Form **990** (Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 **2019** Open to Public Inspection

A For the 2019 calendar year, or tax year beginning JUL 1, 2019 and ending JUN 30, 2020

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

C Name of organization: COALITION FOR THE HOMELESS INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 129 FULTON STREET — Room/suite

City or town, state or province, country, and ZIP or foreign postal code: NEW YORK, NY 10038

D Employer identification number: 13-3072967

E Telephone number: 212-776-2080

G Gross receipts $ 19,260,055.

F Name and address of principal officer: SHAWN-ANN MULLEN SAME AS C ABOVE

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

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

H(c) Group exemption number ▶

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

J Website: ▶ WWW.COALITIONFORTHEHOMELESS.ORG

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

L Year of formation: 1981 **M** State of legal domicile: NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: THE COALITION FOR THE HOMELESS IS THE NATION'S OLDEST ADVOCACY AND DIRECT SERVICE ORGANIZATION

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	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 2019 (Part V, line 2a)	5	198
6	Total number of volunteers (estimate if necessary)	6	600
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 39	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	16,029,742.	17,626,824.
	9	Program service revenue (Part VIII, line 2g)	37,323.	36,609.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	183.	16,314.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	310,846.	730,322.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	16,378,094.	18,410,069.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,579,096.	3,853,772.
	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)	6,656,987.	7,125,890.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	108,050.	64,050.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,436,292.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,262,460.	3,120,521.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	12,606,593.	14,164,233.
	19	Revenue less expenses. Subtract line 18 from line 12	3,771,501.	4,245,836.
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	22,129,975.	27,627,320.
	21	Total liabilities (Part X, line 26)	690,934.	1,935,480.
	22	Net assets or fund balances. Subtract line 21 from line 20	21,439,041.	25,691,840.

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 COPY — Date

▶ SHAWN-ANN MULLEN, CFO

Type or print name and title

Paid Preparer Use Only				
Print/Type preparer's name: MAGDALENA M. CZERNIAWSKI	Preparer's signature: MAGDALENA M. CZERNIA	Date: 05/17/21	Check ☐ if self-employed	PTIN: P00535099
Firm's name ▶ MARKS PANETH LLP			Firm's EIN ▶ 11-3518842	
Firm's address ▶ 685 THIRD AVENUE NEW YORK, NY 10017			Phone no. 212-503-8800	

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

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:
THE COALITION FOR THE HOMELESS IS THE NATION'S OLDEST ADVOCACY AND DIRECT SERVICE ORGANIZATION HELPING HOMELESS MEN, WOMEN, AND CHILDREN. WE BELIEVE THAT AFFORDABLE HOUSING, SUFFICIENT FOOD AND THE CHANCE TO WORK FOR A LIVING WAGE ARE FUNDAMENTAL RIGHTS IN A CIVILIZED SOCIETY.

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 [X] 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 [X] 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 $ 2,686,945. including grants of $ 877,884.) (Revenue $)
CRISIS SERVICES- THE COALITION PROVIDES CRISIS SERVICES TO OVER 11,000 DIFFERENT HOUSEHOLDS BOTH HOMELESS AND AT IMMINENT RISK OF HOMELESSNESS ANNUALLY, INCLUDING EMERGENCY FOOD, CLOTHING, DIAPERS, BABY FORMULA, SCHOOL SUPPLIES AND UNIFORMS, AS WELL AS ASSISTANCE WITH OBTAINING DOCUMENTATION OF IDENTIFICATION, GOVERNMENT BENEFITS, HOUSING APPLICATIONS, MENTAL HEALTH AND SUBSTANCE ADDICTION TREATMENT. CFH ALSO PROVIDES ONE-TIME EMERGENCY GRANTS FOR NEW YORKERS WHO HAVE SIGNIFICANT RENT ARREARS ALLOWING FAMILIES AND INDIVIDUALS ON THE EDGE OF HOMELESSNESS TO REMAIN STABLY HOUSED.

4b (Code:) (Expenses $ 2,447,656. including grants of $ 1,242,267.) (Revenue $ 129,613.)
HIV/AIDS - THE COALITION PROVIDES PERMANENT SCATTERED-SITE HOUSING ALONG WITH SOCIAL SERVICES AND INTENSIVE CASE MANAGEMENT TO 66 FORMERLY HOMELESS INDIVIDUALS AND FAMILIES LIVING WITH HIV/AIDS.

4c (Code:) (Expenses $ 1,777,924. including grants of $ 23,005.) (Revenue $)
ADVOCACY - THE COALITION IS THE COURT-APPOINTED MONITOR OF NYC'S SHELTER SYSTEM FOR HOMELESS SINGLE ADULTS AND CITY-APPOINTED MONITOR OF NYC'S SHELTER SYSTEM FOR HOMELESS FAMILIES; WE STEADFASTLY DEFEND THE RIGHTS OF NEW YORKERS EXPERIENCING HOMELESSNESS AND POVERTY. CFH UTILIZES PUBLIC EDUCATION, GRASSROOTS ORGANIZING AND IMPACT LITIGATION TO INCREASE INVESTMENTS IN HOUSING-BASED SOLUTIONS TO MODERN, MASS HOMELESSNESS. OUR WORK DIRECTLY BENEFITS THE ROUGHLY 60,000 PEOPLE WHO RESIDE IN NYC SHELTERS EACH DAY, AS WELL AS THOUSANDS MORE WHO SLEEP ROUGH ON OUR CITY'S STREET.

4d Other program services (Describe on Schedule O.)
(Expenses $ 4,648,026. including grants of $ 1,710,616.) (Revenue $)

4e Total program service expenses ▶ 11,560,551.

Part IV Checklist of Required Schedules

		Line	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 donor-restricted endowments or in 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
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	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *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 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) 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, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *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	X	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		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	30			
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	

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

				Yes	No
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 198			
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 on 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		
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 on Schedule O*		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?		15		X
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		X
	If "Yes," complete Form 4720, Schedule O.				

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 on 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. 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 on Schedule O.	1a	17		
b	Enter the number of voting members included on 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, 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 on 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 ▶NY,NJ,CA,FL,PA,CT

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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 [ ] Other *(explain on Schedule O)*

19 Describe on 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 ▶

SHAWN-ANN MULLEN, CFO - 212-776-2080

129 FULTON STREET, NEW YORK, NY 10038

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.

See instructions for the order in which to list the persons above.

☐ 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: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(1) AMANDA MORETTI BOARD MEMBER	1.00	X						0.	0.	0.
(2) ANDREW B. KRAMER BOARD MEMBER	1.00	X						0.	0.	0.
(3) BARRY BERKE BOARD CHAIR	1.00	X		X				0.	0.	0.
(4) DANIEL NARDELLO BOARD MEMBER	1.00	X						0.	0.	0.
(5) DAVID N. DINKINS BOARD MEMBER	1.00	X						0.	0.	0.
(6) ELLEN BAXTER BOARD MEMBER	1.00	X						0.	0.	0.
(7) HELEN LOWENSTEIN BOARD MEMBER	1.00	X						0.	0.	0.
(8) HOWARD FURST, MD BOARD MEMBER	1.00	X						0.	0.	0.
(9) JENNIFER WALLACE BOARD MEMBER	1.00	X						0.	0.	0.
(10) LUCY FATO BOARD MEMBER	1.00	X						0.	0.	0.
(11) MARCIA SELLS SECRETARY	1.00	X		X				0.	0.	0.
(12) MICHAEL D. FRIEDMAN TREASURER	1.00	X		X				0.	0.	0.
(13) MICHAEL W. KEMPNER BOARD MEMBER	1.00	X						0.	0.	0.
(14) RICH RUSSO BOARD MEMBER	1.00	X						0.	0.	0.
(15) RICHARD LEWIS BOARD MEMBER	1.00	X						0.	0.	0.
(16) RICHARD ROBERTO BOARD MEMBER	1.00	X						0.	0.	0.
(17) TERRY ANDREAS BOARD MEMBER	1.00	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: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(18) ANN NORTZ DEPUTY EXEC. DIR. OF POLIC	40.00			X				225,737.	0.	46,564.
(19) DAVID GIFFEN EXECUTIVE DIRECTOR	39.00 1.00			X				239,462.	0.	70,485.
(20) SHAWN-ANN MULLEN CHIEF FINANCIAL OFFICER	39.00 1.00			X				166,291.	0.	25,714.
(21) TIM CAMPBELL DEPUTY EXEC. DIR. OF PROG.	40.00			X				152,235.	0.	76,516.
(22) CARL BENTSEN DIR. OF INF. TECH & OPERAT	39.00 1.00					X		119,592.	0.	8,940.
(23) DEBORAH DIAMANT DIR. OF INF. TECH & OPERAT	40.00					X		108,011.	0.	22,035.
(24) LINDSEY DAVIS SENIOR DIR. OF CRISIS SERV	40.00					X		111,259.	0.	15,401.
(25) SARAH MURPHY DIR. OF DEVELOPMENT	40.00					X		132,980.	0.	31,331.
(26) MARY BROSNAHAN PRESIDENT/CEO (FORMER)	39.00 1.00						X	261,392.	0.	30,796.
1b Subtotal ▶								1,516,959.	0.	327,782.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								1,516,959.	0.	327,782.

