

ATTACHMENT E

Form 1023, Part IX, Line 23

Any expense not otherwise classified, such as program services (attach itemized list)

	Actual	Projected	Projected
	From 09/2008 To 12/2008	From 01/2009 To 12/2009	From 01/2010 To 12/2010
D&O Insurance	\$ 1,100.00	\$ 1,100.00	\$ 1,300.00
Liability Insurance		3,000.00	3,000.00
Computer Programs	200.00		
Computers		2,500.00	
Furnishings		7,500.00	3,500.00
Post Office Box Rental Fee	40.00	40.00	40.00
Incorporation Fee	50.00	25.00	25.00
Form 1023 Application Fee		750.00	
TOTAL	\$ 1,390.00	\$ 14,915.00	\$ 7,865.00

***Attachment F
intentionally
left blank,
except for the
explanation
below.***

ATTACHMENT F was written originally to respond to Form 1023, Part X, Line 7, Unusual Grants: Did you receive any unusual grants during any of the years shown on Part IX-A. Statement of Revenues and Expenses? If "Yes," attach a list including the name of the contributor, the date and amount of the grant, a brief description of the grant, and explain why it is unusual.

My Friends Place application was prepared and under review when Department of the Treasury Internal Revenue Service Notice 1382 (January 2009) was received. Because all succeeding attachments already were labeled and in place, ATTACHMENT F was revised as follows: deleted the explanation of the unusual grant according to IRS Notice 1382 and inserted these explanatory statements.

ATTACHMENT G

Form 1023, Schedule F, Section I, Lines 1, 2, 3, 4, 5

**Schedule F. Homes for the Elderly or Handicapped and Low-Income Housing
Section I General Information About Your Housing**

- 1 Describe the type of housing you provide.
My Friends Place will provide temporary shelter for at-risk youth. See ATTACHMENT C, Statement 2, page 2, paragraphs four and five.
- 2 Provide copies of any application forms you use for admission.
Application forms will be written by staff to be hired.
- 3 Explain how the public is made aware of your facility.
All local law enforcement, school district, Department of Human Services, Benton-Franklin Community Action Committee, and other related agency personnel will be notified when My Friends Place is ready to open and provide temporary shelter for at-risk youth.
- 4 Provide a description of the facility.
Site work to identify a location and/or facility is underway.
- 5 Attach a sample copy of your residency or homeownership contract of agreement.
Application or intake forms, shelter rules, etc., will be written by staff to be hired and reviewed by legal counsel.

Form SS-4 Application for EIN (1 pg) followed by IRS Notice CP 575 E, EIN (2 pgs)

Form **SS-4**
(Rev. July 2007)

Application for Employer Identification Number

OMB No. 1545-0003

Department of the Treasury
Internal Revenue Service

(For use by employers, corporations, partnerships, trusts, estates, churches, government agencies, Indian tribal entities, certain individuals, and others.)

EIN

26-3491293

▶ See separate instructions for each line. ▶ Keep a copy for your records.

