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Department of the Treasury Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
Sponsoning organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form
The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-1150

2009

Open to Public Inspection

A	For the	e 2009 calend	ar year,	or tax year beginning	January 1	, 2009,	and ending	Dec	ember	31	, 20 09
$\overline{}$		applicable	Please use IRS	C Name of organization				D Emplo	-	entification r	number
님	Address	-	label or	Homes of Love, Inc.	· · · · · · · · · · · · · · · · · · ·				6	2-1852652	
H	Name ci Initial ret	•	print or type	Number and street (or P.O box	c, if mail is not delivered to stre	et address)	Room/suite	E Telepi	none ni	ımber	
H	Termina		See Specific		86	5-660-4048	i				
Ŏ.	Amende	d retum	F Grou	р Ехе	mption						
	Applicat	ion pending	Instruc- tions.	Knoxville, TN 37930				Num	ber ▶	•	
	• Sec	tion 501(c)(3)	organiz	ations and 4947(a)(1) none	xempt charitable trusts n	ust attach	G Accou	intina Me	thod.	Cash	✓ Accrual
				npleted Schedule A (Form			1	(specify)			
							H Check	<u> </u>	f the o	rganization	us not
. 1	Websi	ite: ▶ www.	.homes	oflove.org						:hedule B (F	
-					√ (insert no.)) or 52	— ı · .	Z, or 990		,, 60 010 00 (1	0.111.000,
	Check				, , , , , , , , , , , , , , , , , , , ,					un than COE	
			_	zation is not a section 509(a)(turn is not required, but if th		-		•			,000. A
		· · · · · · · · · ·						<u>·</u>	ete ret	um.	
	art I			9 to determine gross receipts					\$	for Dort	11
L		• • • • • • • • • • • • • • • • • • • •		enses, and Changes		u balanc	es (See the	instruc		ior Part	
	1		_	s, grants, and similar amo				٠ ٠ ١	1		222,868.23
	2	•		evenue including governr	nent fees and contracts				2		
	3	Membersh	ip dues	and assessments					3		
	4	Investment						[4		1,042.62
	5a	Gross amo	unt fro	m sale of assets other tha	ın inventory	. <u>5a</u>			- 1		
	b	Less: cost									
_	C	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)									
9	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming , check here ▶ □									
Revenue	а	Gross reve	nue (no	ot including \$	of contribution	ns					
		reported on line 1)									
	Ь	•		nses other than fundraisin		. 6b			1		
	1	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)									
	7a										
	1										
	C		_	ss) from sales of inventor	(Cubtract line 7h from		-31		7c		
	8				V (Subtract line-y b from	ilite, raj .	/3/	· :	8		
	1 :	Other reve	•		70 05 0 0	. <i>0110</i> .	٠ . این د	:/ }	9		222 040 05
	9			dd lines 1, 2, 3, 4, 5c, 6c,		: 3//10 :	30:1.	. •			223,910.85
	10			amounts paid (attach sc	nedule) . \ cfp. 🖰	. <i>۱</i> ۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	٠٠ ز ٠٠ -	}	10	•	
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99	12			mpensation, and employe	1 1/	· '			12		48,228.31
Ë	13			and other payments to in	. \ \ \ /	··· · ·		$\cdot \cdot \cdot \downarrow$	13		
Expenses	14	Occupancy, rent, utilities, and maintenance							14		12,155.88
Ш				ons, postage, and shippir					15		4,768.18
	16			lescribe Programs, of				,	16		144,443.84
	17			Add lines 10 through 16					17		209,596.21
र	18			for the year (Subtract line					18		14,314.64
Se	19			d balances at beginning					ŀ		
Š	,	end-of-yea	r figure	reported on prior year's	return)			[19		153,592.
Ref (Assets	20			net assets or fund balanc				[20		
	121	Net assets	or fund	l balances at end of year.	Combine lines 18 throu	gh 20	<u> </u>	. ▶	21		167,906.64
p	art II	Balance	Shee	ts. If Total assets on line	25, column (B) are \$1,2	50,000 or	more, file For	m 990 i	nstea	d of Form	990-EZ.
