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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning and ending

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending

Please use IRS label or print or type. See Specific Instructions

C Name of organization: WORLD HOPE INTERNATIONAL, INC.

Doing Business As:

Number and street (or P.O. box if mail is not delivered to street address): 625 SLATERS LANE — Room/suite: 200

City or town, state or country, and ZIP + 4: ALEXANDRIA, VA 22314-1176

D Employer identification number: 35-1985485

E Telephone number: 703-923-9414

G Gross receipts $: 14,248,649.

F Name and address of principal officer: KARL EASTLACK
SAME AS C ABOVE

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.WORLDHOPE.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1996 M State of legal domicile: IN

Part I Summary

1	Briefly describe the organization's mission or most significant activities: TO ALLEVIATE SUFFERING AND INJUSTICE THROUGH EDUCATION, ENTERPRISE AND COMMUNITY HEALTH.		
2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
3	Number of voting members of the governing body (Part VI, line 1a)	3	16
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5	Total number of employees (Part V, line 2a)	5	40
6	Total number of volunteers (estimate if necessary)	6	405
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	13,415,430.	12,903,076.
9	Program service revenue (Part VIII, line 2g)	1,121,193.	1,221,690.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	56,638.	15,644.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	20,249.	96,104.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	14,613,510.	14,236,514.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,673,341.	2,220,258.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,846,794.	4,073,450.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 611,489.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	8,967,525.	7,907,106.
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	15,487,660.	14,200,814.
19	Revenue less expenses. Subtract line 18 from line 12	<874,150.>	35,700.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	5,720,991.	5,688,299.
21	Total liabilities (Part X, line 26)	1,494,366.	1,531,042.
22	Net assets or fund balances Subtract line 21 from line 20	4,226,625.	4,157,257.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

▶ Signature of officer — Date: 9/28/10

▶ KIRK C. MITCHELL, CFO/Director of Finance
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: RHA — Date: 9/28/10 — Check if self-employed ▶ ☐ — Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4:
RAFFA, PC
1899 L STREET NW, SUITE 900
WASHINGTON, DC 20036

EIN ▶

Phone no. ▶ 202-822-5000

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

22 9/16

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission SEE SCHEDULE O FOR CONTINUATION
THE PURPOSE OF WHI INCLUDES PROVIDING ASSISTANCE PRIMARILY DIRECTED TOWARDS ECONOMICALLY DISADVANTAGED PEOPLES THROUGH EMERGENCY RELIEF AND LONG-TERM SOCIAL TRANSFORMATION PROJECTS, INCLUDING PARTICIPATING IN GRANT PROGRAMS FOR RELIEF AND ECONOMIC DEVELOPMENT PROJECTS AND THE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code.) (Expenses $ 4,706,641. including grants of $ 1,163,730.) (Revenue $ 44,774.)
COMMUNITY HEALTH/HIV/AIDS - WHI RESPONDS TO THE HIV/AIDS CRISIS BY ENHANCING THE CAPACITY OF CHURCHES, FAMILIES AND COMMUNITIES TO RESPOND TO THE NEEDS OF ORPHANS, VULNERABLE CHILDREN AND THEIR CAREGIVERS WHO ARE SUFFERING UNDER THE BURDEN OF THE HIV/AIDS PANDEMIC. IN 2009, OVER 65,000 ORPHANS AND VULNERABLE CHILDREN WERE SUPPORTED WITH CARE, AND OVER 16,000 PEOPLE LIVING WITH HIV/AIDS WERE VISITED AND ATTENDED TO. COMMUNITIES IN SOUTHERN AFRICA AND HAITI NOW HAVE ALMOST 4,000 TRAINED IN COMMUNITY HEALTH AND DISEASE PREVENTION TO COMBAT THE HIV/AIDS CRISIS. TO STOP THE SPREAD OF HIV/AIDS, WHI IS STRONGLY COMMITTED TO ABSTINENCE AND BEHAVIORAL CHANGE IN YOUTH THROUGH THE REACH4LIFE PROGRAM. YOUTH ARE TAUGHT BY NATIONAL VOLUNTEERS THROUGH A 40-WEEK DISCIPLESHIP PROGRAM IN PUBLIC SCHOOLS IN SOUTHERN AFRICA. TRAINING

4b (Code:) (Expenses $ 1,753,338. including grants of $ 36,073.) (Revenue $ 985,127.)
MICROFINANCE DEVELOPMENT - THE PURPOSE OF THIS PROGRAM IS TO PROVIDE THE ENTREPRENEURIAL POOR WITH ACCESS TO SMALL LOANS BETWEEN $50 TO $200 THAT ARE USED TO RUN "MICROBUSINESSES." THESE LOANS HELP TO LIFT PEOPLE OUT OF POVERTY IN A SUSTAINABLE WAY BY ENABLING THEIR PREVIOUSLY-UNATTAINABLE BUSINESS OBJECTIVES TO COME TO FRUITION.

