

	,		2743317	513903				
•	000	Return of Organization Exempt From	Income Tax	OMB No 1545-0047				
Form	990	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (ex	(cept private foundations)	2016				
	ent of the Treasury	▶ Do not enter social security numbers on this form as it may		Open to Public				
	Revenue Service	Information about Form 990 and its instructions is at www. ndar year, or tax year beginning JUL 1, 2016 and ending		Inspection				
B Chec		ndar year, or tax year beginning JUL 1, 2016 and ending of organization	JUN 30, 2017 D Employer identifica	tion number				
appi	licable	or organization	D Employer Identifica	uon number				
Address AME Day Shelter Supporters								
]cl		business as	58-18	36946				
re		er and street (or P.O. box if mail is not delivered to street address) Room/suit		834-3734				
∟lre te	Final 412 Capital Boulevard (919)							
A		r town, state or province, country, and ZIP or foreign postal code eigh, NC 27603	G Gross receipts \$	81,117.				
A		and address of principal officer Shirley Sheares	H(a) Is this a group retu for subordinates?	Yes X No				
		Brandy Bay Road, Raleigh, NC 27613	H(b) Are all subordinates inclu					
1 Tax	k-exempt status	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 7 \$2	If "No," attach a lis	t. (see instructions)				
-	ebsite: Non		H(c) Group exemption r					
	m of organization		ar of formation: 1988 M S	State of legal domicile NC				
Part		ribe the organization's mission or most significant activities ${ t Shelter \ f}$	or Homelegg lo	cated in				
	1 Briefly desc	wn Raleigh, North Carolina. The mission	is to feed and	d cloth				
ctivities & Governance	-	oox ► ☐ If the organization discontinued its operations or disposed of mor						
Ver		oting members of the governing body (Part VI, line 1a)	3	11				
ğ,	4 Number of	ndependent voting members of the governing body (Part VI, line 1b)	4	0				
es es	5 Total numb	er of individuals employed in calendar year 2016 (Part V, line 2a)	5	0				
Σį		er of volunteers (estimate if necessary)	6	0				
Act		ted business revenue from Part VIII, column (C), line 12	7a 7b	0.				
-	b Net unrelate	ed business taxable income from Form 990-T, line RECEIVED	Prior Year	Current Year				
	8 Contributio	ns and grants (Part VIII, line 1h)	26,467.	21,882.				
91		rvice revenue (Part VIII, line 20)	46,586.	59,235.				
8 1	10 Investment	income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.				
~ [~] 1	11 Other rever	ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and the EN UT	0.	0.				
	12 10101101011	and mice of through 11 mast equal 1 at 1	73,053.	81,117.				
		similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.				
4	•	d to or for members (Part IX, column (A), line 4) ner compensation, employee benefits (Part IX, column (A), lines 5-10)	46,068.	48,533.				
اذاة		I fundraising fees (Part IX, column (A), line 11e)	0.	0.				
Expen		uising expenses (Part IX, column (D), line 25)						
_ ŭ 1	17 Other expe	nses (Part IX, column (A), lines 11a-11d, 11f-24e)	31,504.	26,618.				
1	•	ses. Add lines 13-17 (must equal Part IX, column (A), line 25)	77,572.	75,151.				
	19 Revenue le	s expenses Subtract line 18 from line 12	-4,519.	5,966.				
Assets or displaying Balances	10 Takal :		Reginning of Current Year 72,851.	79,230.				
Asse Bala		es (Part X, line 16) es (Part X, line 26)	1,018.	1,432.				
ᇷᆸ		or fund balances Subtract line 21 from line 20	71,833.	77,798.				
Part		re Block		<u> </u>				
Under p	penalties of perjui	y, I declare that I have examined this return, including accompanying schedules and staten	ments, and to the best of my kr	nowledge and belief, it is				
true, co	orrect, and compl	Reclaration of preparer (other than officer) is based on all information of which prepare	er has any knowledge	*a.) 11				
		horly Shearer	X // ~ ⟨	7-11				
Sign	1'	ure of officer(השוב					
Here		rley Sheares, Executive Director	· · · · · · · · · · · · · · · · · · ·					
		reparer's name Preparer's signature	Date Check	PTIN				
Paid			11/09/17 self-employed	P00132642				
Prepare	er Firm's name	▶ Heroux & Company, LLP		56-2082565				
Use On		ss 4700 Falls of Neuse Road, Shite 110						

May the IRS discuss this return with the preparer shown above? (see instruction 632001 11-11-16 LHA For Paperwork Reduction Act Notice, see the separate instructions.

