**PUBLIC DISCLOSURE COPY**

*Return of Organization Exempt From Income Tax*

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

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

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

**2014**

Open to Public Inspection

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**A For the 2014 calendar year, or tax year beginning and ending:**

- **C Name of organization:** WELSPRING FAMILY SERVICES
- **D Employer Identification number:** 91-0567261

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**B**

- **Check if applicable:**
  - Address change: [ ]
  - Name change: [ ]
  - Initial return pending: [ ]
  - Amended return (if applicable): [ ]

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**F Name and address of principal officer:** RUTHANN HOWELL, SAME AS C ABOVE

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**J Website:** [WWW.WELSPRINGFS.ORG](http://WWW.WELSPRINGFS.ORG)

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**K**

- **Form of organization:** [ ] Corporation
- **L Year of formation:** 1852
- **M State of legal domicile:** WA

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**Part I Summary**

1. **Briefly describe the organization's mission or most significant activities:**
   - **SINCE 1892, WELSPRING FAMILY SERVICES HAS BEEN A SOURCE OF OPPORTUNITY FOR CHILDREN, ADOLESCENTS, AND ADULTS**

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**Activities & Governance**

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

3. **Number of voting members of the governing body (Part VI, line 1a):** 3

4. **Number of independent voting members of the governing body (Part VI, line 1b):** 3

5. **Total number of individuals employed in calendar year 2014 (Part V, line 2a):** 142

6. **Total number of volunteers (estimate if necessary):** 553

7. **Total unrelated business revenue from Form 990-T, line 34:**
   - a. 0
   - b. 0

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**Revenue**

8. **Contributions and grants (Part VIII, line 1h):**
   - **Prior Year:** 4,129,135
   - **Current Year:** 5,372,321

9. **Program service revenue (Part VIII, line 2g):**
   - **Prior Year:** 7,290,257
   - **Current Year:** 7,837,225

10. **Investment income (Part VIII, column (A), lines 3, 4, and 7d):**
    - **Prior Year:** 5,333
    - **Current Year:** 5,775

11. **Other revenue (Part VIII, column (A), lines 5, 6d, 8, 9c, 10c, and 11e):**
    - **Prior Year:** -58,999
    - **Current Year:** -44,987

12. **Total revenue - add lines 1-11 (must equal Part VIII, column (A), line 12):**
   - **Prior Year:** 11,365,728
   - **Current Year:** 13,170,443

13. **Grants and similar amounts paid (Part IX, column (A), lines 1-3):**
   - **Prior Year:** 827,081
   - **Current Year:** 1,750,171

14. **Benefits paid to or for members (Part IX, column (A), line 4):**
    - **Prior Year:** 0
    - **Current Year:** 0

15. **Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10):**
    - **Prior Year:** 6,838,621
    - **Current Year:** 7,627,143

16a. **Professional fundraising fees (Part IX, column (A), line 11e):**
    - **Prior Year:** 0
    - **Current Year:** 0

16b. **Total fundraising expenses (Part IX, column (D), line 25):**
    - **Prior Year:** 424,410
    - **Current Year:** 424,410

17. **Other expenses (Part IX, column (A), lines 11a-11d, 11f-24a):**
    - **Prior Year:** 4,107,978
    - **Current Year:** 4,319,286

18. **Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25):**
    - **Prior Year:** 11,773,680
    - **Current Year:** 13,596,600

19. **Revenue less expenses. Subtract line 18 from line 12:**
    - **Prior Year:** -407,954
    - **Current Year:** -526,151

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**Net Assets or Fund Balances**

20. **Total assets (Part X, line 16):**
    - **Beginning of Current Year:** 18,248,107
    - **End of Year:** 17,501,908

21. **Total liabilities (Part X, line 26):**
    - **Beginning of Current Year:** 6,728,199
    - **End of Year:** 6,518,227

22. **Net assets or fund balances. Subtract line 21 from line 20:**
    - **Beginning of Current Year:** 11,519,908
    - **End of Year:** 11,083,681

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**Part II Signature Block**

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

**Sign Here**

[Signature of officer: RUTHANN HOWELL, CHO/PRESIDENT]

**Date:** 9/15/2015

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**Paid/Type preparer's name:** SARA ELIZABETH J. HYRRE

**Preparer's signature:** SARA ELIZABETH J. HYRRE

**Date:** 9/14/15

**Check if self-employed:** [ ]

**PTIN:** 000235495

**Preparer:** CLARK NUDER, P.S.

**Use Only:**

**Firm's name:** CLARK NUDER, P.S.

**Firm's address:** 10800 NE 4TH STREET, SUITE 1700

BELLEROUGE, WA 98004

**Firm's EIN:** 91-1194016

**Phone no.:** 425-454-4919

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**May the IRS discuss this return with the preparer shown above? (see instructions):** [ ] Yes [ ] No

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432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions.

**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**

**Form 990 (2014)**
Part III | Statement of Program Service Accomplishments

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

1. Briefly describe the organization's mission:

TO BUILD EMOTIONALLY HEALTHY SELF-SUFFICIENT FAMILIES & A NON-VIOLENT COMMUNITY IN WHICH THEY CAN THRIV.

2. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? X No

3. Did the organization cease conducting, or make significant changes in how it conducts, any program services? X No

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

4a. (Code: ) (Expenses $4,345,069, including grants of $2,746,671.) (Revenue $19,945.)

WELLSPRING PROVIDED SERVICES TO 1,690 HOMELESS AND AT-RISK FAMILIES IN 2014. THESE SERVICES INCLUDED:

- SPECIALIZED CHILD CARE IN WELLSPRING'S EARLY LEARNING CENTER FOR 80 HOMELESS CHILDREN - 89% OF THOSE WHO ATTENDED FOR AT LEAST 6 MONTHS GAINED DEVELOPMENTAL SKILLS NEED TO BE SUCCESSFUL IN KINDERGARTEN;

- PROVIDING CLOTHING, EQUIPMENT AND OTHER ESSENTIAL ITEMS TO 2,431 HOMELESS CHILDREN AGED 0-17 THROUGH THE BABY BOUTIQUE;

- SUPPORTIVE SERVICES, INCLUDING CASE MANAGEMENT THROUGH WELLSPRING'S HOUSING SERVICES HELPED 340 INDIVIDUALS AVOID EVICTION AND HOMELESSNESS, AND ASSISTED 110 FAMILIES WITH CHILDREN MOVE FROM HOMELESSNESS INTO STABLE HOUSING - 83% OF WHOM WERE STILL STABLY HOUSED 6 MONTHS LATER.

4b. (Code: ) (Expenses $3,412,780, including grants of $3,500.) (Revenue $3,569,419.)

WELLSPRING COUNSELING AND TRAINING SERVICES WORK WITH INDIVIDUALS, COUPLES AND FAMILIES TO NAVIGATE LIFE'S CHALLENGES AND EXPLORE FUTURE POSSIBILITIES. COUNSELING SERVICES WERE PROVIDED TO 1,718 ADULTS AND CHILDREN IN 2014.

4c. (Code: ) (Expenses $3,304,680, including grants of $ ) (Revenue $4,127,037.)

THE WELLSPRING EMPLOYEE ASSISTANCE PROGRAM (EAP) HELPS ORGANIZATIONS HARNESS THE STRENGTH OF THEIR WORKFORCE BY PROVIDING COST-EFFECTIVE, RESPONSIVE SERVICES THAT HELP EMPLOYERS AND EMPLOYEES REACH THEIR FULL POTENTIAL. WELLSPRING MADE EAP SERVICES AVAILABLE TO 179,000 EMPLOYEES OF CLIENT COMPANIES IN 2014.

4d. Other program services (Describe in Schedule C.)

(Expenses $356,181, including grants of $ ) (Revenue $120,024.)

