF HOME 1065 ELKGROVE AVE. #2 VENICE, CA 90291	47-3814056	501(C)(3)	0.	1,500.	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.	14,595.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ACCESS CENTER THE PEOPLE CONCERN 1453 16TH STREET SANTA MONICA, CA 90404	95-6143865	501(C)(3)	0.	40,940.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... ▶ 232.

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

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	(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
ADULT CENTER SHELTER AND COMMUNITY MEALS UNION STATION FOUNDATION - 825 E. ORANGE GROVE BLVD. - PASADENA, CA 91104	95-3958741	501(C)(3)	0.	609.	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(C)(3)	0.	48,261.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
AIDS PROJECT LOS ANGELES 611 SOUTH KINGSLEY DRIVE LOS ANGELES, CA 90005	95-3842506	501(C)(3)	0.	257,261.	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)	0.	62,003.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ALEGRIA THE SALVATION ARMY 2737 SUNSET BLVD. LOS ANGELES, CA 90026	94-1156347	501(C)(3)	0.	9,390.	FAIR MARKET VALUE	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.	16,207.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ALTAMED 512 S. INDIANA STREET LOS ANGELES, CA 90068	95-2810095	501(C)(3)	0.	6,810.	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.	18,495.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
APWC DOMESTIC VIOLENCE TRANSITIONAL HOUSING - 244 S. SAN PEDRO ST., SUITE 504 - LOS ANGELES, CA 90012	93-1102854	501(C)(3)	0.	4,507.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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	(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
ASIAN AMERICAN DRUG ABUSE PROGRAM (AADAP) - 5318 S. CRENSHAW BLVD. - LOS ANGELES, CA 90043	95-2848695	501(C)(3)	0.	17,200.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
AVIVA FAMILY AND CHILDREN'S SERVICES - 7120 FRANKLIN AVENUE - LOS ANGELES, CA 90046	95-1693616	501(C)(3)	0.	17,491.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
B.R.I.D.G.E.S., INC. 1977 GAREY AVENUE, STE. 6 POMONA, CA 91767	95-3077722	501(C)(3)	0.	7,846.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BACK TO SCHOOL FAMILY RESCUE CENTER - 22103 VANOWEN STREET - CANOGA PARK, CA 91303	33-1018720	501(C)(3)	0.	19,896.	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.	51,439.	FAIR MARKET 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.	6,990.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BEHAVIORAL HEALTH SERVICES, INC. JOINT EFFORTS INC. - 15519 CRENSHAW BLVD. - GARDENA, CA 90249	95-2838006	501(C)(3)	0.	37,340.	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 BELL, CA 90201	95-1656360	501(C)(3)	0.	280,344.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BETHEL LA COMMUNITY DEVELOPMENT 7911 S. WESTERN AVENUE LOS ANGELES, CA 90047	51-0429735	501(C)(3)	0.	28,291.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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BEYOND SHELTER PATH 5101 SOUTH BROADWAY LOS ANGELES, CA 90037	95-4197075	501(C)(3)	0.	41,155.	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)	0.	102,735.	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.	45,661.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BIENVENIDOS CHILDRENS CENTER, INC. 316 WEST 2ND STREET, SUITE 800 LOS ANGELES, CA 90012	95-4042883	501(C)(3)	0.	76,693.	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 DRIVE NORTH - SAN PEDRO, CA 90710	95-1691330	501(C)(3)	0.	1,650.	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.	21,012.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
BURBANK TEMPORARY AID CENTER 1304 WEST BURBANK BLVD. BURBANK, CA 91506	95-3309130	501(C)(3)	0.	3,871.	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.	30,512.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CASA PACIFICA CENTERS FOR CHILDREN AND FAMILIES - 1722 S. LEWIS ROAD - CAMARILLO, CA 93012	77-0195022	501(C)(3)	0.	19,913.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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CASA YOUTH SHELTER 10911 REAGAN STREET LOS ALAMITOS, CA 90720	95-3218061	501(C)(3)	0.	27,489.	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.	45,953.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CENTER FOR THE PACIFIC ASIAN FAMILY - 543 NORTH FAIRFAX AVE. # 108 - LOS ANGELES, CA 90036	95-3532351	501(C)(3)	0.	5,852.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CENTRAL CITY ACTION COMMITTEE 534 N. EAST EDGEWARE ROAD LOS ANGELES, CA 90026	23-7363312	501(C)(3)	0.	5,951.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CENTRAL CITY NEIGHBORHOOD PARTNERS 501 S. BIXEL STREET LOS ANGELES, CA 90017	95-4837709	501(C)(3)	0.	38,930.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CENTURY VILLAGES AT CABRILLO 2001 RIVER AVENUE LONG BEACH, CA 90810	95-4646521	501(C)(3)	0.	2,352.	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)	0.	5,451.	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.	187,318.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CHILDRENS INSTITUTE, INC. 2121 W. TEMPLE STREET LOS ANGELES, CA 90026	95-1641424	501(C)(3)	0.	41,748.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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CHOISS PERMANENT SUPPORTIVE HOUSING ALLIANCE FOR HOUSING AND HEALING - 825 COLORADO BLVD. STE. 100 - LOS ANGELES, CA 90041	95-4147364	501(C)(3)	0.	19,775.	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.	176,561.	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.	3,805.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CITY OF LOS ANGELES OFFICE OF CONTROLLER - 200 N. MAIN STREET ROOM 1200 - LOS ANGELES, CA 90012	95-8000735	501(C)(3)	0.	145,600.	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.	4,893.	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.	39,368.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