હ્ય				(See the instructions fo	r Part II.)		(A) Beg	inning of	/ear	(B) End	l of year
2	2 C	ash, savings.	and in	vestments				149	,135	22	163,141
یخ	3 L	and and build								23	
2	4 O			e Furniture, accounts r		• • •	1	10	,270		6,091
2	έτ	otal assets .							,405		169,232
	, . 5 T						`,		,813		1,326
7	, I	et assets or	fund h	ribe ► Payroll liability alances (line 27 of colum	n (B) must agree with li	21\	-' 		502		167 906

	000 LE (2000)					, age =
Par	t III Statement of Program Service Accom	plishments (See the instri	uctions for Part III	.)		Expenses
		see attached - Attachment 1				ired for section
Desc	cribe what was achieved in carrying out the org	anization's exempt purpos	ses. In a clear ar	nd concise		(3) and 501(c)(4)
man		a)(1) trusts, optional				
each	program title.				for oth	
28	Family homes - cared and provided shelter, food, clo	thing, education, & medical	care for 70-80 at-ris	k children		
	in southeast Asia					
	(Grants \$) If this amount	28a	162,731.53			
29						
				•••••		
	(Grants \$) If this amount	ıncludes foreign grants, che	eck here	▶ □	29a	
30	Chants \$ 1 this amount	includes foreign grants, ch	sok nere	· • <u> </u>	234	
30		·····				
			•••••			
	(County C	unalisadas faraigas avanta, ab-		. ▶ □	30a	
24		includes foreign grants, chi			Sua	
31	Other program services (attach schedule)				210	
22	(Grants \$) If this amount Total program service expenses (add lines 28a t	includes foreign grants, che			31a 32	156,243.50
	t IV List of Officers, Directors, Trustees, and Key		en if not compense			
rai	List of Officers, Directors, Trustees, and Rey	(b) Title and average	(c) Compensation	(d) Contribution		(e) Expense
	(a) Name and address	hours per week	(If not paid, enter -0)	employee benefit deferred compe	plans &	account and other allowances
D= (Sary Chesney, 9917 Dutchtown Road,	devoted to position	enter -o)	deterred compe	nsation	other allowarices
		President, 4 hrs	o		0	0
	xville, TN 37932		0			
	William Park, 14310 Virtue Road,	Sec./Treasurer, 2 hrs	o		0	0
	oir City, TN 37772-5357		0			-
	thew Loy, 3920 Sandy Shore Drive,	Board members, 2 hrs	0		0	0
	oir City, TN 37772		U			
	Michael Sims, 439 Wyndham Hall Way,	Board member, 2 hrs	0		0	0
	xville, TN 37934					
	nael Wood, 2734 McAmmon Road,	Board member, 2 hrs	_		^	•
	kford, TN 37853	-	0		0	0
	bie Chesney, 9917 Dutchtown Road,	Executive director, 25 hrs	\$17 200 annually		0	0
Kno	xville, TN 37932		\$17,200annually			0
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years and the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	ade to the organizing or governing documents? If "Yes," attach a conformed copy of common organizing or governing documents? If "Yes," attach a conformed copy of common organizing or governing documents? If "Yes," attach a conformed copy of common organization or lines 2, 6a, and 7a (among others), but solo—T, attach a statement explaining why the organization did not report the income on Form 990-T. have unrelated business gross income of \$1,000 or more or was it subject to section ing, and proxy tax requirements? 1.	Part	Other Information (Note the statement requirements in the instructions for Part V.)			
description of each activity Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T. Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? If "Yes," has it filed a tax return on Form 990-T for this year? Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 36 The enter amount of political expenditures, direct or indirect, as described in the instructions. ■ 37a Did the organization file Form 1120-POL for this year? Did the organization form, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? By the "Yes," complete Schedule L, Part II and enter the total amount involved Bection 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c	ade to the organizing or governing documents? If "Yes," attach a conformed copy of common from business activities, such as those reported on lines 2, 6a, and 7a (among others), but the 30-T, attach a statement explaining why the organization did not report the income on Form 990-T. Thave unrelated business gross income of \$1,000 or more or was it subject to section ing, and proxy tax requirements? ***atax return on Form 990-T for this year? **undergo a liquidation, dissolution, termination, or significant disposition of net assets es," complete applicable parts of Schedule N **ale expenditures, direct or indirect, as described in the instructions. ▶ 37a **ille Form 1120-POL for this year? **porrow from, or make any loans to, any officer, director, trustee, or key employee or were in a prior year and still outstanding at the end of the period covered by this return? **phedule L, Part II and enter the total amount involved **anizations. Enter: **pital contributions included on line 9 **getion 4912 ▶ 39a **getion 4912 ▶ 39a **getion 4915 ▶ 39a **getion 4915 ▶ 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction with a disqualified ar, and that the transaction has not been reported on any of the organization's prior? If "Yes," complete Schedule L, Part I **getion 4012 P 301 P 3				Yes	No
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		C	organization managers or disqualified persons during the year under sections 4912,			
	ganization	d				
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	The second secon	е		40e		, !