4e. Total program service expenses

$11,318,709.
Part IV | Checklist of Required Schedules

1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
   Yes | No
   1 | X

2. Is the organization required to complete Schedule B, Schedule of Contributors?
   Yes | No
   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
   Yes | No
   3 | X

4. Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II
   Yes | No
   4 | X

5. Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III
   Yes | No
   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
   Yes | No
   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
   Yes | No
   7 | X

8. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
   Yes | No
   8 | X

9. Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counselling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV
   Yes | No
   9 | X

10. Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V
    Yes | No
    10 | X

11. If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.
    a. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
       Yes | No
       11a | X
    b. Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII
       Yes | No
       11b | X
    c. Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII
       Yes | No
       11c | X
    d. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX
       Yes | No
       11d | X
    e. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
       Yes | No
       11e | X
    f. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X
       Yes | No
       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
    Yes | No
    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
       Yes | No
       12b | X

13. Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
    Yes | No
    13 | X

14a. Did the organization maintain an office, employees, or agents outside of the United States?
    Yes | No
    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
       Yes | No
       14b | X

15. Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV
    Yes | No
    15 | X

16. Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV
    Yes | No
    16 | X

17. Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I
    Yes | No
    17 | X

18. Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
    Yes | No
    18 | X

19. Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III
    Yes | No
    19 | X

20a. Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
    Yes | No
    20a | X
    b. If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
       Yes | No
       20b | X
<table>
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<th>Yes</th>
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**Note:** All Form 990 filers are required to complete Schedule O.
### Part V Statements Regarding Other IRS Filings and Tax Compliance

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>1a Enter the number reported in Box 3 of Form 1099. Enter -0- if not applicable</td>
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<tr>
<td>1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable</td>
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<tr>
<td>1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td>X</td>
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<tr>
<td>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</td>
<td></td>
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<tr>
<td>2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td>
<td>X</td>
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<td>Note. If the sum of lines 1a and 2a is greater than 256, you may be required to e-file (see instructions)</td>
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<tr>
<td>3a Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
<td>X</td>
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<tr>
<td>3b If &quot;Yes,&quot; has it filed a Form 990-T for this year? If &quot;No,&quot; to line 3b, provide an explanation in Schedule O</td>
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<tr>
<td>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</td>
<td>X</td>
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<tr>
<td>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
<td>X</td>
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<tr>
<td>5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td>X</td>
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<tr>
<td>5c If &quot;Yes,&quot; to line 5a or 5b, did the organization file Form 8886-T?</td>
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<tr>
<td>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?</td>
<td>X</td>
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<tr>
<td>6b If &quot;Yes,&quot; did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
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<tr>
<td>7 Organizations that may receive deductible contributions under section 170(c).</td>
<td></td>
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<tr>
<td>7a 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?</td>
<td>X</td>
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<tr>
<td>7b If &quot;Yes,&quot; did the organization notify the donor of the value of the goods or services provided?</td>
<td>X</td>
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<tr>
<td>7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td>X</td>
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<tr>
<td>7d If &quot;Yes,&quot; indicate the number of Forms 8282 filed during the year</td>
<td></td>
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<tr>
<td>7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
<td>X</td>
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<tr>
<td>7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
<td>X</td>
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<td>7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
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<tr>
<td>7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1099-C?</td>
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<tr>
<td>8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</td>
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<tr>
<td>9 Sponsoring organizations maintaining donor advised funds.</td>
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<tr>
<td>9a Did the sponsoring organization make any taxable distributions under section 4966?</td>
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<tr>
<td>9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</td>
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<tr>
<td>10 Section 501(c)(7) organizations. Enter:</td>
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<tr>
<td>10a Initiation fees and capital contributions included on Part VIII, line 12</td>
<td></td>
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<tr>
<td>10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
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<tr>
<td>11 Section 501(c)(12) organizations. Enter:</td>
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<tr>
<td>11a Gross income from members or shareholders</td>
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<tr>
<td>11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</td>
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<tr>
<td>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
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<tr>
<td>12b If &quot;Yes,&quot; enter the amount of tax-exempt interest received or accrued during the year</td>
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<tr>
<td>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</td>
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<tr>
<td>13a Is the organization licensed to issue qualified health plans in more than one state?</td>
<td></td>
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<tr>
<td>Note. See the instructions for additional information the organization must report on Schedule O.</td>
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<td>13b 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</td>
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<tr>
<td>13c Enter the amount of reserves on hand</td>
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<tr>
<td>14a Did the organization receive any payments for indoor tanning services during the tax year?</td>
<td>X</td>
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<tr>
<td>14b If &quot;Yes,&quot; has it filed a Form 720 to report these payments? If &quot;No,&quot; provide an explanation in Schedule O</td>
<td></td>
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</tbody>
</table>
Section A. Governing Body and Management

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.

1b Enter the number of voting members included in line 1a, above, who are independent

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?

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?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization’s assets?

6 Did the organization have members or stockholders?

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?

7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
   a The governing body?
   b Each committee with authority to act on behalf of the governing body?

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization’s mailing address? If “Yes,” provide the names and addresses in Schedule O

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

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?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?
   b Describe in Schedule O the process, if any, used by the organization to review this Form 990.

12a Did the organization have a written conflict of interest policy? If “No,” go to line 13
   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 in Schedule O how this was done

13 Did the organization have a written whistleblower policy?

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
   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 taxable entity during the year?
   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

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3) only) available for public inspection. Indicate how you made these available. Check all that apply.
   X] Own website  X] Upon request
   [ ] Another’s website  [ ] Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization’s books and records:
   DEBORAH TOWNSEND - 206-326-3041
   1900 RAINIER AVENUE SOUTH, SEATTLE, WA 98144

432006 11-07-14  Form 990 (2014)
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization’s tax year.

- List all of the organization’s current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter “0” in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization’s current key employees, if any. See instructions for definition of “key employee.”
- List the organization’s five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization’s former officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization’s former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) CHRISTIAN SCHILLER</td>
<td>2,00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BOARD CHAIR</td>
<td>0,00</td>
<td>X</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(2) STEVEN LOSLEBEN</td>
<td>2,00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PAST BOARD CHAIR</td>
<td>0,00</td>
<td>X</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(3) AMY HUMPHRYS</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TREASURER</td>
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<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(4) NANCY MYLES</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>SECRETARY</td>
<td>0,00</td>
<td>X</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(5) EMILIE EAST</td>
<td>2,00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CHAIR-ELECT</td>
<td>0,00</td>
<td>X</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(6) CHASE ALVORD</td>
<td>2,00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BOARD MEMBER FROM 9/2014</td>
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<td>x</td>
<td></td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(7) BRIAN BUCKLEY</td>
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<td></td>
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<tr>
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<td></td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(8) JESSICA CANTLIN</td>
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<td></td>
<td></td>
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<tr>
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<td></td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(9) JEFFREY CORDICK</td>
<td>2,00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<td>0,00</td>
<td>X</td>
<td></td>
<td>0.</td>
<td>0.</td>
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<tr>
<td>(10) DAVID HIATT</td>
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<td></td>
<td></td>
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<tr>
<td>BOARD MEMBER FROM 10/2014</td>
<td>0,00</td>
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<td>(11) SUSANNA HURLEY</td>
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<tr>
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<td></td>
<td>0.</td>
<td>0.</td>
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<tr>
<td>(12) NICOLE MATUSKA</td>
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</tr>
<tr>
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<td></td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(13) ANNE NIELSEN</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>BOARD MEMBER</td>
<td>0,00</td>
<td>X</td>
<td></td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(14) ETHAN NORRIS</td>
<td>2,00</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>BOARD MEMBER FROM 9/2014</td>
<td>0,00</td>
<td>X</td>
<td></td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(15) MARY PEDERSEN</td>
<td>2,00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BOARD MEMBER</td>
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<td></td>
<td>0.</td>
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</tr>
<tr>
<td>(16) JONATHAN PERRINO</td>
<td>2,00</td>
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<td></td>
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</tr>
<tr>
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<td></td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(17) DIANE ST. JOHN</td>
<td>2,00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BOARD MEMBER</td>
<td>0,00</td>
<td>X</td>
<td></td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>


### Part VII: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from related organizations below line</th>
<th>(E) Reportable compensation from related organizations</th>
<th>(F) Estimated amount of other compensation from related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(18) Barnett Silver</td>
<td>2.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Board Member</td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(19) Lynn Steinberg</td>
<td>2.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Board Member from 10/2014</td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(20) Jeffrey Turner</td>
<td>2.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Board Member from 9/2014</td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(21) Derrick Williams</td>
<td>2.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Board Member</td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(22) Theresa Shan</td>
<td>2.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Board Member thru 6/2014</td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(23) Brad McKown</td>
<td>2.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Board Member thru 6/2014</td>
<td>0.00 X</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(24) Mark Metcalf</td>
<td>2.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Board Member thru 6/2014</td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(25) Richard Wagner</td>
<td>2.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Board Member thru 6/2014</td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(26) William Whigand</td>
<td>2.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Board Member thru 6/2014</td>
<td>0.00 X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1b Sub-total                                                                 |                   |    |
1c Total from continuation sheets to Part VII, Section A                                                                 | 757,777 | 0.00 | 31,326 |
1d Total (add lines 1b and 1c)                                                                                             | 757,777 | 0.00 | 31,326 |