See Schedule O for Organization Mission Statement Continuation

Raleigh, NC 27609

Phone no. 919-788-9570

920

X Yes No

Form **990** (2016)

	n 990 (2016) AME DAY Shelter Supporters 58-1836	146	Page 2
Ра	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission		
•	The mission is to feed and clothe the homeless, while attempting	to	
	instill in them the value of work, responsibility, and the value		
		01	
	being a productive citizen.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
_	prior Form 990 or 990-EZ?	7	X No
	• ***	res	<u> </u>
	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 exp	encec	
•			_
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expensions	ises, and)
	revenue, if any, for each program service reported		
4a		<u>59,2</u>	35.)
	Year around operation providing shelter for homeless persons.		
4b	(Code) (Expenses \$)
	16		
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$		 '
	Other program services (Describe in Schedule O)		
4d			
	[Expenses \$ including grants of \$) (Revenue \$)		
4-	Total program convice expenses		

Form 990 (2016)

Form 990 (2016	5)
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Form 990 (2016) AME Day Shelter Supporters Part IV | Checklist of Required Schedules

58-183694

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		103	
•	If "Yes," complete Schedule A	1	х	
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	з		Х
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 98-197 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		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
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_		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			,,,
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
	Part VI	11a		
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11b		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	116		
C		11c		х
٨	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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	- <u> -</u>		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
e	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e	Х	
f				
•	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		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
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		<u> </u>
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			37
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4.		¥
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10		X
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18_		
19		19		x
	complete Schedule G. Part III		990	2016

Yes No

(COMMINGE)	Part IV	Checklist of Required Schedules	(continued)
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20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
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	1		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ŭ	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
254		25a		х
_	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
ь	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	056		х
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			x
	complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			v
	of any of these persons? If "Yes," complete Schedule L, Part III	27	_	X
	Was the organization a narty to a husiness transaction with one of the following narties (see Schedule I. Part IV			1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			ì
28	instructions for applicable filing thresholds, conditions, and exceptions)			- <u></u>
		 28a		X
a b	instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
a b	instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
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a b	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28b		Х
a b c	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28b 28c		X X
a b c	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28b 28c		x
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a b c 29 30	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	28b 28c 29		X X
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a b c 29 30	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	28b 28c 29 30		X X X
a b c 29 30	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	28b 28c 29 30 31		х х х
a b c 29 30 31	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	28b 28c 29 30 31		х х х
a b c 29 30 31	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	28b 28c 29 30 31		x x x x
a b c 29 30 31 32 33	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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	28b 28c 29 30 31		x x x x
a b c 29 30 31 32 33	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1	28b 28c 29 30 31 32		х х х х
a b c c 29 30 31 32 33 34 35a	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Inne 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	28b 28c 29 30 31 32 33		x x x x x x x
a b c c 29 30 31 32 33 34 35a	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 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 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	28b 28c 29 30 31 32 33		x x x x x x x
a b c c 29 30 31 32 33 34 35a	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family	28b 28c 29 30 31 32 33 34 35a		x x x x x x x
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a b c c 29 30 31 32 33 34 35a b	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 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 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 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	28b 28c 29 30 31 32 33 34 35a 35b		x x x x x x x
a b c c 29 30 31 32 33 34 35a b	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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, Iine 2 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, Iine 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	28b 28c 29 30 31 32 33 34 35a 35b		x x x x x x x
a b c c 29 30 31 32 33 34 35a b 36 37	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 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, Iine 2 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	28b 28c 29 30 31 32 33 34 35a 35b 36		x x x x x x x x
a b c c 29 30 31 32 33 34 35a b	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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, Iine 2 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, Iine 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	28b 28c 29 30 31 32 33 34 35a 35b 36	X	x x x x x x x x

Form **990** (2016)

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance		<u>_</u>	<u> </u>				
	Check if Schedule O contains a response or note to any line in this Part V			Γ				
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 2	1						
С	5.19							
	(gambling) winnings to prize winners?	1c						
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 0			Í				
ъ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	_3b						
	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)	_		l ₋ .				
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		Х				
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	i I		ĺ				
	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).			<u></u>				
а	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				
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			٠,				
	to file Form 8282?	7c_		X				
ď	If "Yes," indicate the number of Forms 8282 filed during the year							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		 				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		 				
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	_7h_						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<u> </u>						
_	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.			Í				
a	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<u>9a</u> 9b						
10	Section 501(c)(7) organizations. Enter	30		 				
	Initiation fees and capital contributions included on Part VIII, line 12			ļ				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1]				
11	Section 501(c)(12) organizations. Enter	1						
a	Gross income from members or shareholders							
b	Gross income from other sources (Do not net amounts due or paid to other sources against			{				
_	amounts due or received from them)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L						
	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							
С	Enter the amount of reserves on hand			L				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х				
ь	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b						

AME Day Shelter Supporters 58-1836946 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 11 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 0 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X 7h persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? <u>8</u>a Х b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Х 10a 10a Did the organization have local chapters, branches, or affiliates? 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 filling the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done 13 13 Did the organization have a written whistleblower policy? Х 14 Did the organization have a written document retention and destruction policy? 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 15b **b** Other officers or key employees of the organization 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 X taxable entity during the year? 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶NC Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request ___ Own website ____ Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records

Bessie Walker - 919-467-0956 1115 Evans Road, Cary, NC 2

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Form 990 (2016	<u> </u>	<u>Shelter</u>	Supporters_	58-1836946	Page
Part VII Co	mpensation of Officers	, Directors, 1	Trustees, Key Employees, H	lighest Compensated	
Fn	inlovees, and Independ	lent Contract	tore		