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 ▶ 9

			Yes	No
3	Did the organization list any **former** officer, director, 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	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c 702,693.				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e 3,810,713.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 13,113,418.				
	g	Noncash contributions included in lines 1a-1f	1g $ 646,773.				
	h	**Total.** Add lines 1a-1f ▶		17,626,824.			
Program Service Revenue			Business Code				
	2 a	MANAGEMENT FEES	900099	36,609.	36,609.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a-2f ▶		36,609.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		14,915.			14,915.
	4	Income from investment of tax-exempt bond proceeds ▶					
	5	Royalties ▶					
			(i) Real / (ii) Personal				
	6 a	Gross rents	6a 1,482,304. /				
	b	Less: rental expenses	6b 683,162. /				
	c	Rental income or (loss)	6c 799,142. /				
	d	Net rental income or (loss) ▶		799,142.			799,142.
			(i) Securities / (ii) Other				
	7 a	Gross amount from sales of assets other than inventory	7a 1,399. /				
	b	Less: cost or other basis and sales expenses	7b 0. /				
	c	Gain or (loss)	7c 1,399. /				
	d	Net gain or (loss) ▶		1,399.			1,399.
	8 a	Gross income from fundraising events (not including $ 702,693. of contributions reported on line 1c). See Part IV, line 18	8a 5,000.				
	b	Less: direct expenses	8b 166,824.				
	c	Net income or (loss) from fundraising events ▶		-161,824.			-161,824.
	9 a	Gross income from gaming activities. See Part IV, line 19	9a				
	b	Less: direct expenses	9b				
	c	Net income or (loss) from gaming activities ▶					
	10 a	Gross sales of inventory, less returns and allowances	10a				
	b	Less: cost of goods sold	10b				
	c	Net income or (loss) from sales of inventory ▶					
Miscellaneous Revenue			Business Code				
	11 a	OTHER INCOME	900099	90,304.	90,304.		
	b	INTERNSHIP PLACEMENT FEES	900099	2,700.	2,700.		
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a-11d ▶		93,004.			
	12	**Total revenue.** See instructions ▶		18,410,069.	129,613.	0.	653,632.

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	20,000.	20,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	3,833,772.	3,833,772.		
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	988,493.	720,061.	231,864.	36,568.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	291,442.	224,410.	32,059.	34,973.
7 Other salaries and wages	4,084,557.	3,213,730.	509,131.	361,696.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	230,423.	178,304.	33,724.	18,395.
9 Other employee benefits	1,094,976.	877,646.	145,120.	72,210.
10 Payroll taxes	435,999.	347,978.	59,367.	28,654.
11 Fees for services (nonemployees):				
a Management				
b Legal	130,953.	94,153.	36,800.	
c Accounting	42,538.	42,538.		
d Lobbying	484,697.	484,697.		
e Professional fundraising services. See Part IV, line 17	64,050.			64,050.
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.)	241,888.	93,527.		148,361.
12 Advertising and promotion	12,119.	6,056.	5,904.	159.
13 Office expenses	606,403.	240,462.	29,768.	336,173.
14 Information technology				
15 Royalties				
16 Occupancy	301,270.	265,778.	14,046.	21,446.
17 Travel	111,694.	110,010.	363.	1,321.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	54,574.	51,505.	1,096.	1,973.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	98,102.	83,360.	9,271.	5,471.
23 Insurance	157,006.	118,752.	30,618.	7,636.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a UBIT TAXES	6,639.	5,642.	518.	479.
b BAD DEBT EXPENSE	450,540.	441,152.	2,388.	7,000.
c INDIRECT FUNDRAISING EX	275,668.			275,668.
d EQUIPMENT MAINTENANCE	87,242.	65,086.	13,961.	8,195.
e All other expenses	59,188.	41,932.	11,392.	5,864.
25 **Total functional expenses.** Add lines 1 through 24e	14,164,233.	11,560,551.	1,167,390.	1,436,292.
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	4,170,312.	1	9,107,461.
	2	Savings and temporary cash investments	180.	2	272.
	3	Pledges and grants receivable, net	1,550,219.	3	2,519,722.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	149,427.	9	152,403.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a 20,397,136.			
	b	Less: accumulated depreciation — 10b 5,149,420.	15,314,821.	10c	15,247,716.
	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	945,016.	15	599,746.
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	22,129,975.	16	27,627,320.
Liabilities	17	Accounts payable and accrued expenses	600,859.	17	606,378.
	18	Grants payable		18	
	19	Deferred revenue	27,677.	19	97,058.
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	1,205,865.
	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	62,398.	25	26,179.
	26	**Total liabilities.** Add lines 17 through 25	690,934.	26	1,935,480.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ [X] and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	20,220,278.	27	22,885,796.
	28	Net assets with donor restrictions	1,218,763.	28	2,806,044.
		Organizations that do not follow FASB ASC 958, check here ▶ [ ] and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	21,439,041.	32	25,691,840.
	33	Total liabilities and net assets/fund balances	22,129,975.	33	27,627,320.

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	18,410,069.
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,164,233.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,245,836.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	21,439,041.
5	Net unrealized gains (losses) on investments	5	6,963.
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 on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	25,691,840.

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 on 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 on 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.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization COALITION FOR THE HOMELESS INC
Employer identification number 13-3072967

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 [X] 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	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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	11106347.	10281353.	11007383.	16029742.	17626824.	66051649.
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	11106347.	10281353.	11007383.	16029742.	17626824.	66051649.
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)						1168366.
6 **Public support.** Subtract line 5 from line 4.						64883283.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	11106347.	10281353.	11007383.	16029742.	17626824.	66051649.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1098422.	1012044.	1009863.	1101851.	1498618.	5720798.
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.)	622,316.	887,643.	936,585.	223,392.	98,004.	2767940.
11 **Total support.** Add lines 7 through 10						74540387.

12 Gross receipts from related activities, etc. (see instructions) **12** 111,165.

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 2019 (line 6, column (f) divided by line 11, column (f)) **14** 87.04 %

15 Public support percentage from 2018 Schedule A, Part II, line 14 **15** 84.84 %

16a **33 1/3% support test - 2019.** 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 - 2018.** 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 - 2019.** 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 - 2018.** 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2019** (line 10c, column (f), divided by line 13, column (f))	17	%
18	Investment income percentage from **2018** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2019.** 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 - 2018.** 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 (as 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 2019 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-2019**	**(iii) Distributable Amount for 2019**
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in **Part VI.** See instructions.			
7 **Excess distributions carryover to 2020.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

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.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MANAGEMENT FEES

2015 AMOUNT: $ 35,836.

2016 AMOUNT: $ 38,249.

FUNDRAISING

2015 AMOUNT: $ 452,724.

2016 AMOUNT: $ 496,700.

2017 AMOUNT: $ 477,545.

2018 AMOUNT: $ 66,650.

2019 AMOUNT: $ 5,000.

MISC.

2015 AMOUNT: $ 133,756.

2016 AMOUNT: $ 352,694.

2017 AMOUNT: $ 459,040.

2018 AMOUNT: $ 152,842.

2019 AMOUNT: $ 90,304.

INTERNSHIP PLACEMENT FEES

2018 AMOUNT: $ 3,900.

2019 AMOUNT: $ 2,700.

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.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2019

Name of the organization: COALITION FOR THE HOMELESS INC

Employer identification number: 13-3072967

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 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

[X] 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: COALITION FOR THE HOMELESS INC

Employer identification number: 13-3072967

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	NYC HUMAN RESOURCE ADMINISTRATION 375 PEARL STREET NEW YORK, NY 10038	$ 1,926,849.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	NYS OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE 40 NORTH PEARL STREET ABANY, NY 12243	$ 772,448.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	NYS DEPARTMENT OF HEALTH 150 BROADWAY, FL 6W ALBANY, NY 12204	$ 378,046.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4	NYC DEPARTMENT OF HOMELESS SERVICES 33 BEAVER ST NEW YORK, NY 10004	$ 595,735.	Person [X] Payroll [ ] Noncash [ ] (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: COALITION FOR THE HOMELESS INC

Employer identification number: 13-3072967

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
		$	
		$	
		$	
		$	
		$	
		$	

Name of organization: COALITION FOR THE HOMELESS INC

Employer identification number: 13-3072967

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

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**
COALITION FOR THE HOMELESS INC	13-3072967

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 (grassroots lobbying)	255,238.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	229,459.	
c Total lobbying expenditures (add lines 1a and 1b)	484,697.	
d Other exempt purpose expenditures	13,679,526.	
e Total exempt purpose expenditures (add lines 1c and 1d)	14,164,223.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	858,211.	

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.

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)	214,553.	
h Subtract line 1g from line 1a. If zero or less, enter -0-	40,685.	
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.	

