Forr Depa	n 9	E4OF 90 the Treasur		UNTING PERIOD Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private found 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 2017 Open to Public			
			alendar v	year, or tax year beginning 07/01/16, and ending 06/30/17		as acres,	***		
	Check if a			organization	D Employe	r Identification number	- F		
~ `	Address c			HOPE STREET MINISTRY INC.	İ		7		
=	Doing business as 05-0627081								
ऱ'	Name change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number								
_	Initial retur			WEST CAPITOL DRIVE	414-	445-5404	_ ~		
	Fınal retur terminated		City or to	own, state or province, country, and ZIP or foreign postal code			. c		
	Amended		_	WAUKEE WI 53206	G Gross rec	eipts \$ 169,15	1 7		
=				nd address of principal officer H(a) Is this a gr	oun return for s	ubordinates? Yes X N	lo 3		
	Application	n penaing :		G HEINEN	•	<u> </u>	. 8		
				25 W. TERRYWOOD CT			lo "		
				72322	" attach a list	(see instructions)			
1	Тах-ехеп	npt status		501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527			•		
<u> </u>	Website:	► W		DPESTREETMINISTRY . ORG H(c) Group exe		1	=		
_		rganization			2005	M State of legal domicile W	Ξ ∢		
單是	arti		ımmary	e organization's mission or most significant activities			_		
WE ARE A CHRISTIAN MINISTRY PROVIDING TRANSITIONAL HOUSING AND CHRISTIAN DISCIPLESHIP 2 Check this box I 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 2017 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 6 0									
Act	6 7	otal num	nber of vo	lunteers (estimate if necessary)	6	0	~ J		
•	7a ∃	Fotal unre	elated bus	siness revenue from Part VIII, column (C), line 12	7a		<u>0</u> 31		
	bi	Net unrela	ated busir	ness taxable income from Form 990-T, line 34	7b		<u>o</u> ,		
				Prior Ye		Current Year	_		
e			_		9,599	109,02	_		
Revenue	9 F	rogram	service re	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	7,040	56,04	<u>ਵ</u>		
Ş				(Part VIII, column (A), lines 3.4, and (7d)) 8 2012	<u> </u>	4 00	<u>5</u>		
_	1			rt VIII, column (A), lines/5, 6d; 8c, 9c, 10c, and 11e)	6,110	4,08			
					2,749	169,15	Ξ		
				amounts paid (Part IX, column (A), lines 1-3)			Ä		
	1			for members (Part IX, column (A), line 4)	0 014	117 00	ř		
es				· · · · · · · · · · · · · · · · · · ·	8,214	117,08	<u> </u>		
Expenses	<u> </u>			aising fees (Part IX, column (A), line 11e)	a sa a a sa a sa a sa a sa a sa a sa a		U U		
χ			-			न दे के प्रतास के के बेट के प्रतास के के के क्षित के किया है जिस के किया के किया के किया के किया के किया के कि असी प्रतास के किया किया किया किया किया के किया के किया के किया के किया के किया किया के किया के किया के किया कि			
					2,819		_		
	j				1,033				
_ v	19 F	Revenue	less expe		1,716		<u>/</u>		
ts o	20 -	Fotal acc	ete (Dart)	X, line 16) Beginning of Cu	4,339	End of Year 832,98	Ω_		
Balis	20		•		8,457				
Net Assets or Fund Balances	21		•		5,882				
	artii			balances Subtract line 21 from line 20 79 Block	5,002	141,13	<u> </u>		
Ur	nder per	nalties of p	perjury, 1 de	eclare that I have examined this return, including accompanying schedules and statements, and to the be eclaration of preparer (other than officer) is based on all information of which preparer has any knowledge	e		<u>-</u>		
			J.J.	y' . Y	2/	14/18	_		
Sig		ľ's	ignature of c		Date				
He	re	 		S HEINEN PRESIDENT			_		
		1 7 '	, po or print	/					

Print/Type preparer's name Check if PTIN Paid 02/06/18 self-employed P00858577 SCOTT R. KRAUSE, CPA Preparer ASSOCIATES 26-3053349 GROTH Firm's EIN **Use Only** CROSSROADS CIR STE 200 20875 262-798-3520 X Yes No Form 990 (2017) 53186-4052 WAUKESHA, WI Phone no May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions DAA

4d	Other program services (Describe in Sci	nedule O)			
	(Expenses \$ 157,495	including grants of \$) (Revenue \$	56,048)	
4e	Total program service expenses ▶	157,499			