COMMON GROUND VENICE FAMILY CLINIC 2401 LINCOLN BLVD. SANTA MONICA, CA 90405	95-2769432	501(C)(3)	0.	21,505.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
COMUNIDAD CESAR CHAVEZ L.A. FAMILY HOUSING - 207 NORTH BREED STREET - LOS ANGELES, CA 90033	95-3920560	501(C)(3)	0.	51,902.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CORNERSTONE SAN FERNANDO VALLEY COMMUNITY MENTAL HEALTH CTR., INC. - 14660 OXNARD STREET - VAN NUYS, CA 91411	95-6194487	501(C)(3)	0.	31,709.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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COVENANT HOUSE 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	13-3391210	501(C)(3)	0.	5,656.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
COVER THE HOMELESS MINISTRY 1332 S. ORANGE DRIVE LOS ANGELES, CA 90019	91-2094255	501(C)(3)	0.	9,005.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CRISIS HOUSING VOLUNTEERS OF AMERICA - 2040 N GAREY AVE - POMONA, CA 91767	95-1691330	501(C)(3)	0.	46,281.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
CRISIS/BRIDGE HOUSING NEW DIRECTION COMMUNITY PROGRAMS - 8124 SOUTH WESTERN AVE - LOS ANGELES, CA 90047	95-4443705	501(C)(3)	0.	11,106.	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.	15,098.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
DANA MIDDLE SCHOOL THE LOS ANGELES FUND FOR PUBLIC EDUCATION - 1501 S. CABRILLO AVENUE - SAN PEDRO, CA 90731	45-2443162	501(C)(3)	0.	69,890.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
DAVID & MARGARET HOME, THE 1350 THIRD STREET LA VERNE, CA 91750	95-4232535	501(C)(3)	0.	51,929.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
DAYBREAK OPCC 1453 16TH STREET SANTA MONICA, CA 90404	95-6143865	501(C)(3)	0.	4,667.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
DEEP GREEN HOUSING & COMMUNITY DEVELOPMENT - 400 W. 9TH STREET, SUITE 100 - LOS ANGELES, CA 90015	95-4313200	501(C)(3)	0.	200,879.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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DHS OPCC 1751 CLOVERFIELD BLVD, 2ND FLOOR LOS ANGELES, CA 90404	95-6143865	501(C)(3)	0.	3,807.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
DIDI HIRSCH COMM. MENTAL HEALTH CTR - 4760 S. SEPULVEDA BLVD. - CULVER CITY, CA 90230	95-1816023	501(C)(3)	0.	115,438.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
DOMESTIC VIOLENCE CENTER OF SANTA CLARITA VALLEY - PO BOX 220037 - NEWHALL, CA 91322	68-0017331	501(C)(3)	0.	10,812.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
DOOR OF HOPE P.O. BOX 90455 PASADENA, CA 91109	95-4044568	501(C)(3)	0.	23,769.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
DOWNTOWN DROP IN CENTER VOLUNTEERS OF AMERICA - 628 S. SAN JULIAN STREET - LOS ANGELES, CA 90014	95-1691330	501(C)(3)	0.	4,848.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
DOWNTOWN WOMEN'S CENTER 442 S. SAN PEDRO STREET LOS ANGELES, CA 90013	31-1597223	501(C)(3)	0.	1,964.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
EAST HOLLYWOOD TOY GIVEAWAY HOPE IBF (FOUNTAIN AVE BAPTIST CHURCH) - 4903 FOUNTAIN AVENUE - LOS ANGELES, CA 90028	95-1792275	501(C)(3)	0.	46,189.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
EAST SAN GABRIEL VALLEY COALITION FOR THE HOMELESS - 1345 TURNBULL CANYON ROAD - HACIENDA HTS, CA 91715	95-4508436	501(C)(3)	0.	71,243.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
EISNER HEALTH 1530 OLIVE STREET LOS ANGELES, CA 90015	95-1690966	501(C)(3)	0.	13,061.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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ELIZABETH HOUSE 760 SANTA BARBARA STREET PASADENA, CA 91101	95-4451243	501(C)(3)	0.	3,791.	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.	13,902.	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.	62,324.	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.	24,419.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FAMILY EMERGENCY HOUSING PROGRAM VOLUNTEERS OF AMERICA - 8224 SOUTH BROADWAY - LOS ANGELES, CA 90003	95-1691330	501(C)(3)	0.	9,527.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FAMILY VIOLENCE PROJECT - HOPE COTTAGE JEWISH FAMILY SERVICES LOS ANGELES - 827 S. GRAMERCY PLACE - LOS ANGELES, CA 90005	95-0691013	501(C)(3)	0.	63,539.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FAMILY VIOLENCE PROJECT - TAMAR HOUSE JEWISH FAMILY SERVICES OF LOS ANGELES - 13949 VENTURA BLVD. #320 - SHERMAN OAKS, CA 91423	95-1691013	501(C)(3)	0.	13,743.	