Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2020 Open to Public Inspection

A	For the 202	0 calendar year, or tax year beginning $10/01/20$, and ending $10/30/2$	21						
В	Check if applicabl	2: C Name of organization		D Employer	r identification number				
\Box	Address change								
		Doing business as SafeHouse Center	38-2121751						
Ш	Name change	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number					
	Initial return	4100 Clark Road		734-9	973-0242				
	Final return/	City or town, state or province, country, and ZIP or foreign postal code							
	terminated	Ann Arbor MI 48105		G Gross rece	eipts\$ 3,149,103				
Ш	Amended return	F Name and address of principal officer:							
	Application pendi	Kimberli Montgomery	H(a) Is this a gro	roup return for subordinates Yes X No					
		4100 Clark Rd	H(b) Are all sub	ordinates incl	uded? Yes No				
		Ann Arbor MI 48105	M SAMOON AND CONTRACT		See instructions				
_			1						
	Tax-exempt sta		·		_				
_	Website:	www.safehousecenter.org	H(c) Group exe						
	Form of organiza		ear of formation: 1	9/6	M State of legal domicile: MI				
P		Summary							
77.78		describe the organization's mission or most significant activities:							
ည		To provide safety, support, advocacy and resources for survivors of sexual							
nar		assault and domestic violence and their children, and to work relentlessly							
/er	to	change the systems and attitudes that allow this a	abuse to	contin	ue.				
ó	2 Check	this box if the organization discontinued its operations or disposed of more than	25% of its net	assets.					
- ಇ		er of voting members of the governing body (Part VI, line 1a)			18				
es		er of independent voting members of the governing body (Part VI, line 1b)		4	18				
ŧ	5 Total	umber of individuals employed in calendar year 2020 (Part V, line 2a)		. 5	72				
Activities & Governance					87				
A					07				
		inrelated business revenue from Part VIII, column (C), line 12			0				
	b Net ur	related business taxable income from Form 990-T, Part I, line 11	Prior Yea		Current Year				
	8 Contri	outions and grants (Part VIII, line 1h)	3,130		3,056,931				
ile.	9 Progra		3,130	, 307	0,000,001				
Ver			-	2,617	F 003				
Revenue	10 invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)		,979	-5,803				
		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			69,063				
-		evenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,194		3,120,191				
		and similar amounts paid (Part IX, column (A), lines 1–3)	144	715	149,238				
	14 Benefi	ts paid to or for members (Part IX, column (A), line 4)			0				
es	15 Salari	es, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,280	,840	2,297,316				
Sus	16aProfes	sional fundraising fees (Part IX, column (A), line 11e)			0				
Expenses	b Total f	es, other compensation, employee benefits (Part IX, column (A), lines 5–10) sional fundraising fees (Part IX, column (A), line 11e) undraising expenses (Part IX, column (D), line 25) 281,690							
Ш	17 Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,973	660,265				
	18 Total 6	xpenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,998	3,528	3,106,819				
	19 Reven	ue less expenses. Subtract line 18 from line 12	196	, 455	13,372				
Net Assets or Fund Balances			Beginning of Cur	rent Year	End of Year				
sets	20 Total a	ssets (Part X, line 16)	4,342	716	4,215,478				
ABB	21 Total I	abilities (Part X, line 26)		,580	316,608				
E.E.	22 Net as	sets or fund balances. Subtract line 21 from line 20	3,798	3,136	3,898,870				
P	art II	Signature Block							
_		of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to	the best of	my knowledge and belief, it is				
		d complete. Declaration of preparer (other than officer) is based on all information of which prepare			,ago ana bonon n				
-		(I love			5-23-22				
Sig	ın D	Signature of officer		Date	1 45 00				
He		The second secon	ce Dire						
пе	ie	Type or print name and title	ce Dire	0101					
	Deletion	33 ▼ ■ ** Continue ** CANCEST 1981 195, VESST Web. (PoweredS)	Data	The second second	U. DTIN				
D-'		ype preparer's name Preparer's signature	Date	Check	if PTIN				
Pai	DITE	n R. Dixon	05/23	/22 self-em					
	parer Firm's		F	irm's EIN ▶	38-2706146				
Use	Only	1450 Eisenhower Place							
	Firm's	address ▶ Ann Arbor, MI 48108-3283	P	hone no.	734-769-1331				
May	the IRS dis	cuss this return with the preparer shown above? See instructions			Y Yes No				