Part V Checklist of Required Schedules

	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		₹.
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	١.		х
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		х
c	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7		-		
′	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	 '-		
0	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	-		
3	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted	<u> </u>		
Ū	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			145年
•	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	Patelu, sti. ve	CHECKEN CO.	i Mai Canti parenti
_	complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year? If			:
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	1		
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
_	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	 _	X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			.
_	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	 	X
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
_	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	_	X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			.
_	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		x
	If "Yes," complete Schedule G, Part III	19		<u> </u>

Part IV Checklist of Required Schedules (continued) Yes No X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated X employees? If "Yes," complete Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b X through 24d and complete Schedule K If "No," go to line 25a 24a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? X If "Yes," complete Schedule L. Part I 25b 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L. Part III 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV а 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 or IV. and Part V. line 1 34 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable X related organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X Part VI 37 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

19? Note. All Form 990 filers are required to complete Schedule O

Enter the number reported in Box 3 of Form 1088 Enter -0- if not applicable □ Their the number of Forma W-25 included in line. 1s Enter -0- if not applicable □ Did the organization comply with bedup withholding nice for reportable payments to vendors and reportable gamming (pambhing) wernings to price with mine of the properties of	e rea	Check if Schedule O contains a response or note to any line in this Pa	rrt V			
be Enter the number of Forms W-2G included in hine 1s Enter -0-1 flot applicable Did the organization comply with backup withfolding nucles for reportable payments to vendors and reportable gaining (gambhag) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, fled for the calendary ear ending with or within the year covered by this return by at least one is reported on len 22, and the organization file all required laderal employment tax returns? Note. If the sum of fines 1 and 52, and the organization file all required laderal employment tax returns? Note. If the sum of fines 1 and 52, and the organization file all required to-file (see instructions) If 1'ves, 'nate like a Form 99-1' for the year' If 1've' faile 35, provide an explanation on Exclude to 1 If 'ves,' for the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foregring country (such as a bank account), securities accountly. If 'ves,' for the name of the foreign country If year inter the name of the foreign country (such as a bank account) securities accountly. If 'ves,' for the name of the foreign country If 'ves,' for the organization aparty to a prohibited tax shelter transaction at any time during the tax year? Did any trivable party northy the organization file Foreign Bank and Financial Accounts (FEAR) If 'ves,' for the organization interior was or a party to a prohibited tax shelter transaction? Did the organization account an explanation may be a prohibited tax shelter transaction? Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization interior was often as a party to a prohibited tax shelter transaction? Did the organization receive a contribution anders section 170(c). If 'ves,' for the organization interior was organized to the organization receive and prohibited transaction and party for goods and sences provided to the payor		`	1 I	ाट रहा	Yes	No
c Did the organization comply with backup withholding rules for reportable gaming (gatheling) winnings to prize winnings? 2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, flee for the calendar year ending with or within the year covered by this return 1 at least on is reported on line 2, and the organization file all required debrard amplyment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 but the organization have unreaded business gross income of \$1,000 or more during the year? 3 a. 3 but the organization have unreaded business gross income of \$1,000 or more during the year? 3 a. 4 At any time during the calendar year, diff the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FIGAR) 5 but "Yes," enter the name of the foreign country 5 see instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FIGAR) 6 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5 but any taxable party noify the organization that it was or is a party to a prohibited tax shelter transaction? 6 but any taxable party noify the organization that it was or is a party to a prohibited tax shelter transaction? 6 but the organization have amusal gross recepts that are normally greater than \$100,000, and did the organization have a musal gross recepts that are normally greater than \$100,000, and did the organization have amusal gross recepts that are normally greater than \$100,000, and did the organization have amusal gross recepts that are normally greater than \$100,000, and did the organization are party and party as a contributions or gritten were not tax deductible? 6 but the organization have amusal gross recepts that are normally greater than \$100,000, and did the organi	1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a			
Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 1 at least one is reported on line 2a, did the organization file all required decide employment tax returns? 7 Note. If the sum of lines is and 2a is greater than 250, you may be required to e-file (see instructions) 8 Ut the organization have unrelated businesses gross in 150, you may be required to e-file (see instructions) 8 Ut If 'Yea', I have filed a Form 990 or for this year'? If 'Yo' form 93, provide an explanation in Schedule O 8 If 'Yea', Tax is filed a Form 990 or retired country (see organization have an interest in, or a signature or other authority over, a financial account in a foreign country (see his a bank account); ever, a financial account in a foreign country (see his country) 8 If 'Yea', enter the name of the foreign country \in See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FEAR) 1 If 'Yea', include the name of the foreign country \in See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts 1 If 'Yea', include the side of the degracation that it was or is a party to a prohibited fax shelter transaction? 9 If 'Yea', include the organization have anount gross recepts that are normally greater than \$100,000, and did the organization social any contributions that were not tax deductible as charitable contributions? 1 If 'Yea', include the organization include with every solutation an express statement that such contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible as charitable contributions and services prowded to the payor? 1 Organizations that may receive deductible contributions under section 170(c). 2 If the organization service a payment in excess of \$75 made party as a contribution and partyly for years and services prowded to the payor?	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b			
28 Eiter the number of employees reported on Form W-3, Transmitted Of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 1 at least one is reported on line 2a, did the organization file all required federal employment tax returns? 28 The Content of the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 30 Did the organization have unrelated business gross income of \$1.00 or more during the year? 31 If Yes, I has it filed a Form 990-T for this year? If Yol' to line 3b, provide an explanation in Schedule O 32 At any time during the calendar year, of the organization have an interest in, or a significant or other authority over, a financial account in a foreign country (such as a bank account, securities account; or other financial accounts over, a financial account in a foreign country (such as a bank account, securities account, or other financial Accounts (FEAR) 31 West the organization appropriate of the firm 114, Report of Foreign Bank and Financial Accounts (FEAR) 32 Was the organization appropriate in the it was or is a party to a prohibited tax sheller transaction? 33 Uses the organization appropriate in the it was or is a party to a prohibited tax sheller transaction? 34 Uses the organization and party to a prohibited tax sheller transaction? 35 Uses the organization and prose recipits that are normally greater than \$100,000, and did the organization solicit ary contributions that were not tax deductible as charitable contributions? 35 Uses the organization solicit ary receive deductible contributions and services provided to the payor? 36 Uses the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 36 Uses the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 37 Organization shall excess the property of the goods or services provided	С					
Statements, filed for the calendar year ending with or within the year covered by this return If all east one is reported on the 2,0 dt the organization file all required federal employment tax returns? Note. If the sum of lines 1 a and 2 as is greater than 250, you may be required to e-file (see instructions) If If Yea's, has if filed a form 950 of for this year? If You'r to fine 32, provide an explanation in Schedule O 3b. If Yea's, has if filed a form 950 of for this year? If You'r to fine 32, provide an explanation in Schedule O 3b. If Yea's in said filed a form 950 of foreign country (such as a bank account, or a signature or other authority over. I a financial account in a foreign country (such as a bank account, securities account, or other financial accounts of filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FGAR) If Yea's four the name of the foreign country ★ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FGAR) If Yea's four the name of the organization file from 886-17 If Yea's four the said is the organization that it was or is a party to a prohibited tax shefter transaction? If Yea's four the said is the organization file from 886-17 Does the organization have annual gross receipts that are normally greater than \$100,000 and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? If Yes's, idd the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). If Yes's, idd the organization may receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7 a. If Yes's, idd the organization in excess of \$75 made party as a contribution and party for which it was required to the organization receive a payment in exce				1c	despire. Note	X
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Note. If the sum of lines 14 and 24 is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has if filed a Form 990-T for this year? If "No" to fine 30, provide an explanation in Schedule O 31. If "Yes," the during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country is who as a bank account, securities account, or other financial accounts of the organization of the foreign of the security of the organization of the financial Accounts (FBAR) If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5.	_					
Did the organization have unrelated business gross income of \$1,000 or more during the year? 38. b If "Yes," has if lifed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 38. At any time during the calendy rear, did the organization have an interest in, or a signature or other authority over, a financial account, a foreign country {such as a bank account, securities account, or other financial accounts {Financial accountry}. b If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts {Financial Acc	b	· · · · · · · · · · · · · · · · · · ·		Contract Con		
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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI \mathbf{X} Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X 9 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10a 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? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 X Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 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 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 15 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a 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 organization's exempt status with respect to such arrangements? Section C. Disclosure NONE 17 List the states with which a copy of this Form 990 is required to be filed ▶ 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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 in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records ASHLEY THOMAS 2522 WEST CAPITOL

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Part VII	Compen	sation of C	officers, Directo	ors, Trustees	Key Employees, Highest Compe	nsated Employees, and
	Independ	dent Contra	actors			