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.	22,026.	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.	48,815.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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FLOSSIE LEWIS CENTER BEHAVIORAL HEALTH SERVICES - 351 E. 6TH STREET - LONG BEACH, CA 90802	95-2838006	501(C)(3)	0.	21,191.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FOSTER CARE COUNTS 11111 SANTA MONCIA BLVD., SUITE 165 LOS ANGELES, CA 90025	45-4619493	501(C)(3)	0.	454,903.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FOSTER CHILDRENS RESOURCE CENTER 19441 BUSINESS CENTER DRIVE #110 NORTHRIDGE, CA 91324	95-1641960	501(C)(3)	0.	54,664.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FOSTERING A CHANGE 16161 VENTURA BLVD. #C858 LOS ANGELES, CA 91342	46-3910466	501(C)(3)	0.	9,709.	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.	182,790.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FREEHAB THE TEEN PROJECT, INC. 8140 SUNLAND BLVD. SUN VALLEY, CA 91352	30-0421837	501(C)(3)	0.	8,018.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
FRIENDS IN DEED ECUMENICAL COUNCIL OF PASADENA AREA CHURCHES - P.O. BOX 41125 - PASADENA, CA 91114	95-1644608	501(C)(3)	0.	22,838.	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.	9,606.	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	501(C)(3)	0.	11,052.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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GOOD SHEPHERD CENTER FOR HOMELESS WOMEN CATHOLIC CHARITIES OF LOS ANGELES - 1671 BEVERLY BLVD - LOS ANGELES, CA 90026	95-1690973	501(C)(3)	0.	19,949.	FAIR MARKET VALUE	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)	0.	2,361.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
GRAMERCY HOUSING GROUP 1824 4TH AVENUE LOS ANGELES, CA 90019	95-4396861	501(C)(3)	0.	11,777.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HARBOR INTERFAITH SHELTER 670 W. 9TH STREET SAN PEDRO, CA 90731	33-0031099	501(C)(3)	0.	56,445.	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.	32,693.	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.	719.	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.	46,915.	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.	8,586.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HAVEN HOUSE JEWISH FAMILY SERVICES L.A. - P.O. BOX 50007 - PASADENA, CA 91115	95-1691013	501(C)(3)	0.	26,032.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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HEART OF COMPASSION 600 S. MAPLE AVENUE MONTEBELLO, CA 90640	42-1573926	501(C)(3)	0.	403,930.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HELPING KIDS TO RECOVER INC. 937 E ALBERTOINI STREET, SUITE 200 CARSON, CA 90746	34-1981724	501(C)(3)	0.	155,283.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HILLSIDES 940 AVENUE 64 PASADENA, CA 91105	95-1644002	501(C)(3)	0.	7,398.	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)	0.	12,663.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HOLLYGROVE UPLIFT FAMILY SERVICES 815 N. EL CENTRO AVE LOS ANGELES, CA 90038	94-2295953	501(C)(3)	0.	27,840.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HOLLYWOOD COMMUNITY HOUSING CORPORATION - 5020 WEST SANTA MONICA BLVD. - HOLLYWOOD, CA 90029	95-4198215	501(C)(3)	0.	60,928.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HOME AT LAST COMMUNITY DEVELOPMENT CORPORATION - 2514 W. VERNON AVENUE - LOS ANGELES, CA 90008	47-0902546	501(C)(3)	0.	14,069.	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 90057	95-4074970	501(C)(3)	0.	125,112.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HOPE HARBOR CENTER THE SALVATION ARMY - 3107 S. GRAND AVENUE - LOS ANGELES, CA 90007	95-1656360	501(C)(3)	0.	6,446.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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HOPE IN A SUITCASE 2355 WESTWOOD BLVD., SUITE 1121 LOS ANGELES, CA 90064	47-5071911	501(C)(3)	0.	35,139.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HOPE MILL, INC. 16133 VENTURA BLVD., SUITE 650 ENCINO, CA 91436	80-0188464	501(C)(3)	0.	12,785.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HOPE OF THE VALLEY RESCUE MISSION 11134 SEPULVEDA BLVD. MISSION HILLS, CA 91345	27-2053273	501(C)(3)	0.	143,650.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
HOPE THROUGH HOUSING FOUNDATION 9421 HAVEN AVENUE RANCHO CUCAMONGA, CA 91730	33-0802554	501(C)(3)	0.	13,200.	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	501(C)(3)	0.	9,075.	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.	15,071.	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	94-1156347	501(C)(3)	0.	144,818.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