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 6

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual X

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person X

### Section B. Independent Contractors

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

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workplace Benefits, LLC</td>
<td>Counseling Services</td>
<td>320,599</td>
</tr>
<tr>
<td>2912 Highwoods Blvd, Raleigh, NC 27604</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FC Bennett Consulting, Inc</td>
<td>Software Consultants</td>
<td>125,810</td>
</tr>
<tr>
<td>PO Box 498, North Bend, WA 98045</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

SEE PART VII, SECTION A CONTINUATION SHEETS
<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(27) RUSSELL YOUNG</td>
<td>2.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>BOARD MEMBER THRU 6/2014</td>
<td>0.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(28) RUTHANN HOWELL</td>
<td>50.00</td>
<td>X</td>
<td>156,903.</td>
<td>0.</td>
<td>3,976.</td>
</tr>
<tr>
<td>CEO/PRESIDENT</td>
<td>0.00</td>
<td>X</td>
<td>132,395.</td>
<td>0.</td>
<td>4,391.</td>
</tr>
<tr>
<td>(29) PATRICK DUFF</td>
<td>40.00</td>
<td>X</td>
<td>148,339.</td>
<td>0.</td>
<td>6,949.</td>
</tr>
<tr>
<td>CHIEF FINANCIAL OFFICER</td>
<td>0.00</td>
<td>X</td>
<td>115,864.</td>
<td>0.</td>
<td>7,055.</td>
</tr>
<tr>
<td>(30) KATHLEEN CAMPBELL</td>
<td>40.00</td>
<td>X</td>
<td>112,775.</td>
<td>0.</td>
<td>6,555.</td>
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<tr>
<td>CHIEF BUSINESS DEV OFFICER</td>
<td>0.00</td>
<td>X</td>
<td>101,497.</td>
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<td>2,500.</td>
</tr>
</tbody>
</table>

Total to Part VII, Section A, line 1c ........................................... 767,777. 31,326.
### Part VIII: Statement of Revenue

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

#### Contributions, Gifts, Grants, and Other Similar Amounts

<table>
<thead>
<tr>
<th></th>
<th>(A) Total Revenue</th>
<th>(B) Related or Exempt Function Revenue</th>
<th>(C) Unrelated Business Revenue</th>
<th>(D) Revenue Excluded from Tax under Sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Federated campaigns</td>
<td>682,859</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Membership dues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c</td>
<td>Fundraising events</td>
<td>326,513</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td>Related organizations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e</td>
<td>Government grants (contributions)</td>
<td>1,979,299</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f</td>
<td>All other contributions, gifts, grants, and similar amounts not included above</td>
<td>2,383,650</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g</td>
<td>Noncash contributions included in lines 1a-1f</td>
<td>834,659</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1h</td>
<td>Total, Add lines 1a-1g</td>
<td>5,372,321</td>
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</table>

#### Program Service Revenue

<table>
<thead>
<tr>
<th></th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>EMPLOYER ASSISTANCE</td>
</tr>
<tr>
<td>2b</td>
<td>COUNSELING SERVICES</td>
</tr>
<tr>
<td>2c</td>
<td>TRAINING SERVICES</td>
</tr>
<tr>
<td>2d</td>
<td>COMMUNITY SERVICES</td>
</tr>
<tr>
<td>2e</td>
<td>All other program service revenue</td>
</tr>
<tr>
<td>2f</td>
<td>Total, Add lines 2a-2e</td>
</tr>
</tbody>
</table>

#### Investment Income (Including dividends, interest, and other similar amounts)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>3</td>
<td>2,392</td>
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</table>

#### Income from Investment of Tax-exempt Bond Proceeds

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>4</td>
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#### Royalties

<table>
<thead>
<tr>
<th></th>
<th>(i) Real</th>
<th>(ii) Personal</th>
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<tbody>
<tr>
<td>5</td>
<td>673.</td>
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#### Gross Rents

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>6a</td>
<td>673.</td>
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<tr>
<td>6b</td>
<td>0.</td>
</tr>
<tr>
<td>6c</td>
<td>673.</td>
</tr>
<tr>
<td>6d</td>
<td>673.</td>
</tr>
</tbody>
</table>

#### Gross Amount from Sales of Assets Other Than Inventory

<table>
<thead>
<tr>
<th></th>
<th>(i) Securities</th>
<th>(ii) Other</th>
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<tbody>
<tr>
<td>7a</td>
<td>3,383.</td>
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<tr>
<td>7b</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>7c</td>
<td>3,383.</td>
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</tr>
<tr>
<td>7d</td>
<td>3,383.</td>
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#### Gross Income from Fundraising Events (Not Including $326,513 of Contributions Reported on Line 1c).

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
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<tbody>
<tr>
<td>8a</td>
<td>40,000</td>
<td>50,077</td>
</tr>
<tr>
<td>8b</td>
<td>90,077</td>
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</tr>
<tr>
<td>8c</td>
<td>50,077</td>
<td>-50,077</td>
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</tbody>
</table>

#### Gross Income from Gaming Activities

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
</tr>
</thead>
<tbody>
<tr>
<td>9a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9c</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Gross Sales of Inventory, Less Returns and Allowances

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
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<tbody>
<tr>
<td>10a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c</td>
<td></td>
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#### Miscellaneous Revenue

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<tr>
<td>11a</td>
<td>INTERNATIONAL FEES</td>
</tr>
<tr>
<td>11b</td>
<td>NON RAP &amp; OTHER FEES</td>
</tr>
<tr>
<td>11c</td>
<td></td>
</tr>
<tr>
<td>11d</td>
<td>All other revenue</td>
</tr>
<tr>
<td>11e</td>
<td>Total, Add lines 11a-11d</td>
</tr>
</tbody>
</table>

#### Total Revenue. See Instructions.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>13,170,449</td>
</tr>
</tbody>
</table>
### Part IX | Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX. [X]

<table>
<thead>
<tr>
<th>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>1,750,171</td>
<td>1,750,171</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Compensation of current officers, directors, trustees, and key employees</td>
<td>397,666</td>
<td></td>
<td></td>
<td>297,666</td>
</tr>
<tr>
<td>6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Other salaries and wages</td>
<td>6,166,520</td>
<td>5,236,943</td>
<td>631,135</td>
<td>298,442</td>
</tr>
<tr>
<td>8 Pension plan accruals and contributions (Include section 401(k) and 403(b) employer contributions)</td>
<td>83,270</td>
<td>72,844</td>
<td>7,308</td>
<td>3,118</td>
</tr>
<tr>
<td>9 Other employee benefits</td>
<td>590,491</td>
<td>497,216</td>
<td>74,531</td>
<td>18,655</td>
</tr>
<tr>
<td>10 Payroll taxes</td>
<td>485,191</td>
<td>396,941</td>
<td>69,043</td>
<td>23,207</td>
</tr>
<tr>
<td>11 Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Management</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Legal</td>
<td>20,060</td>
<td>16,222</td>
<td>3,838</td>
<td></td>
</tr>
<tr>
<td>c Accounting</td>
<td>54,936</td>
<td>54,936</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Lobbying</td>
<td>10,000</td>
<td>10,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Investment management fees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)</td>
<td>1,977,141</td>
<td>1,822,558</td>
<td>148,463</td>
<td>6,120</td>
</tr>
<tr>
<td>12 Advertising and promotion</td>
<td>99,025</td>
<td>37,089</td>
<td>61,507</td>
<td>429</td>
</tr>
<tr>
<td>13 Office expenses</td>
<td>326,372</td>
<td>230,229</td>
<td>95,263</td>
<td>36,880</td>
</tr>
<tr>
<td>14 Information technology</td>
<td>281,897</td>
<td>149,891</td>
<td>118,935</td>
<td>13,071</td>
</tr>
<tr>
<td>15 Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Occupancy</td>
<td>485,372</td>
<td>415,139</td>
<td>66,720</td>
<td>3,513</td>
</tr>
<tr>
<td>17 Travel</td>
<td>21,834</td>
<td>20,419</td>
<td>955</td>
<td>456</td>
</tr>
<tr>
<td>18 Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Conferences, conventions, and meetings</td>
<td>27,667</td>
<td>27,657</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>20 Interest</td>
<td>152,870</td>
<td>120,292</td>
<td>28,655</td>
<td>3,919</td>
</tr>
<tr>
<td>21 Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Depreciation, depletion, and amortization</td>
<td>695,140</td>
<td>409,564</td>
<td>272,750</td>
<td>12,826</td>
</tr>
<tr>
<td>23 Insurance</td>
<td>59,267</td>
<td>48,367</td>
<td>7,994</td>
<td>2,306</td>
</tr>
<tr>
<td>24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24a. If line 24a amount exceeds 10% of line 25, column (A) amount, list line 24a expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a BAD DEBT EXPENSE</td>
<td>49,752</td>
<td>49,752</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b HR SERVICES</td>
<td>28,681</td>
<td>3,509</td>
<td>25,172</td>
<td></td>
</tr>
<tr>
<td>c VOLUNTEER AND DONOR EXP</td>
<td>14,673</td>
<td>2,099</td>
<td>12,574</td>
<td></td>
</tr>
<tr>
<td>d STAFF TRAINING/DEVEL</td>
<td>14,599</td>
<td>11,813</td>
<td>1,918</td>
<td>868</td>
</tr>
<tr>
<td>e All other expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25 Total functional expenses. Add lines 1 through 24e</td>
<td>13,696,600</td>
<td>11,318,709</td>
<td>1,953,481</td>
<td>424,410</td>
</tr>
<tr>
<td>26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Check here if following SOP 88-2 (ASC 958-720)
## Balance Sheet

