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Form 990-EZ

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

OMB No 1545-1150 2008

Open to Public Inspection

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements Department of the Treasury Internal Revenue Service

Α	For the	2008 calend	lar year,	or tax year beginning , and ending			
В	Check if	applicable	Please	C Name of organization	D	Emp	oloyer identification number
_	Address	change	use IRS label or		ł		
_	Name ch	ange	print or	Hope Made Real, Inc.	ــــــ	26	-3209888
X	Initial retu	urn	type.	Number and street (or P O box, if mail is not delivered to street address)	E		phone number
Ц.	Terminat	ion	See Specific	P O Box 3222	▙		0-244-2498
X	Amended	d return	Instruc-	City or town, state or country, and ZIP + 4	F		up Exemption
		on pending	tions.	Williamsport PA 17701	<u> </u>	Nun	
	Sect	tion 501(c)(3)	_	ations and 4947(a)(1) nonexempt charitable trusts must attach G Accounts	٠.	thod	X Cash Accrual
				npleted Schedule A (Form 990 or 990-EZ). Other (specify	<u> </u>		
1	Website			pemadereal.org H Check Prequired	· [j if the ich Sch	e organization is not nedule B (Form 990,
<u>J</u>				one)— X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527 required	or 990	-PF).	
K	Check	_	-	ration is not a section 509(a)(3) supporting organization and its gross receipts are normally	not n	nore t	han \$25,000 A return
				nization chooses to file a return, be sure to file a complete return			100 505
느				to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ		▶ \$	
<u>_</u> F	Part I			penses, and Changes in Net Assets or Fund Balances (See the inst	ucti		TOT Part I.)
	1			ts, and similar amounts received	-	1	108,770
	2	-		nue including government fees and contracts	-	2	
	3			d assessments		3	
	4	Investment ii	ncome	1 1	-	4	
	5a	Gross amou	nt from s	ale of assets other than inventory 5a			
	Ь	Less cost or	r other ba	isis and sales expenses 5b			
		Gain or (loss)	from sale	of assets other than inventory (Subtract line 5b from line 5a) (attach sch.)	.,	5c	
J.	6	Special events	and activ	ities (complete applicable parts of Schedule G). If any amount is from gaming , check here	J		
Revenue	a	Gross reven	ue (not ir	ocluding \$ of contributions			
æ	1	reported on l	line 1)	6a			
	b	Less direct	expense:	s other than fundraising expenses 6b			
	çeπ	Net income (or (loss)	from special events and activities (Subtract line 6b from line 6a)	l	6c	
	11.62	Gross sales	of invent	ory, less returns and allowances 7a			
	2	Less cost of					
	Sec.	Gross profit	or (loss)	from sales of inventory (Subtract line 7b from line 7a)		7c	
	_8.			be ▶ See Statement 1	_) [8	735
	14.Nto (0, 45-2			nes 1, 2, 3, 4, 5c, 6c, 7c, and 8	•	9	109,505
	10	Grants and s	sımılar ar	nounts paid (attach schedule) See Statement 2	į	10	98,725
	1	Benefits paid	d to or fo	members RECEIVED		11	
Ø	12/13	Salaries, oth	er comp	ensation, and employee benefits		12	
enses	5 3	Professional	fees and	ensation, and employee benefits I other payments to independent contractors DEC 0 6 2010 Only the sand maintenance	ł	13	909
per	(Occupancy,	rent, utili	ties, and maintenance	į	14	
Exp	715	Printing, pub	lications	postage, and shipping	- [15	
	16	Other expen	ses (des	postage, and shipping oribe ► OGDEN, UT	_)	16	
	17	Total expen	ses. Add	lines 10 through 16	•	17	99,634
_ z	18	Excess or (d	leficit) for	the year (Subtract line 17 from line 9)	į	18	9,871
Net Assets	19	Net assets or	fund balar	ces at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on pnor year's return	1)	19	
Ϋ́	20	Other chang	es in net	assets or fund balances (attach explanation)		20	
ž	21	Net assets o	r fund ba	lances at end of year Combine lines 18 through 20	▶	21	9,871
F	art II	Balan	ce She	ets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead o	f Forr	n 990	-EZ
				the instructions for Part II) (A) Beginning of year			(B) End of year
22	Cash, s	avings, and ii	nvestme	nts		22	9,871
		nd buildings				23	
		ssets (descri	be 🕨)		24	
	Total as	•			0	25	9,871
		abilities (des	cnbe 🕨)	0	26	0
		•		(line 27 of column (B) must agree with line 21)	0	27	9,871
				Reduction Act Notice, see the Instructions for Form 990.			Form 990-EZ (2008)