Type or print clearly.	1 Legal name of entity (or individual) for whom the EIN is being requested MY FRIENDS PLACE	
	2 Trade name of business (if different from name on line 1)	3 Executor, administrator, trustee, "care of" name
	4a Mailing address (room, apt., suite no. and street, or P.O. box) PO BOX 2306	5a Street address (if different) (Do not enter a P.O. box.) 4012 W Ct
	4b City, state, and ZIP code (if foreign, see instructions) PASCO WA 99301	5b City, state, and ZIP code (if foreign, see instructions)
	6 County and state where principal business is located FRANKLIN COUNTY WASHINGTON	
	7a Name of principal officer, general partner, grantor, owner, or trustee AVIS J OGDEN	7b SSN, ITIN, or EIN [REDACTED]
8a Is this application for a limited liability company (LLC) (or a foreign equivalent)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8b If 8a is "Yes," enter the number of LLC members ▶
8c If 8a is "Yes," was the LLC organized in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		
9a Type of entity (check only one box). Caution. If 8a is "Yes," see the instructions for the correct box to check.		
<input type="checkbox"/> Sole proprietor (SSN) _____ <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation (enter form number to be filed) ▶ _____ <input type="checkbox"/> Personal service corporation <input type="checkbox"/> Church or church-controlled organization <input checked="" type="checkbox"/> Other nonprofit organization (specify) ▶ 501(C)(3) <input type="checkbox"/> Other (specify) ▶ _____		
<input type="checkbox"/> Estate (SSN of decedent) _____ <input type="checkbox"/> Plan administrator (TIN) _____ <input type="checkbox"/> Trust (TIN of grantor) _____ <input type="checkbox"/> National Guard <input type="checkbox"/> State/local government <input type="checkbox"/> Farmers' cooperative <input type="checkbox"/> Federal government/military <input type="checkbox"/> REMIC <input type="checkbox"/> Indian tribal governments/enterprises Group Exemption Number (GEN) if any ▶ _____		
9b If a corporation, name the state or foreign country (if applicable) where incorporated	State wa	Foreign country
10 Reason for applying (check only one box)		
<input checked="" type="checkbox"/> Started new business (specify type) ▶ new non-profit corporation <input type="checkbox"/> Hired employees (Check the box and see line 13.) <input type="checkbox"/> Compliance with IRS withholding regulations <input type="checkbox"/> Other (specify) ▶ _____		
<input type="checkbox"/> Banking purpose (specify purpose) ▶ _____ <input type="checkbox"/> Changed type of organization (specify new type) ▶ _____ <input type="checkbox"/> Purchased going business <input type="checkbox"/> Created a trust (specify type) ▶ _____ <input type="checkbox"/> Created a pension plan (specify type) ▶ _____		
11 Date business started or acquired (month, day, year). See instructions. August, 2008		12 Closing month of accounting year December
13 Highest number of employees expected in the next 12 months (enter -0- if none).		14 Do you expect your employment tax liability to be \$1,000 or less in a full calendar year? <input type="checkbox"/> Yes <input type="checkbox"/> No (If you expect to pay \$4,000 or less in total wages in a full calendar year, you can mark "Yes.")
Agricultural 0	Household 0	
15 First date wages or annuities were paid (month, day, year). Note. If applicant is a withholding agent, enter date income will first be paid to nonresident alien (month, day, year) ▶		
16 Check one box that best describes the principal activity of your business.		
<input type="checkbox"/> Construction <input type="checkbox"/> Rental & leasing <input type="checkbox"/> Transportation & warehousing <input type="checkbox"/> Accommodation & food service <input type="checkbox"/> Wholesale-agent/broker <input type="checkbox"/> Real estate <input type="checkbox"/> Manufacturing <input type="checkbox"/> Finance & insurance <input checked="" type="checkbox"/> Other (specify) non-profit corporation <input type="checkbox"/> Health care & social assistance <input type="checkbox"/> Wholesale-other <input type="checkbox"/> Retail		
17 Indicate principal line of merchandise sold, specific construction work done, products produced, or services provided. operate a youth shelter		
18 Has the applicant entity shown on line 1 ever applied for and received an EIN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," write previous EIN here ▶		

Third Party Designee	Complete this section only if you want to authorize the named individual to receive the entity's EIN and answer questions about the completion of this form.	
	Designee's name Albert Coke Roth, III, Esq.	Designee's telephone number (include area code) (509) 783-0220
	Address and ZIP code 8836 W. Gage Blvd, Suite 204A, KENNEWICK, WA 99336	Designee's fax number (include area code) (509) 783-0411

Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, it is true, correct, and complete.		Applicant's telephone number (include area code) (509) 531.2954
Name and title (type or print clearly) ▶ Avis J. Ogden, Director		Applicant's fax number (include area code) ()
Signature ▶ <i>Avis J. Ogden</i>	Date ▶ 10/6/08	

My Friends Place
ATTACHMENT H
IRS Notice CP 575 E, Employer Identification Number

26-3491293



DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

Date of this notice: 10-07-2008

Employer Identification Number:
26-3491293

Form: SS-4

Number of this notice: CP 575 E

For assistance you may call us at:
1-800-829-4933

MY FRIENDS PLACE
% AVIS OGDEN
PO BOX 2306
PASCO, WA 99302

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 26-3491293. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Assigning an EIN does not grant tax-exempt status to non-profit organizations. Publication 557, *Tax Exempt Status for Your Organization*, has details on the application process, as well as information on returns you may need to file. To apply for formal recognition of tax-exempt status, most organizations will need to complete either Form 1023, *Application for Recognition of Exemption Under Section 501(c)(3) of the Internal Revenue Code*, or Form 1024, *Application for Recognition of Exemption Under Section 501(a)*. Submit the completed form, all applicable attachments, and the required user fee to:

Internal Revenue Service
PO Box 192
Covington, KY 41012-0192

The Pension Protection Act of 2006 contains numerous changes to the tax law provisions affecting tax-exempt organizations, including an annual electronic notification requirement (Form 990-N) for organizations not required to file an annual information return (Form 990 or Form 990-EZ). Additionally, if you are required to file an annual information return, you may be required to file it electronically. Please refer to the Charities & Non-Profits page at www.irs.gov for the most current information on your filing requirements and on provisions of the Pension Protection Act of 2006 that may affect you.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

MY FRIENDS PLACE
MINUTES OF DIRECTORS' ORGANIZATIONAL MEETING
OCTOBER 6, 2008

Pursuant to Section 24.03 of the Revised Code of Washington, and a call of the majority of the Board of Directors named in the Articles of Incorporation, the organizational meeting of the Directors of MY FRIENDS PLACE was held at 8836 Gage Boulevard, Suite 204A, Kennewick, Benton County, Washington on October 6, 2008, at five o'clock p.m., pursuant to a written Waiver of Notice, signed by all the Directors, fixing such time and place.

The following Directors, being a quorum of the Directors named in the Articles of Incorporation, and constituting the Board of Directors were present:

Merrie M. Crawford
R. Scott Duncan
Avis J. Ogden
Mark Nathan Lee
Stacy B. Estes

Merrie M. Crawford was chosen Chairman and Mark Nathan Lee was chosen Secretary of the meeting.

Also in attendance were Merrie Felton, Jeanne Harvey-Duncan, Terry Ogden, Dave Riddle, Wendy Riddle, and Megan Thompson.

The Chairman reported that the Articles of Incorporation of the Association were filed in the office of the Secretary of State on September 9, 2008 under Unified Business Identifier No. 602-862-658; and that a Certificate of Incorporation has been issued by the office of the Secretary of State dated the 9th day of September, 2008. The Federal Employer Identification Number obtained for the Corporation is 26-3491293.

The Secretary presented a set of Bylaws for the governing of the Association, the conduct of its affairs, and management of its property and business which was read article by article.

Upon motion duly made by R. Scott Duncan, seconded and carried it was:

RESOLVED, that the Bylaws submitted and read to this meeting be and the same hereby are adopted as and for the Bylaws of this Association, and that the Secretary be and he hereby is instructed to cause the same to be inserted in the minute book immediately following the copy of the Articles of Incorporation and the Certificate of Incorporation.

The Chairman stated that the next business to come before the meeting was the ratification of the Directors of the Association to hold office for the ensuing year and until their respective successors are chosen and qualify. The Chairman noted that these Directors were named in the Articles of Incorporation. Thereupon the following persons were nominated and unanimously elected as Directors of the Association:

Merrie M. Crawford
R. Scott Duncan
Avis J. Ogden
Mark Nathan Lee
Stacy B. Estes

The Chairman stated that the next business to come before the meeting was the election of Officers of the Association to hold office for the ensuing year and until their respective successors are chosen and qualify, and called for nominations. Thereupon the following persons were nominated as Officers of the Association:

Merrie M. Crawford	President
Avis J. Ogden	Vice President
R. Scott Duncan	Treasurer
Mark Nathan Lee	Secretary

The Directors having voted, the Chairman announced the foregoing persons had been

unanimously elected to the offices set beside their respective names to serve until the election and qualification of their respective successors.

The President thereupon acted as Chairman and the Secretary entered upon the discharge of his duties.

The Directors then reviewed the necessity for a Corporate Seal and procuring the corporate notebook.

Upon motion duly made by Avis Ogden, seconded and carried it was ratified:

RESOLVED, that the Law Office of Coke Roth be and is hereby instructed to order the Corporate Seal of this Association and directed to procure the proper corporate organizational documents.

The President then presented to the meeting the requirement to file for federal income taxation exemption under Section 501(a) and 501(c)(3) of the Internal Revenue Code of 1986 with the Internal Revenue Service.