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

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

X Check this box if neither the organization (A) Name and Title	(B) Average hours per week	(do	not c	Pos heck i	C) ition more	than of the state	one n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Shirley Sheares	20.00	I								
Director		X	<u> </u>	_	<u> </u>	┝	_	0.	0.	0 .
(2) G.L. Edmond	3.00	1		,,						
Chair (3) Bessie Walker	10.00	├	-	Х	├—	├-	-	0.	0.	0.
Treasurer	10.00	1		$ _{\mathbf{x}} $				0.	0.	0.
Treasurer								0.	0.	
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	T DOCUMENTAL OFFICE 191 DIRECTORS THESE	TOCO, INC. LIN	7107	, , ,	4111	4 1 11	91100	,. <u>v</u>	Jinpensatea Employet	o (continued)				
	(A)	(B)				C)			(D)	(E)			(F)	
	Name and title	(do not check more than one)						Reportable						
		hours per week	box	, unle:	ss pe	rson I	s both or/trus	n an	compensation	compensatio				of
		(list any	\vdash		Π	Γ	Γ	Ì	from the	from related organizations			other pensat	tion
		hours for	direct				-		organization	(W-2/1099-MIS		1	om the	
		related	68 01	trustee	ļ		nsate		(W-2/1099-MISC)	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	٠,		anızatı	
		organizations	Trust	al tru	i	oyee	ed					and	d relate	ed
		below	Individual trustee or director	Institutional 1	 is	Key employee	Highest compensated employee	Former				orga	anızatıc	วทร
		line)	를	ısı	Officer	, Ke	E E	호	<u> </u>			<u> </u>		
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	Sub-total	Castian A							0.	<u> </u>	0.	<u> </u>		0.
	Total from continuation sheets to Part VII	, Section A							0.		0.			ö.
	Total (add lines 1b and 1c) Total number of individuals (including but no	at limited to th		linto		0010	A wh	216		000 of reportable		L		<u> </u>
2	_	ot minted to tri	USE	IISTE	u at	JUVE	<i>)</i> wii	016	ceived more than \$100,	ood of reportable				0
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	director or tri	ietad	ם א	v en	nnlo	WAA	orl	highest compensated er	nnlovee on		\sqcap		
•	line 1a? If "Yes," complete Schedule J for si		13101	, RC	y Ci	iipio	ycc,	0	riigilest compensated ei	iipioyee on		3		X
4	For any individual listed on line 1a, is the su		e co	mne	nsa	tion	and	oth	ner compensation from t	he organization				
•	and related organizations greater than \$150									no organization		4		X
5	Did any person listed on line 1a receive or a			-						fual for services			$\neg \uparrow$	
•	rendered to the organization? If "Yes." com					-						5		X
Sec	tion B. Independent Contractors	Diete Certebrit		71 50	<u></u>	7415	<u> </u>							
1	Complete this table for your five highest cor	mpensated ind	epe	nder	nt co	ontra	actor	s th	nat received more than \$	100,000 of comp	ensa	tion fro	m	
	the organization Report compensation for t		-											
	(A)								(B)			(0	 ;)	
	Name and business	address	NC	NE	3 _				Description of s	ervices		Compe		1
								- 1						
														_
								- 1		Ì				
								_						
								ı						
								_						
								- {		}				
														
2	Total number of independent contractors (in	cluding but no	ot lim	nited	l to 1	_		ted	above) who received mo	ore than				
	\$100,000 of compensation from the organiz	ation)						000 (
												_ ,		

Page 8

		Check if Schedule O conf	tains a response	or note to any lir	ne in this Part VIII			<u> </u>
		33.33.33			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ats	1 a	Federated campaigns	1a					
irar our	ь	Membership dues	1b		_			
S, C	c	Fundraising events	1c		1			
	d	Related organizations	1 <u>d</u>	14,350.	1			
S,	е	Government grants (contribut		·		}		
er jë	f	All other contributions, gifts, gran						
ē		similar amounts not included abo		7,532.	4			
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions included in lines	1a-1f \$					
<u>0</u> 8	<u> </u>	Total. Add lines 1a-1f		P	21,882.	 		1
	_ ا	Weekly Tenant D	nenosits	Business Code 531390	59,235.	59,235.		
Program Service Revenue	2 a b			331390	33,233.	39,233.		· · · - ·
Sen Te								
Ē	ا							
gra Re	e							
P	ľ	All other program service reve	enue					
		Total. Add lines 2a-2f			59,235.			
	3	Investment income (including	dividends, intere	est, and				
1		other similar amounts)		>				
	4	Income from investment of ta	x-exempt bond p	roceeds				
	5	Royalties		<u> </u>				
			(i) Real	(ıı) Personal				
		Gross rents						
		Less rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)	(2) Coorrettoo	(i) Other				-
	/ a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	h	Less cost or other basis			1			
		and sales expenses						
	c	Gain or (loss)		1				
		Net gain or (loss)		•				
		Gross income from fundraisin	g events (not				·	
Revenue		including \$						
eve		contributions reported on line	1c) See					
		Part IV, line 18	а					
Other	b	Less direct expenses	b	<u> </u>				
٥	С	Net income or (loss) from fund	draising events			.		
	9 a	Gross income from gaming ac	ctivities See	1				
		Part IV, line 19	а					
		Less direct expenses	b	L				
		Net income or (loss) from gam	=					<u> </u>
	10 a	Gross sales of inventory, less			1			
	_	and allowances	a					
		Less cost of goods sold Net income or (loss) from sale	b o of inventors	L				
1		Miscellaneous Revenu		Business Code				
	11 a			Duanicas Code				
	u			· · · · · · · · · · · · · · · · · · ·				
	c							
	d							
	е	Total. Add lines 11a-11d		>				
	12	Total revenue. See instructions.			81,117.	59,235.	0.	0.