WHI IS INVOLVED IN FOUR MICROFINANCE INSTITUTIONS WORLDWIDE. WHI IS ONE OF THREE STAKEHOLDERS IN SIGNIFICANT MICROFINANCE INSTITUTIONS IN CAMBODIA AND LIBERIA WHERE THE TOTAL COMBINED CLIENTS SERVED ARE IN EXCESS OF 55,000. WHI IS THE SOLE STAKEHOLDER IN MICROFINANCE INSTITUTIONS IN INDONESIA AND SIERRA LEONE. THE INDONESIA OPERATION IS IN ITS EARLY STAGES OF DEVELOPMENT. THE SIERRA LEONE OPERATION IS WELL

4c (Code:) (Expenses $ 1,543,819. including grants of $ 594,092.) (Revenue $ 0.)
HOPE FOR CHILDREN - WHI'S FOUNDATIONAL EDUCATIONAL INITIATIVE IS HOPE FOR CHILDREN (HFC), A CHILD SPONSORSHIP PROGRAM. CHILDREN ENROLLED IN THE HOPE FOR CHILDREN PROGRAM TYPICALLY LIVE IN POOR COMMUNITIES WITH OTHERWISE LITTLE HOPE OF RECEIVING AN EDUCATION. IN 2009, MORE THAN 4,000 CHILDREN WERE SPONSORED, INSURING A QUALITY EDUCATION, AND FOOD AND CLOTHING TO EQUIP THE CHILD'S MIND FOR LEARNING. HOPE FOR CHILDREN IS EMPOWERING CHILDREN TO ACHIEVE THEIR POTENTIAL TO BE PREPARED AS ADULTS TO PROVIDE FOR THEIR FAMILIES AND TO TAKE LEADERSHIP POSITIONS IN THEIR HOMES, COMMUNITIES AND CHURCHES. IN 2009 CHILDREN IN 17 COUNTRIES WERE SERVED THROUGH THE HOPE FOR CHILDREN PROGRAM.

IN ADDITION TO HFC'S MONTHLY SPONSORSHIPS, CHURCH, COMMUNITY AND SCHOOL

4d Other program services (Describe in Schedule O)
(Expenses $ 5,202,967. including grants of $ 426,363.) (Revenue $ 191,789.)

4e **Total program service expenses ▶ $** 13,206,765.

Part IV 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?	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? *If "Yes," complete Schedule C, Part II*	4	X	
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5	N/A	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, serve as a 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
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	Is the organization's answer to any of the following questions "Yes"? *If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*			
	• 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*			
	• 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.*			
	• 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*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*			
	• 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? *If "Yes," complete Schedule D, Part X*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* (Yes: X; No:)	12A		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Part II*	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Part III*	16		X
17	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*	17		X
18	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
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	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 employees? *If "Yes," complete Schedule J*	23		X
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 through 24d and complete Schedule K If "No", go to line 25*	24a		X
b	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) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
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? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X
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	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
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*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
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*	33	X	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35	X	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	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, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	1a	22		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	
2a	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	2a	40		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b		
4a	At any time 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 (such as a bank account, securities account, or other financial account)?		4a	X	
b	If "Yes," enter the name of the foreign country ▶ SEE SCHEDULE O See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966? N/A		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A		9b		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders N/A	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax exempt interest received or accrued during the year	12b			

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*

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body	1a	16		
b	Enter the number of voting members that are independent	1b	16		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		5		X
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
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?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	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		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ AK, AZ, CA, FL, GA, IL, MD, MN, MS, NH, NM, NC

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

[X] Own website [ ] Another's website [X] Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

THE ORGANIZATION - 703-923-9414

625 SLATERS LANE, NO. 200, ALEXANDRIA, VA 22314-1176

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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. Use Schedule J-2 if additional space is needed

- 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 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 the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JO ANNE LYON CHAIR	1.00	X		X				8,077.	0.	0.
DAVID BLANCHARD VICE-CHAIR	1.00	X		X				0.	0.	0.
BOBBIE STRAND SECRETARY	1.00	X		X				0.	0.	0.
KEVIN BATMAN TREASURER	1.00	X		X				0.	0.	0.
DONALD BRAY DIRECTOR	1.00	X						0.	0.	0.
EVVY HAY CAMPBELL DIRECTOR	1.00	X						0.	0.	0.
DANIEL CHAMBERLAIN DIRECTOR	1.00	X						0.	0.	0.
MIKE CHAMBERS DIRECTOR	1.00	X						0.	0.	0.
ROBERT CLYDE DIRECTOR	1.00	X						0.	0.	0.
CLINT CURLE DIRECTOR	1.00	X						0.	0.	0.
NORWOOD DAVIS DIRECTOR	1.00	X						0.	0.	0.
JOHN LYON DIRECTOR	1.00	X						0.	0.	0.
JERRY PENCE DIRECTOR	1.00	X						0.	0.	0.
THOMAS E. PHILLIPPE SR. DIRECTOR	1.00	X						0.	0.	0.
JERI SAPE DIRECTOR	1.00	X						0.	0.	0.
H.C. WILSON DIRECTOR	1.00	X						0.	0.	0.
KARL EASTLACK CHIEF EXECUTIVE OFFICER	40.00			X				77,272.	0.	13,149.