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)** 2016	**(b)** 2017	**(c)** 2018	**(d)** 2019	**(e)** Total
2a Lobbying nontaxable amount	737,955.	748,916.	786,511.	858,211.	3,131,593.
b Lobbying ceiling amount (150% of line 2a, column(e))					4,697,390.
c Total lobbying expenditures	202,651.	199,498.	220,524.	484,697.	1,107,370.
d Grassroots nontaxable amount	184,489.	187,229.	196,628.	214,553.	782,899.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,174,349.
f Grassroots lobbying expenditures	8,975.	5,986.	17,018.	255,238.	287,217.

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?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
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.

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.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization: COALITION FOR THE HOMELESS INC
Employer identification number: 13-3072967

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 (for example, recreation or education)
- ☐ Protection of natural habitat
- ☐ Preservation of open space
- ☐ Preservation of a historically important land area
- ☐ Preservation of a certified historic structure

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 7/25/06, 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 FASB 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 FASB 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 FASB 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 make 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 program
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 Term 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		7,966,789.		7,966,789.
b Buildings		10,689,907.	4,614,593.	6,075,314.
c Leasehold improvements		926,295.	26,762.	899,533.
d Equipment		426,478.	246,685.	179,793.
e Other		387,667.	261,380.	126,287.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				15,247,716.

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) CAPITAL LEASE PAYABLE	26,179.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	26,179.

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 FASB 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	19,418,217.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	6,963.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	318,023.		
e	Add lines **2a** through **2d**			2e	324,986.
3	Subtract line **2e** from line **1**			3	19,093,231.
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	-683,162.		
c	Add lines **4a** and **4b**			4c	-683,162.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	18,410,069.

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	14,986,777.
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	1,098,212.		
e	Add lines **2a** through **2d**			2e	1,098,212.
3	Subtract line **2e** from line **1**			3	13,888,565.
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	275,668.		
c	Add lines **4a** and **4b**			4c	275,668.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	14,164,233.

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:

THE AGENCY BELIEVES IT HAS NO UNCERTAIN TAX POSITIONS AS OF JUNE 30, 2020 IN ACCORDANCE WITH ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC 740, "INCOME TAXES," WHICH PROVIDES STANDARDS FOR ESTABLISHING AND CLASSIFYING ANY TAX PROVISIONS FOR UNCERTAIN TAX POSITIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RELATED ENTITIES REVENUE	1,765,225.
CONSOLIDATING ELIMINATIONS	-1,171,534.
INDIRECT FUNDRASING EXPENSES	-275,668.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	318,023.

Part XIII Supplemental Information *(continued)*

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RENTAL EXPENSES NETTED AGAINST REVENUE	-683,162.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RELATED ENTITIES EXPENSES	1,586,584.
CONSOLIDATING ELIMINATIONS	-1,171,534.
RENTAL EXPENSES NETTED AGAINST REVENUE	683,162.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	1,098,212.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INDIRECT FUNDRASING EXPENSES	275,668.

SCHEDULE G (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Supplemental Information Regarding Fundraising or Gaming Activities	OMB No. 1545-0047
	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. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.	2019 Open to Public Inspection

Name of the organization	Employer identification number
COALITION FOR THE HOMELESS INC	13-3072967

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 [X] Mail solicitations
b [X] Internet and email solicitations
c [ ] Phone solicitations
d [X] In-person solicitations
e [X] Solicitation of non-government grants
f [X] Solicitation of government grants
g [X] 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? [X] 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	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
SANKY COMMUNICATIONS - 599 11TH AVENUE, NEW YORK, NY	DIRECT MAIL		X	2,555,829.	64,050.	2,491,779.
Total ▶				2,555,829.	64,050.	2,491,779.

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

NY,NJ,CT,PA,FL,CA

SEE PART IV FOR CONTINUATIONS

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 ARTWALK (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	707,693.			707,693.
	2 Less: Contributions	702,693.			702,693.
	3 Gross income (line 1 minus line 2)	5,000.			5,000.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	37,499.			37,499.
	7 Food and beverages	129,325.			129,325.
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				166,824.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-161,824.

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.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: SANKY COMMUNICATIONS

(I) ADDRESS OF FUNDRAISER: 599 11TH AVENUE, NEW YORK, NY 10036

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.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization: COALITION FOR THE HOMELESS INC

Employer identification number 13-3072967

Part I **General Information on Grants and Assistance**

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

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

Part II **Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" 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
INTERFAITH ASSEMBLY ON HOMELESSNESS AND HOUSING - 165 W 105TH ST - NEW YORK, NY 10025	13-3279158	501(C)(3)	20,000.	0.			GENERAL OPERATING

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

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

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" 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
GRANTS TO CLIENTS - RENT	788	2,008,793.	0.		
GRANTS TO CLIENTS - TRANSPORTATION	0	0.	97,479.	FMV	METROCARDS
GRANTS TO CLIENTS - COVID RELIEF	0	512,038.	0.		
GRANTS TO CLIENTS - CASH	0	319,682.	0.		
GRANTS TO CLIENTS - FOOD	0	0.	842,868.	COST	FOOD

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:

THE ORGANIZATION IS PAYING DIRECTLY TO VENDORS THEREFORE, IT ENSURES THAT THE FUNDS ARE PROPERLY SPENT.

Part III **Continuation of Grants and Other Assistance to Individuals in the United States** (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
GRANTS TO CLIENTS - FURNISHING	0.	0.	16,862.	FMV	FURNITURE
GRANT CLIENT STORAGE	0.	36,049.	0.		

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization	Employer identification number
COALITION FOR THE HOMELESS INC	13-3072967

Part I Questions Regarding Compensation

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

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
(1) ANN NORTZ	(i)	222,005.	0.	3,732.	34,869.	11,695.	272,301.	0.
DEPUTY EXEC. DIR. OF POLIC	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DAVID GIFFEN	(i)	237,344.	0.	2,118.	12,912.	57,573.	309,947.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SHAWN-ANN MULLEN	(i)	166,231.	0.	60.	5,918.	19,796.	192,005.	0.
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) TIM CAMPBELL	(i)	151,742.	0.	493.	19,348.	57,168.	228,751.	0.
DEPUTY EXEC. DIR. OF PROG.	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) SARAH MURPHY	(i)	132,917.	0.	63.	10,947.	20,384.	164,311.	0.
DIR. OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) MARY BROSNAHAN	(i)	0.	0.	261,392.	0.	30,796.	292,188.	0.
PRESIDENT/CEO (FORMER)	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 4A:

MARY BROSHAHAN RECEIVED SERVERANCE PAYMENT OF $261,392 THAT IS INCLUDED IN COLUMN (B)(III).

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.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization: COALITION FOR THE HOMELESS INC

Employer identification number: 13-3072967

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		214,757.	FMV
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	186	100,738.	FMV
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	X	2	33,377.	FMV
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (COSMETICS)	X	5,300	140,200.	FMV
26	Other ▶ (TOYS)	X	5,141	110,169.	FMV
27	Other ▶ (SCHOOL SUPPLE)	X	4,251	19,819.	FMV
28	Other ▶ (EVENT TICKETS)	X	10	12,000.	FMV

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.

PART I, OTHER TYPES OF PROPERTY:

INSTRUMENTS

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 9

(C) REVENUE REPORTED ON FORM 990, PART VIII $ 7358.

(D) METHOD OF DETERMINING REVENUE: FMV

COMPUTER EQUIPMENT

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 23

(C) REVENUE REPORTED ON FORM 990, PART VIII $ 5849.

(D) METHOD OF DETERMINING REVENUE: FMV

GIFT CARDS

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 15

(C) REVENUE REPORTED ON FORM 990, PART VIII $ 2506.

(D) METHOD OF DETERMINING REVENUE: FMV

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER IN COLUMN (B) REPRESENTS THE NUMBER OF ITEMS CONTRIBUTED.

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.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization	Employer identification number
COALITION FOR THE HOMELESS INC	13-3072967

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
HELPING HOMELESS MEN, WOMEN, AND CHILDREN. WE BELIEVE THAT AFFORDABLE HOUSING, SUFFICIENT FOOD AND THE CHANCE TO WORK FOR A LIVING WAGE ARE FUNDAMENTAL RIGHTS IN A CIVILIZED SOCIETY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
OUR 11 FRONTLINE PROGRAMS PROVIDE EMERGENCY FOOD AND CLOTHING, EVICTION PREVENTION, CRISIS SERVICES, PERMANENT HOUSING, JOB TRAINING AND SPECIAL PROGRAMS FOR YOUTH TO OVER 3,500 HOMELESS NEW YORKERS EACH DAY. OUR GRASSROOTS ORGANIZING, PUBLIC EDUCATION CAMPAIGNS AND IMPACT LITIGATION IN NEW YORK CITY AND THROUGHOUT NEW YORK STATE PROTECT HOMELESS ADULTS AND CHILDREN AND CREATE LONG-TERM, HOUSING-BASED SOLUTIONS TO MODERN MASS HOMELESSNESS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
FOOD SERVICES - THE COALITION'S MOBILE SOUP KITCHEN DELIVERS ROUGHLY 1,000 HOT NUTRITIOUS MEALS TO HOMELESS AND FOOD-INSECURE INDIVIDUALS EACH NIGHT, 365 NIGHTS A YEAR, AT 24 SITES ON THE STREETS OF NYC.
EXPENSES $ 1,744,789.   INCLUDING GRANTS OF $ 67,957.   REVENUE $ 0.