Form 990 (2016) AME Day Shelter Supporters
Part IX Statement of Functional Expenses

Secti	ion 501(c)(3) and 501(c)(4) organizations must compl Check if Schedule O contains a respons			nplete column (A).	
Do :	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII	Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign			•	
	organizations, foreign governments, and foreign				
4	Individuals See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,				
J	trustees, and key employees		,		
6	Compensation not included above, to disqualified				
J	persons (as defined under section 4958(f)(1)) and	ĺ	İ		
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	44,971.	44,971.		
8	Pension plan accruals and contributions (include			· · · · · · · · · · · · · · · · · · ·	
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	3,562.	3,562.		
11	Fees for services (non-employees)				
а	Management				
þ	Legal				
С	Accounting				
d	Lobbying				
е	· F	····			
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.)				
12	Advertising and promotion			<u></u>	
13	Office expenses				<u> </u>
14	Information technology				L
15	Royalties	24,556.	24,556.		<u> </u>
16 17	Occupancy Travel	27,330.	24,3300	·	
17 18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials		J		
19	Conferences, conventions, and meetings				<u> </u>
20	Interest			 	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,505.	1,505.		
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)			į	
	amount, list line 24e expenses on Schedule 0.)				
а	Bank Fees	557.		557.	
b					
С					
d					
	All other expenses	75 151	74 504	557	
<u>25</u>	Total functional expenses. Add lines 1 through 24e	75,151.	74,594.	557.	0.
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				
		J			

		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			2,114.	1	9,998.
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net		3_			
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and fo	rmer o	fficers, directors,			
		trustees, key employees, and highest compensa	ited em	ployees Complete			
		Part II of Schedule L		·		5	
	6	Loans and other receivables from other disqualit	fied per	sons (as defined under			
		section 4958(f)(1)), persons described in section	4958()(3)(B), and contributing			
		employers and sponsoring organizations of sect	ion 501	(c)(9) voluntary			
छ		employees' beneficiary organizations (see instr)	Compl	ete Part II of Sch L		6_	
Assets	7	Notes and loans receivable, net				7	
Ÿ	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or other					
		basis. Complete Part VI of Schedule D	10a	110,000.			
	b	Less accumulated depreciation	10b	40,768.	70,737.	10c	69,232.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments · program-related. See Part IV, line	11			13	
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal	72,851.	16	79,230.		
	17	Accounts payable and accrued expenses		17			
	18	Grants payable		}		18_	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete				21	
es	22	Loans and other payables to current and former					
Ė		key employees, highest compensated employee	s, and	disqualified persons			
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated	-			24	
	25	Other liabilities (including federal income tax, pa	•			ļ	
		parties, and other liabilities not included on lines	17-24)	Complete Part X of	1,018.	25	1,432.
		Schedule D		ŀ	1,018.	25 26	1,432.
	26	Total liabilities. Add lines 17 through 25	\	k have X and	1,010.	26	1,452.
		Organizations that follow SFAS 117 (ASC 958		k here ▶ <u>X</u> and			
Ses	27	complete lines 27 through 29, and lines 33 an Unrestricted net assets	u 34.		71,833.	27	77,798.
jue .	27	Temporarily restricted net assets			7270001	28	1.7,750
Ва	28 29	Permanently restricted net assets		}		29	
nd	29	Organizations that do not follow SFAS 117 (A	SC 059	t) check here			
Ę.		and complete lines 30 through 34.	J 936	,, officer field			
S	30	Capital stock or trust principal, or current funds				30	- =
set	31	Paid-in or capital surplus, or land, building, or eq	luipmei	nt fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			<u>. </u>	32	
Š	33	Total net assets or fund balances	· · · • · · ·		71,833.	33	77,798.
	24	Total liabilities and net assets/fund halances		Ì	72.851.	34	79.230.

	1990 (2016) AME_Day Shercer Supporters		-T020346	<u> </u>	age 12
Pa	rt XI Reconciliation of Net Assets				-
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>117.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			151.
3	Revenue less expenses. Subtract line 2 from line 1	_3			966.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		11,	833.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			<u>-1.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		77,	<u> 798.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Ye	s No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			ł	-
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			.
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		_2a	ļ	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			İ	ĺ
	Separate basis Consolidated basis Both consolidated and separate basis			Í	د ــــــا .
þ	Were the organization's financial statements audited by an independent accountant?		_ <u>2b</u>	↓	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,		1	- }
	consolidated basis, or both				1
	Separate basis Consolidated basis Both consolidated and separate basis]	l i
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audıt,		-	_
	review, or compilation of its financial statements and selection of an independent accountant?		<u>2c</u>	-	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche			1	-
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud	dit	-	<u>. </u>
	Act and OMB Circular A-133?		3a	┼-	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red auc			1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		0 (2016)
			For	~ 99	U (2016)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

