Department of the Treasury Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax

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

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

January 1

OMB No. 1545-1150

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

, 2015, and ending

Open to Public Inspection

December 31

, 20 15

A	For the 2	015 calend	ar year, or tax year beginning January 1 , 2015, and endin	g	250000000000000000000000000000000000000	ember :					
	Check if app		C Name of organization		D Emplo	yer ide	ntification number				
	Address ch	ange	The Reno Initiative for Shelter and Equality				-5617917				
1	Name char	nge	Number and street (or P.O. box, if mail is not delivered to street address) Room/suit	е	E Teleph	none nur	mber				
	Initial return		PO Box 5254			775	-525-0048				
H		/terminated	City or town, state or province, country, and ZIP or foreign postal code	F Group Exemption							
H	Amended r Application		Reno, NV 89513-5254		Num	ber 🕨	N/A				
		ing Method:	AND THE RESIDENCE OF THE PARTY	Н	Check •	▶ ✓ if	the organization is not				
	Website:		renoinitiative.org		required	to atta	ch Schedule B				
			eck only one) — ✓ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527		(Form 99	90, 990	-EZ, or 990-PF).				
K	Form of	organization	☐ Corporation ☐ Trust ☐ Association ☐ Other								
L	Add lines	5b. 6c. and	7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if	total	assets						
(Pa	art II, colu	ımn (B) belo	w) are \$500,000 or more, file Form 990 instead of Form 990-EZ			▶ \$	53,738				
-	Part I	Revenu	e. Expenses, and Changes in Net Assets or Fund Balances (see	the	instruc	tions	for Part I)				
		Check i	the organization used Schedule O to respond to any question in this Pa	art I			🗸				
	1	Contributi	ons, gifts, grants, and similar amounts received			1	53,003				
	2	Program s	ervice revenue including government fees and contracts			2	657				
	3	Membersh	nip dues and assessments			3	0				
	4	Investmen				4	0				
	5a		ount from sale of assets other than inventory 5a		0						
	b		or other basis and sales expenses		0						
	c	Gain or (lo	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c 0								
	6		Gaming and fundraising events								
	а		come from gaming (attach Schedule G if greater than								
9			6a		0						
Revenue	ь	Gross inc	ome from fundraising events (not including \$ 72 of contrib	utio	าร						
۷۵۷	2	from func	raising events reported on line 1) (attach Schedule G if the			Some in					
ш	-	sum of su	ch gross income and contributions exceeds \$15,000) 6b		78						
	C	Less: dire	ct expenses from gaming and fundraising events 6c		487						
	d	Net incor	ne or (loss) from gaming and fundraising events (add lines 6a and 6b and	d su	btract						
		line 6c)				6d	(409)				
	7a	Gross sal	es of inventory, less returns and allowances		0						
	b	Less: cos	t of goods sold		0						
	C	Gross pro	fit or (loss) from sales of inventory (Subtract line 7b from line 7a)			7c	0				
	8		enue (describe in Schedule O)			8	0				
	9	Total rev	enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		. ▶	9	53,251				
	10	Grants ar	d similar amounts paid (list in Schedule O)			10	0				
	11	Benefits	paid to or for members			11	0				
	g 12	Salaries,	other compensation, and employee benefits			12	0				
ò	13 14 15	Professio	nal fees and other payments to independent contractors			13	0				
-	14	Occupan	cy, rent, utilities, and maintenance			14	1,471				
Ĺ	15	Printing,	oublications, postage, and shipping			15	81				
	16	Other exp	penses (describe in Schedule O)			16	44,776				
	17	Total ex	penses. Add lines 10 through 16		. ▶	17	46,328				
-	10	Excess of	r (deficit) for the year (Subtract line 17 from line 9)			18	6,923				
1	19	Net asse	ts or fund balances at beginning of year (from line 27, column (A)) (must	agre	e with						
	ASS		ear figure reported on prior year's return)			19	2,583				
	Net Assets 19 20	Other ch	anges in net assets or fund balances (explain in Schedule O)			20	487				
:	Ž 21	Net asse	ts or fund balances at end of year. Combine lines 18 through 20			21	9,993				