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

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>(A) Beginning of year</th>
<th></th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash - non-interest-bearing</td>
<td>1,970,511</td>
<td>1</td>
<td>1,582,419.</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>95,645</td>
<td>2</td>
<td>95,691.</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>515,342</td>
<td>3</td>
<td>715,886.</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>809,151</td>
<td>4</td>
<td>849,464.</td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees’ beneficiary organizations (see instr). Complete Part II of Sch L</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td></td>
<td>8</td>
<td>89,400.</td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>100,582</td>
<td>9</td>
<td>66,905.</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>18,148,152</td>
<td>10a</td>
<td>14,629,056.</td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td>4,018,343</td>
<td>10b</td>
<td>14,129,209.</td>
</tr>
<tr>
<td>11</td>
<td>Investments - publicly traded securities</td>
<td></td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Investments - other securities. See Part IV, line 11</td>
<td></td>
<td>12</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments - program-related. See Part IV, line 11</td>
<td>127,820</td>
<td>13</td>
<td>72,834.</td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td></td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>18,248,107</td>
<td>16</td>
<td>17,601,908.</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>693,536</td>
<td>17</td>
<td>782,677.</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td></td>
<td>18</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>254,828</td>
<td>19</td>
<td>153,368.</td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td></td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td>21</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td></td>
<td>22</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>5,703,184</td>
<td>23</td>
<td>5,495,032.</td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td>24</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td></td>
<td>25</td>
<td>87,130.</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities. Add lines 17 through 25</td>
<td>6,728,199</td>
<td>26</td>
<td>6,518,227.</td>
</tr>
</tbody>
</table>

**Net Assets or Fund Balances**

Organizations that follow SFAS 117 (ASC 958), check here □ and complete lines 27 through 29, and lines 33 and 34.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>(A) Beginning of year</th>
<th></th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Unrestricted net assets</td>
<td>10,932,895</td>
<td>27</td>
<td>10,263,382.</td>
</tr>
<tr>
<td>28</td>
<td>Temporarily restricted net assets</td>
<td>541,513</td>
<td>28</td>
<td>774,799.</td>
</tr>
<tr>
<td>29</td>
<td>Permanently restricted net assets</td>
<td>45,500</td>
<td>29</td>
<td>45,500.</td>
</tr>
</tbody>
</table>

Organizations that do not follow SFAS 117 (ASC 958), check here □ and complete lines 30 through 34.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>(A) Beginning of year</th>
<th></th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
<td>31</td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
<td>32</td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>Total net assets or fund balances</td>
<td>11,519,908</td>
<td>33</td>
<td>12,083,681.</td>
</tr>
<tr>
<td>34</td>
<td>Total liabilities and net assets/fund balances</td>
<td>18,248,107</td>
<td>34</td>
<td>17,601,908.</td>
</tr>
</tbody>
</table>
### Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI: [X]

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
<td>9</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</td>
<td>10</td>
</tr>
</tbody>
</table>

### Part XII Financial Statements and Reporting

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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>X</td>
</tr>
</tbody>
</table>

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2b X

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:

- Separate basis
- Consolidated basis
- Both consolidated and separate basis

2c X

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

- Separate basis
- Consolidated basis
- Both consolidated and separate basis

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3b X

As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2014)
Public Charity Status and Public Support

Complete 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

Name of the organization: WELLSPRING FAMILY SERVICES
Employer Identification number: 91-0567261

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1. A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
3. A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4. A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital’s name, city, and state:

5. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6. A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7. An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
8. A community trust described in section 170(b)(1)(A)(vii). (Complete Part II.)
9. 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.)
10. An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
11. 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.

- **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supporting 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 II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

- Enter the number of supported organizations:

- Provide the following information about the supported organization(s):

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on line 1-6 above or IRC section (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Total

LHA For Paperwork Reduction Act Notice, see the instructions for Schedule A (Form 990 or 990-EZ) 2014

Form 990 or 990-EZ. 432021 06-17-14
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2010</th>
<th>(b) 2011</th>
<th>(c) 2012</th>
<th>(d) 2013</th>
<th>(e) 2014</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>5,015,728</td>
<td>5,645,059</td>
<td>4,891,335</td>
<td>4,129,135</td>
<td>5,372,321</td>
<td>25,053,578</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td>14,400</td>
<td>14,400</td>
<td>14,400</td>
<td>14,400</td>
<td>14,400</td>
<td>72,000</td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td>5,030,128</td>
<td>5,659,459</td>
<td>4,905,735</td>
<td>4,143,535</td>
<td>5,386,721</td>
<td>25,125,578</td>
</tr>
<tr>
<td>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2010</th>
<th>(b) 2011</th>
<th>(c) 2012</th>
<th>(d) 2013</th>
<th>(e) 2014</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>5,030,128</td>
<td>5,659,459</td>
<td>4,905,735</td>
<td>4,143,535</td>
<td>5,386,721</td>
<td>25,125,578</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td>7,155</td>
<td>5,368</td>
<td>10,427</td>
<td>6,357</td>
<td>3,065</td>
<td>32,372</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td>93,210</td>
<td>43,328</td>
<td>3,179</td>
<td>4,532</td>
<td>144,249</td>
<td></td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions)</td>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 First five years: If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Public support percentage from 2013 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2013. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2010</th>
<th>(b) 2011</th>
<th>(c) 2012</th>
<th>(d) 2013</th>
<th>(e) 2014</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2010</th>
<th>(b) 2011</th>
<th>(c) 2012</th>
<th>(d) 2013</th>
<th>(e) 2014</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First five years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

| Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| Public support percentage from 2013 Schedule A, Part III, line 15 | 16 | % |

### Section D. Computation of Investment Income Percentage

| Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| Investment income percentage from 2013 Schedule A, Part III, line 17 | 18 | % |

**Note:** For 19a 33 1/3% support tests - 2014, if the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

**Note:** For 20 Private foundation, if the organization did not check a box on line 14, 16a, or 16b, check this box and see instructions.
Section A. All Supporting Organizations

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>b</td>
<td></td>
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<tr>
<td></td>
<td>c</td>
<td></td>
</tr>
<tr>
<td>4a</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>b</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c</td>
<td></td>
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<tr>
<td>5a</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>b</td>
<td></td>
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<td></td>
<td>c</td>
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<td></td>
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<td>7</td>
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<tr>
<td>9a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c</td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part IV Supporting Organizations (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 Has the organization accepted a gift or contribution from any of the following persons?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?</td>
<td></td>
<td>11a</td>
</tr>
<tr>
<td>b A family member of a person described in (a) above?</td>
<td></td>
<td>11b</td>
</tr>
<tr>
<td>c A 35% controlled entity of a person described in (a) or (b) above? If &quot;Yes&quot; to a, b, or c, provide detail in Part VI.</td>
<td></td>
<td>11c</td>
</tr>
</tbody>
</table>

### Section B. Type I Supporting Organizations

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

### Section C. Type II Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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 &quot;No,&quot; describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</td>
<td></td>
<td>1</td>
</tr>
</tbody>
</table>

### Section D. Type III Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization’s governing documents in effect on the date of notification, to the extent not previously provided?</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>2 Were any of the organization’s officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If &quot;No,&quot; explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>3 By reason of the relationship described in (2), did the organization’s supported organizations have a significant voice in the organization’s investment policies and in directing the use of the organization’s income or assets at all times during the tax year? If &quot;Yes,&quot; describe in Part VI the role the organization’s supported organizations played in this regard.</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

