


<div> <div>Form <b>990</b></div> <div>  </div> <div>                     Department of the Treasury                      Internal Revenue Service                 </div> </div>	<div>Return of Organization Exempt From Income Tax</div> <div>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)</div> <div> <div>▶ Do not enter social security numbers on this form as it may be made public</div> <div>▶ Information about Form 990 and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a></div> </div>	<div>OMB No 1545-0047</div> <div><b>2015</b></div> <div><b>Open to Public Inspection</b></div>
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**A For the 2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015**

<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization EL SOL JUPITER'S NEIGHBORHOOD RESOURCE CENTER INC		<b>D</b> Employer identification number 01-0870672	
	Doing business as		E Telephone number (561) 745-9860	
	Number and street (or P O box if mail is not delivered to street address) 106 MILITARY TRAIL	Room/suite	F Gross receipts \$ 643,352	
	City or town, state or province, country, and ZIP or foreign postal code JUPITER, FL 33458		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) <b>H(c)</b> Group exemption number ▶	
	<b>F</b> Name and address of principal officer SHEILA HIRSCH 106 MILITARY TRAIL JUPITER, FL 33458			
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
<b>J</b> Website: ▶ WWW.FRIENDSOFELSOL.ORG				
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L</b> Year of formation 2005	<b>M</b> State of legal domicile FL

## Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities OPERATION OF A DAY LABOR AND RESOURCE CENTER IN AND FOR THE RESIDENTS OF THE TOWN OF JUPITER		
	2 Check this box <input type="checkbox"/> 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	15
	4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	4	15
5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) . . . . .	5	34	
6 Total number of volunteers (estimate if necessary) . . . . .	6	408	
7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	7a	0	
7b Net unrelated business taxable income from Form 990-T, line 34 . . . . .	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h) . . . . .	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g) . . . . .	631,705	629,837
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	0	0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	379	398
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,571	13,117
		647,655	643,352
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . .	0	0
	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)	288,587	314,129
	16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) <u>2,757</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .	303,650	364,389
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	592,237	678,518
	19 Revenue less expenses Subtract line 18 from line 12 . . . . .	55,418	-35,166
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16) . . . . .	726,512	691,215
	21 Total liabilities (Part X, line 26) . . . . .	2,255	2,124
	22 Net assets or fund balances Subtract line 21 from line 20 . . . . .	724,257	689,091

## 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.

<b>Sign Here</b>	*****		2016-07-22		
	Signature of officer		Date		
	SHEILA HIRSCH TREASURER				
	Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name JOHN R TEMPLETON	Preparer's signature JOHN R TEMPLETON	Date	Check <input type="checkbox"/> if self-employed	PTIN P01957752
	Firm's name ► TEMPLETON & COMPANY LLP			Firm's EIN ► 14-1918990	
	Firm's address ► 222 LAKEVIEW AVENUE SUITE 1200  WEST PALM BEACH, FL 33401			Phone no (561) 798-9988	