IMAGINE LA 5455 WILSHIRE BLVD., STE. 1001 LOS ANGELES, CA 90036	20-4637089	501(C)(3)	0.	2,976.	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(C)(3)	0.	78,805.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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INDEPENDENT LIVING CENTER 14407 GILMORE STREET #101 VAN NUYS, CA 91401	95-3026060	501(C)(3)	0.	14,702.	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.	15,872.	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.	14,736.	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.	51,611.	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.	35,502.	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.	83,184.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LA CAN/DWAC CANGRESS 530 S. MAIN STREET LOS ANGELES, CA 90013	02-0661629	501(C)(3)	0.	21,741.	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.	16,027.	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.	22,279.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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LANCASTER COMMUNITY SHELTER GRACE RESOURCES, INC. - 45134 N. SIERRA HWY. - LANCASTER, CA 93534	95-4309251	501(C)(3)	0.	13,578.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LAS FAMILIAS DEL PUEBLO 307 E. 7TH STREET LOS ANGELES, CA 90014	95-3660735	501(C)(3)	0.	17,774.	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.	22,432.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LINC HOUSING CORPORATION 555 OCEAN BLVD., SUITE 900 LONG BEACH, CA 90802	33-0578620	501(C)(3)	0.	7,386.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LITTLE TOKYO SERVICE CENTER, INC. 231 E. THIRD STREET G106 LOS ANGELES, CA 90013	95-4444102	501(C)(3)	0.	8,523.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LIVE AGAIN RECOVERY HOMES 38215 N. SAN FRANCISQUITO CYN. RD. SAUGUS, CA 91390	95-4053779	501(C)(3)	0.	19,893.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LOAVES & FISHES I CATHOLIC CHARITIES OF LOS ANGELES - 4322 SAN FERNANDO ROAD - GLENDALE, CA 91204	95-1690973	501(C)(3)	0.	54,573.	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.	42,838.	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.	9,906.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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LONG BEACH U.S. VETERANS INITIATIVE - 2001 RIVER AVENUE - LONG BEACH, CA 90810	95-4382752	501(C)(3)	0.	25,942.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LOS ANGELES COUNTY ALLIANCE OF BOYS & GIRLS CLUBS - 3939 ATLANTIC AVENUE, SUITE 215 - LONG BEACH, CA 90807	13-5562976	501(C)(3)	0.	28,060.	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.	97,312.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LOS ANGELES TEAM MENTORING 714 W. OLYMPIC BLVD., STE. 640 LOS ANGELES, CA 90015	95-4443617	501(C)(3)	0.	3,494.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
LOS ANGELES TRADE TECHNICAL COLLEGE - 400 W. WASHINGTON BLVD. - LOS ANGELES, CA 90015	95-3813527	501(C)(3)	0.	5,215.	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.	22,239.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MARIPOSA AND MENLO HOUSES AIDS/HIV HEALTH ALTERNATIVES - 1731 S. MENLO STREET - LOS ANGELES, CA 90006	95-4607820	501(C)(3)	0.	2,790.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MARY LIND RECOVERY CENTERS SOCIAL MODEL RECOVERY SYSTEMS, INC. - 360 SOUTH WESTLAKE AVE. - LOS ANGELES, CA 90057	95-4079133	501(C)(3)	0.	56,483.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MARYVALE 7600 E. GRAVES AVENUE ROSEMEAD, CA 91770	53-0196617	501(C)(3)	0.	103,666.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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MATERNAL AND CHILD HEALTH ACCESS 1111 W. 6TH STREET, 4TH FLOOR LOS ANGELES, CA 90017	95-4555879	501(C)(3)	0.	6,116.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MCKINLEY CHILDREN'S CENTER 762 W. CYPRESS STREET SAN DIMAS, CA 91773	95-2016696	501(C)(3)	0.	44,623.	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.	35,551.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MENTAL HEALTH AMERICA 456 ELM AVENUE LONG BEACH, CA 90802	95-1881491	501(C)(3)	0.	32,113.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MENTAL HEALTH AMERICA (LANCASTER) 506 WEST JACKSON STREET LANCASTER, CA 93534	95-1881491	501(C)(3)	0.	16,793.	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.	130,204.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
MY FIRST PLACE FIRST PLACE FOR YOUTH - 3530 WILSHIRE BLVD., SUITE 600 - LOS ANGELES, CA 90010	94-3341034	501(C)(3)	0.	10,980.	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.	3,832.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
OPERATION LOVE MINISTRIES, INC. 7811 SOUTH WESTERN AVENUE LOS ANGELES, CA 90047	47-0953408	501(C)(3)	0.	1,281.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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OPERATION SCHOOL BELL ASSISTANCE LEAGUE OF LOS ANGELES - 826 COLE AVENUE - LOS ANGELES, CA 90038	95-1641960	501(C)(3)	0.	1,746.	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.	34,872.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
OSBORNE PLACE SAN FERNANDO VALLEY COMMUNITY MENTAL HEALTH CTR, INC. - 14515 HAMLIN STREET - VAN NUYS, CA 91405	95-6194487	501(C)(3)	0.	38,408.	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(C)(3)	0.	25,034.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
PACIFIC CLINICS 2550 E. FOOTHILL BLVD. PASADENA, CA 91107	95-1644034	501(C)(3)	0.	167,592.	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	501(C)(3)	0.	15,633.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