### Section E. Type III Functionally-Integrated Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a The organization satisfied the Activities Test. Complete line 2 below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b The organization is the parent of each of its supported organizations. Complete line 3 below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Activities Test. Answer (a) and (b) below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Did substantially all of the organization’s activities during the tax year directly further the exempt purposes of those supported organizations and explain how these activities directly furthered their exempt purposes? If &quot;Yes,&quot; then in Part VI identify the supported organizations. If &quot;No,&quot; then in Part VI identify the supported organizations and explain how the organization maintained a close and continuous working relationship with the supported organization(s).</td>
<td></td>
<td>2a</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; explain in Part VI the reasons for the organization’s position that its supported organization(s) would have engaged in these activities but for the organization’s involvement.</td>
<td></td>
<td>2b</td>
</tr>
<tr>
<td>3 Parent of Supported Organizations. Answer (a) and (b) below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.</td>
<td></td>
<td>3a</td>
</tr>
<tr>
<td>b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If &quot;Yes,&quot; describe in Part VI the role played by the organization in this regard.</td>
<td></td>
<td>3b</td>
</tr>
</tbody>
</table>

432025 08-17-14
### Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

#### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td><strong>Adjusted Net Income</strong> (subtract lines 5, 6 and 7 from line 4)</td>
<td><strong>8</strong></td>
</tr>
</tbody>
</table>

#### Section B - Minimum Asset Amount

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

#### Section C - Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line B, Column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 85% of line 1</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line B, Column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td><strong>Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</strong></td>
</tr>
<tr>
<td>7</td>
<td>Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).</td>
</tr>
</tbody>
</table>
### Part V  Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

#### Section D - Distributions

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See Instructions.</td>
</tr>
<tr>
<td>7</td>
<td><strong>Total annual distributions.</strong> Add lines 1 through 6.</td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2014 from Section C, line 6</td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by Line 9 amount</td>
</tr>
</tbody>
</table>

#### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>Excess Distributions</th>
<th>Underdistributions Pre-2014</th>
<th>Distributable Amount for 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2014 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2014:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>From 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td><strong>Total</strong> of lines 3a through e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2014 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2009 not applied (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Remainder, Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2014 from Section D, line 7: $</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2014 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Remainder, Subtract lines 4a and 4b from 4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td><strong>Excess distributions carryover to 2015. Add lines 3j and 4c.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2014</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2014
**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)

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

**INTER-AGENCY RECEIPTS**

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>$53,745</td>
</tr>
<tr>
<td>2011</td>
<td>$6,100</td>
</tr>
<tr>
<td>2012</td>
<td>$795</td>
</tr>
</tbody>
</table>

**TRAINING REVENUE**

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>$33,159</td>
</tr>
</tbody>
</table>

**MISCELLANEOUS**

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>$6,306</td>
</tr>
<tr>
<td>2014</td>
<td>$2,123</td>
</tr>
</tbody>
</table>

**NON RAP & OTHER FEES**

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>$37,228</td>
</tr>
<tr>
<td>2012</td>
<td>$419</td>
</tr>
<tr>
<td>2014</td>
<td>$609</td>
</tr>
</tbody>
</table>

**INTERNATIONAL FEES**

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>$1,975</td>
</tr>
<tr>
<td>2014</td>
<td>$1,800</td>
</tr>
</tbody>
</table>
** PUBLIC DISCLOSURE COPY **

Schedule B
(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Name of the organization
WELLSpring FAMILY SERVICES

Employer identification number
91-0567261

Organization type (check one):

Filers of:

<table>
<thead>
<tr>
<th>Section:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990 or 990-EZ</td>
</tr>
<tr>
<td>501(c)(3) (enter number) organization</td>
</tr>
<tr>
<td>4947(a)(1) nonexempt charitable trust not treated as a private foundation</td>
</tr>
<tr>
<td>527 political organization</td>
</tr>
</tbody>
</table>

| Form 990-PF |
| 501(c)(3) exempt private foundation |
| 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| 501(c)(3) taxable private foundation |

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

General Rule

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

Special Rules

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

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

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)
### Part I: Contributors

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$1,011,644.</td>
<td>Person X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$679,587.</td>
<td>Person X</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>$158,571.</td>
<td>Person X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>$140,611.</td>
<td>Person X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>$500,000.</td>
<td>Person X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)
### Part II: Noncash Property

(see instructions). Use duplicate copies of Part II if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate) (see instructions)</th>
<th>(d) Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>$</td>
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</tr>
<tr>
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</tr>
</tbody>
</table>
WELLSPRING FAMILY SERVICES 91-0567261

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total $1,000 or less for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this Info. on Schedule B, line 22.)

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

**Transfer of Gift**

Transferee’s name, address, and ZIP + 4

<table>
<thead>
<tr>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
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<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
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<tr>
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</tr>
</tbody>
</table>

**Transfer of Gift**

Transferee’s name, address, and ZIP + 4

<table>
<thead>
<tr>
<th>Relationship of transferor to transferee</th>
</tr>
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<tbody>
<tr>
<td></td>
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<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
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<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

**Transfer of Gift**

Transferee’s name, address, and ZIP + 4

<table>
<thead>
<tr>
<th>Relationship of transferor to transferee</th>
</tr>
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<tbody>
<tr>
<td></td>
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<tr>
<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
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<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
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<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Transfer of Gift**

Transferee’s name, address, and ZIP + 4

<table>
<thead>
<tr>
<th>Relationship of transferor to transferee</th>
</tr>
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<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td></td>
</tr>
</tbody>
</table>
**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

- Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
- Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

**2014**

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c)(3) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 5027 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have not filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

**Part I-A**

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

<table>
<thead>
<tr>
<th>Name of organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>WELLSPRING FAMILY SERVICES</td>
<td>91-0567261</td>
</tr>
</tbody>
</table>

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

2. Political expenditures ................................................................. $

3. Volunteer hours .................................................................................

**Part I-B**

Complete if the organization is exempt under section 501(c)(3).

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

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

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

4a. Was a correction made? .................................................................

b. If "Yes," describe in Part IV.

**Part I-C**

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

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

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

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

4. Did the filing organization file Form 1120-POL for this year? [ ] Yes [ ] No

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

<table>
<thead>
<tr>
<th>(a) Name</th>
<th>(b) Address</th>
<th>(c) EIN</th>
<th>(d) Amount paid from filing organization's funds. If none, enter -0-</th>
<th>(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2014

LHA 432041
10-21-14
Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5788 (election under section 501(h)).

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

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

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Filing organization’s totals</td>
<td>Affiliated group totals</td>
</tr>
</tbody>
</table>

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)

1b Total lobbying expenditures to influence a legislative body (direct lobbying)

1c Total lobbying expenditures (add lines 1a and 1b)

1d Other exempt purpose expenditures

1e Total exempt purpose expenditures (add lines 1c and 1d)

1f Lobbying nontaxable amount. Enter the amount from the following table in both columns.

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

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a. If zero or less, enter 0:

i Subtract line 1f from line 1c. If zero or less, enter 0:

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

4-Year Averaging Period Under section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2011</th>
<th>(b) 2012</th>
<th>(c) 2013</th>
<th>(d) 2014</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a Lobbying nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Lobbying ceiling amount (150% of line 2a, column(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Total lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Grassroots nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Grassroots ceiling amount (150% of line 2d, column (e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Grassroots lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Schedule C (Form 990 or 990-EZ) 2014 WELLSPRING FAMILY SERVICES**

**Part II-B**
Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1l below, provide in Part IV a detailed description of the lobbying activity.