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year

Check if Schedule O contains a response or note to any line in this Part VII

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for	bo of	(C) Position do not check more than one ox, unless person is both an fficer and a director/trustee)		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the			
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(organization and related organizations
(1) JOHN PENCE				_						
	0.00								_	_
DIRECTOR	0.00	X	<u> </u>			 		0	0	0
(2) STEVE MAYER										
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DIRECTOR	0.00	X		<u> </u>	ļ			0	0	0
(3) SUE MAYER	0.00									
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OIRECTOR (4) ROBERT KOEBELE	0.00	X		-	ļ			<u> </u>	0	
(4) ROBERT ROEBELLE	0.00	i								
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(5) SHEILA JONES	0.00	^	 		-	╁╌╂	-			
(0) SHEETIN SONES	0.00			ļ		, ,				
DIRECTOR	0.00	x				1 1		o	0	0
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DIRECTOR	0.00	X						o	0	0
(7) KEVIN MAST				\vdash						
•	0.00									
DIRECTOR	0.00	X		İ				0	0	0
(8) RICHARD WHITTOW										
	0.00									
DIRECTOR	0.00	X						0	0	0
(9) TOYA WASHINGTON	!					1				
	0.00									
DIRECTOR	0.00	X	<u> </u>			[]		0	0	0
(10) LAURA SANDRETTI				ļ		1 1				
	0.00		1	l	}	łł				_
DIRECTOR	0.00	X			_	\vdash		0	0	0
(11) THOMAS TYM	0.00				ļ					
CHORUMARY	0.00			,,	1	[ا م		^
SECRETARY DAA	0.00	Ц	<u> </u>	X	<u> </u>	لـــا		0	0	Form 990 (2017)

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶

05-0627081 Form 990 (2017) HOPE STREET MINISTRY INC. Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue Total revenue Unretated exempt business excluded from tax under sections function 512-514 revenue 1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 109,021 1f g Noncash contributions included in lines 1a-1f 109,021 h Total. Add lines 1a-1f Program Service Revenue Busn Code 56,048 PROGRAM SERVICE 56,048 b f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6a Gross rents **b** Less rental exps c Rental inc or (loss) Net rental income or (loss) 7a Gross amount from (II) Other (i) Secunties sales of assets other than inventory b Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances

b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 3,600 3,600 11a RENTAL b OTHER INCOME 482 d All other revenue 4,082 Total. Add lines 11a-11d 169,151 60,130 Total revenue. See instructions

Form 990 (2017)

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 (B) (D) Do not include amounts reported on lines 6b, Total expenses Program service Fundraising Management and 7b. 8b. 9b. and 10b of Part VIII. expenses general expenses 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 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, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 58,028 97.912 39,884 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 7,745 7,745 Other employee benefits 11.423 6.740 4,683 Payroll taxes Fees for services (non-employees) Management Legal 5,663 5,663 Accounting d Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 482 482 12 Advertising and promotion 3,262 3,262 13 Office expenses 14 Information technology 15 Royalties 30,117 30,117 16 Occupancy Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 1,863 1,863 20 Interest 21 Payments to affiliates 20,193 20,193 22 Depreciation, depletion, and amortization 11,610 11,610 23 Insurance Other expenses Itemize expenses not covered 24 above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 10,235 FUND RAISING EXPENSE 6,756 6,756 MEMBER FOOD SUPPLIES & RE 4,050 4,050 BABY ACORN 4,034 OTHER 4,034 d 5,183 5,183 All other expenses 220,528 157,499 52,31210,717 Total functional expenses. Add lines 1 through 24e 25 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)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 152,954 121,014 Cash-non-interest bearing 1 2 Savings and temporary cash investments Pledges and grants receivable, net 3 5,739 3,837 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 1,184,946 other basis Complete Part VI of Schedule D 10a 725,646 476,809 708,137 b Less accumulated depreciation 10b 10c 11 Investments-publicly traded securities 12 Investments-other securities See Part IV, line 11 12 13 Investments-program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 832,988 884,339 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 11,136 16,440 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 77,321 69,358 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 88,457 85,798 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 781,170 714,678 27 Unrestricted net assets 14,712 28 Temporarily restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 795,882 747,190 33 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 884,339 832,988

orm	990 (2017) HOPE STREET MINISTRY INC. 05-0627081			Pag	<u>je 12</u>
Pa	Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		69,:	
2	Total expenses (must equal Part IX, column (A), line 25)	2		20,!	
3	Revenue less expenses Subtract line 2 from line 1	3		51,:	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7:	<u>95,8</u>	<u> 882</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		2,0	<u>685</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	7	47 ,:	<u> 190</u>
Pa	nt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			re I	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O			超聲	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				電影
ь	Were the organization's financial statements audited by an independent accountant?		2b		X
	if "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audite explain why in Schedule O and describe any stone taken to undergo such audite		36		

SCHEDULE A (Form 990 or 990-EZ)

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public

Internal Revenue Service

Name of the organization

Department of the Treasury

HOPE STREET MINISTRY INC.