PARENTS OF WATTS 10828 LOU-DILLON AVENUE LOS ANGELES, CA 90059	95-3894168	501(C)(3)	0.	41,649.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
PATHWAYS TO HOME VOLUNTEERS OF AMERICA - 3600 WILSHIRE BLVD, SUITE 1500 - LOS ANGELES, CA 90017	95-1691330	501(C)(3)	0.	6,152.	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)	0.	42,408.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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PERSONAL INVOLVEMENT CENTER, INC. 8220 S. SAN PEDRO STREET LOS ANGELES, CA 90003	23-7186243	501(C)(3)	0.	103,973.	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.	4,081.	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.	116,728.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
PROYECTO PASTORAL 171 S. GLESS STREET LOS ANGELES, CA 90033	95-3213958	501(C)(3)	0.	8,094.	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.	6,221.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
RECYCLED RESOURCES FOR THE HOMELESS - 715 NOLDEN STREET - LOS ANGELES, CA 90042	26-3457517	501(C)(3)	0.	6,348.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
RIVER COMMUNITY COVINA SOCIAL MODEL RECOVERY SYSTEMS, INC. - 508 S. SECOND AVE. - COVINA, CA 91723	95-4079133	501(C)(3)	0.	70,915.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ROSEMARY CHILDREN'S SERVICES 36 S. KINNELOA AVENUE, STE. 100 PASADENA, CA 91107	95-1661683	501(C)(3)	0.	3,998.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ROTARY CLUB OF LOS ANGELES FOUNDATION - 523 W 6TH STREET, SUITE 718 - LOS ANGELES, CA 90014	95-4479461	501(C)(3)	0.	22,680.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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SAFE HAVEN OPCC 1453 16TH STRET SANTA MONICA, CA 90404	95-6143865	501(C)(3)	0.	357.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SAFE REFUGE 1041 REDONDO AVENUE LONG BEACH, CA 90804	33-0355130	501(C)(3)	0.	34,540.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SAMOSHEL OPCC 1453 16TH STREET SANTA MONICA, CA 90404	95-6143865	501(C)(3)	0.	103.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SAN GABRIEL REGION CATHOLIC CHARITIES OF LOS ANGELES - 1307 WARREN STREET - LOS ANGELES, CA 90033	95-1690973	501(C)(3)	0.	23,212.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SAN GABRIEL VALLEY CENTER CALIFORNIA HISPANIC COMMISSION - 11046 VALLEY MALL - EL MONTE, CA 91731	94-2301551	501(C)(3)	0.	2,396.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SANCTUARY OF HOPE 4003 ADAMS BLVD. LOS ANGELES, CA 90018	27-3273118	501(C)(3)	0.	4,490.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SANTA FE SPRINGS - TRANSITIONAL LIVING CENTER THE SALVATION ARMY - 12000 EAST WASHINGTON BLVD. - WHITTIER, CA 90606	94-1156347	501(C)(3)	0.	223,094.	FAIR MARKET VALUE	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.	62,003.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SEPULVEDA I AND II NEW DIRECTIONS FOR VETERANS - 1611 PLUMMER ST. VA BLDG 4 - NORTH HILLS, CA 91343	95-4242745	501(C)(3)	0.	5,294.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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SHELTER PARTNERSHIP - OUTREACH 523 W. SIXTH STREET. STE. 616 LOS ANGELES, CA 90014	95-3976214	501(C)(3)	0.	39,428.	FAIR MARKET VALUE	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.	8,695.	FAIR MARKET VALUE	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	501(C)(3)	0.	221,329.	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(C)(3)	0.	19,527.	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.	1,754.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SOUTHERN CALIFORNIA ALCOHOL & DRUG PROGRAMS (ANGEL STEP INN) - 11500 PARAMOUNT BLVD. - DOWNEY, CA 90241	23-7228780	501(C)(3)	0.	38,506.	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.	31,283.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SRO HOUSING 1055 W. 7TH STREET LOS ANGELES, CA 90017	95-3909215	501(C)(3)	0.	88,799.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ST. ANNES RESIDENTIAL FACILITY 155 N. OCCIDENTAL BLVD. LOS ANGELES, CA 90026	95-1691306	501(C)(3)	0.	15,125.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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	(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. FRANCIS CENTER 1835 SOUTH HOPE STREET LOS ANGELES, CA 90015	95-4479271	501(C)(3)	0.	87,019.	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.	105,748.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
ST. MARGARET'S CENTER CATHOLIC CHARITIES OF LOS ANGELES - 10217 INGLEWOOD AVENUE - LENNOX, CA 90304	95-1690973	501(C)(3)	0.	76,468.	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.	13,404.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
STEP UP ON SECOND 1328 2ND STREET SANTA MONICA, CA 90401	95-4109386	501(C)(3)	0.	32,792.	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)	0.	91,210.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SU CASAENDING DOMESTIC ABUSE 3840 WOODRUFF AVENUE, SUITE 203 LONG BEACH, CA 90808	95-3495175	501(C)(3)	0.	33,368.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