JOB TRAINING - THE COALITION'S FIRST STEP JOB TRAINING PROGRAM PROVIDES COMPUTER SKILLS TRAINING, JOB READINESS, SOCIAL SERVICE SUPPORT, INTERNSHIP, MENTORSHIP AND JOB PLACEMENT FOR HOMELESS AND LOW-INCOME WOMEN.
EXPENSES $ 684,918.   INCLUDING GRANTS OF $ 28,220.   REVENUE $ 0.

Name of the organization	Employer identification number
COALITION FOR THE HOMELESS INC	13-3072967

PERMANENT HOUSING: THE COALITION'S PERMANENT HOUSING PROGRAMS PROVIDE DECENT, AFFORDABLE PERMANENT HOUSING AND CRITICAL SUPPORT SERVICES TO FORMERLY HOMELESS INDIVIDUALS AND FAMILIES THROUGHOUT NEW YORK CITY.

EXPENSES $ 238,323.   INCLUDING GRANTS OF $ 37,081.   REVENUE $ 0.

YOUTH SERVICES - THE COALITION'S CAMP HOMEWARD BOUND IS THE NATION'S FIRST SUMMER SLEEP-AWAY CAMP DESIGNED SPECIFICALLY FOR THE UNIQUE NEEDS OF HOMELESS GIRLS AND BOYS, SERVING 300 KIDS EACH SUMMER. CFH'S BOUND FOR SUCCESS AFTER-SCHOOL AND DAY CAMP PROGRAMS GIVE CHILDREN LIVING IN FAMILY SHELTERS ONE-ON-ONE TUTORING, SPORTS AND RECREATIONAL OPPORTUNITIES.

EXPENSES $ 1,025,079.   INCLUDING GRANTS OF $ 571.   REVENUE $ 0.

OTHER PROGRAMS

EXPENSES $ 954,917.   INCLUDING GRANTS OF $ 1,576,787.   REVENUE $ 0.

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

THE RETURN IS PREPARED BY AN INDEPENDENT ACCOUNTANT AND REVIEWED AND APPROVED BY THE AUDIT COMMITTEE AND THEN DISTRIBUTED TO ALL BOARD MEMBERS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL BOARD MEMBERS AND OFFICERS ARE ANNUALLY REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE FORM. IF ANY CONFLICTS ARE NOTED, THE BOARD OF DIRECTORS CONDUCTS A REVIEW. ANY PERSON WITH A POTENTIAL CONFLICT IS RECUSED FROM THE VOTE TO DETERMINE WHETHER A CONFLICT EXIST.

FORM 990, PART VI, SECTION B, LINE 15:

Name of the organization	Employer identification number
COALITION FOR THE HOMELESS INC	13-3072967

ALL SALARY COMPENSATION FOR THE PRESIDENT/CEO, EXECUTIVE DIRECTOR, CFO, AND OTHER OFFICERS ARE REVIEWED AND APPROVED BY THE BOARD. SALARIES ARE BASED ON COMPARABLE INDUSTRIES AVERAGE COMPENSATION PAID FOR SIMILIAR POSITIONS AND ACCORDING TO BUDGET SIZE. WE ALSO UTILIZE PUBLISHED SALARY SURVEYS PUBLISHED BY OTHER NON-PROFIT COMMITTEES IN NEW YORK. THIS PROCESS IS PERFORMED ANNUALLY AND WAS LAST PERFORMED IN 2017.

FORM 990, PART VI, SECTION C, LINE 19:

THESE DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization: COALITION FOR THE HOMELESS INC

Employer identification number: 13-3072967

Part I **Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
BRIDGE HOMES INC - 13-3626917 129 FULTON STREET NEW YORK, NY 10038	MEAL PREPARATION	NEW YORK	501(C)(3)	LINE 12A, I	COALITION FOR THE HOMELESS INC.	X	

Part III **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
BRIDGE COALITION LIMITED PARTNERSHIP - 14-6002615, 129 FULTON STREET, NEW YORK, NY 10038	LOW INCOME HOUSING	NY	N/A	N/A	N/A	N/A	N/A		N/A	N/A		N/A
COALITION HOUSES, L.P. 129 FULTON STREET NEW YORK, NY 10038	LOW INCOME HOUSING	NY	N/A	N/A	N/A	N/A	N/A		N/A	N/A		N/A

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No
BRIDGE BUILDING MANAGEMENT CO - 13-3626860 129 FULTON STREET NEW YORK, NY 10038	LOW INCOME HOUSING	NY	COALITION FOR THE HOMELESS INC.	C CORP	0.	9,201.	100%	X	
WEST SEVENTY SEVENTH INC - 13-4186692 129 FULTON STREET NEW YORK, NY 10038	LOW INCOME HOUSING	NY	COALITION FOR THE HOMELESS INC.	C CORP	0.	0.	79.00%	X	
170 WEST 77TH STREET HOUSING DEVELOPMENT FUND CORPORATION - 13-4166836, 129 FULTON STREET, NEW YORK, NY 10038	LOW INCOME HOUSING	NY	COALITION FOR THE HOMELESS INC.	C CORP	0.	0.	100%	X	

Part V **Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to related organization(s)	1b		X
c Gift, grant, or capital contribution from related organization(s)	1c		X
d Loans or loan guarantees to or for related organization(s)	1d		X
e Loans or loan guarantees by related organization(s)	1e		X
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
i Exchange of assets with related organization(s)	1i		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
o Sharing of paid employees with related organization(s)	1o	X	
p Reimbursement paid to related organization(s) for expenses	1p	X	
q Reimbursement paid by related organization(s) for expenses	1q		X
r Other transfer of cash or property to related organization(s)	1r	X	
s Other transfer of cash or property from related organization(s)	1s		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) BRIDGE HOMES, INC.	P	441,152.	FMV
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor-tionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

932164 09-10-19

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Form **8868**
(Rev. January 2020)
Department of the Treasury
Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. COALITION FOR THE HOMELESS INC	Taxpayer identification number (TIN) 13-3072967
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 129 FULTON STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10038	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ SHAWN-ANN MULLEN, CFO
  129 FULTON STREET - NEW YORK, NY 10038
  Telephone No. ▶ 212-776-2080 Fax No. ▶
- If the organization does not have an office or place of business in the United States, check this box .... ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ . If this is for the whole group, check this box ▶ ☐ . If it is for part of the group, check this box ▶ ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 17, 2021 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ ☐ calendar year ______ or
▶ ☒ tax year beginning JUL 1, 2019 , and ending JUN 30, 2020 .

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	**3a**	$ 0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	**3b**	$ 0.
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	**3c**	$ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

COALITION FOR THE HOMELESS, INC.
AND AFFILIATES

coalition for the homeless

CONSOLIDATED FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION
(Together with Independent Auditors' Report)

YEAR ENDED JUNE 30, 2020

MARKS PANETH

ACCOUNTANTS & ADVISORS

COALITION FOR THE HOMELESS, INC. AND AFFILIATES

CONSOLIDATED FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION
(Together with Independent Auditors' Report)

YEAR ENDED JUNE 30, 2020

CONTENTS

Marks Paneth LLP
685 Third Avenue
New York, NY 10017
P 212.503.8800
F 212.370.3759
markspaneth.com

MARKS PANETH
ACCOUNTANTS & ADVISORS

INDEPENDENT AUDITORS' REPORT

The Board of Directors
Coalition for the Homeless, Inc. and Affiliates

We have audited the accompanying consolidated financial statements of Coalition for the Homeless, Inc. and Affiliates (collectively, the "Agency"), which comprise the consolidated statement of financial position as of June 30, 2020 and the related consolidated statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the consolidated financial statements.