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KIRK C. MITCHELL CHIEF FINANCIAL OFFICER	40.00			X				86,647.	0.	27,289.
DAVID M. ERICKSON CHIEF OPERATING OFFICER	40.00			X				100,203.	0.	31,078.
STEVE BROWN INT. CEO(9/1/08-4/30/09)	30.00			X				0.	0.	0.
1b Total ▶								272,199.	0.	71,516.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 1

		Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
MAXIM DESIGN GROUP, LLC 74 SANTALINA TRAIL, BATTLE CREEK, MI 49014	COMMUNICATIONS	188,388.

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 1

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	4,029,996.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	8,873,080.			
	g Noncash contributions included in lines 1a-1f $		181,341.			
	h **Total.** Add lines 1a-1f	▶	12903076.			
Program Service Revenue		Business Code				
	2a MICROFINANCE/LOAN REV.	900099	986,082.	986,082.		
	b OTHER PROGRAM INCOME	900099	66,652.	66,652.		
	c SEMESTER ABROAD	900099	49,316.	49,316.		
	d LODGING	900099	30,456.	30,456.		
	e CROP/LIVESTOCK	900099	29,906.	29,906.		
	f All other program service revenue	900099	59,278.	59,278.		
	g **Total.** Add lines 2a-2f	▶	1,221,690.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶	16,213.			16,213.
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶				
		(i) Real	(ii) Personal			
	6a Gross Rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)	▶				
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	11,566.				
	b Less: cost or other basis and sales expenses	12,135.				
	c Gain or (loss)	<569.>				
	d Net gain or (loss)	▶	<569.>			<569.>
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less: direct expenses	b				
	c Net income or (loss) from fundraising events	▶				
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities	▶				
	10a Gross sales of inventory, less returns and allowances	a				
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory	▶				
	Miscellaneous Revenue	Business Code				
	11a SUBLEASE INCOME	900099	72,672.			72,672.
	b OTHER INCOME	900099	11,394.			11,394.
	c APPLICATION INCOME	900099	7,427.			7,427.
	d All other revenue	900099	4,611.			4,611.
	e **Total.** Add lines 11a-11d	▶	96,104.			
	12 **Total revenue.** See instructions.	▶	14236514.	1,221,690.	0.	111,748.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S See Part IV, line 21	39,350.	39,350.		
2 Grants and other assistance to individuals in the U.S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U S. See Part IV, lines 15 and 16	2,180,908.	2,180,908.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	343,715.	31,768.	289,924.	22,023.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,620,399.	2,201,250.	264,786.	154,363.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	154,688.	97,801.	37,111.	19,776.
9 Other employee benefits	835,889.	657,031.	122,376.	56,482.
10 Payroll taxes	118,759.	65,940.	39,120.	13,699.
11 Fees for services (non-employees)				
a Management				
b Legal	6,263.	1,581.	1,392.	3,290.
c Accounting	56,037.	17,037.	39,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	377,503.	345,852.	28,951.	2,700.
12 Advertising and promotion	19,155.	10,887.	90.	8,178.
13 Office expenses	724,465.	492,360.	82,251.	149,854.
14 Information technology	133,215.	46,022.	85,143.	2,050.
15 Royalties				
16 Occupancy	652,288.	329,033.	323,255.	
17 Travel	1,195,054.	1,126,445.	42,941.	25,668.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	78,737.	47,101.	10,296.	21,340.
20 Interest	42,292.	42,239.	53.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	144,762.	31,955.	104,287.	8,520.
23 Insurance	13,184.	1,462.	9,214.	2,508.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a INDIRECT COSTS/OVERHEAD	0.	1,090,596.	<1,196,043.>	105,447.
b CHILD SPONS/ORPHAN CARE	1,170,472.	1,170,472.		
c SCHOOLS/WELLS CONSTR.	530,574.	530,574.		
d VOLUNTEER ACTIVITIES	530,118.	530,118.		
e VEHICLE PURCHASE	503,751.	503,223.	351.	177.
f All other expenses	1,729,236.	1,615,760.	98,062.	15,414.
25 Total functional expenses Add lines 1 through 24f	14,200,814.	13,206,765.	382,560.	611,489.
26 Joint costs. Check here ▶ [X] if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	449,082.	266,695.	0.	182,387.