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Volunteers?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Paid staff or management (include compensation in expenses reported on lines 1c through 1l)?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c. Media advertisements?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d. Mailings to members, legislators, or the public?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e. Publications, or published or broadcast statements?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>f. Grants to other organizations for lobbying purposes?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>g. Direct contact with legislators, their staffs, government officials, or a legislative body?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>h. Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>i. Other activities?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>j. Total. Add lines 1c through 1l</td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. If &quot;Yes,&quot; enter the amount of any tax incurred under section 4912</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c. If &quot;Yes,&quot; enter the amount of any tax incurred by organization managers under section 4912</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d. If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?</td>
<td></td>
</tr>
</tbody>
</table>

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Were substantially all (80% or more) dues received nondeductible by members?</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Did the organization make only in-house lobbying expenditures of $2,000 or less?</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Did the organization agree to carry over lobbying and political expenditures from the prior year?</td>
<td>3</td>
</tr>
</tbody>
</table>

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

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

**Part IV** Supplemental Information

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

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

LOBBying ACTIVITIES INCLUDE MEETING WITH STATE LEGISLATORS AND STAFF.
Supplemental Financial Statements

Part I. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

1. Total number at end of year
2. Aggregate value of contributions to (during year)
3. Aggregate value of grants from (during year)
4. Aggregate value at end of year
5. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6. Did the organization inform all grant recipients, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II. Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1. Purpose(s) of conservation easements held by the organization (check all that apply).
   - Preservation of land for public use (e.g., recreation or education)
   - Preservation of a historically important land area
   - Protection of natural habitat
   - Preservation of a certified historic structure
   - Preservation of open space
2. Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
   - Total number of conservation easements
   - Total acreage restricted by conservation easements
   - Number of conservation easements on a certified historic structure included in (a)
   - Number of conservation easements included in (c) acquired after 9/17/08, and not on a historic structure listed in the National Register
3. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4. Number of states where property subject to conservation easement is located
5. Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6. Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year
7. Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
8. Does each conservation easement reported on line 2(c) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
9. In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
1b. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
   (i) Revenue included in Form 990, Part VIII, line 1
   (ii) Assets included in Form 990, Part X
2. If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
   a. Revenue included in Form 990, Part VIII, line 1
   b. Assets included in Form 990, Part X
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items
   (check all that apply):
   a Public exhibition
   b Scholarly research
   c Preservation for future generations
   d Loan or exchange programs
   e Other

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

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

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

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

1b If "Yes," explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

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

2b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

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

1a Beginning of year balance
   (a) Current year
   (b) Prior year
   (c) Two years back
   (d) Three years back
   (e) Four years back

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>45,500</td>
<td>45,500</td>
<td>42,500</td>
<td>42,500</td>
<td>42,500</td>
</tr>
<tr>
<td>Contributions</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Net investment earnings, gains, and losses</td>
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</tr>
<tr>
<td>Grants or scholarships</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Other expenditures for facilities and programs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Administrative expenses</td>
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<td></td>
</tr>
<tr>
<td>End of year balance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>45,500</td>
<td>45,500</td>
<td>45,500</td>
<td>42,500</td>
<td>42,500</td>
<td></td>
</tr>
</tbody>
</table>

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

| (a) Board designated or quasi-endowment | .00 % |
| (b) Permanent endowment | 100.00 % |
| (c) Temporarily restricted endowment | .00 % |

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
   (i) unrelated organizations
   (ii) related organizations

   [ ] Yes [ ] No

   3a(ii) X

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? [ ] Yes [ ] No

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

Part VI Land, Buildings, and Equipment.

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

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td>2,456,349</td>
<td></td>
<td>2,456,349</td>
<td></td>
</tr>
<tr>
<td>b Buildings</td>
<td>13,588,083</td>
<td>2,465,401</td>
<td>11,122,682</td>
<td></td>
</tr>
<tr>
<td>c Leasehold improvements</td>
<td>442,467</td>
<td>431,798</td>
<td>10,669</td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td>1,571,947</td>
<td>1,110,558</td>
<td>461,389</td>
<td></td>
</tr>
<tr>
<td>e Other</td>
<td>89,305</td>
<td>11,186</td>
<td>78,120</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) [ ] 14,129,209.
## Part VII  Investments - Other Securities.

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

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
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<tr>
<td>(D)</td>
<td></td>
<td></td>
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<tr>
<td>(E)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(F)</td>
<td></td>
<td></td>
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<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)

## Part VIII  Investments - Program Related.

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

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
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<tr>
<td>(3)</td>
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<tr>
<td>(4)</td>
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<tr>
<td>(5)</td>
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<tr>
<td>(6)</td>
<td></td>
<td></td>
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<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

## Part IX  Other Assets.

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

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

## Part X  Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability | (b) Book value
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2) SUBLEASE DEPOSITS</td>
<td>2,000</td>
</tr>
<tr>
<td>(3) CAPITAL LEASE OBLIGATION</td>
<td>85,130</td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XII [ ]
<table>
<thead>
<tr>
<th>Part XI</th>
<th>Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Total revenue, gains, and other support per audited financial statements</td>
<td>13,351,050.</td>
</tr>
<tr>
<td>2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td></td>
</tr>
<tr>
<td>a Net unrealized gains (losses) on investments</td>
<td>524.</td>
</tr>
<tr>
<td>b Donated services and use of facilities</td>
<td>90,000.</td>
</tr>
<tr>
<td>c Recoveries of prior year grants</td>
<td>2c</td>
</tr>
<tr>
<td>d Other (Describe in Part XIII.)</td>
<td></td>
</tr>
<tr>
<td>e Add lines 2a through 2d</td>
<td>90,524.</td>
</tr>
<tr>
<td>3 Subtract line 2e from line 1</td>
<td>13,260,526.</td>
</tr>
<tr>
<td>4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td>b Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td>c Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)</td>
<td>13,170,449.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part XII</th>
<th>Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Total expenses and losses per audited financial statements</td>
<td>13,876,677.</td>
</tr>
<tr>
<td>2 Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
<td></td>
</tr>
<tr>
<td>a Donated services and use of facilities</td>
<td>90,000.</td>
</tr>
<tr>
<td>b Prior year adjustments</td>
<td>2b</td>
</tr>
<tr>
<td>c Other losses</td>
<td>2c</td>
</tr>
<tr>
<td>d Other (Describe in Part XIII.)</td>
<td>2d</td>
</tr>
<tr>
<td>e Add lines 2a through 2d</td>
<td>2e</td>
</tr>
<tr>
<td>3 Subtract line 2e from line 1</td>
<td>3</td>
</tr>
<tr>
<td>4 Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td>b Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td>c Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
<td>5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part XIII</th>
<th>Supplemental information.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.</td>
<td></td>
</tr>
</tbody>
</table>

**PART V, LINE 4:**

**ENDOWMENT FUNDS WERE ESTABLISHED UNDER THE CAPITAL CAMPAIGN AND THE FUNDS ARE TO BE USED FOR CREATING A FUTURE FUNDING SOURCE FOR THE ORGANIZATION AND THE PROGRAMS THAT SERVE CLIENTS.**

**PART XI, LINE 4B - OTHER ADJUSTMENTS:**

**FUNDRAISING EXPENSES**

-90,077.

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

**FUNDRAISING EXPENSES**

90,077.
### Part I: Fundraising Activities

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

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
   - [ ] Mall solicitations
   - [ ] Internet and email solicitations
   - [ ] Phone solicitations
   - [ ] In-person solicitations
   - [ ] Solicitation of non-government grants
   - [ ] Solicitation of government grants
   - [ ] Special fundraising events

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

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

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total**

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

- 
- 
- 
- 
- 
- 
- 

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Part II: Fundraising Events

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

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Event #1</th>
<th>(b) Event #2</th>
<th>(c) Other events</th>
<th>(d) Total events (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>LUNCHSON</td>
<td></td>
<td>NONE</td>
<td></td>
</tr>
<tr>
<td>1 Gross receipts</td>
<td>366,513,</td>
<td></td>
<td></td>
<td>366,513,</td>
</tr>
<tr>
<td>2 Less: Contributions</td>
<td>326,513,</td>
<td></td>
<td></td>
<td>326,513,</td>
</tr>
<tr>
<td>3 Gross income (line 1 minus line 2)</td>
<td>40,000,</td>
<td></td>
<td></td>
<td>40,000,</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Direct Expenses</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Cash prizes</td>
<td></td>
</tr>
<tr>
<td>5 Noncash prizes</td>
<td></td>
</tr>
<tr>
<td>6 Rent/facility costs</td>
<td></td>
</tr>
<tr>
<td>7 Food and beverages</td>
<td>43,284,</td>
</tr>
<tr>
<td>8 Entertainment</td>
<td>46,793,</td>
</tr>
<tr>
<td>9 Other direct expenses</td>
<td>90,077,</td>
</tr>
</tbody>
</table>

| Direct expense summary. Add lines 4 through 9 in column (d) | 90,077, |
| Net income summary. Subtract line 10 from line 3, column (d) | -50,077, |

### Part III: Gaming

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

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Volunteer labor</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>7 Direct expense summary. Add lines 2 through 5 in column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Net gaming income summary. Subtract line 7 from line 1, column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9 Enter the state(s) in which the organization conducts gaming activities:
   a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No
   b If "No," explain:

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

---

Schedule G (Form 990 or 990-EZ) 2014
11 Does the organization conduct gaming activities with nonmembers? □ Yes □ No

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

13 Indicate the percentage of gaming activity conducted in:
   a The organization's facility ................................................................. 13a %
   b An outside facility ........................................................................... 13b %

