SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2012

Open to Public

Inspection

Employer identification number

THE WIDOW'S MITE DOING BUSINESS AS LAS VEGAS CATHOLIC WORKER 88-0486834 PART 1, LINE 1: \$41,525 OF THIS IS NONCASH CONTRIBUTIONS (DONATED FOOD, ETC.) PART 1, LINE 2: THIS IS MONEY COLLECTED FROM HOSPITALITY HOUSE GUESTS TO HELP WITH HOUSE EXPENSES (RENT DONATION) PART 1, LINE 6 -B,-C & -D: GROSS INCOME FROM FUNDRAISING EVENTS: THIS IS ALL REVENUE AND EXPENSES FROM EMPTY BOWL BENEFIT EVENT AT GREEN VALLEY HIGH SCHOOL ON MARCH 10, 2012. PART 1, LINE 16, OTHER EXPENSES: \$71,095. DIRECT PURCHASES OF FOOD, BOWLS, ETC. FOR SOUPLINE: \$42,821 / OFFICE SUPPLIES: \$2,578 / PURCHASES FOR FOOD BASKET PROGRAM: \$9,210 / FOOD PURCHASED FOR HOSPITALITY HOUSE GUESTS: \$2,373 / HOSPITALITY DAY MEAL EXPENSES: \$1,189 / HELP TO OTHERS (INDIVIDUALS AND GROUPS): \$3,278 / GUEST EXTRACTIONS, COST OF REMOVING GUEST FROM HOUSEHOLD: \$725 / COSTS OF EMPTY LOT AT 710 WILSON: \$143 / COSTS OF VEHICLE (1998 MOUNTAINEER): \$5,603 / VOLUNTEER SUPPORT: \$1,680 / POSTAGE: \$481 / OTHER: \$1,014 PART 2, LINE 26, OTHER LIABILITIES: \$9,695 / OWED TO THESE BARTLETT AVE. TENANTS FOR REPAIRS AND MAINTENANCE: CATHOLIC WORKER FRANCIS HOUSE RESERVE: \$2,564 / POVERELLO HOUSE: \$1,948 / PACE E BENE: \$1,723 / NEVADA DESERT EXPERIENCE: \$2,710 / CREDIT CARDS PAYABLE (LIABILITY): B OF A VISA: \$50, SW AIR VISA: \$700 PART 3, LINE 31, OTHER PROGRAM SERVICES: \$3,278, THESE FUNDS WERE GIVEN TO INDIVIDUALS TO HELP WITH TRANSPORTATION, RENT, FOOD, LAUNDRY, ETC. AND ALSO TO NON-PROFIT GROUPS. PART 4, OFFICERS AND KEY EMPLOYEES: EACH OF THE FOUR COMMUNITY MEMBERS WHO RUN THE CATHOLIC WORKER (JOHN YEVTICH, KATIE KELSO, GARY CAVALIER AND JULIA OCCHIOGROSSO) RECEIVE ROOM, BOARD, USE OF A VEHICLE, AND A SMALL WEEKLY STIPEND OF \$50 PER WEEK. ADDITIONAL COSTS SHOWN ON GARY AND JULIA'S SALARIES ARE REIMBURSEMENT COSTS FOR THEIR PERSONAL VEHICLE. THE PROCESS FOR REVIEWING FORM 990 IS AS FOLLOWS: A YEAR END STATEMENT OF FINANCES IS SUBMITTED TO THE BOARD OF DIRECTORS BY THE TREASURER FOR COMMENTS, CORRECTIONS AND APPROVAL, THEN THE TREASURER USES THIS INFORMATION TO COMPILE THE FORM 990 AND OTHER NECESSARY SCHEDULES IN CONSULTATION WITH DIRECTORS KNOWLEDGEABLE ABOUT ACCOUNTING AND WITH OTHER KEY EMPLOYEES, THE COMPLETED FORM 990 IS APPROVED BY THE PRESIDENT, SECRETARY AND TREASURER AND SIGNED AND SUBMITTED BY THE TREASURER. COPIES ARE AVAILABLE AT OUR OFFICE AND ON OUR WEBSITE. NO OFFICER, DIRECTOR, OR KEY EMPLOYEE HAS A BUSINESS RELATIONSHIP WITH ANOTHER DIRECTOR, OFFICER OR KEY