Par						
	t II Balance Sheets (see the instructions for	or Part II)	, avestion in this E	lort II		🔽
	Check if the organization used Schedule (o to respond to an	y question in tris F	A) Beginning of year	• •	(B) End of year
			·	2,583		6,653
22	Cash, savings, and investments		⊢	2,565		0,033
23	Land and buildings		-		24	3,340
24	Other assets (describe in Schedule O)		–	2,583		9,993
25	Total assets		–		26	0
26	Total liabilities (describe in Schedule O)			2,583	_	9,993
27	Net assets or fund balances (line 27 of column	(B) must agree with	ine ZI)		21	5,555
Par	Statement of Program Service Accomp	Otoments (see the	y augstion in this I	Part III		Expenses
	Check if the organization used Schedule		y question in this r	artin E		quired for section
	is the organization opiniary oxempt perpendicular	charitable	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE			(c)(3) and 501(c)(4) anizations; optional for
Desc	ribe the organization's program service accomplis	hments for each of	its three largest pr	ogram services,	othe	
as m	neasured by expenses. In a clear and concise man	anner, describe the	services provided	the number of	2011/0-7	2.736
pers	ons benefited, and other relevant information for ea	ch program une.				T
28	RISE and Dine: communal meal program; volunteers	provide homecooked	meals and serve to	low-income and		
	houseless clients. Forty events held per year, 200+ m	eals served to house	less clients per even	<u>r.</u>		
					28a	13.692
	(Grants \$ 0) If this amount	includes foreign gra	nts, check here .		200	13,692
29	Market(s): Mobile and stationary distribution of clothi	ng and toiletries to h	ouseless clients. Dis	tributed \$27.5K		
	worth of donations.					
					20.	20.005
	(Grants \$ 0) If this amount	includes foreign gra	nts, check here .		298	a 30,065
30	Client Aid: Fulfilling special needs of low-income and	l houseless clients. D	onated services incl	ude face tattoo		
	removal (value- \$300) for houseless client seeking en	nployment				
					20.	4 200
	(Grants \$ 0) If this amount	includes foreign gra	nts, check here .	🗆	30a	a 1,288
31	Other program services (describe in Schedule O)				24	- 0.4
	(Grants \$ 0) If this amount	includes foreign gra	nts, check here .	· · · • • •	31	
32	Total program service expenses (add lines 28a	through 31a)				
Pai	List of Officers, Directors, Trustees, and Key	Employees (list each	one even if not com	Part IV	nsuru	
	Check if the organization used Schedule	O to respond to a	(c) Reportable	(d) Health benefits,	Ť	Ц
		(b) Average hours per week	compensation	contributions to employ	100 10	e) Estimated amount of
	(a) Name and title		(Forms W-2/1099-MISC			other componentian
		devoted to position				other compensation
Ren		devoted to position	(if not paid, enter -0-)	benefit plans, and deferred compensation		other compensation
	amin Castro		(if not paid, enter -0-)	deferred compensation	on	
	jamin Castro sident Executive Director	devoted to position		deferred compensation		
Pres	sident Executive Director e Colling	40	(if not paid, enter -0-)	deferred compensation	0	
Pres Kati Vice	sident Executive Director e Colling President Director of Market Operations		(if not paid, enter -0-)	deferred compensation	on	
Pres Kati Vice	sident Executive Director e Colling	40	(if not paid, enter -0-)	deferred compensation	0 0	0
Pres Kati Vice Arth Dire	sident Executive Director e Colling e President Director of Market Operations our Gies Jr ctor	40	(if not paid, enter -0-)	deferred compensation	0	0
Pres Kati Vice Arth Dire	sident Executive Director e Colling e President Director of Market Operations our Gies Jr	40 40 30	(if not paid, enter -0-)	deferred compensation	0 0	0
Pres Kati Vice Arth Dire Sha	sident Executive Director e Colling e President Director of Market Operations our Gies Jr ctor	40	(if not paid, enter -0-)	deferred compensation	0 0	0
Pres Kati Vice Arth Dire Sha	sident Executive Director e Colling President Director of Market Operations our Gies Jr ctor lise Ptak	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted	sident Executive Director e Colling President Director of Market Operations our Gies Jr ctor lise Ptak	40 40 30	(if not paid, enter -0-)	deferred compensation	0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted Dire Lau	sident Executive Director e Colling President Director of Market Operations For Gies Jr Cotor For Gies Description For Gies Descrip	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0 0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted Dire Lau	sident Executive Director e Colling President Director of Market Operations For Gies Jr Ctor Flise Ptak Ctor Levatter	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted Dire Lau	sident Executive Director e Colling President Director of Market Operations For Gies Jr Cotor For Gies Description For Gies Descrip	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0 0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted Dire Lau	sident Executive Director e Colling President Director of Market Operations For Gies Jr Cotor For Gies Description For Gies Descrip	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0 0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted Dire Lau	sident Executive Director e Colling President Director of Market Operations For Gies Jr Cotor For Gies Description For Gies Descrip	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0 0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted Dire Lau	sident Executive Director e Colling President Director of Market Operations For Gies Jr Cotor For Gies Description For Gies Descrip	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0 0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted Dire Lau	sident Executive Director e Colling President Director of Market Operations For Gies Jr Cotor For Gies Description For Gies Descrip	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0 0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted Dire Lau	sident Executive Director e Colling President Director of Market Operations For Gies Jr Cotor For Gies Description For Gies Descrip	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0 0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted Dire Lau	sident Executive Director e Colling President Director of Market Operations For Gies Jr Cotor For Gies Description For Gies Descrip	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0 0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted Dire Lau	sident Executive Director e Colling President Director of Market Operations For Gies Jr Cotor For Gies Description For Gies Descrip	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0 0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted Dire Lau	sident Executive Director e Colling President Director of Market Operations For Gies Jr Cotor For Gies Description For Gies Descrip	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0 0 0	0
Pres Kati Vice Arth Dire Sha Dire Ted Dire Lau	sident Executive Director e Colling President Director of Market Operations For Gies Jr Cotor For Gies Description For Gies Descrip	40 40 30 20	(if not paid, enter -0-)	deferred compensation	0 0 0 0 0	other compensation 0 0 0 0 0