Employer identification number 05-0627081

									
P	art I	Reas	on for Public Charity	Status (All organizations	must co	mplete t	this part) See instruction	s	
The	orga	nization is not a	a private foundation because	it is (For lines 1 through 12, ch	eck only or	ne box)			
1		A church, cor	vention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(A)(i).	ng	
2		A school desc	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E (Form	990 or 990)-EZ))		U I	
3	П	A hospital or	a cooperative hospital servic	e organization described in sect	tion 170(b)	(1)(A)(iii)		V 1	
4	П	•	•	in conjunction with a hospital de	•			ital's name.	
		city, and state	- ·	,				,	
5	\Box	•		a college or university owned o	r operated	by a gove	emmental unit described in		
•	ш	-	b)(1)(A)(iv). (Complete Part	- ·	. operates	5, a gove	minuted and accorded in		
6		•		, vernmental unit described in se	ction 170(b)(1)(A)(v	d.		
7	Н	•		ubstantial part of its support fron	•		•		
•	Ч	-	section 170(b)(1)(A)(vi). (Co		a govern	montal an	in or from the gorieral public		
8				70(b)(1)(A)(vi). (Complete Part	II Y				
9	-	•		ribed in section 170(b)(1)(A)(i)	•	in coniiin	ction with a land-grant college		
•	Ш	-	-	agriculture (see instructions)		-			
		university	ar ar the manner grant, some go at	- aga (562 m.eace., _					
10	X	-	on that normally receives (1)	more than 33 1/3% of its suppo	ort from cor	tributions	membership fees, and gross		
	ш	_	-	ot functions—subject to certain					
		support from	gross investment income and	d unrelated business taxable inc	ome (less	section 51	11 tax) from businesses		
	_	acquired by the	ne organization after June 30	, 1975 See section 509(a)(2).	(Complete	Part III)			
11		An organization	on organized and operated e	xclusively to test for public safet	y See sec	tion 509(a)(4).		
12		An organization	on organized and operated e	xclusively for the benefit of, to pe	erform the	functions	of, or to carry out the purposes		
				ations described in section 509					
	Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g								
	a 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.								
	b		• •	pervised or controlled in connect					
				ing organization vested in the sa	ime persor	is that cor	ntrol or manage the supported		
	_		on(s) You must complete	·			طنين لممتحجج والمحجودة والمحجودة والمحجودة		
	С			upporting organization operated ructions) You must complete					
	d		• ,,,	. A supporting organization oper	-		•)	
		_ •		organization generally must sati			• • • • • • • • • • • • • • • • • • • •	•	
		requireme	ent (see instructions) You m	ust complete Part IV, Section	s A and D	, and Par	t V.		
	е	Check the	s box if the organization rece	ived a written determination froi	m the IRS t	hat it is a	Type I, Type II, Type III		
				-functionally integrated supporting	ng organiza	ition			
	f		ber of supported organization					<u> </u>	
	g	Provide the fo	llowing information about the	supported organization(s)	-, -				
(•	e of supported	(ii) EIN	(III) Type of organization		rganization	(v) Amount of monetary	(vi) Amount of	
	on	ganization		(described on lines 1–10 above (see instructions))		ir governing ment?	support (see instructions)	other support (see instructions)	
					Yes	No	110000107	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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Pa	Support Schedule for O	ganizations D	escribed in Se	ections 170(b)	(1)(A)(iv) and 1	170(b)(1)(A)(vi)	<u> </u>
	(Complete only if you cheen Part III If the organization						under
	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge					j	
4	Total. Add lines 1 through 3						·- <u></u>
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support				/		
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on		4				
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (see instructions)				12	
13	First five years. If the Form 990 is for the	organization's first,	second, third, fourt	h, or fifth tax year a	s a section 501(c)(3)	
	organization, check this box and stop here				·		•
Sec	tion C. Computation of Public Su	pport Percent	age				
14	Public support percentage for 2017 (line 6,	column (f) divideď Î	y line 11, column ((f))		14	%
15	Public support percentage from 2016 Scher	dule A, Part II, Jine	14			15	%
16a	33 1/3% support test—2017. If the organic	zation did not∕checl	k the box on line 13	, and line 14 is 33	1/3% or more, chec	ck this	
	box and stop here. The organization qualif						▶ [_
þ	33 1/3% support test—2016. If the organic	zation did not checi	k a box on line 13 o	r 16a, and line 15 i	s 33 1/3% or more	, check	
	this box and stop here . The organization q						▶ [_
17a	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported						
b	organization 10%-facts-and-circumstances test—201 15 is 10% or more, and if the organization resplain in Part VI how the organization meeting the state of the organization of the organ	neets the "facts-and	d-circumstances" te	est, check this box	and stop here.		▶ [_
18	xplain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly apported organization. rivate foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see structions.						