Total

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization **Employer identification number** 58-1836946 AME Day Shelter Supporters 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) 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). 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi), (Complete Part II) 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 10 X 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 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. 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. _____ 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. ____ 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. Check this box if the organization received a written determination from the IRS that it is a Type I, 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) (iv) Is the organization listed (III) Type of organization (v) Amount of monetary (I) Name of supported in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Pa	irt II Support Schedule for	Organizations	Described in	Sections 170			
	(Complete only if you checke fails to qualify under the tests				on failed to qualify	under Part III If the	organization
Sec	ction A. Public Support	- Brioto, piea		····			/ -
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gifts, grants, contributions, and	(a) 2012	10/2013	(6) 2014	(u) 2015	(e) 20102	(i) iotai
•	membership fees received. (Do not	Į			1		
	include any "unusual grants ")	ĺ					
2	Tax revenues levied for the organ-				 		
	ization's benefit and either paid to	1			/	1	
	or expended on its behalf					j	
3	The value of services or facilities						
	furnished by a governmental unit to	ĺ	Í			ľ	
	the organization without charge			<u> </u>		ļ	
4	Total. Add lines 1 through 3				<u>/</u>		
5	The portion of total contributions			/	1		
	by each person (other than a	ľ	1			Ì	
	governmental unit or publicly						
	supported organization) included		ĺ		Į	İ	1
	on line 1 that exceeds 2% of the	ļ	Į.				
	amount shown on line 11,					ì	
_	column (f)			/		 	
	Public support, Subtract line 5 from line 4 ction B, Total Support	Ĺ	·	<u> </u>	<u> </u>	<u> </u>	
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4						
8	Gross income from interest,				Ţ		
	dividends, payments received on	ļ					
	securities loans, rents, royalties		/		1]	
	and income from similar sources			<u> </u>			
9	Net income from unrelated business		/				
	activities, whether or not the	/	1				
	business is regularly carried on			<u> </u>	ļ	 	
10	Other income Do not include gain	/					
	or loss from the sale of capital	/	ļ				
	assets (Explain in Part VI.)	/	ļ <u> — </u>	 	 	 	
	Total support. Add lines 7 through 10	L	 	<u> </u>	J	1-1	L
	Gross receipts from related activities,	,		ما المارك المارك المارك المارك المارك		12	
13	First five years. If the Form 990 is for organization, check this box and stop	<i>,</i> -	s first, second, thii	a, tourth, or titth ta	ax year as a section	n 501(c)(3)	▶□
Sec	ction C. Computation of Publi	c/Support Per	centage				
14	Public support percentage for 2016 (he 6, column (f) di	vided by line 11, o	column (f))		14	%
	Public support percentage from 2015	, ,	•	•••		15	%
16a	33 1/3% support test - 2016. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	k and
	stop here. The organization qualifies	as a publicly supp	orted organization	1			ightharpoons
b	33 1/3% support test - 2015. If the c	organization did no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	6 or more, check th	s box
	and stop here. The organization qual		• •				▶□
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop I	here. Explain in Pa	art VI how the organ	nization
	meets the "facts-and-circumstances"	-					
b	10% -facts-and-circumstances test	-					
	more, and if the organization meets the				•		,
	organization meets the "facts-and-circ		-	•	• • • •		. ►
18	Private foundation/ If the organization	n did not check a	box on line 13, 16	a, 160, 1/a, or 17b			
	/				Scn	edule A (Form 990	01 990-62) 2016
	/						
	/						

632022 09-21-16

Schedule A (Form 990 or 990-EZ) 2016 AME Day Shelter Supporters 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

5	qualify under the tests listed by	elow, please comp	lete Part II)				
	ction A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and		ľ	ĺ		}	
	membership fees received (Do not	00 000	24 250	24 277	06 465	01 000	107 405
	include any "unusual grants ")	20,300.	34,379.	34,377.	26,467.	21,882.	137,405.
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	52,624.	60,936.	55,013.	46,586.	59,235.	274,394.
3	Gross receipts from activities that			Ì			
	are not an unrelated trade or bus-			}		}	
	iness under section 513					<u></u>	
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	72,924.	95,315.	89,390.	73,053.	81,117.	411,799.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
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						0.
c	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 8)						411,799.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	72,924.	95,315.	89,390.	73,053.	81,117.	411,799.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources]
b	Unrelated business taxable income	}	l			ł	
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b					<u> </u>	
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)	72,924.	95,315.	89,390.	73,053.	81,117.	411,799.
14	First five years. If the Form 990 is for	the organization's	first, second, third	i, fourth, or fifth ta	x year as a section	1 501(c)(3) organiza	ition,
	check this box and stop here						▶□
Sec	tion C. Computation of Publi	c Support Per	centage			,	
15	Public support percentage for 2016 (li	ne 8, column (f) div	rided by line 13, co	olumn (f))			<u>100.00 %</u>
	Public support percentage from 2015					16	100.00 %
<u>Sec</u>	tion D. Computation of Inves	<u>tment Income</u>	Percentage	<u> </u>			
17	Investment income percentage for 20	16 (line 10c, colum	nn (f) divided by line	e 13, column (f))		17	.00 %
18	Investment income percentage from 2	2015 Schedule A, F	Part III, line 17			18	%
19a	33 1/3% support tests - 2016. If the more than 33 1/3%, check this box an						7 is not ►X
b	33 1/3% support tests - 2015. If the	organization did n	ot check a box on	line 14 or line 19a,	and line 16 is mo	re than 33 1/3%, a	nd
	line 18 is not more than 33 1/3%, chec	ck this box and st	op here. The orga	nization qualifies a	is a publicly suppo	orted organization	▶□
20	Private foundation. If the organization	n did not check a t	ox on line 14, 19a	or 19b. check the	s box and see ins	tructions	▶□