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

   Name ▶

   Address ▶

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

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

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

      Name ▶

      Address ▶

16 Gaming manager information:

      Name ▶

      Gaming manager compensation ▶ $ ________________

      Description of services provided ▶

      □ Director/officer □ Employee □ Independent contractor

17 Mandatory distributions:

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

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

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).
# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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

Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>WELLSPRING FAMILY SERVICES</th>
<th>Employer identification number</th>
<th>91-0567261</th>
</tr>
</thead>
</table>

## Part I: General Information on Grants and Assistance

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

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

## Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section if applicable</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
</table>

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2014)
### Part III: Grants and Other Assistance to Domestic Individuals
Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of non-cash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOUSING ASSISTANCE</td>
<td>450</td>
<td>0</td>
<td>946,614</td>
<td>FAIR MARKET VALUE</td>
<td>HOUSING ASSISTANCE INCLUDING PAYMENT FOR RENT, UTILITIES, GROCERY DEBT CARDS AND IDENTIFICATION REPLACEMENT.</td>
</tr>
<tr>
<td>CLOTHING</td>
<td>2431</td>
<td>0</td>
<td>800,057</td>
<td>FAIR MARKET VALUE</td>
<td>CLOTHING FOR CHILDREN FROM THE BABY BOUTIQUE PROGRAM.</td>
</tr>
<tr>
<td>STUDENT SCHOLARSHIPS</td>
<td>5</td>
<td>0</td>
<td>3,500</td>
<td>CASH PAID TO SCHOOL</td>
<td>TUITION ASSISTANCE TO ATTEND SCHOOL.</td>
</tr>
</tbody>
</table>

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

**PART I, LINE 2:**

ALL GRANTS TO INDIVIDUALS ARE AWARDED AND DOCUMENTED THROUGH A PROCESS THAT IS MANAGED BY AGENCY CASE WORKERS. ONCE APPROVED, FUNDS ARE DISBURSED IN ACCORDANCE WITH AUTHORIZED DOCUMENTATION. EXAMPLES INCLUDE PAYMENT OF RENT ON BEHALF OF CLIENTS, PAYMENTS TO GOVERNMENT OFFICES FOR REPLACEMENT OF LEGAL IDENTIFICATION OR GIFT CARDS FOR PURCHASE OF FOOD. GRANTS ARE BUDGETED AT THE FUNDING SOURCE AND PROGRAM LEVEL TO ENSURE THAT OVERALL GRANT EXPENDITURES MEET THE REQUIREMENTS OF THE FUNDING SOURCES AS WELL AS THE FINANCIAL RESOURCES OF THE AGENCY.

432102 10-15-14
**SCHEDULE J (Form 990)**

**Compensation Information**
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- Attach to Form 990.

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

**Part I: Questions Regarding Compensation**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- First-class or charter travel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Travel for companions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Tax indemnification and gross-up payments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Discretionary spending account</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Housing allowance or residence for personal use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Payments for business use of personal residence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Health or social club dues or initiation fees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Personal services (e.g., maid, chauffeur, chef)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain ..............................................................

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? ..............................................................

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- Compensation committee [X]
- Written employment contract [ ]
- Independent compensation consultant [ ]
- Compensation survey or study [X]
- Form 990 of other organizations [ ]
- Approval by the board or compensation committee [X]

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment? ............................

b Participate in, or receive payment from, a supplemental nonqualified retirement plan? ..............................................................

c Participate in, or receive payment from, an equity-based compensation arrangement? ..............................................................

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization? ..............................................................................

b Any related organization? .................................................................

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization? ..............................................................................

b Any related organization? .................................................................

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III ..............................................................

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III ..............................................................

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? ..............................................................

**Employer Identification Number**

91-5567261

**For Paperwork Reduction Act Notice, see the Instructions for Form 990.**
For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred in prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) RUTHANN HOWELL CEO/PRESIDENT</td>
<td>(i) 156,903.0</td>
<td>(ii) 0.0</td>
<td>(iii) 0.0</td>
<td>(D) 3,133.0</td>
<td>(E) 150,879.0</td>
</tr>
<tr>
<td>(2) KATHLEEN CAMPBELL CHIEF BUSINESS DEV OFFICER</td>
<td>(i) 148,339.0</td>
<td>(ii) 0.0</td>
<td>(iii) 0.0</td>
<td>(D) 2,425.0</td>
<td>(E) 155,188.0</td>
</tr>
</tbody>
</table>
# SCHEDULE M (Form 990)

**Noncash Contributions**

1. Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
2. Attach to Form 990.
3. Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

### Part I - Types of Property

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(a) Check if applicable</td>
<td>(b) Number of contributions or items contributed</td>
<td>(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g</td>
</tr>
<tr>
<td>1</td>
<td>Art - Works of art</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Art - Historical treasures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Art - Fractional interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Books and publications</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Clothing and household goods</td>
<td>X</td>
<td>800,057</td>
</tr>
<tr>
<td>6</td>
<td>Cars and other vehicles</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Boats and planes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Intellectual property</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Securities - Publicly traded</td>
<td>X</td>
<td>34,602</td>
</tr>
<tr>
<td>10</td>
<td>Securities - Closely held stock</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Securities - Partnership, LLC, or trust interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Securities - Miscellaneous</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Qualified conservation contribution - Historic structures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Qualified conservation contribution - Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Real estate - Residential</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Real estate - Commercial</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Real estate - Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Collectibles</td>
<td></td>
<td></td>
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<tr>
<td>19</td>
<td>Food inventory</td>
<td></td>
<td></td>
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<tr>
<td>20</td>
<td>Drugs and medical supplies</td>
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<tr>
<td>21</td>
<td>Taxidermy</td>
<td></td>
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<tr>
<td>22</td>
<td>Historical artifacts</td>
<td></td>
<td></td>
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<tr>
<td>23</td>
<td>Scientific specimens</td>
<td></td>
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<tr>
<td>24</td>
<td>Archeological artifacts</td>
<td></td>
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<tr>
<td>25</td>
<td>Other</td>
<td>▶</td>
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<td>26</td>
<td>Other</td>
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<tr>
<td>27</td>
<td>Other</td>
<td>▶</td>
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<tr>
<td>28</td>
<td>Other</td>
<td>▶</td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement</td>
<td></td>
<td>29</td>
</tr>
</tbody>
</table>

### Additional Questions

30a. During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?  
   **Yes**  
   **No**  
   
30b. If "Yes," describe the arrangement in Part II.  

31. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?  
   **Yes**  
   **No**  

32a. Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?  
   **Yes**  
   **No**  

32b. If "Yes," describe in Part II.  

33. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

---

**For Paperwork Reduction Act Notice, see the instructions for Form 990.**

Schedule M (Form 990) (2014)
Part II. Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER IN COLUMN B IS BASED ON THE NUMBER OF CONTRIBUTIONS RECEIVED.
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FAMILIES IN OUR COMMUNITY TO REACH THEIR FULL POTENTIAL. IN 2014, WE
HELPED OVER 5,800 INDIVIDUALS AND FAMILIES TAKE THE NEXT STEP FORWARD,
TAP INTO THEIR OWN STRENGTH AND REBUILD THEIR LIVES. WELLSPRING
OPERATES SIX PROGRAMS SERVING ITS CLIENTS: BABY BOUTIQUE, DOMESTIC
VIOLENCE INTERVENTION PROGRAM, HOUSING SERVICES, EARLY LEARNING CENTER,
COUNSELING SERVICES AND THE EMPLOYEE ASSISTANCE PROGRAM.

FORM 990, PART I, LINE 6: NUMBER OF VOLUNTEERS

THE NUMBER OF VOLUNTEERS IS TRACKED BY THE EARLY LEARNING CENTER, BABY
BOUTIQUE AND FUND DEVELOPMENT PROGRAMS, 2% VOLUNTEER IN THE EARLY
LEARNING CENTER, ASSISTING TEACHERS AND THERAPISTS IN THE CLASSROOM.
93% VOLUNTEER IN THE BABY BOUTIQUE, ASSISTING CLIENTS AND ORGANIZING
DONATIONS FOR FAMILIES TO GET FREE BABY SUPPLIES, CLOTHES AND TOYS, 2%
HELP WITH COMMUNICATIONS OUTREACH AND FUNDRAISING EVENTS, 3% SERVE AS
VOLUNTEER DIRECTORS ON THE AGENCY BOARD OF DIRECTORS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

DOMESTIC VIOLENCE INTERVENTION AND PREVENTION SERVICES PROVIDE STATE
CERTIFIED SERVICES TO STOP VIOLENCE AT HOME AND HELP PEOPLE BUILD
HEALTHIER RELATIONSHIPS. 113 INDIVIDUALS PARTICIPATED IN THE DOMESTIC
VIOLENCE INTERVENTION PROGRAM IN 2014 - 87% OF WHOM WHO STAYED FOR AT
LEAST 7 MONTHS LEARNED NON-ABUSIVE BEHAVIORS.