	990 (2020) Domestic Violence Project 38-2121751			age <u>6</u>	
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule C			X	
	Check if Schedule O contains a response or note to any line in this Part VI				
ec	tion A. Governing Body and Management		Yes	No	
١	Enter the number of voting members of the governing body at the end of the tax year		103	100	
ıa	If there are material differences in voting rights among members of the governing body, or	1			
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain on Schedule O.	14.			
b	Enter the number of voting members included on line 1a, above, who are Independent 1b 18				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with				
-	any other officer director tryates or key employee?				
3	Did the organization delegate control over management duties customarily performed by or under the direct				
•	supervision of officers, directors, trustees, or key employees to a management company or other person?				
ı	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?	5		X X X	
,	Plattle annual of the bound of the bound of the library	6		X	
' 'a	Did the organization have members or stockholders, or other persons who had the power to elect or appoint	, i			
4	one or more members of the governing body?	7a		X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,				
~	stockholders, or persons other than the governing body?	7ь		Χ	
3	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow	ing:		51.34 ¹ .4	
a	The governing body?	8a	Х		
b	Each committee with authority to act on behalf of the governing body?	8b	X		
)	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 on Schedule O	9		X	
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.)		
			Yes	No	
)a	Did the organization have local chapters, branches, or affiliates?	10a		Х	
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?				
1a	the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?		Χ		
b	cribe in Schedule O the process, if any, used by the organization to review this Form 990.			٠.	
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Χ		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"				
	describe in Schedule O how this was done	12c	Χ		
3	Did the organization have a written whistleblower policy?	13	X		
1	Did the organization have a written document retention and destruction policy?	14	Х		
5	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?	2.5			
а	The organization's CEO, Executive Director, or top management official	15a	Х		
b	Other officers or key employees of the organization	15b	Х		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
a	Did the organization invest in, contribute assets to, or participate in a Joint venture or similar arrangement		- 1		
	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		Ī		
	organization's exempt status with respect to such arrangements?	16b			
ec	tion C. Disclosure				
,	List the states with which a copy of this Form 990 is required to be filed ▶MI	,			
3	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, If applicable), 990, and 990-T (Section 501(c)				
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.				
	Own website Another's website X Upon request Other (explain on Schedule O)				
)	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and				
	financial statements available to the public during the tax year.				
)	State the name, address, and telephone number of the person who possesses the organization's books and records >				