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 Suppo	orting Organizations
----------------------	----------------------

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

	Yes	No
1		
2		
3a_		
3c		
4a		
	-	-
4c		
5a		
5b		
5c		
66		
7	-	
8		
9a		
9b		
9c		
10a		
10b		

Sche	dule A (Form 990 or 990-EZ) 2016 AME Day Shelter Supporters	58-183694	<u>6 Ра</u>	age 5
Ра	rt IV Supporting Organizations (continued)		· · ·	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	-		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	1		
L	below, the governing body of a supported organization?	11a	 	
	A family member of a person described in (a) above?	11b		
	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. tion B. Type I Supporting Organizations	11c_	L	<u> </u>
300	tion b. Type I dupporting Organizations		Voc	No
1	Did the directors trustees or membership of one or more supported exceptrations have the newer to		Yes	NO
•	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			j
	controlled the organization's activities. If the organization had more than one supported organization,	ļ		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	 1		
^	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	 '		 -
2	Did the organization operate for the benefit of any supported organization other than the supported	ľ		1
	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,		~	- 3
202	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations		l,	l
500	tion o. Type it Supporting Organizations		V	N _a
	Was a manager of the agreement and advantage of the discontinuous that the control of the discontinuous		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		1	
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u>``</u>	the supported organization(s). tion D. All Type III Supporting Organizations	1	L	Ь—
36 6	tion b. All Type III Supporting Organizations		Yes	No
_	Dut the assessment and the seals of the supervised assessment to the least day of the 66th month of the		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	1		
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	- -		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		ļ	
	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	1		
	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] ^j
	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		L
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	uctions)		
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			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity	(see instructions)	<u> </u>	T
2	Activities Test Answer (a) and (b) below		Yes	No
а	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	ľ		
	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		_	- 1
_	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			1
	reasons for the organization's position that its supported organization(s) would have engaged in these			 .
	activities but for the organization's involvement	2b_	ļ	
3	Parent of Supported Organizations. Answer (a) and (b) below			ļi
а	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		<u> </u>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

Pa	dule A (Form 990 or 990-EZ) 2016 AME Day Shelter Support			58-1836946 Page 6
	, , , , , , , , , , , , , , , , , , ,			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	•		Part VI) See instructions. Al
	other Type III non-functionally integrated supporting organizations must c	omplete Se	ections A through E	
Sect	ion 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		<u> </u>
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		<u> </u>
5	Depreciation and depletion	5		<u> </u>
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		<u> </u>
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			<u> </u>
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		<u> </u>
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		<u> </u>
_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		<u> </u>
8	Minimum Asset Amount (add line 7 to line 6)	8		<u> </u>
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
_3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	T		
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrate	ed Type III supporting org	anization (see
	instructions)			

Sche	dule A (Form 990 or 990 EZ) 2016 AME Day Shelt	er Supporters		<u>8-1836946</u>	Page 7
Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)		
Sect	ion D - Distributions			Current Ye	ar
1	Amounts paid to supported organizations to accomplish exe	mpt purposes			
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purpose	es 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	<u></u>			
7	Total annual distributions. Add lines 1 through 6				
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI) See instructions	·			
9	Distributable amount for 2016 from Section C, line 6				
10	Line 8 amount divided by Line 9 amount				
		(i)	(ii)	(iii)	
		Excess Distributions	Underdistributions	Distributab	
Sect	on E - Distribution Allocations (see instructions)		Pre-2016	Amount for 2	2016
1	Distributable amount for 2016 from Section C, line 6				
	Underdistributions, if any, for years prior to 2016 (reason-				
	able cause required explain in Part VI) See instructions				
3	Excess distributions carryover, if any, to 2016			·	
a					
b					
	From 2013				
	From 2014				
	From 2015				
	Total of lines 3a through e				
	Applied to underdistributions of prior years				
	Applied to 2016 distributable amount				
	Carryover from 2011 not applied (see instructions)				
	Remainder, Subtract lines 3g, 3h, and 3i from 3f				
4	Distributions for 2016 from Section D.				
	line 7 \$				
a	Applied to underdistributions of prior years			<u> </u>	
	Applied to 2016 distributable amount				
	Remainder Subtract lines 4a and 4b from 4				
5	Remaining underdistributions for years prior to 2016, if				
-	any Subtract lines 3g and 4a from line 2 For result greater				
	than zero, explain in Part VI See instructions				
6	Remaining underdistributions for 2016 Subtract lines 3h				
-	and 4b from line 1 For result greater than zero, explain in				
	Part VI See instructions				
7	Excess distributions carryover to 2017. Add lines 3				
-	and 4c			1	
8	Breakdown of line 7			1	
			<u> </u>	 	
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				
	Excess from 2016		_		