EXPENSES $ 356,181. INCLUDING GRANTS OF $ 0. REVENUE $ 120,024.

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

LHA FOR PAPERWORK REDUCTION ACT NOTICE, SEE THE INSTRUCTIONS FOR FORM 990 OR 990-EZ.
WELSPRING FAMILY SERVICES

THE FORM 990 IS PREPARED BY THE OUTSIDE CPA FIRM. BOARD MEMBERS ARE

PROVIDED COPIES OF THE FORM 990 PRIOR TO FILING WITH THE IRS. IN ADDITION,

THE FORM 990 IS REVIEWED AND APPROVED BY THE FINANCE COMMITTEE.

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

OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO REVIEW THE CONFLICT
OF INTEREST POLICY AND DISCLOSE ANY POTENTIAL CONFLICT OF INTEREST

ANNUALLY, THE POLICY IS MONITORED AND ENFORCED AS A PART OF THE FISCAL
AUDIT PROCESS. THE AUDIT COMMITTEE ADDRESSES ANY FINDINGS IF THERE ARE
ANY. IF A CONFLICT ARISES, THE BOARD MEMBER RECUSES HIM/HERSELF FROM
VOTING AND DISCUSSIONS ON THE RELEVANT MATTER WITH THE AUDIT COMMITTEE.

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

ANNUALLY, IF THERE IS A SALARY INCREASE, THE BOARD EXECUTIVE COMMITTEE
REVIEWS AND APPROVES THE SALARIES OF THE CEO AND SENIOR EXECUTIVES. THE
APPROVAL INCLUDES VERIFICATION BY THE APPROVING MEMBERS THAT THEY ARE
INDEPENDENT AND UNRELATED TO THE EXECUTIVES. COMPENSATION MARKET DATA IS
USED TO MAKE THE DECISION. THE LAST REVIEW WAS DONE IN DECEMBER 2014.

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

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONTRACT THERAPISTS:

PROGRAM SERVICE EXPENSES 1,215,221.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

06-27-14 Schedule O (Form 990 or 990-EZ) (2014)
<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL EXPENSES</td>
<td>1,215,221</td>
</tr>
<tr>
<td><strong>CONTRACT TRAINERS:</strong></td>
<td></td>
</tr>
<tr>
<td>PROGRAM SERVICE EXPENSES</td>
<td>42,177</td>
</tr>
<tr>
<td>MANAGEMENT AND GENERAL EXPENSES</td>
<td>0</td>
</tr>
<tr>
<td>FUNDRAISING EXPENSES</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL EXPENSES</td>
<td>42,177</td>
</tr>
<tr>
<td><strong>RAP VENDORS:</strong></td>
<td></td>
</tr>
<tr>
<td>PROGRAM SERVICE EXPENSES</td>
<td>186,656</td>
</tr>
<tr>
<td>MANAGEMENT AND GENERAL EXPENSES</td>
<td>0</td>
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<tr>
<td>FUNDRAISING EXPENSES</td>
<td>0</td>
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<tr>
<td>TOTAL EXPENSES</td>
<td>186,656</td>
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<tr>
<td><strong>CONTRACT SERVICES:</strong></td>
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</tr>
<tr>
<td>PROGRAM SERVICE EXPENSES</td>
<td>282,670</td>
</tr>
<tr>
<td>MANAGEMENT AND GENERAL EXPENSES</td>
<td>92,303</td>
</tr>
<tr>
<td>FUNDRAISING EXPENSES</td>
<td>6,120</td>
</tr>
<tr>
<td>TOTAL EXPENSES</td>
<td>381,093</td>
</tr>
<tr>
<td><strong>CONSULTANTS:</strong></td>
<td></td>
</tr>
<tr>
<td>PROGRAM SERVICE EXPENSES</td>
<td>9,773</td>
</tr>
<tr>
<td>MANAGEMENT AND GENERAL EXPENSES</td>
<td>55,160</td>
</tr>
<tr>
<td>FUNDRAISING EXPENSES</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL EXPENSES</td>
<td>65,933</td>
</tr>
<tr>
<td><strong>EAP LEGAL/ FINANCIAL PROVIDERS:</strong></td>
<td></td>
</tr>
<tr>
<td>PROGRAM SERVICE EXPENSES</td>
<td>69,738</td>
</tr>
</tbody>
</table>

Schedule O (Form 990 or 990-EZ) (2014)
MANAGEMENT AND GENERAL EXPENSES
0.

FUNDRAISING EXPENSES
0.

TOTAL EXPENSES
69,738.

OTHER:

PROGRAM SERVICE EXPENSES
16,323.

MANAGEMENT AND GENERAL EXPENSES
0.

FUNDRAISING EXPENSES
0.

TOTAL EXPENSES
16,323.

TOTAL OTHER IRRS ON FORM 990, PART IX, LINC 11O, COL A
1,977,141.

FORM 990, PART XI, LINE 8: PRIOR PERIOD ADJUSTMENT

THE PRIOR PERIOD ADJUSTMENT WAS TO REFLECT A REVISION TO THE

RECOGNITION FOR IN-KIND CONTRIBUTIONS OF CLOTHING AND OTHER CHILD

ITEMS, WHICH ARE THEN IN TURN DONATED AT NO COST TO OUR COMMUNITY

SERVICES CLIENTS. THE ADJUSTMENT IS TO RECOGNIZE THE VALUE OF THE

IN-KIND DONATIONS THAT ARE IN INVENTORY AT YEAR END.
**Related Organizations and Unrelated Partnerships**

- Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- Attach to Form 990.

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

**Name of the organization:** WELSPRING FAMILY SERVICES

**Employer identification number:** 91-0567261

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

<table>
<thead>
<tr>
<th>Name, address, and EIN (if applicable) of disregarded entity</th>
<th>Primary activity</th>
<th>Legal domicile (state or foreign country)</th>
<th>Total Income</th>
<th>End-of-year assets</th>
<th>Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAMILY SERVICES PROPERTY, LLC - 26-0217889</td>
<td>OWNERSHIP OF FACILITY USED</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1900 RAINIER AVENUE SOUTH</td>
<td>BY WELSPRING FAMILY SERVICES</td>
<td>WASHINGTON</td>
<td>480,000.</td>
<td>14,247,514.</td>
<td>WELSPRING FAMILY</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Name, address, and EIN of related organization</th>
<th>Primary activity</th>
<th>Legal domicile (state or foreign country)</th>
<th>Exempt Code section</th>
<th>Public charity status (if section 501(c)(3))</th>
<th>Direct controlling entity</th>
<th>Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
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<td>Yes</td>
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<td>No</td>
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</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III
#### Identification of Related Organizations Taxable as a Partnership
Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-JUBI amount in box K-1 of Schedule (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
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<td>Yes</td>
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</table>

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Section 512(b)(12) controlled entity?</th>
<th>(j) Yes</th>
<th>(k) No</th>
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432162 08-14-14

Schedule R (Form 990) 2014
Part V  Transactions With Related Organizations  Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1. **During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**
   - Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
   - Gift, grant, or capital contribution to related organization(s)
   - Gift, grant, or capital contribution from related organization(s)
   - Loans or loan guarantees to or for related organization(s)
   - Loans or loan guarantees by related organization(s)
   - Dividends from related organization(s)
   - Sale of assets to related organization(s)
   - Purchase of assets from related organization(s)
   - Exchange of assets with related organization(s)
   - Lease of facilities, equipment, or other assets to related organization(s)
   - Lease of facilities, equipment, or other assets from related organization(s)
   - Performance of services or membership or fundraising solicitations for related organization(s)
   - Performance of services or membership or fundraising solicitations by related organization(s)
   - Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
   - Sharing of paid employees with related organization(s)
   - Reimbursement paid to related organization(s) for expenses
   - Reimbursement paid by related organization(s) for expenses
   - Other transfer of cash or property to related organization(s)
   - Other transfer of cash or property from related organization(s)

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

<table>
<thead>
<tr>
<th>(a) Name of related organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount Involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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</tbody>
</table>
### Unrelated Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Share of total income</th>
<th>(f) Share of end-of-year assets</th>
<th>(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(h) Disproportionate allocation?</th>
<th>(i) General or managing partner?</th>
<th>(j) Percentage ownership</th>
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