Part '	Other Information (Note the Schedule A and personal benefit contract statement requirements	in the Part \	e /	П
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	art	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		1
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34	1	
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0	071	100	1
b 38a	Did the organization file Form 1120-POL for this year?	37b 38a		1
b 39	If "Yes," complete Schedule L, Part II and enter the total amount involved			
а	Initiation fees and capital contributions included on line 9			
b 40a	Gross receipts, included on line 9, for public use of club facilities			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ▶ Nevada	775 2	13-74	c 7
42a	The organization's books are in care of Plauten Casto		9503	37
h	Located at ► 2095 Arcane Ave, Reno, NV At any time during the calendar year, did the organization have an interest in or a signature or other authority over			No
b	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	42b		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	If "Yes," enter the name of the foreign country: ▶	420	<u>:</u>	\ \ \
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	s No
44a	completed instead of Form 990-EZ	448	185	, we
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	441	_	/
d	Did the organization receive any payments for indoor tanning services during the year?	440		V
	explanation in Schedule O	440	-	-
45a b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	45		
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	45	b	V

Form 990-E	Z (2015)						Р	age 4
46 Di	d the organization engage, directly or in candidates for public office? If "Yes," of the candidates for public office?	ndirectly, in political c	ampaign activities or	n behalf c	of or in opposition		Yes	No
Part VI	Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51.	s only s must answer que	estions 47-49b and	52, and	complete the	tables f	or line	√ es
	Check if the organization used Sc	hedule O to respond	to any question in t	this Part	VI			
47 Di	d the organization engage in lobbying ear? If "Yes," complete Schedule C, Par		section 501(h) election			47	Yes	No
5.000	the organization a school as described i					48		V
49a Di	Did the organization make any transfers to an exempt non-charitable related organization?							1
50 Co	"Yes," was the related organization a so complete this table for the organization's	s five highest compen	sated employees (otl	her than	officers, director	49b	es an	d ke
er	nployees) who each received more than (a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) He contribut benefit pl	ealth benefits,	enter "N e) Estimate other con	ed amou	unt of
NONE				Cor	nperisation			

51 Co	otal number of other employees paid over omplete this table for the organization 100,000 of compensation from the organization (a) Name and business address of each independent	's five highest compe anization. If there is no	ensated independent one, enter "None."					thar
NONE	(a) Name and business address of each independ	Sent contractor	(b) Type of serv	vice	(6)	ompensati	on	_
	***************************************	**********			_			
	***************************************	**************						
d To	otal number of other independent contra	ectors each receiving	over \$100,000		0			
52 Di	d the organization complete Schedu	(1) (1) 1 (1) 1 (1) (1) (1) (1) (1) (1)	ection 501(c)(3) orga	nizations	must attach	a ► ✓ Yes		No
Under penal true, correct	Ities of perjury, I declare that I have examined this and complete. Declaration of preparer (other than	return, including accompan	ying schedules and stateme	ents, and to	the best of my know		Name of Street	
Sian	Sign is a state	6			5/1,	116		
Sign Here	Signature of officer Benjamin Q. Co	astro Pres	ident		Date			
Paid	Print/Type preparer's name	Preparer's signature	Da	ate	Check if	023		
Prepare Use On					Firm's EIN ▶			
	*				The state of the s			

Firm's address

May the IRS discuss this return with the preparer shown above? See instructions

► ☐ Yes ☐ No

Organization Name Change

Please refer to attached proof of filing and amended and restated Articles of Incorporation (dated 2/19/13) filed with the state of Nevada on February 22, 2013.

