Form 990

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.

A For the 2015 calendar year, or tax year beginning Jul 1, 2015, and ending Jun 30, 2016

B Check if applicable:

<table>
<thead>
<tr>
<th>Address change</th>
<th>Name change</th>
<th>Initial return</th>
<th>Final return/terminated</th>
<th>Amended return</th>
<th>Application pending</th>
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C Name of organization

BETHESDA PROJECT

Doing business as

D Employer Identification number

23-2220933

E Telephone number

(215) 985-1600

F Name and address of principal officer:

TINA PAGOTTO 1628-30 South St Philadelphia PA 19146

G Gross receipts

$5,059,161

Mailing address:

PHILADELPHIA
PA 19146

H 1) Is this a group return for subordinates? Yes No

I Website:

www.bethesdaproject.org

J Tax-exempt status

X 501(c)(3)

K Forms of organization

X Corporation

L Year of formation

1979

M State of legal domicile

PA

Part I - Summary

1 Briefly describe the organization’s mission or most significant activities: PROVIDING SHELTER AND SUPPORTIVE SERVICES

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)

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

5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 34

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other income (Part VIII, column (A), lines 5, 6d, 6e, 9c, 10c, and 11e)

12 Total revenue – add lines 9 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a Professional fundraising expenses (Part IX, column (A), line 11e)

16b Total fundraising expenses (Part IX, column (D), line 25)

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

Part II - Signature Block

Signature of officer:

TINA PAGOTTO

Date

01/31/17

CHIEF EXECUTIVE OFFICER

Paid Preparer Use Only

Print/Type preparer’s name

Edward A. Suarez, CPA, MBA

Preparer’s signature

02/27/17

Check if self-employed

PTIN

P00018408

Firm’s EIN

22-3191317

Firm’s address

387 Haddon Avenue

Collingswood NJ 08108

Phone no.

(856) 858-7887

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

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEA0101 10/12/15

Form 990 (2015)