Management's Responsibility for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the agency's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of Coalition for the Homeless, Inc. and Affiliates as of June 30, 2020, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements of Coalition for the Homeless, Inc. and Affiliates as a whole. The consolidating information (shown on pages 15-16) is presented for the purpose of additional analysis of the consolidated financial statements rather than to present the financial position of the individual entities and is not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

Marks Paneth LLP

New York, NY
January 7, 2021

COALITION FOR THE HOMELESS, INC. AND AFFILIATES
CONSOLIDATED STATEMENT OF FINANCIAL POSITION
AS OF JUNE 30, 2020

ASSETS	
Cash and cash equivalents (Notes 2D and 17)	$ 9,387,374
Reserve fund (Note 7)	901,921
Total cash, cash equivalents and restricted cash	10,289,295
Contributions receivable, net (Notes 2E and 4)	1,385,413
Grants receivable (Notes 2F, 2H and 5)	1,134,309
Prepaid expenses and other	492,632
Property and equipment, net (Notes 2G and 6)	17,113,800
TOTAL ASSETS	$ 30,415,449
LIABILITIES	
Accounts payable and accrued expenses	$ 350,513
Accrued vacation	395,233
Refundable advances	97,003
PPP loan (Note 14E)	1,205,865
Loan payable (Note 9)	3,123,904
Capital lease (Note 11)	26,179
TOTAL LIABILITIES	5,198,697
COMMITMENTS AND CONTINGENCIES (Note 13)	
NET ASSETS (Note 2C)	
Net assets without donor restrictions:	
Invested in property and equipment	15,221,537
Board designated (Note 15)	3,100,000
Operations	4,534,955
Total controlling interest	22,856,492
Noncontrolling interest	(445,784)
Total net assets without donor restrictions	22,410,708
Net assets with donor restrictions (Note 13)	2,806,044
TOTAL NET ASSETS	25,216,752
TOTAL LIABILITIES AND NET ASSETS	$ 30,415,449

COALITION FOR THE HOMELESS, INC. AND AFFILIATES
CONSOLIDATED STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2020

	Without Donor Restrictions	With Donor Restrictions	Total
PUBLIC SUPPORT AND OTHER REVENUE:			
Contributions (Note 2E)	$ 6,330,662	$ 4,809,637	$ 11,140,299
Government support (Note 2H)	4,087,874	-	4,087,874
Special events (net of direct expenses of $442,492) (Note 2M)	383,221	-	383,221
In-kind donations (Note 2J)	546,035	-	546,035
Bequests	1,031,903	-	1,031,903
Rental income (Note 10)	1,998,944	-	1,998,944
Other income	229,941	-	229,941
Net assets released from restrictions (Note 14)	3,222,356	(3,222,356)	-
Total Public Support and Other Revenue	17,830,936	1,587,281	19,418,217
EXPENSES (Note 2I)			
Program Services:			
Advocacy	1,777,924	-	1,777,924
AIDS	2,447,656	-	2,447,656
Crisis intervention	2,686,945	-	2,686,945
Housing	942,302	-	942,302
Food services	1,369,271	-	1,369,271
Job training	684,918	-	684,918
Emergency mail	115,126	-	115,126
Emergency goods	839,791	-	839,791
Children's programs	1,025,079	-	1,025,079
Program Services	11,889,012	-	11,889,012
Supporting Services:			
Management and administration	1,253,979	-	1,253,979
Fundraising	1,160,624	-	1,160,624
Business rental	683,162	-	683,162
Supporting Services	3,097,765	-	3,097,765
Total Operating Expenses	14,986,777	-	14,986,777
CHANGE IN NET ASSETS	2,844,159	1,587,281	4,431,440
Net assets - beginning of year, before change in reporting entity	19,815,821	1,218,763	21,034,584
Change in reporting entity - (Note 16)	(249,272)	-	(249,272)
Net assets - beginning of year, after change in reporting entity	19,566,549	1,218,763	20,785,312
NET ASSETS - END OF YEAR	$ 22,410,708	$ 2,806,044	$ 25,216,752

COALITION FOR THE HOMELESS, INC. AND AFFILIATES
CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2020

	Program Services										Supporting Services				
	Advocacy	AIDS	Crisis Intervention	Housing	Food Services	Job Training	Children's Programs	Emergency Mail	Emergency Goods	Total Program Services	Management and Administration	Fundraising	Business Rental Property	Total Supporting Services	Total 2020
Salaries	$ 849,496	$ 645,687	$ 1,054,718	$ 234,559	$ 417,769	$ 412,208	$ 574,424	$ 44,843	$ 29,736	$ 4,263,440	$ 743,466	$ 423,242	$ 127,522	$ 1,294,230	$ 5,557,670
Payroll taxes and other benefits (Note 12)	239,100	373,781	517,819	90,687	171,324	166,388	113,886	50,054	12,024	1,735,063	267,799	129,254	52,194	449,247	2,184,310
Total salaries and related expenses	1,088,596	1,019,468	1,572,537	325,246	589,093	578,596	688,310	94,897	41,760	5,998,503	1,011,265	552,496	179,716	1,743,477	7,741,980
Professional fees	507,122	39,882	33,462	87,421	43,729	8,895	60,668	1,791	13,737	796,707	36,800	77,458	16,103	130,361	927,068
Commercial insurance	10,021	25,305	26,258	39,371	7,140	4,376	43,881	1,200	959	158,511	30,618	5,174	1,799	37,591	196,102
Transportation	4,690	22,013	831	278	46,382	-	35,399	-	417	110,010	363	399	-	762	110,772
Supplies	12,727	2,451	7,721	25,041	59,451	2,415	52,250	1,396	23,560	187,012	6,868	7,853	293	15,014	202,026
Telephone	18,552	21,538	28,901	8,666	8,277	6,388	13,330	1,601	1,772	109,025	11,959	9,061	2,385	23,405	132,430
Bank charges and fees	2,096	2,523	4,274	32,755	832	1,343	1,301	224	179	45,527	2,955	77,458	291	80,704	126,231
Occupancy (Note 13)	52,480	41,143	73,187	142,312	22,822	19,393	40,864	10,826	3,455	406,482	86,811	16,446	82,045	185,302	591,784
Direct assistance to clients (Note 2N)	23,005	1,242,267	877,884	37,081	67,957	28,220	571	-	750,904	3,027,889	-	-	-	-	3,027,889
Advertising	476	-	176	159	975	4,270	-	-	-	6,056	5,904	159	-	6,063	12,119
Printing/duplication & list rental management	754	234	396	37	77	124	121	21	17	1,781	113	217,747	27	217,887	219,668
Conferences	27,187	3,112	5,624	328	1,007	4,979	8,133	509	626	51,505	1,096	935	758	2,789	54,294
Equipment maintenance	11,241	9,917	21,689	35,299	8,987	4,617	10,367	1,093	818	104,028	13,961	8,195	2,065	24,221	128,249
Food	-	-	3,750	-	473,119	4,000	44,838	-	-	525,707	-	-	-	-	525,707
Postage, shipping and messenger	582	894	2,928	694	213	263	1,370	36	281	7,261	3,367	159,712	376	163,455	170,716
Dues and subscriptions	1,460	34	130	-	182	624	3,420	-	-	5,850	4,506	13,612	-	18,118	23,968
Catering, entertainment and venue costs	-	-	-	-	-	-	-	-	-	-	-	226,824	-	226,824	226,824
Real estate taxes	-	-	-	6,552	-	-	-	-	-	6,552	-	-	88,630	88,630	95,182
Unrelated business income taxes	797	1,133	1,684	440	335	993	416	152	88	6,038	518	479	130	1,127	7,165
Bad debt (Note 2F)	-	-	-	-	-	-	-	-	-	-	16,212	7,000	-	23,212	23,212
Miscellaneous	6,227	8,405	12,826	1,298	5,481	2,933	4,256	772	733	42,931	11,392	5,864	2,745	20,001	62,932
												-			
Total other than personnel	679,417	1,420,851	1,101,721	417,732	746,966	93,833	321,185	19,621	797,546	5,598,872	233,443	834,376	197,647	1,265,466	6,864,338
Total expenses before depreciation and amortization	1,768,013	2,440,319	2,674,258	742,978	1,336,059	672,429	1,009,495	114,518	839,306	11,597,375	1,244,708	1,386,872	377,363	3,008,943	14,606,318
Depreciation and amortization (Note 6)	9,911	7,337	12,687	199,324	33,212	12,489	15,584	608	485	291,637	9,271	5,471	305,799	320,541	612,178
Sub-total	1,777,924	2,447,656	2,686,945	942,302	1,369,271	684,918	1,025,079	115,126	839,791	11,889,012	1,253,979	1,392,343	683,162	3,329,484	15,218,496
Less: cost of direct benefits to donors	-	-	-	-	-	-	-	-	-	-	-	(231,719)	-	(231,719)	(231,719)
TOTAL EXPENSES	$ 1,777,924	$ 2,447,656	$ 2,686,945	$ 942,302	$ 1,369,271	$ 684,918	$ 1,025,079	$ 115,126	$ 839,791	$ 11,889,012	$ 1,253,979	$ 1,160,624	$ 683,162	$ 3,097,765	$ 14,986,777

The accompanying notes are an integral part of these consolidated financial statements.

COALITION FOR THE HOMELESS, INC. AND AFFILIATES
CONSOLIDATED STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED JUNE 30, 2020

CASH FLOWS FROM OPERATING ACTIVITIES	
Change in net assets	$ 4,431,440
Adjustments to reconcile change in net assets to net cash provided by operating activities:	
Depreciation and amortization	612,178
Bad debt	23,212
Changes in operating assets and liabilities	
Decrease (increase) in assets	
Contributions receivable	(413,525)
Grants receivable	(596,252)
Prepaid expenses and other	(250,252)
Deferred rent receivable	19,674
Increase (decrease) in liabilities	
Accounts payable and accrued expenses	(348,026)
Accrued vacation	(1,289)
Refundable advances	69,326
Net Cash Provided by Operating Activities	3,546,486
CASH FLOWS FROM INVESTING ACTIVITIES	
Purchases of property and equipment	(257,462)
Net Cash Used in Investing Activities	(257,462)
CASH FLOWS FROM FINANCING ACTIVITIES	
Principal payment of obligations under capital lease	(36,219)
Proceeds from loan payable	394,868
Proceeds from PPP loan	1,205,865
Net Cash Provided by Financing Activities	1,564,514
NET INCREASE IN CASH, CASH EQUIVALENTS AND RESTRICTED CASH	4,853,538
Cash, Cash Equivalents and Restricted Cash - Beginning of Year	5,435,757
CASH, CASH EQUIVALENTS AND RESTRICTED CASH - END OF YEAR	$ 10,289,295

The accompanying notes are an integral part of these consolidated financial statements.