DAA

Form 990-EZ,(2008) Hope Made Re-	al, inc.	20	1-3209000				Page 2
Part III Statement of Program Se		See the instruct	ons for Part II	l.)		Ex	penses
What is the organization's primary exempt purpose	?					•	for 501(c)(3)
See Statement 3					1		rganizations
Describe what was achieved in carrying out the org							(a)(1) trusts,
describe the services provided, the number of pers	ons benefited, or other relevant in	formation for each pro	ogram une		0	otional i	or others)
28 See Statement 4							
(Grants \$) If this a	amount includes foreign grants, ch	eck here	•	П	28a		78,944
29 See Statement 5							•
(Grants \$) If this	amount includes foreign grants, ch	eck here		Ш.	29a		9,890
30 See Statement 6							
			_	\Box	_		2 060
***************************************	amount includes foreign grants, ch See Statement 7	eck here		44	30a		2,968
31 Other program services (attach schedule)		ook boro		\Box	240		6,923
	amount includes foreign grants, ch	leck nere	<u> </u>	₩	31a 32		98,725
Part IV List of Officers, Directors, Trust		ich one even if not co	mnensated (See t	he in		ns for P	
Fatt 14 List of Officers, Directors, Trust	ees, and Ney Employees. List co	(b) Title and average	(c) Compensation	(d)	Contribu	tions to	(e) Expense
(a) Name and add	ress	hours per week devoted to position	(If not paid, enter -0)		oyee bene rred comp	fit plans & ensation	account and other allowances
Sharon Landis	McAllen	President					
7201 North 28th Street	TX 78504	10	0			0	0
John C. Green	Williamsport	Treasurer					
41 Marvin Circle	PA 17701	10	c			0	0
Sarah Ketchley	Seattle	Secretary					
317 NE 75th Street	WA 98115	10	c	<u> </u>		0	0
Arlene Brown	Southern Province	Director					
BP179, Gitarama, Muhanga	RW	40	c	+		0	0
Karen Lake - Shampaın	Nipomo	Board				•	
700 Whimbrell Court	CA 93444	10 Board	<u>-</u> C	'		0	0
Mike Ricker	Glendale AZ 85310	10	ا ا			o	0
21949 North 69th Avenue	AZ 03310	1 - 10		'			
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and enter the amount of tax-exempt interest received or accrued during the tax year

"Yes," Form 990 must be completed instead of Form 990-EZ

Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of

Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If

Form 990-EZ (2008)

44

45

Yes

No

X

X

Form 990-F7

Date

errastro,

Loyalsock Ave Ste D

Montoursville

11/15/10

Check if

Form 990-EZ (2008)

75-3206893

570-326-2799

X Yes

Preparer's Identifying Number (See instr.)