From: Reno Initiative for Shelter and Equality

To: <u>The</u> Reno Initiative for Shelter and Equality

STATE OF NEVADA

ROSS MILLER

Secretary of State

SCOTT W. ANDERSON

Deputy Secretary for Commercial Recordings



OFFICE OF THE SECRETARY OF STATE

Commercial Recordings Division

202 N. Carson Street Carson City, NV 89701-4069 Telephone (775) 684-5708 Fax (775) 684-7138

Job:C20130222-1204 February 27, 2013

LAUREN CASTRO 2095 ARCANE AVE RENO, NV 89503

Special Handling Instructions:

Reg mail out 2-27-2013 amended and restated articles. Ras

Charges

Description	Document Number	Filing Date/Time	Qty	Price	Amount
Amended & Restated Articles	20130119263-78	2/22/2013 10:27:32 AM	1	\$50.00	\$50.00
Total					\$50.00

Payments

Туре	Description	Amount
Check	Check #0007	\$50.00
Total		\$50.00

Credit Balance: \$0.00

Job Contents: File Stamped Copy(s):

1

LAUREN CASTRO 2095 ARCANE AVE RENO, NV 89503





ROSS MILLER Secretary of State 204 North Carson Street, Suite 1 Carson City, Nevada 89701-4520 (775) 684-5708 Website: www.nvsos.gov

Certificate to Accompany Restated Articles or Amended and Restated Articles

(PURSUANT TO NRS)

Filed in the office of 20130119263-78

Ross Miller Secretary of State State of Nevada

Document Number 20130119263-78

Filing Date and Time 02/22/2013 10:27 AM

Entity Number E0377802012-8

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

This Form is to Accompany Restated Articles or Amended and Restated Articles of Incorporation (Pursuant to NRS 78.403, 82.371, 86.221, 87A, 88.355 or 88A.250)

(This form is also to be used to accompany Restated Articles or Amended and Restated Articles for Limited-Liability Companies, Certificates of Limited Partnership, Limited-Liability Limited Partnerships and Business Trusts)

2. The articles are: (mark only one box) Restated	Amended and Restated
Please entitle your attached articles "Restated" or "Amend	annessen state data de sentier de la respective de la re
Indicate what changes have been made by checking	
the certificate by resolution of the board of director	
The certificate correctly sets forth the text of the a	articles or certificate as amended to the date of the certificate.
☐ The registered agent has been changed. (attach	Certificate of Acceptance from new registered agent)
The purpose of the entity has been amended.	
☐ The authorized shares have been amended.	
The directors, managers or general partners ha	ave been amended.
☐ IRS tax language has been added.	and the second s
Articles have been added.	27 (a)
Articles have been deleted.	
X Other. The articles or certificate have been am	nended as follows: (provide article numbers, if available)
Article IV: title changed to "Initial Board of Director Article V: text changed to "who formed"; added a	
4. Effective date and time of filing: (optional) Date:	Time:

* This form is to accompany Restated Articles or Amended and Restated Articles which contain newly altered or amended articles. The Restated Articles must contain all of the requirements as set forth in the statutes for amending or altering the articles for certificates.

IMPORTANT: Failure to include any of the above information and submit with the proper fees may cause this filting to be rejected.

This form must be accompanied by appropriate fees.

Nevada Secretary of State Restated Articles Revised: 8-31-11

AMENDED AND RESTATED ARTICLES OF INCORPORATION OF THE RENO INITIATIVE FOR SHELTER AND EQUALITY

A Nevada Nonprofit Corporation

Pursuant to the provisions of the laws of the State of Nevada, The Reno Initiative for Shelter and Equality, a nonprofit corporation organized under the laws of the State of Nevada, amends and restates its Articles of Incorporation. The undersigned hereby certifies as follows:

- 1. He is the duly elected and acting President of The Reno Initiative for Shelter and Equality, a Nevada nonprofit corporation (the "Corporation").
- On February 19, 2013, the Board of Directors of the Corporation (the "Board") unanimously approved the amendment and restatement of the Corporation's Articles of Incorporation (the "Articles").
- 3. On February 18, 2013, the proposed amendment to Article III was submitted to the Board. The Board unanimously voted in favor of the amendment to Article III to specify the purpose of the organization as charitable. Article III, Section 3.1, Purpose, is hereby amended to read in full as follows:
 - 3.1 <u>Purpose</u>. RISE is organized exclusively for charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 2006, or the corresponding section of any future Federal tax code.
- 5. On February 19, 2013, the proposed amendment to the entity name was submitted to the Board. The Board unanimously voted in favor of the amendment to the entity name. The entity name of the Corporation is hereby amended to read in full as follows:

The Reno Initiative for Shelter and Equality

6. Title of Article IV is hereby amended to read in full as follows:

Initial Board of Directors

 Descriptive text of Article V, Original Incorporators, is hereby amended to read in full as follows:

The names and addresses of the persons who formed the corporation are as follows:

- 8. Article V, Original Incorporators, is hereby amended to include incorporator Arthur Gies, Jr.
- 9. Article IV, Initial Board of Directors, and Article V, Original Incorporators, is hereby amended with current addresses.

AMENDED AND RESTATED ARTICLES OF INCORPORATION

ARTICLE I NAME

The name of the corporation shall be The Reno Initiative for Shelter and Equality ("RISE"). RISE shall be a nonprofit corporation organized under the laws of the State of Nevada.

ARTICLE II PRINCIPAL OFFICE

The place in this state where the principal office of RISE is to be located is the City of Reno, Washoe County. The address of the principal office of RISE shall be designated by resolution of RISE's Board of Directors (the "Board").

ARTICLE III PURPOSE AND LIMITATIONS

3.1 Purpose

RISE is organized exclusively for charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 2006, or the corresponding section of any future Federal tax code.

3.2 Limitations

No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the purpose clause hereof.

No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

ARTICLE IV INITIAL BOARD OF DIRECTORS

The names and addresses of the persons who are the initial directors of the corporation are as follows:

THE RENO INITIATIVE FOR SHELTER AND EQUALITY

Benjamin Castro

Arthur Gies, Jr.

Paige Pulley

2095 Arcane Avenue Reno, Nevada 89503 831 Wheeler Avenue #7 Reno. Nevada 89502 1675 Sky Mountain Drive #435

Reno, Nevada 89523

Mark Pitchford

4800 Kietzke Lane #47 Reno, Nevada 89502 Katie Colling

635 N. Maddux Drive Reno. Nevada 89512 Lauren Castro

2095 Arcane Avenue Reno, Nevada 89503

ARTICLE V ORIGINAL INCORPORATORS

The names and addresses of the persons who formed the corporation are as follows:

Benjamin Castro

Arthur Gies, Jr.

Paige Pulley

2095 Arcane Avenue Reno, Nevada 89503 831 Wheeler Avenue #7 Reno, Nevada 89502 1675 Sky Mountain Drive #435

Reno, Nevada 89523

Mark Pitchford

Katie Colling

Lauren Castro

4800 Kietzke Lane #47 Reno, Nevada 89502 635 N. Maddux Drive Reno, Nevada 89512 2095 Arcane Avenue Reno, Nevada 89503

ARTICLE VI DISTRIBUTION OF ASSETS UPON DISSOLUTION

Upon dissolution of the corporation, and after paying or adequately providing for the debts and obligations of the corporation, the balance of the RISE's assets shall be distributed only to a nonprofit fund, foundation or corporation which is organized and operated exclusively for charitable, educational, religious and/or scientific purposes, and which has established its tax-exempt status under Section 501(c)(3) of the Code, and shall, in the opinion of the Board, best benefit the general objects and purposes for which RISE was organized.

CERTIFICATE OF ADOPTION OF AMENDED AND RESTATED ARTICLES OF INCORPORATION

I, Benjamin Castro, President of The Reno Initiative for Shelter and Equality, have been authorized by the Board of Directors to sign this certificate and do hereby certify that the above Amended and Restated Articles of Incorporation was approved and adopted by the Board of Directors on Tuesday, February 19, 2013 and constitute a complete copy of the Articles of Incorporation of the corporation.