SUPPORTIVE HOUSING ELLA'S FOUNDATION - 3006 S. VERMONT AVE. #113 - LOS ANGELES, CA 90007	80-0679091	501(C)(3)	0.	95,408.	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.	72,536.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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	(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
TEMPLE ISRAEL 5200 LANKERSIM BLV, STE 850 NORTH HOLLYWOOD, CA 91601	23-7383024	501(C)(3)	0.	19,999.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
THE BIDDY MASON CHARITABLE FOUNDATION FIRST AFRICAN METHODIST EPISCOPAL - 2249 SO. HARVARD BLVD. - LOS ANGELES, CA 90018	95-6142291	501(C)(3)	0.	13,594.	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.	43,498.	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.	130,591.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
THE NEW YOU CENTER, INC. 1030 W. FLORENCE AVE. LOS ANGELES, CA 90044	14-1992560	501(C)(3)	0.	619.	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.	29,413.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
THE VILLAGE FAMILY SERVICES 6736 LAUREL CANYON BLVD. #200 NORTH HOLLYWOOD, CA 90016	95-4625826	501(C)(3)	0.	48,397.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
THE WAY IN THE SALVATION ARMY 5939 HOLLYWOOD BLVD. LOS ANGELES, CA 90028	94-1156347	501(C)(3)	0.	34,365.	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.	9,128.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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	(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
TRINITY YOUTH SERVICES P.O. BOX 1210 COLTON, CA 92324	95-2480624	501(C)(3)	0.	17,108.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
TRUDY NORMAN LEWIS VALLEY SHELTER L.A. FAMILY HOUSING - 7843 LANKERSHIM BLVD. - 7843 LANKERSHIM BLVD. NORTH HOLLYWOOD, CA 91605	95-3920560	501(C)(3)	0.	56,169.	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.	123,633.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
TURNING POINT OPCC 1453 16TH STREET SANTA MONICA, CA 90404	95-6143865	501(C)(3)	0.	1,663.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
U.S. VETERANS INITIATIVE 733 S. HINDRY AVENUE INGLEWOOD, CA 90301	95-4382752	501(C)(3)	0.	22,680.	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.	216,377.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
UP4YOUTH EXTRAORDINARY FAMILIES 221 NORTH ARDMORE AVE LOS ANGELES, CA 90004	95-4440220	501(C)(3)	0.	7,662.	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.	11,921.	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.	9,557.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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	(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
VENICE COMMUNITY HOUSING CORPORATION - 720 ROSE AVENUE - VENICE, CA 90291	95-4200761	501(C)(3)	0.	74,644.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
VETERAN OPPORTUNITY CENTER NEW DIRECTIONS, INC. - 11303 WILSHIRE BLVD VA BLDG 116 - LOS ANGELES, CA 90073	95-4242745	501(C)(3)	0.	23,017.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WALDEN HOUSE HEALTHRIGHT 360 149 W. 22ND STREET LOS ANGELES, CA 90007	94-6129071	501(C)(3)	0.	109,213.	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.	94,165.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WEST COVINA ACCESS & OUTREACH CENTER VOLUNTEERS OF AMERICA - 1760 WEST CAMERON AVENUE, STE. 104 - WEST COVINA, CA 91790	95-1691330	501(C)(3)	0.	7,323.	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)	0.	95,226.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WEST L.A. HAVEN THE SALVATION ARMY 11301 WILSHIRE, BLDG 207, RM. 205 LOS ANGELES, CA 90073	94-1156347	501(C)(3)	0.	218.	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.	14,829.	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.	14,160.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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	(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
WHITTIER CORPS SOCIAL SERVICES THE SALVATION ARMY - P.O. BOX 954 - WHITTIER, CA 90608	94-1156347	501(C)(3)	0.	7,636.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WINGS YWCA SAN GABRIEL VALLEY 943 N. GRAND AVENUE COVINA, CA 91724	95-1641967	501(C)(3)	0.	4,564.	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.	30,781.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WOMEN ORGANIZING RESOURCES, KNOWLEDGE AND SERVICES (W.O.R.K.S.) - 795 N. AVENUE 50 - LOS ANGELES, CA 90042	95-4680440	501(C)(3)	0.	67,019.	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.	14,116.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
WOMENSHELTER OF LONG BEACH PO BOX 32107 LONG BEACH, CA 90832	95-1644058	501(C)(3)	0.	19,404.	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.	22,056.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.
YWCA GREATER LOS ANGELES 7515 PACIFIC BLVD. WALNUT PARK, CA 90255	95-1652919	501(C)(3)	0.	12,417.	FAIR MARKET VALUE	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.	20,725.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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	(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
ZAHN CENTER THE SALVATION ARMY 832 W. JAMES M. WOOD BLVD. LOS ANGELES, CA 90015	95-1656360	501(C)(3)	0.	53,750.	FAIR MARKET VALUE	VARIOUS GOODS	TO ASSIST THE ENTITY WITH RESOURCES TO SUPPORT THE HOMELESS.

