

Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 10-01-2014, and ending 09-30-2015

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

NAOMIS HOUSE

Doing business as

Number and street (or P O box if mail is not delivered to street address)

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

D Employer identification number

01-0709883

E Telephone number

(559) 498-6988

G Gross receipts \$ 417,608

F Name and address of principal officer

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: ▶ NAOMIHOUSEFRESNO.COM

K Form of organization

☐ Corporation☐ Trust☒ Association☐ Other ▶

L Year of formation 2002

M State of legal domicile CA

Part I	Summary																								
Activities & Governance	<div>1 Briefly describe the organization's mission or most significant activities</div> <div>PROVIDE HELP TO SINGLE HOMELESS WOMEN</div>																								
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets																								
	<table><tr><td>3 Number of voting members of the governing body (Part VI, line 1a)</td><td>3</td><td>27</td></tr><tr><td>4 Number of independent voting members of the governing body (Part VI, line 1b)</td><td>4</td><td>26</td></tr><tr><td>5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)</td><td>5</td><td>11</td></tr><tr><td>6 Total number of volunteers (estimate if necessary)</td><td>6</td><td>94</td></tr><tr><td>7a Total unrelated business revenue from Part VIII, column (C), line 12</td><td>7a</td><td>0</td></tr><tr><td>7b Net unrelated business taxable income from Form 990-T, line 34</td><td>7b</td><td></td></tr></table>	3 Number of voting members of the governing body (Part VI, line 1a)	3	27	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	26	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	11	6 Total number of volunteers (estimate if necessary)	6	94	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							
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Revenue	<table><tr><td>8 Contributions and grants (Part VIII, line 1h)</td><td>Prior Year</td><td>Current Year</td></tr><tr><td>9 Program service revenue (Part VIII, line 2g)</td><td>406,616</td><td>416,608</td></tr><tr><td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td><td></td><td>0</td></tr><tr><td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td>228</td><td>1,000</td></tr><tr><td>12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td><td>406,844</td><td>417,608</td></tr></table>	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	9 Program service revenue (Part VIII, line 2g)	406,616	416,608	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	228	1,000	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	406,844	417,608									
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Net Assets or Fund Balances	<table><tr><td></td><td>Beginning of Current Year</td><td>End of Year</td></tr><tr><td>20 Total assets (Part X, line 16)</td><td>252,260</td><td>281,929</td></tr><tr><td>21 Total liabilities (Part X, line 26)</td><td>12,459</td><td>15,248</td></tr><tr><td>22 Net assets or fund balances Subtract line 21 from line 20</td><td>239,801</td><td>266,681</td></tr></table>		Beginning of Current Year	End of Year	20 Total assets (Part X, line 16)	252,260	281,929	21 Total liabilities (Part X, line 26)	12,459	15,248	22 Net assets or fund balances Subtract line 21 from line 20	239,801	266,681												
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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

PAT BRADLEY Treasurer

Type or print name and title

2016-08-09

Date

Paid Preparer Use Only

Print/Type preparer's name

PAMELA R SMITH

Firm's name ▶ Horg & Gray CPAS

Firm's address ▶ 6740 N West Avenue Suite 103

Fresno, CA 93711

Preparer's signature

PAMELA R SMITH

Date

Check ☐ if self-employed

PTIN P01240842

Firm's EIN ▶

Phone no (559) 439-7400

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2014)