NOTE 1 – ORGANIZATION AND NATURE OF ACTIVITIES

Coalition for the Homeless, Inc. (the "Coalition") is a not-for-profit entity that provides advocacy, housing and direct services to over 3,500 people each day. The Coalition is dedicated to the principle that affordable housing, sufficient food and the chance for a living wage job are fundamental rights in a civilized society. The Coalition's operations are categorized under advocacy, AIDS, crisis intervention, housing, food services, job training, children's programs, emergency mail and emergency goods. The Coalition is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code.

The accompanying consolidated financial statements include ("the Coalition") and the following entities:

Bridge Homes, Inc. ("BHI") is a not-for-profit entity engaged in the preparation of nutritious meals distributed by the Coalition's mobile feeding program to homeless individuals in the boroughs of Manhattan and the Bronx. BHI is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. The Coalition is the sole corporate member of BHI.

Bridge Building Management Company ("BBMC") was formed pursuant to the Private-Housing Finance law and the Not-for-Profit Corporation Law, both of the State of New York, which operates a 15-unit rental housing project for homeless persons and persons of low income. The Coalition is the sole corporate member of BBMC.

West Seventy Seventh, Inc.("WSS") was formed pursuant to the Private-Housing Finance law and the Not-for-Profit Corporation Law, both of the State of New York, which was created to develop and renovate the 166, 168 and 170 West 77th Street properties as low-income housing. The Coalition is a 79% corporate member of WSS.

WSS entered into an agreement with Coalition Houses L.P. ("CHLP") to renovate the 166, 168 and 170 West 77th Street properties as low-income housing. The agreement was financed by to the City of New York Department of Housing Preservation and Development ("HPD"). CHLP has one general partner, WSS ("WSS G.P."). WSS G.P. has a .01% interest in CHLP.

170 West 77th Street Housing Development Fund Corporation ("HDFC") was formed pursuant to the Private-Housing Finance Law and the Not-for-Profit Corporation Law, both of the State of New York, for the purpose of developing a housing project for persons with low income. The Coalition is the sole corporate member of the HDFC and the member designates the board of directors of the HDFC.

The Coalition is the sole member of BBMC, which entered into an operating agreement with Bridge Coalition Limited Partnership ("BCLP") to operate a 15-unit rental housing project for homeless persons and persons of low income. The agreement was financed by HPD and New York State Division of Housing and Community Renewal ("DHCR"). BCLP has one general partner, BBMC ("BBMC G.P."). BBMC G.P. has a 1% interest in BCLP.

BHI, BBMC, WSS, HDFC, CHLP and BCLP are collectively referred to as the "Affiliates". The Coalition and the Affiliates are collectively referred to as the "Agency".

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. ***Basis of Accounting and Use of Estimates*** - The Agency's consolidated financial statements have been prepared using the accrual basis of accounting. The Agency adheres to accounting principles generally accepted in the United States of America ("U.S. GAAP") which requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the consolidated financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

B. ***Basis of Consolidation*** - The Coalition consolidates the activities of BHI, BBMC, CHLP, BCLP, HDFC and WSS since it is the sole member. Upon consolidation, all significant intercompany transactions have been eliminated.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

C. ***Net Assets*** - The Agency's resources are classified and reported based on the existence or absence of donor-imposed restrictions as follows:

- Without donor restrictions:

  Operations – represents expendable resources not subject to donor-imposed restrictions.

  Board Designated Fund – consists of funds designated by the Board of Directors which represent a portion of the Agency's net assets without donor restrictions as quasi-endowment funds, operating reserve for extraordinary events and amounts designated for capital and other needs.

- With donor restrictions – Includes resources subject to donor-imposed stipulations that limit their use either through purpose or time restrictions. When donor restrictions expire, that is, when a time restriction ends or a purpose restriction is accomplished, net assets with donor restrictions are reclassified as net assets without donor restrictions and reported as net assets released from restrictions. In addition, net assets with donor restrictions include resources subject to donor-imposed stipulations, requiring that the principal be maintained in perpetuity.

D. ***Cash and Cash Equivalents*** - Cash equivalents include all highly liquid instruments purchased with original maturities of 90 days or less.

E. ***Contributions*** **and Government Grants –** Contributions and pledges are recognized when the donor makes a promise to give to Coalition that is, in substance, unconditional. Conditional contributions and promises to give (pledges), those with a measurable performance or other barrier and a right of return, are not recognized as support until the conditions on which they depend are substantially met. Contributions and grants receivable due in more than one year are discounted to net present value using the risk-adjusted discount rate in effect on the date of the gifts, unless the value is immaterial. Government grants are recorded as revenues to the extent that expenses have been incurred for the purposes specified by the grantors. To the extent amounts received exceed amounts spent, the Agency establishes refundable advances from governmental sources.

As of June 30, 2020, Coalition expects to received conditional grants and contracts from foundations and government agencies in the aggregate amount of approximately $4 million, that have not been recorded in the accompanying consolidated financial statements, as they have not yet been earned. These grants and contracts require Coalition to provide certain services for future specified periods. If such services are not provided, Coalition and governmental entities are not obligated to expend the funds allotted under the grants and contracts and Coalition may be required to return the funds already remitted

F. ***Allowance for Uncollectible Receivables*** - The Agency determines whether an allowance for uncollectible receivables should be provided for grants receivable and contributions receivable. Such estimate is based on management's assessment of the aged basis of its receivables, current economic conditions, credit worthiness of its donors, historical experience and collections subsequent to year end. As of June 30, 2020, the Agency determined that no allowance was necessary for accounts receivable.

G. ***Property and Equipment*** - Property and equipment is stated at cost less accumulated depreciation and amortization. These amounts do not purport to represent replacement or realizable values. Donated assets are valued at market at the time of donation. The Agency capitalizes property and equipment with a cost of $1,000 and a useful life greater than one year. Depreciation is provided for using the straight-line method over the estimated useful lives of the assets. Leasehold improvements are amortized over the lease term or the useful life of the asset, whichever is less.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

H. ***Functional Expenses*** - The cost of providing the various program and supporting services has been summarized on a functional basis in the accompanying consolidated statements of functional expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited as determined by management. The expenses that are allocated include salaries and payroll taxes and employee benefits, which are allocated based on estimates of time and effort. Other allocated expenses include professional fees, transportation, direct assistance to clients, printing, conferences, food and catering, and are directly charged based on specific identification to program activities. All remaining expenses are allocated based on full-time equivalent per program.

I. ***Donated Goods and Services*** - Donated services are recognized in the consolidated financial statements if the services enhance or create nonfinancial assets or require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation. Donated goods are recognized in the consolidated financial statements at their fair values at the date of receipt. For the year ended June 30, 2020, donated goods and services amounted to $546,035.

J. ***Deferred Rent Receivable*** - Deferred rent receivable is recorded for the difference between the rental income based on the operating leases and the straight-line basis. Rental income is recorded based on operating leases and revenue is recognized on the straight-line basis over the terms of the leases.

K. ***Rental Income -*** Rental income is recognized in accordance with the contract terms of the lease to which it relates.

L. ***Rent Expense*** - The Coalition leases office space and equipment at various locations. Rent is recorded on the straight-line basis over the term of the lease. Deferred rent liability is recorded when material.

M. ***Special Events*** - The direct cost of special events includes expenses for the benefit of the donor. For example, meals and facilities rental are considered to be direct cost of special events.

N. ***Direct Assistance to Clients*** - Direct assistance to clients are the core expenditure for the clients served at the Agency and consists of rent, food, transportation, furniture and other expenses. The funds to cover such assistance are primarily from government grants and contributions.

NOTE 3 – LIQUIDITY AND AVAILABILITY OF RESOURCES

The Agency regularly monitors the availability of resources required to meet its operating needs and other contractual commitments. For purposes of analyzing resources available to meet general expenditures over a 12-month period, the Agency considers all expenditures related to its ongoing activities of providing direct services and advocacy for men, women and children experiencing homelessness, as well as the conduct of services undertaken to support those activities, to be general expenditures.

In addition to financial assets available to meet general expenditures over the next 12 months, the Agency operates with a balanced budget and anticipates collecting sufficient revenue to cover general expenditures not covered by donor-restricted resources. Refer to the consolidated statements of cash flows which identifies the sources and uses of the Agency's cash and shows positive cash generated by operations for fiscal years 2020. At the discretion of the Board, the Agency could utilize its board designated funds to cover general expenditures (see Note 15). In the event of an unanticipated liquidity need, the Agency could also draw upon $1.5 million of its available line of credit.