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

APPLICATION REVIEW, SITE VISITS AS APPROPRIATE.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ 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.irs.gov/form990.*

OMB No. 1545-0047

2016

Open To Public Inspection

Name of the organization

SHELTER PARTNERSHIP, INC.

Employer identification number

95-3976214

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods	X		7,259,180.	FAIR MARKET VALUE
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
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 organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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 O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2016

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:

MATERIALS ASSISTANCE

DURING OUR MOST RECENT FISCAL YEAR, THE S. MARK TAPER FOUNDATION SHELTER RESOURCE BANK SECURED $7.1 MILLION IN NEW PRODUCTS FROM 63 DONORS. WE DISTRIBUTED $10.1 MILLION IN NEW PRODUCTS AND DISTRIBUTED THEM, AT NO CHARGE, TO 235 AGENCIES SERVING THE HOMELESS, FOSTER YOUTH, AND PERSONS LIVING IN POVERTY IN LA COUNTY. GOODS INCLUDED NEW CLOTHING, SHOES, UNDERWEAR AND SOCKS FOR ALL AGE GROUPS; PERSONAL CARE PRODUCTS AND TOILETRIES; CLEANING SUPPLIES; HOUSEHOLD GOODS, PAPER PRODUCTS; BABY ACCESSORIES; MATTRESSES, COMFORTERS, AND BEDS; TOYS AND BOOKS; FURNISHING ITEMS; AND SO MUCH MORE. 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. SINCE THE PROJECT'S INCEPTION IN 1989, OVER $224 MILLION IN NEW GOODS HAVE BEEN DISTRIBUTED.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

PUBLIC POLICY/TECHNICAL ASSISTANCE

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

Name of the organization: SHELTER PARTNERSHIP, INC.