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		371,300.	1	729,695.
	2	Savings and temporary cash investments		955,636.	2	441,292.
	3	Pledges and grants receivable, net		462,806.	3	479,201.
	4	Accounts receivable, net		154,735.	4	152,379.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net		1,881,988.	7	1,884,810.
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		218,132.	9	181,688.
	10a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	10a 1,862,808.			
	b	Less. accumulated depreciation	10b 455,677.	1,176,617.	10c	1,407,131.
	11	Investments - publicly traded securities		4,399.	11	18,614.
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11		422,083.	13	317,015.
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		73,295.	15	76,474.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		5,720,991.	16	5,688,299.
Liabilities	17	Accounts payable and accrued expenses		529,687.	17	747,305.
	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	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		339,129.	23	262,706.
	24	Unsecured notes and loans payable to unrelated third parties		68,774.	24	157,643.
	25	Other liabilities Complete Part X of Schedule D		556,776.	25	363,388.
	26	**Total liabilities.** Add lines 17 through 25		1,494,366.	26	1,531,042.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		1,025,808.	27	565,684.
	28	Temporarily restricted net assets		3,090,817.	28	3,481,573.
	29	Permanently restricted net assets		110,000.	29	110,000.
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.				
	30	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	
	33	Total net assets or fund balances		4,226,625.	33	4,157,257.
	34	Total liabilities and net assets/fund balances		5,720,991.	34	5,688,299.

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis			
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	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	X	

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization	Employer identification number
WORLD HOPE INTERNATIONAL, INC.	35-1985485

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii)	A family member of a person described in (i) above?	11g(ii)	
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants ")	7680796.	10654766.	10566083.	13415430.	12903076.	55220151.
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						
4 **Total.** Add lines 1 through 3	7680796.	10654766.	10566083.	13415430.	12903076.	55220151.
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)						10973993.
6 **Public support.** Subtract line 5 from line 4						44246158.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	7680796.	10654766.	10566083.	13415430.	12903076.	55220151.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	169,050.	19,601.	151,770.	71,145.	88,885.	500,451.
9 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 (Explain in Part IV)	11,947.	60,770.	39,237.	7,284.	64,432.	183,670.
11 **Total support.** Add lines 7 through 10						55904272.

12 Gross receipts from related activities, etc (see instructions)	12	3,556,017.

13 **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) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	79.15 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	78.78 %

16a **33 1/3% support test - 2009.** 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 ▶ ☒

b **33 1/3% support test - 2008.** 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 ▶ ☐

17a **10% -facts-and-circumstances test - 2009.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 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 ▶ ☐

b **10% -facts-and-circumstances test - 2008.** 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 ▶ ☐

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

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 through 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 $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
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 IV.)						
13 **Total support** (Add lines 9, 10c, 11, and 12.)						

14 **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) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.

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

OMB No 1545-0047

2009

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III

Name of organization	Employer identification number
WORLD HOPE INTERNATIONAL, INC.	35-1985485

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $ _____

3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $ _____

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $ _____

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount Enter the amount from the following table in both columns		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a If zero or less, enter -0-		
i Subtract line 1f from line 1c If zero or less, enter -0-		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?	X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c	Media advertisements?		X	
d	Mailings to members, legislators, or the public?		X	
e	Publications, or published or broadcast statements?		X	
f	Grants to other organizations for lobbying purposes?		X	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		55,000.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i	Other activities? If "Yes," describe in Part IV		X	
j	Total Add lines 1c through 1i			55,000.
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."**

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information.

Schedule D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
WORLD HOPE INTERNATIONAL, INC.

Employer identification number
35-1985485

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 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? ☐ Yes ☐ No

6 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? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (e.g., recreation or pleasure)
- ☐ Protection of natural habitat
- ☐ Preservation of open space
- ☐ Preservation of an historically important land area
- ☐ Preservation of a certified historic structure

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
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, 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" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 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 relating to these items.

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	110,000.	110,000.			
b Contributions					
c Net investment earnings, gains, and losses	4,123.	4,961.			
d Grants or scholarships					
e Other expenditures for facilities and programs	4,123.	4,961.			
f Administrative expenses					
g End of year balance	110,000.	110,000.			

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ 100.00 %
c Term endowment ▶ _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations 3a(i)		X
(ii) related organizations 3a(ii)		X

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		21,232.		21,232.
b Buildings		923,677.	3,617.	920,060.
c Leasehold improvements		260,806.	108,678.	152,128.
d Equipment		136,235.	82,632.	53,603.
e Other		520,858.	260,750.	260,108.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				1,407,131.

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
EQUITY INVESTMENT IN A MICROFINANCE INSTITUTION	317,015.	END-OF-YEAR MARKET VALUE
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶	317,015.	

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Amount
Federal income taxes	
DEFERRED RENT ABATEMENT	95,222.
MICRO-FINANCE CLIENT SAVINGS	219,711.
OTHER NONCURRENT LIABILITIES	48,455.
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	363,388.