Benjamin Castro, President

Date

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization The Reno Initiative for Shelter and Equality			M 51	Employer identification number 45-5617917		
Part I, Line 16 Other Expenses						
	Total	Program Service	Management	Fundraising		
Advertising and Promotion	762.43	0	43.18	719.25		
Clothing & Living Necessities	29,713.11	29,713.11	0	0		
Food & Beverage	12,393.17	12,393.17	0	0		
Information Technology	228.31	0	228.31	0		
Materials & Components	24.21	24.21	0	0		
Miscellaneous	185.54	31.14	100.00	54.40		
Supplies & Equipment	1,468.86	1,435.83	33.03	0		
TOTAL	44,775.63	43,597.46	404.52	773.65		
Adjusting for Part I line 6c (\$487) v	which is a direct expe	nse made in 2014 tax year for a	fundraising event that occurr	red in 2015 tax year.		
Part II, Line 24 Other Assets						
Clothing Inventory (Market)	2,905.00					
Food Inventory (RISE and Dine)	435.20					
Total Program Distribution Invento	ory 3,340.20					
Part III, Line 31 Other Program Serv	rices					
Giving Gardens: Construction and	I maintenance of gard	lens for community education.	Vegetable harvest is given to	our RISE and Dine		
program to feed houseless clients						

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Name of the organization

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

Employer identification number

Open to Public Inspection

OMB No. 1545-0047

The Reno Initiative for Shelter and Equality 45-5617917 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33½% 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 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 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 supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d 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 II, Type III, Typ 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). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of isted in your governing (described on lines 1-9 support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

STREET, STREET	Fagi
Part II	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under
	Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)
	Dublic Current

Sect	on A. Public Support						
Caler	idar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	N/A	3,821	15,655	27,833	53,003	100,312
2	Tax revenues levied for the		5,021	10,000	27,000	33,003	100,312
	organization's benefit and either paid						
	to or expended on its behalf	N/A	0	0	0	0	0
3	The value of services or facilities			-		U	
	furnished by a governmental unit to the						
	organization without charge	N/A	0	0	0	0	0
4	Total. Add lines 1 through 3	N/A	3,821	15,655	27,833	53,003	100,312
5	The portion of total contributions by	ar of the same of			127,500	33,003	100,312
	each person (other than a	1			1. (1)		
	governmental unit or publicly		3.4	700	46.0		
	supported organization) included on					NEW BOOK	
	line 1 that exceeds 2% of the amount		· · · · · · · · · · · · · · · · · · ·	Carlos de la companion de la c	研究を持った		
	shown on line 11, column (f)						8,655
6	Public support. Subtract line 5 from line 4,		0.00	Ohitis = a		792 176 1961	91,657
Secti	on B. Total Support						01,007
Calen	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	N/A	3,821	15,655	27,833	53,003	100,312
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	N/A	0	0	0	0	0
9	Net income from unrelated business						
	activities, whether or not the business				4		
	is regularly carried on	N/A	0	0	0	0	0
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)	N/A	0	0	0	0	0
11	Total support. Add lines 7 through 10				NATURE OF THE PARTY OF THE PART		100,312
12	Gross receipts from related activities, etc.	(see instruction	ns)			12	1,975
13	First five years. If the Form 990 is for the						
	organization, check this box and stop her						🕨 🗸
250.5077	on C. Computation of Public Suppor						
14	Public support percentage for 2015 (line 6				-	14	%
15 16a	Public support percentage from 2014 Sch	edule A, Part II	, line 14			15	%
Toa	33 ¹ / ₃ % support test—2015. If the organiz box and stop here. The organization quali	ation did not c	neck the box o	on line 13, and			
b							
D	331/3% support test—2014. If the organicheck this box and stop here. The organization	zation did fiot	check a box	on line 13 or	Toa, and line	15 IS 331/3% C	
47-							. • 📙
17a	10%-facts-and-circumstances test—20	15. If the organ	nization did not	t check a box	on line 13, 16a	, or 16b, and li	ne 14 is
	10% or more, and if the organization mee	its the Tacts-a	nd-circumstan	ces test, ched	ck this box and	stop here. Ex	xplain in
	Part VI how the organization meets the "fa organization	icts-and-circur	nstances test	. The organiza	tion qualifies a	is a publicly su	pported
4							🗆
b	10%-facts-and-circumstances test—20	14. If the organ	nization did no	t check a box	on line 13, 16a	a, 16b, or 17a,	and line
	15 is 10% or more, and if the organization my	on meets the	racts-and-circ	cumstances" t	est, check thi	s box and sto	p here.
	Explain in Part VI how the organization me supported organization	sets the Tacts-	anu-circumsta	ances test. In	e organization	quaimes as a	publicly
18	Private foundation. If the organization did						🗆
	instructions		<u> </u>				