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PERSONS WITH MENTAL ILLNESS, PERSONS WITH SUBSTANCE ADDICTIONS, PERSONS LIVING WITH HIV/AIDS, OLDER ADULTS, AND PERSONS WITH CHRONIC PHYSICAL AILMENTS), AND HOMELESS FAMILIES (INCLUDING TRANSITIONAL AGE YOUTH WITH YOUNG CHILDREN AND VICTIMS OF DOMESTIC VIOLENCE).

DURING THE FISCAL YEAR, SHELTER PARTNERSHIP WORKED WITH COMMUNITY ORGANIZATIONS, AND THE CITY OF LOS ANGELES TO HELP DESIGN "PROPOSITION HHH." THE PROPOSITION PROVIDES $1.2 BILLION IN BONDS TO HELP CREATE 10,000 UNITS OF PERMANENT SUPPORTIVE HOUSING FOR CHRONICALLY HOMELESS INDIVIDUALS AND WAS APPROVED BY LOS ANGELES CITY VOTERS IN NOVEMBER 2016.

SHELTER PARTNERSHIP ALSO WORKED WITH COMMUNITY ORGANIZATIONS AND THE COUNTY OF LOS ANGELES TO HELP DESIGN "MEASURE H." THE MEASURE PROVIDES $355 MILLION IN ANNUAL FUNDING FOR 10 YEARS FOR HOMELESS SERVICES AND RENTAL ASSISTANCE. IT WAS APPROVED BY LOS ANGELES COUNTY VOTERS IN MARCH 2017.

SHELTER PARTNERSHIP ASSISTED THE LOS ANGELES HOMELESS SERVICES AUTHORITY (LAHSA) IN PREPARING THE LOS ANGELES CONTINUUM OF CARE CONSOLIDATED APPLICATION, THROUGH WHICH LAHSA RECEIVED OVER $105 MILLION FROM HUD TO FUND PERMANENT SUPPORTIVE HOUSING, RAPID REHOUSING, TRANSITIONAL HOUSING, AND SUPPORTIVE SERVICES FOR THE HOMELESS THROUGHOUT THE COUNTY AND THE CITY OF LOS ANGELES.

SHELTER PARTNERSHIP 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

Name of the organization: SHELTER PARTNERSHIP, INC.

Employer identification number: 95-3976214

REHOUSING AND HOUSING STABILITY SERVICES FOR HOMELESS AND AT-RISK FAMILIES. THE CES FOR FAMILIES SYSTEM ASSISTED OVER 1,500 FAMILIES MOVE INTO HOUSING IN THE 2016-2017 YEAR.

SHELTER PARTNERSHIP 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. IN 2016-2017 OVER 3,500 HOMELESS VETERANS SECURED HOUSING.

SHELTER PARTNERSHIP ADVISED THE LOS ANGELES HOUSING AND COMMUNITY INVESTMENT DEPARTMENT (HCIDLA) IN ITS ADMINISTRATION OF THE HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA) PROGRAM, INCLUDING PROGRAM IMPLEMENTATION AND UNDERTAKING AN ASSESSMENT OF THE NEW REGIONAL OFFICES. THESE OFFICES WERE DEVELOPED AS PART OF OUR PROGRAM REDESIGN.

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 18 COMMUNITY-BASED AGENCIES THROUGHOUT THE METRO LOS ANGELES AREA SERVING THE HOMELESS. DURING FISCAL YEAR 2016-2017, 6,525 INDIVIDUALS WERE ASSISTED WITH 235,145 TOKENS AND NEARLY 12,000 "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.

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SHELTER PARTNERSHIP CONTINUED WORKING ON THE UNITED WAY'S HOME FOR GOOD INITIATIVE, PARTICIPATING IN THE HOMELESS ANALYSIS COLLABORATIVE, POLICY TEAM, AND THE COORDINATED ENTRY SYSTEM POPULATION INTEGRATION GROUP.

SHELTER PARTNERSHIP 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 HOMELESS PREVENTION PROGRAM.

SHELTER PARTNERSHIP PARTICIPATED IN VARIOUS OTHER PLANNING PROCESSES, INCLUDING THE COUNTY'S HOMELESS INITIATIVE AND THE CITY'S COMPREHENSIVE HOMELESS STRATEGY, AND SUBSEQUENT IMPLEMENTATION ACTIVITIES.

FORM 990, PART VI, SECTION B, LINE 11B:

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

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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 18:

THE ORGANIZATION'S FORM 990 IS AVAILABLE FOR PUBLIC VIEWING ON WWW.GUIDESTAR.ORG AND ON SHELTER PARTNERSHIP, INC.'S WEBSITE.

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.

PART XII, LINE 2C

THE AUDIT OVERSIGHT COMMITTEE HAS NOT CHANGED ITS PROCESS SINCE THE PRIOR YEAR.