Schedule A (Form 990 or 990-EZ) 2016

Schedule A	(Form 990 or 990-EZ) 2016 AME	Day Shelter	Supporters	58-1836946 Page 8
Part VI	Supplemental Information. Part IV, Section A, lines 1, 2, 3b, 3c line 1, Part IV, Section D, lines 2 an	Provide the explanati 4, 4b, 4c, 5a, 6, 9a, 9b, d 3, Part IV, Section E.	ons required by Part II, line 10, Part II, line 17a of 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, 5, and 6 Also complete this part for any addition	17b, Part III, line 12, and 2, Part IV, Section C, /, Section B, line 1e, Part V,
		 		
-		······		
				
	······································			
		<u> </u>		
				
		····		
				
-				
		· · · · · · · · · · · · · · · · · · ·		
				
·				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

Pa	AME Day Shelter Support I Organizations Maintaining Donor Advised		r Similar Funda or	58-1836946
Fa			r Similar Funds or	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		wood 6 mdo	(h) Funda and other appoints
	 	(a) Donor ad	vised iulius	(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 wr	•		
	are the organization's property, subject to the organization's ex	-		L Yes L No
6	Did the organization inform all grantees, donors, and donor adv	•	-	•
	for charitable purposes and not for the benefit of the donor or o	donor advisor, or to	r any other purpose cor	
Pa	impermissible private benefit?		"\\\- " - F 000 F-	Yes No
				tiv, line /
1	Purpose(s) of conservation easements held by the organization			- the construction of some
	Preservation of land for public use (e.g., recreation or edu	· —		cally important land area
	Protection of natural habitat		Preservation of a certifie	a historic structure
_	Preservation of open space		A	
2	Complete lines 2a through 2d if the organization held a qualified	d conservation cor	itribution in the form of a	
	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	tura included in (a)		2c
C	Number of conservation easements on a certified historic struc		t on a historic etrilature	20
d	• • • •	er 8/17/06, and no	t on a historic structure	2d
_	listed in the National Register Number of conservation easements modified, transferred, relea	and national unbod	or terminated by the or	
3	_	isea, extinguisnea,	or terminated by the or	ganization during the tax
4	year ►Number of states where property subject to conservation ease	ment is located		
5	Does the organization have a written policy regarding the perio		nection, handling of	
3	violations, and enforcement of the conservation easements it h		pection, nandling of	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha		s and enforcing conserv	— —
Ū	b	anding of violation	s, and ornoroning correct	ration decombine defining the year
7	Amount of expenses incurred in monitoring, inspecting, handling	nd of violations, and	d enforcing conservation	n easements during the year
•	> \$.9 5. 170,2110110,		,
8	Does each conservation easement reported on line 2(d) above	satisfy the requiren	nents of section 170(h)(4	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 r	evenue and expense sta	itement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizatio			
	conservation easements			
Pa	rt III Organizations Maintaining Collections of A	Art, Historical	reasures, or Othe	r Similar Assets.
	Complete if the organization answered "Yes" on Form 9	90, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report	in its revenue statemen	t and balance sheet works of art,
	historical treasures, or other similar assets held for public exhib	ition, education, o	research in furtherance	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe	s these items		
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in it	s revenue statement an	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu-	cation, 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 treas	ures, or other simil	ar assets for financial ga	
	the following amounts required to be reported under SFAS 116	(ASC 958) relating	to these items	
а	Revenue included on Form 990, Part VIII, line 1			> \$
h	Assets included in Form 990, Part Y			• •