2. FIN 48 Footnote In Part XIV, 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

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	14,236,514.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	14,200,814.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	35,700.
4	Net unrealized gains (losses) on investments	4	35,626.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	<140,694.>
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4 through 8	9	<105,068.>
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	<69,368.>

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12)*			5	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
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	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18)*			5	

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4: THE EARNINGS FROM WHI'S ENDOWMENT FUND IS DESIGNATED FOR SCHOLARSHIPS TO A BIBLE COLLEGE IN MOZAMBIQUE.

PART X: WHI PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED DECEMBER 31, 2009, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR WHICH MAY HAVE ANY AFFECT ON ITS TAX-EXEMPT STATUS.

Schedule F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

WORLD HOPE INTERNATIONAL, INC.

Employer identification number

35-1985485

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 **For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	1	55	PROGRAM SERVICES/GRANTS TO RECIPIENTS LOCATED IN REGION	CHILD SPONSORSHIP, HIV/AIDS PREVENTION	3,407,465.
EAST ASIA AND THE PACIFIC	2	51	PROGRAM SERVICES/GRANTS TO RECIPIENTS LOCATED IN REGION	ANTI-HUMAN TRAFFICKING, CHILD SPONSORSHIP, EDUCATION, MICROFINANCE, DISASTER RELIEF, RURAL	808,154.
EUROPE (INCLUDING ICELAND AND GREENLAND)	1	2	PROGRAM SERVICES	EDUCATION	49,547.
RUSSIA AND THE NEWLY INDEPENDENT STATES	1	9	PROGRAM SERVICES	EDUCATION, RURAL DEVELOPMENT	170,209.
SUB-SAHARAN AFRICA	6	204	PROGRAM SERVICES/GRANTS TO RECIPIENTS LOCATED IN REGION	CHILD SPONSORSHIP, HIV/AIDS PREVENTION, EDUCATION, RURAL DEVELOPMENT, ANTI-HUMAN	5,601,178.
MIDDLE EAST AND NORTH AFRICA	0	1	PROGRAM SERVICES	MICROFINANCE	47,880.
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		412,975.
SOUTH AMERICA	1	1	PROGRAM SERVICES/GRANTS TO RECIPIENTS LOCATED IN REGION	EDUCATION, HIV/AIDS PREVENTION, CHILD SPONSORSHIP	57,169.
Totals ▶	12	323			10,570,011.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule F (Form 990) 2009**

SEE PART IV FOR COLUMN (E) DESCRIPTIONS

932071
02-01-10

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 ▶ ☐

Use Schedule F-1 (Form 990) if additional space is needed

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	CHILD SPONSORSHIP	6,689.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CHILD SPONSORSHIP	33,591.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	BIBLE COLLEGE FACILITY UPKEEP	10,565.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CHILD SPONSORSHIP	5,742.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CHILD SPONSORSHIP	10,352.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HIV/AIDS PREVENTION	652,006.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CHILD SPONSORSHIP	86,701.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HIV/AIDS PREVENTION	158,516.	WIRE	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 30

3 Enter total number of other organizations or entities ▶ 0

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16
Use Schedule F-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information

SCHEDULE F, PART I, LINE 2: WHI MONITORS GRANTS IT AWARDS TO OTHER ORGANIZATIONS BY REQUIRING PERIODIC PROGRAM AND FINANCIAL REPORTS, HAVING WHI'S STAFF OR REPRESENTATIVES VISIT FIELD PROJECTS AND GRANTEES, MOU'S OR GRANTEE AGREEMENTS, AND IN SOME CASES HAVING AN OUTSIDE AUDITOR REVIEW GRANTEE FINANCIAL INFORMATION.

PART I, LINE 3, COLUMN (E):

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: ANTI-HUMAN TRAFFICKING, CHILD SPONSORSHIP, EDUCATION, MICROFINANCE, DISASTER RELIEF, RURAL DEVELOPMENT

REGION: SUB-SAHARAN AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: CHILD SPONSORSHIP, HIV/AIDS PREVENTION, EDUCATION, RURAL DEVELOPMENT, ANTI-HUMAN TRAFFICKING, COMMUNITY HEALTH, AGRICULTURE

SCHEDULE F-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule F (Form 990)

▶ Attach to Form 990 to list additional information for Schedule F (Form 990) Part I, line 3; Part II, line 1; or Part III.
▶ See instructions for Schedule F (Form 990).

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization: WORLD HOPE INTERNATIONAL, INC.