(CONTINUED ON NEXT PAGE)

Schedule O (Form 990 or 990-E Name of the organization	Z) (2012)				Pa Employer identification number
THE WIDOW'S MITE DOIN	G BUSINESS AS LAS	VEGAS CATHOLIC	WORKER		88-0486834
THE WIDOW 3 WITE DOIN	O DUSINESS AS EAS	VLGAS CATHOLIC	WORKER		00-0400034
(CONTINUED FROM PAGE	1)				
EMPLOYEE. THERE ARE I	FAMILY RELATIONSH	IIPS BETWEEN KEY	EMPLOYEES: TR	EASURER GARY CA	VALIER IS MARRIED TO
BOARD MEMBER JULIA C	OCCHIOGROSSO AND	THEY ARE BOTH	KEY EMPLOYEES	AS WELL. KEY EMPI	LOYEES JOHN YEVTICH AND
KATIE KELSO ARE A COL	JPLE. PRESIDENT DA	LE DEVITT IS MARI	RIED TO BOARD M	EMBER MARGARET	DEVITT. BOARD MEMBERS
MARGARET BEAN AND G	EORGE BEAN ARE M	IARRIED. SECRETA	RY MARK KELSO	IS THE FATHER OF	KEY EMPLOYEE KATIE KELSO.
THE PROCESS OF DETER	MINING COMPENSAT	TION FOR EXECUTIV	VE DIRECTOR(S):	THERE ARE FOUR C	CO-DIRECTORS WHO RECEIVE
ROOM, BOARD, USE OF A	CAR AND A \$50 PER	R WEEK STIPEND. T	HIS COMPENSATI	ON IS DECIDED AND	O APPROVED BY THE BOARD
OF DIRECTORS. AT THIS	POINT THERE ARE N	O OTHER KEY EMP	LOYEES BESIDE 1	HESE FOUR CO-DIF	RECTORS. THERE ARE FOUR
FORMERLY HOMELESS G	UESTS WHO RECEIV	/E STIPENDS BETW	EEN \$10 AND \$100	PER WEEK FOR HE	ELPING WITH OUR PROJECTS.
JULIA OCCHIOGROSSO A	ND GARY CAVALIER	ALSO RECEIVED C	OMPENSATION F	OR THE COSTS OF	THEIR PERSONAL VEHICLE
DURING 2012, THAT IS WE	HY THEIR SALARY IS	MORE THAN THE \$	50 STIPEND PAID	EACH WEEK.	
	THIS IS THE END	OF SCHEDULE O F	OR FORM 990 FO	R THE YEAR 2012	

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule O (Form 990 or 990-EZ), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/form990.

Purpose of Schedule

An organization should use Schedule O (Form 990 or 990-EZ), rather than separate attachments, to provide the IRS with narrative information required for responses to specific questions on Form 990 or 990-EZ, and to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990 or 990-EZ.

Do not use Schedule O to supplement responses to questions in other schedules of the Form 990 or 990-EZ. Each of the other schedules includes a separate part for supplemental information.

Who Must File

All organizations that file Form 990 and certain organizations that file Form 990-EZ must file Schedule O (Form 990 or 990-EZ). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 11b and 19. If an organization is not required to file Form 990 or 990-EZ but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

Specific Instructions

Use as many continuation sheets of Schedule O (Form 990 or 990-EZ) as needed.

Complete the required information on the appropriate line of Form 990 or 990-EZ prior to using Schedule O (Form 990 or 990-EZ).

Identify clearly the specific part and line(s) of Form 990 or 990-EZ to which each response relates. Follow the part and line sequence of Form 990 or 990-EZ.

Late return. If the return is not filed by the due date (including any extension granted), attach a separate statement giving the reasons for not filing on time. Do not use this schedule to provide the latefiling statement.