Page 3

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support					·	
Caler	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	233,046	294 990	274 200	309,599	109,021	1 210 863
_		233,040	284,889	274,308	309,399	109,021	1,210,863
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	169,969	140,518	118,657	133,150	60,130	622,424
3	Gross receipts from activities that are not an unrelated trade or business under section 513				 		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge				 		
6	Total. Add lines 1 through 5	403,015	425,407	392,965	442,749	169,151	1,833,287
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						_
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b	rance Senier was street a street a street		Final Professional Supports Laborated Supports	Col (N.) and China demanda (N. 24 del a.)	Designed and particles 176,0% for following	
8	Public support. (Subtract line 7c from line 6)						1,833,287
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	403,015	425,407	392,965	442,749	169,151	1,833,287
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	403,015			442,749		1,833,287
14	First five years. If the Form 990 is for the	•	second, third, fourt	h, or fifth tax year a	s a section 501(c)(3)	. []
	organization, check this box and stop here						▶
	tion C. Computation of Public Su				- 		
15 46	Public support percentage for 2017 (line 8,	• • •		(1))		15	100 00 %
16 Sac	Public support percentage from 2016 Sche tion D. Computation of Investme					16	100.00%
<u>360</u> 17	Investment income percentage for 2017 (lin			olumn (f)		17	%
18	Investment income percentage for 2017 (iii	• •	•	olumii (1 <i>))</i>		18	%
19a	33 1/3% support tests—2017. If the organ			4 and line 15 is mi	ore than 33 1/3%		
u	17 is not more than 33 1/3%, check this bo						► X
b	33 1/3% support tests—2016. If the organ				• •		,)
	line 18 is not more than 33 1/3%, check this						▶ □
20	Private foundation. If the organization did		-	•			▶ 🗌

Page 4

Part IV

Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A. and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)

HOPE STREET MINISTRY INC.

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
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		REPORT A
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10a		
1, 1,		
10b		ľ

- Pai	Ti Vi	Supporting Organizations (continued)	
		·	Yes No
11	Has th	e organization accepted a gift or contribution from any of the following persons?	
а	A pers	on who directly or indirectly controls, either alone or together with persons described in (b) and (c)	
	below,	the governing body of a supported organization?	11a
b	A fami	y member of a person described in (a) above?	116
		controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c
Sect	ion B.	Type I Supporting Organizations	
			Yes No
1		directors, trustees, or membership of one or more supported organizations have the power to	
	_	ly appoint or elect at least a majority of the organization's directors or trustees at all times during the	
	•	n'? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	
		led the organization's activities. If the organization had more than one supported organization,	
		ne how the powers to appoint and/or remove directors or trustees were allocated among the supported	(1)
_		rations and what conditions or restrictions, if any, applied to such powers during the tax year	
2		e organization operate for the benefit of any supported organization other than the supported	
		zation(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	
		providing such benefit carned out the purposes of the supported organization(s) that operated,	
Sact		rised, or controlled the supporting organization Type II Supporting Organizations	2
Seci	1011 C.	Type II Supporting Organizations	Voc. No.
1	\Mara :	a majority of the organization's directors or trustees during the tax year also a majority of the directors	Yes No
1		tees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	
		nagement of the supporting organization was vested in the same persons that controlled or managed	
		pported organization(s)	
Sect		All Type III Supporting Organizations	
			Yes No
1	Did the	e organization provide to each of its supported organizations, by the last day of the fifth month of the	
		zation's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	
		i) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	
	-	zation's governing documents in effect on the date of notification, to the extent not previously provided?	1
2		any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	
	organi	zation(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	
	the org	anization maintained a close and continuous working relationship with the supported organization(s)	2
3	By rea	son of the relationship described in (2), did the organization's supported organizations have a	
	signific	ant voice in the organization's investment policies and in directing the use of the organization's	
	income	e or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	
		ted organizations played in this regard	3
Sect	ion E.	Type III Functionally-Integrated Supporting Organizations	
1		the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ctions)
a	_	e organization satisfied the Activities Test Complete line 2 below	
p	_	e organization is the parent of each of its supported organizations. Complete line 3 below	
С	Th	e organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instructions)
_	A =44. = =	Test Annual (a) and (b) below	CV No
		Test Answer (a) and (b) below.	Yes No
а		bstantially all of the organization's activities during the tax year directly further the exempt purposes of	
		oported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	
		supported organizations and explain how these activities directly furthered their exempt purposes,	
		e organization was responsive to those supported organizations, and how the organization determined	
.		ese activities constituted substantially all of its activities	
b		e activities described in (a) constitute activities that, but for the organization's involvement, one or more	
		organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the is for the organization's position that its supported organization(s) would have engaged in these	
		is for the organization's position that its supported organization(s) would have engaged in these es but for the organization's involvement.	2b
3		of Supported Organizations Answer (a) and (b) below.	
э a		e organization have the power to regularly appoint or elect a majority of the officers, directors, or	
a		es of each of the supported organizations? <i>Provide details in Part VI.</i>	3a
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each	ासक्षात्रकार के क्षात्रकार व तक्षात् द्वाराम्पर्यं स्थापना
~		upported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b
		<u> </u>	