P01207913

EIN

Phone

no 🕨

Paid

Preparer's

Use Only

Type or print name and title

May the IRS discuss this return with the preparer shown above? See instructions

signature

Firm's name (or yours

address, and ZIP + 4

if self-employed),

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

Open to Pub

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Part I

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Hope Made Real, Inc. 26-32

Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

Employer identification number 26-3209888

The	orgai	nization is not a	a private f	foundation becau	ise it is (Please check only one o	rganization)	-						
1	Ť		•		ssociation of churches described i	-	•	A)(i).						
2	Н)(A)(ii). (Attach Schedule E)			-7(-7-						
3	Н			* * * *	vice organization described in sec	tion 170(b)	/1\/ Δ \/iii\	(Attach	Schedu	le H)				
4	Н	•	•	•	ed in conjunction with a hospital of						e hospi	ital's name		
•	ш	city, and state		garnzation operati	ea in conjunction with a nospital c	icaciibed iii	3000.011		,,,,,,,,,,		о поорі	ika o namo,		
5		•		ted for the benefit	of a college or university owned	or operated	hy a nove	ernmenta	d unit de	scribed	ın			
Ŭ	ш	•	•	iv). (Complete Pa	•	or operator	b, a gov	J		00.1200				
6	\Box				governmental unit described in s	ection 170(b)(1)(A)(v	n)						
7	x	-		•	a substantial part of its support fro			-	n the ne	neral nu	blic			
•		-		•	Complete Part II)	in a govern	montal di	01 /10/	i ine ge	iciai pa	Diio			
8	\Box				170(b)(1)(A)(vi). (Complete Part	31.3								
9	Н				(1) more than 33 1/3 % of its sup		ntribution	s memh	ershin fe	es and	l arnes			
3	ш				empt functions—subject to certain									
					and unrelated business taxable in									
		• •	•		30, 1975 See section 509(a)(2).				0111 0001					
10	\Box		•		d exclusively to test for public safe			a)(4) (se	e instru	ctions)				
11	Н	•	•	•	d exclusively for the benefit of, to p	-	-							
•••	ш	_	_		rted organizations described in se						tion			
					the type of supporting organization									
		a Type		b Type II	c Type III–Functio			d		e III-Otl	ner			
е					rganization is not controlled direct	, ,		or more						
_	لسبا	, ,		•	s and other than one or more put	-					tion			
		509(a)(1) or s	section 50)9(a)(2)	·		_							
f					termination from the IRS that it is	a Type I, Ty	pe II, or T	ype III s	upportin	g				
•		organization,		_										П
g		Since August	17, 2006	, has the organiz	ation accepted any gift or contribu	ution from a	ny of the							
•		following per	sons?	_										
		(i) A person	n who dire	ectly or indirectly	controls, either alone or together	with persons	s describe	ed in (ii)					Yes	No
					of the supported organization?							11g(i)		
		(ii) A family	member	of a person desci	ribed in (i) above?							11g(iı)		
		(iii) A 35% c	ontrolled	entity of a person	described in (i) or (ii) above?							11g(ni)		<u> </u>
h		Provide the f	ollowing i	information about	the organizations the organizatio	n supports								
(i)	Nam	e of supported		(ii) EIN	(iii) Type of organization	(iv) is the	organization	(v) Did y	rou notify	(vi)	s the	(viı) Am	ount of	
		anization		• ,	(described on lines 1-9		sted in your	T	nization in	organizat		supp	ort	
					above or IRC section (see instructions))	governing	document?		of your port?		zed in the			
					(See mandenons))	Yes	No	Yes	No	Yes	No			
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										C-1		· (F 000		

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not 108,770 include any "unusual grants") 108,770 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 108,770 Total. Add lines 1-3 108,770 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) 14,665 Public support. Subtract line 5 from line 4 94,105 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total (a) 2004 Amounts from line 4 108,770 108,770 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets 735 735 (Explain in Part IV) 109,505 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) ► X organization, check this box and stop here Section C. Computation of Public Support Percentage 14 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 33 1/3 % support test—2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test-2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or 17a more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")					,	
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						
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 1-5		 				
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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
C	Add lines 7a and 7b		 				
8	Public support (Subtract line 7c from line 6)		-		······································		-
500	tion B. Total Support	<u> </u>	<u> </u>	<u> </u>		I	_1
$\overline{}$	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	(a) 2004	(b) 2003	(0) 2000	(0) 2007	(0) 2000	(1) Total
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						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						4
	and 12)		<u> </u>		<u> </u>	<u> </u>	1
14	First five years. If the Form 990 is for the organization, check this box and stop here		second, third, fourt	h, or fifth tax year a	s a section 501(c)	(3)	▶ 🗆
Sec	tion C. Computation of Public Su	pport Percen	tage				
15	Public support percentage for 2008 (line 8,	column (f) divided	by line 13, column	(f))		15	%
16	Public support percentage from 2007 Sche					16	%
Sec	tion D. Computation of Investme	nt Income Pe	rcentage				
17	Investment income percentage for 2008 (lin	ne 10c, column (f)	divided by line 13, o	olumn (f))		17	<u>%</u>
18	Investment income percentage from 2007 S					18_	%_
19a	33 1/3 % support tests—2008. If the organ						. —
	17 is not more than 33 1/3 %, check this bo						▶ ∐
b	33 1/3 % support tests—2007. If the organ						. 🗀
	line 18 is not more than 33 1/3 %, check the						. H
20	Private foundation. If the organization did	not check a box or	n line 14, 19a or 19	b, check this box ar	nd see instructions		>

Schedule A (Form 990 or 990-EZ) 2008 Hope Made Real, Inc.