Employer identification number: 35-1985485

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA (INCLUDES CANADA AND MEXICO, NOT USA)	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		15,434.
Totals ▶					15,434.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F-1 (Form 990) 2009

932181 02-01-10

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	CHILD SPONSORSHIP	63,521.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HIV/AIDS PREVENTION	150,869.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HIV/AIDS PREVENTION	152,152.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CHILD SPONSORSHIP	12,487.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	ANTI-HUMAN TRAFFICKING	23,466.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	CHILD SPONSORSHIPS, MICROFINANCE, SCHOOL CONSTRUCTION	129,648.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	CHILD SPONSORSHIP, DISASTER RESPONSE	76,350.	WIRE	0.		
		SOUTH AMERICA	BIBLE COLLEGE SCHOLARHSIPS	7,200.	WIRE	0.		
		SOUTH ASIA	CHILD SPONSORSHIP	41,329.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	CHILD SPONSORSHIP	86,877.	WIRE	0.		
		SOUTH ASIA	CHILD SPONSORSHIP	29,307.	WIRE	0.		
		SOUTH ASIA	CHILD SPONSORSHIP	54,129.	WIRE	0.		
		SOUTH ASIA	DISASTER RELIEF	18,500.	WIRE	0.		
		SOUTH ASIA	CHILD SPONSORSHIP	23,236.	WIRE	0.		
		SOUTH ASIA	CHILD SPONSORSHIP	136,038.	WIRE	0.		
		SOUTH ASIA	CHILD SPONSORSHIP	23,559.	WIRE	0.		
		SUB-SAHARAN AFRICA	SCHOOL CONSTRUCTION /REHABIL./SCHOLARSHIP	17,117.	WIRE	0.		
		SUB-SAHARAN AFRICA	SUPPORT NUTRITION PRGM AT KAMAKWIE HOSPITAL/SCHOLARSHIPS	19,567.	WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	BIBLE COLLEGE SCHOLARSHIPS	14,968.	WIRE	0.		
		SUB-SAHARAN AFRICA	ANIMAL MULTIP./HUSBANDRY/VIL DEV. TRUST	21,091.	WIRE	0.		
		SUB-SAHARAN AFRICA	REACH4LIFE PROGRAM/OPERATIONAL SUPPORT/ANTI-HUMAN TRAFFICKING	85,242.	WIRE	0.		
		NORTH AMERICA (INCLUDES CANADA AND MEXICO, NOT U.S.)	CHILD SPONSORSHIP PROGRAM/POVERTY REDUCTION PROGRAM SUPPORT	15,434.	CHECK	0.		

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
WORLD HOPE INTERNATIONAL, INC.

Employer identification number
35-1985485

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000 Check this box if no one recipient received more than $5,000 Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ [ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SALVATION ARMY - WORLD SERVICE OFFICE - 615 SLATERS LANE - ALEXANDRIA, VA 22314	13-2923701	501(C)(3)	39,350.	0.			ANTI-HUMAN TRAFFICKING PROJECT-LIBERIA, WEST AFRICA

2 Enter total number of section 501(c)(3) and government organizations ▶ 1.

3 Enter total number of other organizations ▶ 0.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule I (Form 990) 2009

932101 02-02-10

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22
Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information

SCHEDULE I, PART I, LINE 2: WHI MONITORS GRANTS IT AWARDS TO ORGANIZATIONS BY THE CEO AND COO REQUESTING PERIODIC UPDATES. WHI RARELY GIVES GRANTS IN THE USA.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization: WORLD HOPE INTERNATIONAL, INC.

Employer identification number: 35-1985485

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	5	11,338.	MEDIAN VALUE - SHARE
10	Securities - Closely held stock	X	1	15,012.	QUART. SHARE PRICE
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (GOODS)	X	0	154,991.	FAIR MARKET VALUE
26	Other ▶ ( )				
27	Other ▶ ( )				
28	Other ▶ ( )				

29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment	29	1

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II			
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information

SCHEDULE M, PART I, COLUMN (B): WHI RECEIVED GIFT PACKS DONATIONS FROM VARIOUS CHURCHES, GROUPS, AND INDIVIDUALS. THE GIFT PACKS INCLUDED SCHOOL SUPPLIES AND HYGIENE PRODUCTS.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization: WORLD HOPE INTERNATIONAL, INC.

Employer identification number: 35-1985485

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SEEKING OF FINANCIAL SUPPORT FOR SUCH PROJECTS. THE PURPOSES ALSO INCLUDE PARTICIPATING IN CRISIS INTERVENTION FOR VICTIMS OF NATURAL DISASTERS AND PROVIDING TECHNICAL ASSISTANCE FOR ORGANIZATIONAL AND PROGRAM DEVELOPMENT RELATING TOWARDS PROVIDING EMERGENCY RELIEF AND SUSTAINABLE ECONOMIC DEVELOPMENT PROJECTS FOR THE DISADVANTAGED.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

YOUNG WOMEN AND MEN IS CRUCIAL TO DEFEATING THE HIV/AIDS PANDEMIC.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

ESTABLISHED AND, AT OVER 20,000 CLIENTS IN 2009, HAS MORE CLIENTS THAN ANY OTHER FINANCIAL INSTITUTION IN THE COUNTRY.