Amended return. If the organization checked the Amended return box on Form 990, *Heading*, item B, or Form 990-EZ, *Heading*, item B, use Schedule O (Form 990 or 990-EZ) to list each part or schedule and line item of the Form 990 or 990-EZ that was amended.

Group return. If the organization answered "Yes" to Form 990, line H(a), but "No" to line H(b), use a separate

attachment to list the name, address, and EIN of each affiliated organization included in the group return. Do not use this schedule. See the Instructions for Form 990, I. Group Return.

Form 990, Parts III, V, VI, VII, IX, XI, and XII. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions in the Form 990.

- 1. Part III, Statement of Program Service Accomplishments.
 - a. "Yes" response to line 2.
 - b. "Yes" response to line 3.
 - c. Other program services on line 4d.
- 2. Part V, Statements Regarding Other IRS Filings and Tax Compliance.
 - a. "No" response to line 3b.
 - b. "Yes" or "No" response to line 13a.
 - c. "No" response to line 14b.
- 3. Part VI, Governance, Management, and Disclosure.
- a. Material differences in voting rights among members of the governing body in line 1a.
- b. Delegation of governing board's authority to executive committee.
 - c. "Yes" responses to lines 2 through 7b.
- d. "No" responses to lines 8a, 8b, and 10b.
 - e. "Yes" response to line 9.
- f. Description of process for review of Form 990, if any, in response to line 11b.
 - g. "Yes" response to line 12c.
- h. Description of process for determining compensation in response to lines 15a and 15b.
- i. If applicable, in response to line 18, an explanation as to why the organization checked the "Other" box or did not make any of Forms 1023, 1024, 990, or 990-T publicly available.
- j. Description of public disclosure of documents in response to line 19.
- 4. Part VII, Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors.
- a. Explain if reporting of compensation paid by a related organization is provided only for the period during which the related organization was related, not the entire calendar year ending with or within the tax year, and state the period during which the related organization was related.
- b. Description of reasonable efforts undertaken to obtain information on compensation paid by related organizations, if the organization is unable to obtain such information to report in column (E).
- 5. Explanation for Part IX, Statement of Functional Expenses, line 11g (other fees

for services), including the type and amount of each expense included in line 11g, if the amount in Part IX, line 11g, exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

- 6. Explanation for Part IX, Statement of Functional Expenses, line 24e (all other expenses), including the type and amount of each expense included in line 24e, if the amount on line 24e exceeds 10% of the amount in Part IX, line 25 (total functional expenses).
- 7. Part XI, Reconciliation of Net Assets. Explain any other changes in net assets or fund balances reported on line 9.
- 8. Part XII, Financial Statements and Reporting.
- a. Change in accounting method or description of other accounting method used on line 1.
- b. Change in committee oversight review from prior year on line 2c.
 - c. "No" response to line 3b.

Form 990-EZ, Parts I, II, III, and V. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions:

- 1. Part I, Revenue, Expenses, and Changes in Net Assets or Fund Balances.
- a. Description of other revenue, in response to line 8.
- b. List of grants and similar amounts paid, in response to line 10.
- c. Description of other expenses, in response to line 16.
- d. Explanation of other changes in net assets or fund balances, in response to line 20.
 - 2. Part II, Balance Sheets.
- a. Description of other assets, in response to line 24.
- b. Description of total liabilities, in response to line 26.
- 3. Description of other program services in response to Part III, Statement of Program Service Accomplishments, line 31.
 - 4. Part V, Other Information.
 - a. "Yes" response to line 33.
 - b. "Yes" response to line 34.
- c. Explanation of why organization did not report unrelated business gross income of \$1,000 or more to the IRS on Form 990-T, in response to line 35b.

Other. Use Schedule O (Form 990 or 990-EZ) to provide narrative explanations and descriptions in response to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.



Do not include on Schedule O (Form 990 or 990-EZ) any social security number(s), because this **CAUTION** schedule will be made available