Schedu	lle A (Form 990 or 990-EZ) 2017 HOPE STREET MINISTRY INC.		05-0627	081 Page 6
Раг	Type III Non-Functionally Integrated 509(a)(3) Supporting (Organizati	ons	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on	Nov 20, 197	0 (explain in Part VI) See	
	instructions. All other Type III non-functionally integrated supporting organizations r	nust complet	e Sections A through E	
Sect	ion A - Adjusted Net Income	(A) Pnor Year	(B) Current Year (optional)	
1_	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2	·	
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
col	lection of gross income or for management, conservation, or			
ma	intenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year
Jec.	ion by initiality Asset Amount		(A) FIIOI Teal	(optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
ıns	tructions for short tax year or assets held for part of year)			
	a Average monthly value of securities	_1a		
	b Average monthly cash balances	1b		
	c Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
	e Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
sec	e instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2017

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

instructions)

	Type III Non-Functionally Integrated 509(a)(3) Su	upporting Organizati	ons (continued)				
	on D - Distributions	Current Year					
1	Amounts paid to supported organizations to accomplish exempt purposes						
2	Amounts paid to perform activity that directly furthers exempt purposes of						
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purposes of supporte	ed organizations					
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
	Other distributions (describe in Part VI) See instructions						
7	Total annual distributions, Add lines 1 through 6						
8	Distributions to attentive supported organizations to which the organizatio	n is responsive		-			
_	(provide details in Part VI) See instructions						
9	Distributable amount for 2017 from Section C, line 6						
10	Line 8 amount divided by line 9 amount	······································					
		(i)	(ii)	(iii)			
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable			
	,		Pre-2017	Amount for 2017			
1	Distributable amount for 2017 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2017						
	(reasonable cause required-explain in Part VI) See						
	instructions						
3	Excess distributions carryover, if any, to 2017						
a							
b	From 2013						
СС	From 2014						
d	From 2015						
ее	From 2016						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2017 distributable amount						
i_	Carryover from 2012 not applied (see instructions)						
	Remainder Subtract lines 3g, 3h, and 3i from 3f						
4	Distributions for 2017 from						
	Section D, line 7 \$						
a	Applied to underdistributions of prior years			1000年,1000年10日 10日 10日 10日 10日 10日 10日 10日 10日 10日			
b	Applied to 2017 distributable amount						
c	Remainder Subtract lines 4a and 4b from 4						
5	Remaining underdistributions for years prior to 2017, if						
	any Subtract lines 3g and 4a from line 2 For result						
	greater than zero, explain in Part VI See instructions						
6	Remaining underdistributions for 2017 Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in						
	Part VI See instructions			· ·			
7	Excess distributions carryover to 2018. Add lines 3j						
	and 4c						
8	Breakdown of line 7						
a	Excess from 2013						
b	Excess from 2014						
с	Excess from 2015						
d	Excess from 2016						
е	Excess from 2017		是不可能是是 的的。 在其實的				
	Schedule A (Form 990 or 990-EZ) 2017						

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

SCHEDULE D (Form 990)