Upon motion duly made by R. Scott Duncan, seconded and carried, the following resolutions were unanimously adopted:

RESOLVED, that the Association shall apply for recognition as an organization exempt from federal income taxation under Sections 501(a) and 501(c)(3) of the Internal Revenue Code of 1986, as amended;

FURTHER RESOLVED, that the Officers of the Association are hereby authorized and directed to complete and file with the Internal Revenue Service as soon as possible (*but in no event later than fifteen (15) months following the date on which this Association's Articles of Incorporation were filed*) Form 1023, Application for Recognition of Exemption under Section 501(c)(3) of the Internal Revenue Code.

The President then directed discussion to the administrative costs of organizing the Association.

Upon motion duly made by Mark Lee, seconded and carried, it was:

RESOLVED, that the Treasurer be and he hereby is authorized to pay all fees and expenses incident to and necessary to the organization of the Association.

The Incorporator requested indemnification for the acts incident to incorporation and ratification of all contracts entered into incident to incorporation, which were represented by the Directors that there are none.

Upon motion duly made by Avis Ogden, seconded and carried, it was:

RESOLVED, that the Incorporator be indemnified to the extent the Association indemnifies Directors and that all pre-incorporation contracts be and are hereby ratified.

The President recommended the adoption of corporate banking resolutions.

Upon motion duly made by Stacy Estes, seconded and carried, it was:

RESOLVED, that Yakima Federal Savings & Loan Association, 3604 W. Court Street, Pasco Branch, be and it is hereby designated as the initial depository bank in which funds of this Association shall be by its Officers, Employees, and Servants deposited, and that the bank account shall be kept in the corporate name; that all checks or drafts drawn against said account shall, in addition to the corporate name of this Association, bear the personal signature of one or more of the Officers, or the authorized signature of the bookkeeper, as Agent for the Association, subject to change by the Board upon Majority Vote.

IT IS FURTHER RESOLVED, that the Treasurer of this Association secure from the bank, and have executed by the Officers of this Association, the necessary documents to effectuate the purposes of this resolution.

No other business being presented, upon motion duly made by Avis Ogden, seconded and carried, the meeting was adjourned.

A true record signed by the Secretary.



Mark Nathan Lee, Secretary

My Friends Place
Board of Directors Meeting
February 17, 2009

CALL TO ORDER The meeting of the Board of Directors of My Friends Place was called to order at 9:24 p.m. by President Merrie Crawford. The meeting was held at Riverview United Methodist Church, Pasco WA. Present: Merrie Crawford, President, Avis Ogden, Vice President, Mark Nathan Lee, Secretary, and Stacy Estes, Director. Treasurer Scott Duncan was unable to attend the meeting.

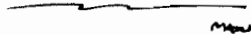
MINUTES No minutes were reviewed.

UNFINISHED BUSINESS There was no unfinished business.

NEW BUSINESS Conflict of Interest Policy Stacy Estes moved that the *Conflict of Interest Policy be adopted as presented. Motion seconded and carried.* The policy first was presented to the Board of Directors at its meeting on January 20, 2009, after being received from My Friends Place attorney, Coke Roth. The policy also was attached to the email notice of this meeting. Board members then signed a copy of the Conflict of Interest Policy for the current fiscal year.

ANNOUNCEMENTS Next Board of Directors meeting is April 14, 2009, 5:30 p.m. at Riverview United Methodist Church. Next Action Team meeting is April 14, 2009, 7:00 p.m. at Riverview United Methodist Church.

ADJOURNMENT There being no further business, the meeting was adjourned at 9:34 p.m.


Mark Nathan Lee
Secretary

Approved (date) _____

Merrie M. Crawford, President

My Friends Place
Workshop to Write Values, Mission, and Vision Statements
January 31, 2009

Following are **DRAFTS** as a result of the group work done on values, mission, and vision statements on Saturday, January 31, 2009. Participants will share thoughts and comments with each other and other interested individuals in the next few weeks, after which the statements will be finalized and adopted.

Values

- *My Friends Place* affirms the inherent worth, dignity and potential of each individual.
- *My Friends Place* acts and serves with integrity.
- *My Friends Place* reaches out to all with compassion.

Mission

My Friends Place offers a safe and welcoming environment for homeless youth 13 through 17 years of age, providing resources and increasing the availability and accessibility of services for these youth and those at risk of homelessness.

Vision

Thriving Community...

Healthy Families...

Supported Youth...

...Envisioning a future without youth homelessness