The Agency receives significant contributions restricted by donors, and considers contributions restricted for programs which are ongoing, major, and central to its annual operations to be available to meet cash needs for general expenditures. The Agency manages its liquidity and reserves following three guiding principles: Operating within a prudent range of financial soundness and stability, maintaining adequate liquid assets to fund near-term

NOTE 3 – LIQUIDITY AND AVAILABILITY OF RESOURCES (Continued)

operating needs, and maintaining sufficient reserves to provide reasonable assurance that long-term obligations will be discharged.

Financial assets available for general expenditures within one year of the consolidated statement of financial position date are as follows:

Cash and cash equivalents	$ 9,387,374
Contributions receivable, net	1,385,413
Grants receivable	1,134,309
Total financial assets	11,907,096
Less: Board designated	(3,100,000)
Net assets with donor restrictions	(2,806,044)
	$ 6,001,052

NOTE 4 – CONTRIBUTIONS RECEIVABLE

Contributions receivable consists of the following as of June 30, 2020:

Due within one year	$ 1,385,413

NOTE 5 – GRANTS RECEIVABLE

Grants receivable consists of the following as of June 30, 2020:

New York City Human Resources Administration	$ 554,778
New York City Department of Homeless Services	275,201
Consortium for Workers Education	66,106
New York State Office of Temporary and Disability Assistance	172,752
NYC Department of Youth and Community Development	15,846
New York State Department of Health	49,626
	$ 1,134,309

NOTE 6 – PROPERTY AND EQUIPMENT

Property and equipment consist of the following as of June 30, 2020:

		Estimated Useful Lives
Land	$ 8,089,841	
Buildings and improvements	15,817,350	40 Years
Leasehold improvements	926,295	10 Years
Equipment	717,659	3-10 Years
Vehicles	127,812	3-10 Years
Furniture and fixtures	59,714	7-10 Years
	25,738,671	
Less: accumulated depreciation and amortization	(8,624,871)	
	$ 17,113,800	

For the year ended June 30, 2020, depreciation and amortization expenses amounted to $612,178. For the year ended June 30, 2020, there were no write offs of fully depreciated fixed assets.

NOTE 7 – RESERVE FUND

The partnership agreement between WSS, the general partner of Coalition Houses L/P., of which Coalition is the "Sponsor", provides for the establishment of a social services reserve, the purpose of which is to be available to provide supportive social services for the tenants. The reserve is funded from the Sponsor's developer fees and is being held by the New York City Housing Development Corporation.

NOTE 8 – BANK LINE OF CREDIT

The Coalition has a $1.5 million unsecured, revolving line of credit with a bank, of which $0 was outstanding as of June 30, 2020 and 2019. Interest on any outstanding balance is payable at the 30-day London interbank offered rate ("LIBOR ") plus 3.00%, which was 0% as of June 30, 2020. The line of credit will expire January 28, 2021.

NOTE 9 – LOAN PAYABLE

CHLP has a mortgage payable to the HPD that bears interest at 1% per annum with the principal balance and accrued interest payable due at maturity in July 2033. The outstanding principal as of June 30, 2020 was $2,816,275 and accrued interest payable was $394,868.

CHLP has a second mortgage with HPD that is secured by the first HPD mortgage that bears interest at 1.00% per annum. The principal and accrued interest are payable upon maturity on April 1, 2025. The outstanding principal as of June 30, 2020 was $307,629 and accrued interest payable was $46,143.

NOTE 10 – RENTAL INCOME

The Coalition leases a portion of its building to two tenants: CVS, Inc. (CVS) and Hamilton-Madison House, Inc. (HMH). The CVS lease is a non-cancelable operating lease agreement, which expired July 31, 2019 with the option for a five-year extension at $1,182,696 per annum. CVS exercised the option which commenced August 1, 2019 and extends through July 31, 2024. The HMH lease is a non-cancelable lease agreement that expired June 30, 2019 and was renewed with an expiration date of June 30, 2024.

The future minimum lease payments to be received by the Coalition for the following years are:

	CVS	HMH	Total
2021	$ 1,182,696	$ 260,900	$ 1,443,596
2022	1,182,696	260,900	1,443,596
2023	1,182,696	260,900	1,443,596
2024	1,182,696	260,900	1,443,596
	$ 4,730,784	$ 1,043,600	$ 5,774,384

For the year ended June 30, 2020, rental income included in the accompanying consolidated statements of activities from the leases amounted to approximately $2,000,000.

NOTE 11 – CAPITAL LEASE

Effective March 10, 2018, the Coalition entered into a three-year lease agreement with Canon Financial Services for the acquisition of certain equipment with monthly payments of $3,174 and an interest rate of 1.9725%.

The future minimum lease payments under the capital leases, together with the present value of the net minimum lease payments as of June 30, 2020, were as follows.

2021	$ 26,365
Less: Unamortized interest	186
	$ 26,179

NOTE 12 – PENSION PLAN

The Agency has a 403(b) Thrift Plan covering all eligible full-time employees. The Agency is required by the plan to match employee contributions in accordance with the pension plan agreements. Each plan year, the Agency will make an employer based contribution on the employee's behalf based on their years of service and a percentage of their compensation for that plan year, provided they are employed with the Agency on the last day of the plan year. Pension expense for the year ended June 30, 2020 amounted to approximately $303,000.

NOTE 13 – COMMITMENTS AND CONTINGENCIES

A. Pursuant to the Agency's contractual relationships with certain governmental funding sources, outside governmental agencies have the right to examine the books and records of the Agency involving transactions relating to these contracts. The accompanying consolidated financial statements make no provision for possible disallowances.

B. Coalition leases 66 scattered site apartments throughout the five boroughs for clients of the program. These leases are between $800 and $1,800 depending on the size of the apartment and are directly funded by the New York City Human Resources Administration, a government agency. The leases are one to two years and are non-cancelable. The Coalition also signed ten-year leases in March 2018 for two campsites within Harriman State Park which expire December 31, 2027, which are used for summer sleep-away camp.

   The two leases are for $10,307 and $4,056, annually.

C. Coalition leases office space in Albany, New York which expires in September 2021 with annual rent of $17,000.

   Future minimum rental payments under non-cancelable operating leases with terms in excess of one year are as follows:

2021	$ 864,947
2022	534,712
2023	14,363
2024	14,363
2025	14,363
Thereafter	35,908
	$ 1,478,656

   Rent expense for the years ended June 30, 2020 amounted to $1,648,775 and is included in occupancy expense and direct assistance to clients in the accompanying statement of functional expenses.

D. The Agency believes it has no uncertain tax positions as of June 30, 2020 in accordance with Accounting Standards Codification ("ASC") Topic 740, "Income Taxes," which provides standards for establishing and classifying any tax provisions for uncertain tax positions.

E. ***PPP Loan -*** On March 27, 2020, in response to COVID-19, the federal government passed the Coronavirus Aid, Relief, and Economic Stability Act ("CARES Act"). Among many other provisions, to help businesses retain employees, the CARES Act provides relief to qualifying businesses through a program called the Paycheck Protection Program ("PPP"). Participating in the PPP enables the business to obtain a loan from the Small Business Administration sector of the government. The term of the loan is two years and bears interest at a fixed rate of 1% per annum. If the proceeds from the loan are used for specified purposes, some or all of the loan can be forgiven, based on how much is spent in the twenty-four week period immediately following funding of the loan times a forgiveness factor that is based on employee headcount and amounts paid to the Agency's employees. The Agency applied for this loan and received $1,205,865 in April 2020. Management has opted to account for the proceeds as a loan under FASB ASC 470 until the loan is, in part or wholly, forgiven and the Agency has been "legally released".

NOTE 13 – COMMITMENTS AND CONTINGENCIES (Continued)

F. The COVID-19 pandemic remains a rapidly evolving situation. The extent of the impact of COVID-19 on the Agency's business and financial results will depend on future developments, including the duration and spread of the outbreak. Due to the rapidly changing business environment, unprecedented market volatility, and other circumstances resulting from the COVID-19 pandemic, the Agency is currently unable to fully determine the extent of COVID-19's impact on its business in future periods. The Agency's performance in future periods will be heavily influenced by the timing, length, and intensity of the economic recoveries in the United States. The Agency continues to monitor evolving economic and general business conditions and the actual and potential impacts on its financial position and results of operations.

NOTE 14 – NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions are available for the following purposes as of June 30, 2020:

Crisis intervention	$ 366,432
Children's programs	415,841
Advocacy	358,901
Job training	24,160
Food services	220,957
COVID-19	1,373,554
Time restricted	46,199
	$ 2,806,044

Net assets were released from restrictions by incurring expenses or the passage of time thus satisfying the restricted purposes as follows for the year ended June 30, 2020:

Children's programs	$ 408,726
Food services	385,305
Crisis intervention	989,980
Job training	135,399
AIDS Services	274
Advocacy	339,795
Emergency goods distribution	697,623
COVID-19	265,254
	$ 3,222,356

NOTE 15 – BOARD DESIGNATED

On June 28, 2019, the Agency's governing board has designated a portion of its net assets without donor restrictions resources for quasi-endowment, operating reserve and other purposes. U.S. GAAP provides guidance on the net asset classifications of donor-restricted endowment funds for a not-for-profit organization that is subject to an enacted version of the Uniform Prudent Management of Institutional Funds Act ("UPMIFA"). The guidance requires disclosure about an organization's endowment funds, whether or not the organization is subject to UPMIFA. The quasi-endowment funds will be invested for long-term appreciation, but remain available and may be spent at the discretion of the board with a board resolution. The operating reserve funds will be invested for a shorter term and can be drawn down at the discretion of management to meet cash needs. The remaining funds will be used for known capital and other needs within the next 12 months.