THE MICROCAP FUND PROVIDES LOANS TO MICROFINANCE INSTITUTIONS AROUND THE WORLD. THE LOAN PRODUCTS ARE DESIGNED TO MIGRATE MICROFINANCE INSTITUTIONS FROM GRANT FUNDING TO COMMERCIAL LOAN FUNDING. WHI FOUND THAT MICROFINANCE INSTITUTION MANAGERS MAKE MUCH BETTER DECISIONS ABOUT THE USE OF FINANCIAL RESOURCES WHEN THEY ARE WORKING WITH BORROWED CAPITAL RATHER THAN GRANTS. THESE LOANS HELP TO PREPARE THE INSTITUTIONS TO ACCESS OTHER SOURCES OF DEBT CAPITAL AND THEY HELP THE INSTITUTIONS TO BECOME SELF-SUFFICIENT. MICROCAP WAS ABLE TO ISSUE THREE NEW LOANS IN 2009 ADDING TO THE THREE EXISTING LOANS. AT THE END OF 2009, THE TOTAL PRINCIPAL VALUE OF THE OUTSTANDING LOAN PORTFOLIO IS JUST OVER $1 MILLION.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization: WORLD HOPE INTERNATIONAL, INC.

Employer identification number: 35-1985485

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

GROUPS IN NORTH AMERICA ARE ENCOURAGED TO PUT TOGETHER "CHRISTMAS GIFT PAKS" CONTAINING HYGIENE PRODUCTS, BOOKS AND SMALL TOYS, WHICH ARE LATER SENT TO DIFFERENT COUNTRIES AND DISTRIBUTED TO CHILDREN. IN 2009, MORE THAN $150,000 WORTH OF THESE "GIFT PAKS" WERE GATHERED FOR DISTRIBUTION TO SOME OF THE COUNTRIES WHERE THE HFC PROGRAM OPERATES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

HOPE CORPS

EXPENSES $ 1328323. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

COMMUNITY/RURAL DEVELOPMENT

EXPENSES $ 1176519. INCLUDING GRANTS OF $ 5777. REVENUE $ 10087.

ANTI-HUMAN TRAFFICKING

EXPENSES $ 1172919. INCLUDING GRANTS OF $ 71239. REVENUE $ 13887.

EDUCATION INITIATIVES/SCHOOL DEVELOPMENT

EXPENSES $ 562033. INCLUDING GRANTS OF $ 244552. REVENUE $ 79528.

OTHER PROGRAMS

EXPENSES $ 527793. INCLUDING GRANTS OF $ 79585. REVENUE $ 88287.

PUBLIC AWARENESS AND EDUCATION

EXPENSES $ 379133. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization: WORLD HOPE INTERNATIONAL, INC.

Employer identification number: 35-1985485

DIASTER RELIEF

EXPENSES $ 56247. INCLUDING GRANTS OF $ 25210. REVENUE $ 0.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

HAITI, CAMBODIA, LIBERIA, SIERRA LEONE,

AZERBAIJAN, MOZAMBIQUE, ZAMBIA, HONG KONG,

MALAWI, SOUTH AFRICA, BOSNIA-HERZEGOVINA

FORM 990, PART VI, SECTION A, LINE 2: JOHN LYON, BOARD MEMBER, IS THE SON OF JO ANNE LYON, BOARD CHAIR.

FORM 990, PART VI, SECTION B, LINE 11: WHI HIRES AN INDEPENDENT ACCOUNTING FIRM TO PREPARE THE FEDERAL FORM 990. ONCE WHI RECEIVES A DRAFT, IT IS REVIEWED BY THE OFFICERS OF WHI AND DISTRIBUTED TO ALL BOARD MEMBERS. ONCE APPROVED, IT IS FINALIZED, SIGNED, AND FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: IN ORDER TO MONITOR AND ENFORCE THE CONFLICT OF INTEREST POLICY, EVERY YEAR AT THE MARCH BOARD MEETING, THE BOARD IS PROVIDED WITH THE POLICY AND ASKED TO FILL OUT AND SIGN AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE. OFFICERS AND KEY EMPLOYEES ARE ALSO REQUIRED TO FILL OUT AND SIGN THE ANNUAL QUESTIONNAIRE.

ANY MEMBER OF THE WORLD HOPE BOARD OR A KEY EMPLOYEE WHO IS AN OFFICER, BOARD MEMBER, A COMMITTEE MEMBER OR STAFF MEMBER OF A PARTNER ORGANIZATION SHALL IDENTIFY HIS OR HER AFFILIATION WITH SUCH ORGANIZATIONS. FURTHER, IN CONNECTION WITH ANY POLICY COMMITTEE OR BOARD ACTION SPECIFICALLY DIRECTED

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization: WORLD HOPE INTERNATIONAL, INC.

Employer identification number: 35-1985485

TO THAT ORGANIZATION, HE/SHE WILL NOT PARTICIPATE IN THE DECISION AFFECTING THAT ORGANIZATION AND THE DECISION MUST BE MADE AND/OR RATIFIED BY THE FULL BOARD.