		<u>Shelter Su</u>						<u>58-18</u>			ige 2	
Par	t III Organizations Maintaining Co	llections of Art	t, Histo	orical Tre	asures, o	r Other	<u>r Simila</u>	r Assets	(continu	ıed)		
3	Using the organization's acquisition, accession	n, and other records	s, check	any of the f	ollowing that	t are a sig	gnificant i	use of its o	ollection i	tems		
	(check all that apply)											
а	Public exhibition	d		Loan or exc	hange progra	ams						
b	Scholarly research	е		Other								
С												
4	Provide a description of the organization's coll	ections and explain	how th	ev further th	ie organizatio	on's exer	not purpo	se in Part	XIII			
5	During the year, did the organization solicit or	•		•	•							
	to be sold to raise funds rather than to be mair								Yes		No	
Par	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						,		,			
12	Is the organization an agent, trustee, custodiar		ary for o	ontributions	s or other ass	sets not i	included					
	on Form 990, Part X?	TO OUTCO INCOMEGO	ary ior c	,on thi ibation t	o or ourier as	3013 1101 1	illiciaaca	Г	Yes		No	
h	If "Yes," explain the arrangement in Part XIII ar	ad complete the fell	lovuna t	able					_ 163		,	
U	ii res, explain the arrangement in rait Alli ar	ia complete the ion	owing to	abic			Γ	J	Amount			
_	Paginning halanca						10		Amount			
	Beginning balance						1c					
	Additions during the year						_1d					
_	Distributions during the year						1e					
f	Ending balance	000 D-+V I	04 (<u>1f</u>		7 ٧		1	
	Did the organization include an amount on For		•				ity /	L_	_ Yes	<u> </u>	No	
Par	If "Yes," explain the arrangement in Part XIII C t V Endowment Funds. Complete if						10				Ь	
I ai	Endowment Farias: Complete in				,			was baak	(a) Four			
4	Banana at was balance	(a) Current year	(0) P	rior year	(c) Two yea	IS DACK	(a) Three	years back	(e) Four	/ears t	Jack	
1a	Beginning of year balance				 							
b	Contributions											
C	Net investment earnings, gains, and losses				 							
d	Grants or scholarships								<u> </u>			
е	Other expenditures for facilities				1	ĺ			ł			
	and programs								ļ			
f	Administrative expenses								ļ			
g	End of year balance				L				<u></u>			
2	Provide the estimated percentage of the current	nt year end balance	(line 1g	ı, column (a))) held as							
а	Board designated or quasi-endowment		_%									
b	Permanent endowment	%										
С	Temporarily restricted endowment ▶	%										
	The percentages on lines 2a, 2b, and 2c should	d equal 100%										
3a	Are there endowment funds not in the possess	sion of the organiza	tion that	t are held ar	nd administer	red for th	e organız	ation	_	r		
	by								<u>_</u>	Yes	No	
	(i) unrelated organizations								3a(i)			
	(ii) related organizations								3a(ii)	—		
b	If "Yes" on line 3a(ii), are the related organization	ons listed as require	ed on So	chedule R?					3b_			
4	Describe in Part XIII the intended uses of the o		vment fo	unds								
Par	t VI Land, Buildings, and Equipme	nt.										
	Complete if the organization answered	"Yes" on Form 990	Part IV	, line 11a. S	ee Form 990	, Part X,	line 10.					
	Description of property	(a) Cost or of			or other		ccumulat		(d) Book	value	;	
		basis (investm	nent)	basis	(other)	de	preciation					
1a	Land		000.							,00		
b	Buildings	50,0	000.				30,7		19	, 23		
С	Leasehold improvements	10,0	000.				10,0	00.			0.	
d	Equipment											
е	Other										0.	
Total	. Add lines 1a through 1e (Column (d) must equ	ual Form 990, Part 2	C. colum	n (B), line 10	Oc.)				69	, 23	12.	

Schedule D (Form 990) 2016 AME Day She Part VIII Investments - Other Securities.	lter Suppor	ters	58-183	36946 Page 3
	on Form 990 Part IV	line 11h See Form 990 I	Part V line 12	
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value		aluation Cost or end-of-yea	r market value
(1) Financial derivatives	(=) = = = = = = = = = = = = = = = = = =	(4)		
(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"				
(a) Description of investment	(b) Book value	(c) Method of v	aluation Cost or end-of-yea	r 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. I	Part X, line 15	
	Description			b) Book value
(1)				
(2)				
(3)				
(4)				· · · · · · · · · · · · · · · · · · ·
(5)				
(6)				
	 			
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.				
Complete if the organization answered "Yes" of	on Form 990, Part IV,		990, Part X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes		1 422		
(2) Current Payroll liabilitie	es	1,432.		
(3)	 -			
(4)				
(5)				
<u>(6)</u>				
<u>(7)</u>				
(8)				
(9)	25)	1,432.		
Total. (Column (b) must equal Form 990, Part X, col. (B) line	43.1	+, = 740		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016 AME Day Shelter Suppor		58-1836946 Page 4
Part XI Reconciliation of Revenue per Audited Financial St		e 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
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	()	1 1
a Net unrealized gains (losses) on investments	2a	
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	<u> </u>
d Other (Describe in Part XIII)	2d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1.1	<u> </u>
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII)	4b	
c Add lines 4a and 4b		4c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I. line 1 Part XII Reconciliation of Expenses per Audited Financial S	2)	5
		ses per neturn.
Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a	
1 Total expenses and losses per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1001	
a Donated services and use of facilities	2a 2b	
b Prior year adjustments		
c Other losses	2c 2d	
d Other (Describe in Part XIII)	<u> 20]</u>	20
e Add lines 2a through 2d		2e 3
 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1 		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4a	} }
	4b	
b Other (Describe in Part XIII) c Add lines 4a and 4b		4c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990. Part I. line	. 10)	5
Part XIII Supplemental Information.	(8.)	
nes 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide Part X, Line 2:	any additional information	
None, and no audit or footnotes prepared	•	

632054 08-29-16

Schedule D (Form 990) 2016

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

Department of the Treasury Internal Revenue Service

16 Open to Public Inspection

Name of the organization

AME Day Shelter Supporters

Employer identification number 58-1836946

Form 990, Part I, Line 1, Description of Organization Mission:
the homeless, while attempting to instill in them the value of work,
responsibility, and the value of being a productive citizen.
Form 990, Part VI, Section B, line 11b:
The board of directors reviews Form 990 prior to filing at the most recent
board meeting following completion of Form 990.
Form 990, Part VI, Section C, Line 19:
Governing Documents, conflict of interest policy, and financial statements
are available to the public by request of Shirley Sheares.
Form 990, Part XI, line 9, Changes in Net Assets:
Rounding -1.