NOTE 16 – CHANGE IN REPORTING ENTITY

In accordance with Accounting Standards Update ("ASU") 2017-02, "Not-for-Profit Entities – Consolidation," which clarified guidance for consolidating interests in limited partnerships or similar legal entities, the Agency has included the net assets of two limited partnerships: CHLP and BCLP (See Note 1). As of July 1, 2019, CHLP had a net deficit of $251,107 and BCLP had net assets of $1,835. The consolidation of these limited partnerships reduced the net assets by $249,272 as of July 1, 2019.

NOTE 17 – CONCENTRATION OF CREDIT RISK

Cash that potentially subjects the Agency to a concentration of credit risk includes cash accounts with banks that exceed the Federal Deposit Insurance Corporation ("FDIC") insurance limits ($250,000 per depositor). As of June 30, 2020, there was approximately $2,414,000 of cash held by banks that exceeded FDIC limits.

NOTE 18 – SUBSEQUENT EVENTS

Management has evaluated, for potential recognition and disclosure, events subsequent to the date of the consolidated statement of financial position through January 7, 2021, the date the consolidated financial statements were available to be issued.

COALITION FOR THE HOMELESS, INC. AND AFFILIATES
CONSOLIDATING STATEMENT OF FINANCIAL POSITION
AS OF JUNE 30, 2020

	Coalition for the Homeless, Inc.	Bridge Homes, Inc.	West Seventy Seventh, Inc.	Bridge Building Management Company	HDFC	Bridge Coalition L.P.	Coalition Houses L.P.	Consolidating Eliminations	Consolidated Total
ASSETS									
Cash and cash equivalents	$ 9,107,733	$ -	$ -	$ 100	$ -	$ 97,714	$ 181,827	$ -	$ 9,387,374
Reserve fund	226,663	-	-	-	-	724	701,603	(27,069)	901,921
Contributions receivable, net	1,385,413	-	-	-	-	-	-	-	1,385,413
Grants receivable	1,134,309	-	-	-	-	-	-	-	1,134,309
Prepaid expenses and other	198,067	-	-	-	-	156,363	138,202		492,632
Due from affiliates	327,419	-	-	-	3,118	-	-	(330,537)	-
Property and equipment, net	15,247,716	-	-	-	-	40,068	1,826,016	-	17,113,800
TOTAL ASSETS	$ 27,627,320	$ -	$ -	$ 100	$ 3,118	$ 294,869	$ 2,847,648	$ (357,606)	$ 30,415,449
LIABILITIES									
Accounts payable and accrued expenses	$ 211,145	$ -	$ -	$ 8,901	$ -	$ 300,257	$ 134,449	$ (304,239)	$ 350,513
Accrued vacation	395,233	-	-	-	-	-	-	-	395,233
Refundable advances	97,058	-	-	-	-	27,014	-	(27,069)	97,003
PPP Loan	1,205,865	-	-	-	-	-	-	-	1,205,865
Loan payable							3,123,904		3,123,904
Capital lease	26,179	-	-	-	-	-	-	-	26,179
Due to affiliate	-	-	19,481	3,775	-	-	3,042	(26,298)	-
TOTAL LIABILITIES	1,935,480	-	19,481	12,676	-	327,271	3,261,395	(357,606)	5,198,697
NET ASSETS									
Without donor restrictions:									
Controlling interest	22,885,796	-	(19,481)	(12,576)	3,118	(324)	(41)	-	22,856,492
Noncontrolling interest	-	-	-	-	-	(32,078)	(413,706)	-	(445,784)
Total net assets (deficit) without donor restrictions	22,885,796	-	(19,481)	(12,576)	3,118	(32,402)	(413,747)	-	22,410,708
Net assets with donor restrictions - controlling interest	2,806,044	-	-	-	-	-	-	-	2,806,044
TOTAL NET ASSETS (DEFICIT)	25,691,840	-	(19,481)	(12,576)	3,118	(32,402)	(413,747)	-	25,216,752
TOTAL LIABILITIES AND NET ASSETS (DEFICIT)	$ 27,627,320	$ -	$ -	$ 100	$ 3,118	$ 294,869	$ 2,847,648	$ (357,606)	$ 30,415,449

See independent auditors' report.

COALITION FOR THE HOMELESS, INC. AND AFFILIATES
CONSOLIDATING STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2020

	Coalition for the Homeless, Inc.			Bridge Homes, Inc.	West Seventy Seventh, Inc.	Bridge Building Management Company	HDFC	Bridge Coalition L.P.	Coalition Houses L.P.		Consolidated Total		
	Without donor restrictions	With donor restrictions	Total	Without donor restrictions						Eliminations	Without donor restrictions	With donor restrictions	Total
PUBLIC SUPPORT AND OTHER REVENUE:													
Contributions	$ 6,330,662	$ 4,809,637	$ 11,140,299	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 6,330,662	$ 4,809,637	$ 11,140,299
Government support	4,087,874	-	4,087,874	-	-	-	-	-	-	-	4,087,874	-	4,087,874
Special events (net of direct expenses of $442,492)	383,221	-	383,221	-	-	-	-	-	-	-	383,221	-	383,221
In-kind donations	546,035	-	546,035	-	-	-	-	-	-	-	546,035	-	546,035
Bequests	1,031,903	-	1,031,903	-	-	-	-	-	-	-	1,031,903	-	1,031,903
Rental income	1,409,530	-	1,409,530	-	-	-	-	185,444	403,970	-	1,998,944	-	1,998,944
Other income	225,664	-	225,664	730,382	-	-	-	1,983	2,294	(730,382)	229,941	-	229,941
Forgiveness of debt	-	-	-	441,152	-	-	-	-	-	(441,152)	-	-	-
Net assets released from restrictions	3,222,356	(3,222,356)	-	-	-	-	-	-	-	-	3,222,356	(3,222,356)	-
Total Public Support and Other Revenue	17,237,245	1,587,281	18,824,526	1,171,534	-	-	-	187,427	406,264	(1,171,534)	17,830,936	1,587,281	19,418,217
EXPENSES													
Program Services:													
Advocacy	1,777,924	-	1,777,924	-	-	-	-	-	-	-	1,777,924	-	1,777,924
AIDS	2,447,656	-	2,447,656	-	-	-	-	-	-	-	2,447,656	-	2,447,656
Crisis intervention	2,686,945	-	2,686,945	-	-	-	-	-	-	-	2,686,945	-	2,686,945
Housing	238,323	-	238,323	-	-	-	-	206,439	497,540	-	942,302	-	942,302
Food services	1,744,789	-	1,744,789	796,016	-	-	-	-	-	(1,171,534)	1,369,271	-	1,369,271
Job training	684,918	-	684,918	-	-	-	-	-	-	-	684,918	-	684,918
Emergency mail	115,126	-	115,126	-	-	-	-	-	-	-	115,126	-	115,126
Emergency goods	839,791	-	839,791	-	-	-	-	-	-	-	839,791	-	839,791
Children's programs	1,025,079	-	1,025,079	-	-	-	-	-	-	-	1,025,079	-	1,025,079
Program Services	11,560,551	-	11,560,551	796,016	-	-	-	206,439	497,540	(1,171,534)	11,889,012	-	11,889,012
Supporting Services:													
Management and administration	1,167,390	-	1,167,390	-	-	-	-	15,225	71,364	-	1,253,979	-	1,253,979
Fundraising	1,160,624	-	1,160,624	-	-	-	-	-	-	-	1,160,624	-	1,160,624
Business rental	683,162	-	683,162	-	-	-	-	-	-	-	683,162	-	683,162
Supporting Services	3,011,176	-	3,011,176	-	-	-	-	15,225	71,364	-	3,097,765	-	3,097,765
Total Operating Expenses	14,571,727	-	14,571,727	796,016	-	-	-	221,664	568,904	(1,171,534)	14,986,777	-	14,986,777
CHANGE IN TOTAL NET ASSETS	2,665,518	1,587,281	4,252,799	375,518	-	-	-	(34,237)	(162,640)	-	2,844,159	1,587,281	4,431,440
Net Assets (Deficit) - Beginning of Year	20,220,278	1,218,763	21,439,041	(375,518)	(19,481)	(12,576)	3,118	-	-	-	19,815,821	1,218,763	21,034,584
Change in reporting entity	-	-	-	-	-	-	-	1,835	(251,107)	-	(249,272)	-	(249,272)
NET ASSETS (DEFICIT) - END OF YEAR	$ 22,885,796	$ 2,806,044	$ 25,691,840	$ -	$ (19,481)	$ (12,576)	$ 3,118	$ (32,402)	$ (413,747)	$ -	$ 22,410,708	$ 2,806,044	$ 25,216,752

See independent auditors' report.