FORM 990, PART VI, SECTION B, LINE 15A: A COMMITTEE COMPOSED OF WHI'S TREASURER, VICE-CHAIRMAN AND ANOTHER DIRECTOR REVIEWED COMPARABLE DATA GLEANED FROM A NUMBER (70) OF SIMILAR ORGANIZATIONS - BOARD MEMBERS AND OTHER DEVELOPMENT AND RELIEF AGENCIES IN THE DC AREA. THESE COMPARATIVES LOOK AT THE CEO'S COMPENSATION AS WELL AS COO AND CFO'S DATA WHEN AVAILABLE. THE INFORMATION WAS GLEANED FROM THE VARIOUS ENTITIES' MOST RECENT 990.

THE SUBCOMMITTEE THEN MAKES A RECOMMENDATION RELATING TO ONLY THE CEO. THE BOARD IN A EXECUTIVE SESSION, LOOKS AT THE RECOMMENDATION OF THE COMPENSATION SUBCOMMITTEE AND THE COMPARATIVE DATA.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AK,AZ,CA,FL,GA,IL,MD,MN,MS,NH,NM,NC,OK,OR,PA,TN,UT,VA,WV,WI

FORM 990, PART VI, SECTION C, LINE 19: WHI MAKES ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC BY POSTING THEM ON WHI'S WEBSITE AND ON THE EFCA'S (EVANGELICAL COUNCIL FOR FINANCIAL ACCOUNTABILITY) WEBSITE. OTHER INFORMATION SUCH AS GOVERNING DOCUMENTS, FEDERAL FORM 990 AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

SCHEDULE R (Form 990)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

WORLD HOPE INTERNATIONAL, INC.

Employer identification number

35-1985485

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
WORLD HOPE MICROCAPITAL FUND, LLC - 20-5714291, 625 SLATERS LANE, #200, ALEXANDRIA, VA 22314-1176	LOANS/TECH, SUPPORT TO MICROFINANCE INSTITUTIONS IN DEVELOPING COUNTRIES	DELAWARE	482,475.	1,068,185.	N/A

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(d) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
FIRST STEP ECONOMIC OPPORTUNITY ZONE, INC. - 27-1035915, 625 SLATER LANE, #200, ALEXANDRIA, VA 22314-1176	ASSIST WITH A BUSINESS ENTERPISE ZONE IN SIERRA LEONE	DE	N/A	C CORP	0.	0.	100%

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to other organization(s)	1b		X
c Gift, grant, or capital contribution from other organization(s)	1c		X
d Loans or loan guarantees to or for other organization(s)	1d		X
e Loans or loan guarantees by other organization(s)	1e		X
f Sale of assets to other organization(s)	1f		X
g Purchase of assets from other organization(s)	1g		X
h Exchange of assets	1h		X
i Lease of facilities, equipment, or other assets to other organization(s)	1i		X
j Lease of facilities, equipment, or other assets from other organization(s)	1j		X
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		X
l Performance of services or membership or fundraising solicitations by other organization(s)	1l		X
m Sharing of facilities, equipment, mailing lists, or other assets	1m	X	
n Sharing of paid employees	1n	X	
o Reimbursement paid to other organization for expenses	1o		X
p Reimbursement paid by other organization for expenses	1p		X
q Other transfer of cash or property to other organization(s)	1q		X
r Other transfer of cash or property from other organization(s)	1r		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1) FIRST STEP ECONOMIC OPPORTUNITY ZONE, INC.	N	0.
(2)		
(3)		
(4)		
(5)		
(6)		

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations? Yes	(d) No	(e) Share of end-of-year assets	(f) Disproportionate allocations? Yes	(f) No	(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner? Yes	(h) No

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Type or print	Name of Exempt Organization	Employer identification number
File by the extended due date for filing the return See instructions.	WORLD HOPE INTERNATIONAL, INC.	35-1985485
	Number, street, and room or suite no. If a P.O box, see instructions. 625 SLATERS LANE, NO. 200	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ALEXANDRIA, VA 22314-1176	

Check type of return to be filed (File a separate application for each return):

[X] Form 990 [ ] Form 990-EZ [ ] Form 990-T (sec. 401(a) or 408(a) trust) [ ] Form 1041-A [ ] Form 5227 [ ] Form 8870
[ ] Form 990-BL [ ] Form 990-PF [ ] Form 990-T (trust other than above) [ ] Form 4720 [ ] Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ▶ THE ORGANIZATION
  625 SLATERS LANE, NO. 200 - ALEXANDRIA, VA 22314-1176
  Telephone No. ▶ 703-923-9414 FAX No ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ▶ [ ]. If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until NOVEMBER 15, 2010.

5 For calendar year 2009, or other tax year beginning _____, and ending _____

6 If this tax year is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	8a	$	
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	$	
c	**Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	$	N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶ R H Title ▶ CPA Date ▶ 8/3/10