4100 Clark Rd

MI 48105

Cynthia Jones

Ann Arbor

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (C) Unrelated (D) Revenue excluded (B) Related or exempt function revenue from tax under sections 512-514 Gifts, Grants Ilar Amounts 1a Federated campaigns 1a **b** Membership dues _____ 1b c Fundraising events 1c 77,407 d Related organizations 1d Contributions, and Other Sim e Government grants (contributions) 1,801,017 1e f All other contributions, gifts, grants, and similar amounts not included above 1,178,507 1f 54,895 1g q Noncash contributions included in lines 1a-1f 3,056,931 h Total. Add lines 1a-1f Business Code Program Service f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 2,431 2,431 Income from investment of tax-exempt bond proceeds Royalties (I) Real (II) Personal 54,705 6a Gross rents b Less: rental expenses 6b 54,705 C Rental inc. or (loss) 6c 54,705 Net rental income or (loss) 7a Gross amount from (I) Securitles (ii) Other sales of assets other than inventory Other Revenue b Less: cost or other 7b 8,234 basis and sales exps. -8,234c Gain or (loss) 7c -8.234d Net gain or (loss) 8a Gross income from fundraising events (not including \$ 77, 407 of contributions reported on line 1c). See Part IV, line 18 20,678 8a b Less: direct expenses 678 8b c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses 9b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a **b** Less: cost of goods sold 10b c Net income or (loss) from sales of inventory . **Business Code** 900099 14.358 14,358 Miscellaneous Income d All other revenue Total. Add lines 11a-11d 14,358 Total revenue. See instructions 3,120,191 63,260 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 (A) Total expenses (B) Program service (D) Fundraising Do not include amounts reported on lines 6b. Management and 7b. 8b. 9b. and 10b of Part VIII. expenses expenses general expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 149,238 149,238 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals, See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 215,473 90,206 77.157 48,110 trustees, and key employees 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 735,909 500,585 105,668 129,656 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 435 Other employee benefits 189,031 157,508 8,088 156,903128,663 14.120 Payroll taxes 10 Fees for services (nonemployees): Management Legal 31,412 31,412 Accounting Lobbying Professional fundraising services. See Part IV, line 1 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, column 9,993 (A) amount, fist line 11g expenses on Schedule O.) 84,357 65,275 9,089 2,473 10,644 13,117 12 Advertising and promotion 145,937 110,066 14,285 586 13 Office expenses Information technology 3,599 3,095 288 14 Royalties 15 284. 710 276. 571 426 2,713 Occupancy 16 429 4,167 738 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials .654 .654 19 Conferences, conventions, and meetings 10,411 10,411 20 Payments to affiliates _____ 21 221 Depreciation, depletion, and amortization 22,102 21,439 442 22 36,801 796 34,755 Insurance Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 18,830 18,830 Direct benefit to donors 420 474 3,168 b Miscellaneous d e All other expenses 2,545,686 279,443 281,690 3,106,819 25 Total functional expenses. Add lines 1 through 24e . Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720) Form 990 (2020)

Part X Balance Sheet

	Check if Schedule O contains a response	or note to any lin	e in this Part X			
				(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing			189	1	121
2				724,313	2	380,752
3				262,567	3	322,134
4	Accounts receivable, net				4	
5	Loans and other receivables from any current or former officer, director,				1.13	A THE STREET
	trustee, key employee, creator or founder, substantial contributor, or 35%				44	Aleberta Control
	controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined				5	
6					:1- <u>7</u> 12	[[基本]]] 李本[[文]]
छ	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)				6	
Assets				7		
₹ 8			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		8	
9			****************	26,502	9	34,167
10	a Land, buildings, and equipment: cost or other	·····	***************************************	1975年,1966年中的1976年	11/17/	ANGER WATER TO BE
'	basis, Complete Part VI of Schedule D	10a	355,432	576 3 184 404 45	Sign.	
	b Less: accumulated depreciation	10b	171,568	72,572	10c	183,864
11				163,231	11	176,808
12		 11	*****************	200,202	12	2,0,000
13		· · · · · · · · · · · · · · · · · · ·	7/		13	
14					14	
15				3,093,342	15	3,117,632
16		l line 33)		4,342,716		4,215,478
17				196,647	17	122,187
18	Accounts payable and accrued expenses Grants payable			1907011	18	122,107
19					19	
20	- 41 10 100				20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
						To the state of th
.≝ "						
Liabilities 23	trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				22	
5 23		od third parties	· · · · · · · · · · · · · · · · · · ·	205,046		194,421
24		third parties		142,887	24	194,421
25				142,007	24	
25	parties, and other liabilities not included on lines					
	•		25			
20	of Schedule D			544,580	25 26	316,608
26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, che	-le bana V		344,300	20	310,000
8		ck nere 🔽				
Ĕ	and complete lines 27, 28, 32, and 33.			E02 270		(7(711
E 27	Net assets without donor restrictions			583,279 3,214,857		676,744 3,222,126
열 28				<u> </u>	28	3,222,126
ا ق	Organizations that do not follow FASB ASC 958, check here ▶					
Net Assets or Fund Balances 32 32 35	and complete lines 29 through 33.					
<u>29</u>	Capital stock or trust principal, or current funds				29	
g 30				30		
₹ 31		0 700 100	31	2 000 050		
를 32		3,798,136				
<u> 33</u>	Total liabilities and net assets/fund balances			4,342,716	33	<u>4,215,478</u>