26-3209888

Page 4

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

Part II, Line 10 - Other Income Detail

Gain on currency exchanges

\$

735

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HOPE Hope Made Real, Inc. 26-3209888

Federal Statements

FYE: 12/31/2008

Amended Return Explanation

Description

Original return omitted \$9,372 in contributions.

Original return omitted \$735 in gain on currency exchange.

Original return omitted \$414 in bank and paypal fees.

Original return omitted Schedule A, Schedule B.

Original return omitted balance sheet information.

Amended return has been updated to include current board members, officers and trustees.

Statement 1 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	A	mount
Net income on exchange rates	\$	735
Total	\$	735

Federal Statements

HOPE Hope Made Real, Inc. 26-3209888 FYE: 12/31/2008

Paid
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- Grants an
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art
orm 990-EZ, Par
: - Form
Statement 2

Statellier	11101-711	Statement 2 - 1 Ohn 330-LE, Faith, Line 10			ala Calla	
Name and Address		Relationship to Organization	ر	Class of Activity	Date of Gift	
Description of Cash Property Contribution		Noncash Contribution	Book Value	Book Value Explanation	FMV Explanation	Purpose
Urukundo Home for Children 78 Muhanga Southern Dist, RW	78,944					
Cyeza Sector support Project 9 Muhanga Southern Dist., RW	068'6					
Avega 2 Muhanga Southern Dist, RW	2,968					
Community projects 6 Rwanda, Africa, RW	6,923					
Total 98	98,725					

HOPE Hope Made Real, Inc. 26-3209888

FYE: 12/31/2008

Federal Statements

Statement 3 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

Hope Made Real, Inc. is a charitable organization dedicated to improving the lives of children and adults in the country of Rwanda. Started in 2008, Hope Made Real, Inc. supports various projects in Rwanda with the aim of assisting the country's orphaned and abandoned children and other poor and vulnerable residents of Rwanda.

Statement 4 - Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

Description

Orphanage

Hope Made Real supports the Urukundo Home for Children, a non-profit orphanage serving the Urukundo Village in Rwanda, Africa. The Urukundo Home for Children currently houses forty-two orphaned and abandoned children. The Urukundo Home also works in coordination with the Rwanda National Prison Ministry to secure homes for children with incarcerated parents. Hope Made Real provides funds for the purchase of food and clothing for the children in the orphanage as well as providing certain educational supports, such as the cost of textbooks, pencils, paper and other school fees. Hope Made Real also provides funds for medical supplies, electricity and water.

<u>Statement 5 - Form 990-EZ, Part III, Line 29 - Statement of Program Service</u> <u>Accomplishments</u>

Description

Education

Hope Made Real provides educational support for the children in the Urukundo Village and now provides support to other children in the Muhanga District of Rwanda through the Cyeza Sector Support project.

Statement 6 - Form 990-EZ, Part III, Line 30 - Statement of Program Service Accomplishments

Description

Grass Roots Enterprise - through livestock and beehives

Hope Made Real provides the financial support to provide livestock and beehives to the Avega organization, which is the Rwandan national association for genocide widows, to provide them with a means of support. Hope Made Real makes similiar donations of livestock and beehives to HIV and AIDS patients.

HOPE Hope Made Real, Inc. 26-3209888 FYE: 12/31/2008

Federal Statements

11/15/2010 3:34 PM

Statement 7 - Form 990-EZ, Part III, Line 31 - Statement of Program Service Accomplishments

Description

Other Community Projects

Hope Made Real contributed to numerous local community projects in Rwanda. Projects supported included construction of a well, a soccer field, a basketball field, a library and a children's chapel.