Department of the Treasur Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information Name of the organization Employer identification number HOPE STREET MINISTRY INC. 05-0627081 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1

	dule D (Form 990) 2017 HOPE STREE					05-062				Page 2
Pa	Ttill Organizations Maintaining	Collections of	Art, H	istorical Tre	easures, o	or Other Si	milar Ass	ets (cont	nuec	<u>1)</u>
3	Using the organization's acquisition, accession, collection items (check all that apply)	and other records,	check a	ny of the follow	ing that are a	a significant us	e of its			
а	Public exhibition	d 🗌	Loan or	exchange prog	rams					
b	Scholarly research	е 🗌	Other							
C	Preservation for future generations									
4	Provide a description of the organization's collect	ctions and explain h	ow they	further the orga	anization's e	xempt purpose	ın Part			
	XIII									
5	During the year, did the organization solicit or re					nılar		<u></u>		
m 122	assets to be sold to raise funds rather than to be		t of the	organization's c	collection?				Yes	No
ra	Escrow and Custodial Arrai	_		000 D	411/ 1 6		d			
	Complete if the organization a 990, Part X, line 21	answered "Yes" —————	on Fo	orm 990, Par	τιν, line s 	э, ог геропе 	a an amo	unt on Fo	rm 	7
1a	Is the organization an agent, trustee, custodian	or other intermedia	ry for co	ntributions or of	ther assets r	ot		,		
	included on Form 990, Part X?							Ļ	Yes	∐ No
b	If "Yes," explain the arrangement in Part XIII and	d complete the follo	wing tab	le			r			
								Am	ount	
С	Beginning balance						1c			
ď	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on Form					•			Yes	U No
	If "Yes," explain the arrangement in Part XIII Ch	neck here if the exp	lanation	has been provi	ded on Part	XIII			<u> </u>	<u> </u>
Ра	rtV Endowment Funds.	-1 437 - 1		000 D						
	Complete if the organization a							1		
		(a) Current year	(b) Pnor year	(c) Two ye	ars back	d) Three years	back (e)	Four ye	ars back
	Beginning of year balance			 						
	Contributions		ļ ———					 -		
С	Net investment earnings, gains, and					i				
	losses									
	Grants or scholarships									
е	Other expenditures for facilities and					ļ				
	programs							·		
	Administrative expenses									
	End of year balance				L					
2	Provide the estimated percentage of the current		line 1g,	column (a)) nei	id as					
a	Board designated or quasi-endowment	%								
b	Permanent endowment ▶ % Temporarily restricted endowment ▶	%								
·	The percentages on lines 2a, 2b, and 2c should									
32	Are there endowment funds not in the possession	•	nn that a	re held and ad-	ministered fo	or the				
va	organization by	on on the organization	,,, mar a	are niciu anu dui	mmatereu it	// UIC			V.	es No
	(i) unrelated organizations							3-	ı(t)	140
	(ii) related organizations							3a		
h	If "Yes" on line 3a(ii), are the related organization	ns listed as require	d on Scl	nedule R2					b	_†
4	Describe in Part XIII the intended uses of the or	•							<u> </u>	<u>-</u> -L
Pa	ttVI Land, Buildings, and Equip		THE INC.	100			··			
AB 41 20	Complete if the organization a		on Fo	rm 990. Par	t IV. line 1	11a See Fo	rm 990. F	art X. line	10	
	Description of property	(a) Cost or other b		(b) Cost or o		(c) Accur		1	Book valu	16
	· · · · ·	(investment)		(othe		deprec		'		
1a	Land				82,987				82	2,987
	Buildings					A STATE OF THE PARTY OF THE	on the Control of the			<u>, v</u>
	Leasehold improvements		-		6,389		639	<u> </u>	5	750
	Equipment									
	Other			1,0	95,570	4	76,170		619	,400

708,137

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

05-0627081 HOPE STREET MINISTRY INC. Schedule D (Form 990) 2017 Page 3 Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12) ▶ Investments-Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c See Form 990, Part X, line 13 (a) Description of investment (b) Book value (c) Method of valuation Cost or end-of-year market value (1) (2) (3) (4) (5) (6)(7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) ▶ Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15 (a) Description (1) (2) (3) (4) (5) (6)(7) (8) Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

- c Other losses
- d Other (Describe in Part XIII)
- e Add lines 2a through 2d
- 3 Subtract line 2e from line 1
- 4 Amounts included on Form 990, Part IX, line 25, but not on line 1
- a Investment expenses not included on Form 990, Part VIII, line 7b
- **b** Other (Describe in Part XIII)
- c Add lines 4a and 4b
- 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Page 5

Part XIII Supplemental Information (continued)

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.

2017Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Employer identification number

Name of the organization

HOPE STREET MINISTRY INC.

05-0627081

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT
WE ARE A CHRISTIAN MINISTRY PROVIDING TRANSITIONAL HOUSING AND CHRISTIAN

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY BOARD OF DIRECTORS MEETINGS

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

BOOK / TAX DEPRECIATION DIFFERENCE \$ 2,685