41 List the states with which a copy of this return is filed. ▶ Tennessee		41	List the states with which a copy of this return is filed. ▶ Tennessee			
42a The organization's books are in care of ▶ Susan Carol B Hagemeyer Telephone no. ▶ 865-599-9	nich a copy of this return is filed. ► Tennessee	42a	The organization's books are in care of ▶ Susan Carol B Hagemeyer Telephone no. ▶	865-59	9-927	•
			Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ►	379	34	
Located at N 111 Loudoup Road Suite 102 Knowille TN 7ID . 4 N 27034	oks are in care of ▶ Susan Carol B Hagemeyer Telephone no. ▶ 865-599-9279	b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b At any time during the calendar year, did the organization have an interest in or a signature or other authority	oks are in care of Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN ZIP + 4 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		Yes	No
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Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN ZIP + 4 S 37934 e calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial Yes No 42b					
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN c calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial needs to be a count of the foreign country:		and Financial Accounts.			
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of ▶ Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN c calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial ne of the foreign country: ▶ or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank ints.	С	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶	42c		✓
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of ▶ Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN ZIP + 4 ▶ 37934 e calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial	43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. 1	▶ □
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of ▶ Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN ZIP + 4 ▶ 37934 e calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank or exceptions and filing requirements for Foreign Bank or exceptions are exceptions and filing requirements for Foreign Bank or exceptions are exceptions and filing requirements for Foreign Bank or exceptions are exceptions and filing requirements for Foreign Bank or exceptions are exceptions are exceptions are exceptions are excepti		and enter the amount of tax-exempt interest received or accrued during the tax year			
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of ▶ Susan Carol B Hagemeyer Indoun Road, Suite 102, Knoxville, TN Indoun Road, Suite 102, Knoxville, Th Indoun Roa			1	Yes	No
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN c calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank ints. c calendar year, did the organization maintain an office outside of the U.S.? the control of the foreign country: Interest received or accrued during the tax year Telephone no. 865-599-9279 37934 Yes No 42b 42b 42c 42c 42c 43	44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			
b 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)?	oks are in care of Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN c calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial or exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank ints. c calendar year, did the organization maintain an office outside of the U.S.? ne of the foreign country: me of the foreign country: Magnetic Promotion		Form 990-EZ	44		✓
b 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)?	oks are in care of ▶ Susan Carol B Hagemeyer Indour Road, Suite 102, Knoxville, TN Indour Road, Suite 102, Knoxville, Th Indour Roa	45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		1
b 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)? If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If	oks are in care of ▶ Susan Carol B Hagemeyer Indoor Road, Suite 102, Knoxville, TN Indoor Road, Suite 102, Knoxville, Th Indoor Roa			m 990)-FZ	(5000)
		41		40e		✓
41 List the states with which a copy of this return is filed. ▶ Tennessee			List the states with which a copy of this return is filed. ▶ Tennessee		0.027	
						_
42a The organization's books are in care of ▶ Susan Carol B Hagemeyer Telephone no ▶ 865-599-9	nich a copy of this return is filed. ► Tennessee	42a	Located at N 111 Louisum Road Suite 102 Knowville TN 7/D + 4 N)
42a The organization's books are in care of ▶ Susan Carol B Hagemeyer Telephone no ▶ 865-599-9	nich a copy of this return is filed. ► Tennessee	42a	The organization's books are in care of ▶ Susan Carol B Hagemeyer Telephone no. ▶	865-59	9-9279	•
THE THE PRODUCTION DOUGHOUS DISTRIBUTED TO THE PRODUCTION OF THE P			Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ►			
4Za ne organization's books are in care of ▶ Susan Carol B Hagemeyer Telephone no ▶ 865-599-9		42a	Telephone no. ► 1)
Topico III.	oks are in care of ▶ Susan Carol B Hagemeyer Telephone no. ▶ 865-599-9279	b		379	34	
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934	oks are in care of ▶ Susan Carol B Hagemeyer Telephone no. ▶ 865-599-9279 udoun Road, Suite 102, Knoxville, TN ZIP + 4 ▶ 37934	þ				
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b At any time during the calendar year, did the organization have an interest in or a signature or other authority	oks are in care of ► Susan Carol B Hagemeyer Telephone no. ► 865-599-9279 udoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 e calendar year, did the organization have an interest in or a signature or other authority			42b	Yes	No ✓
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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 Ye	oks are in care of Susan Carol B Hagemeyer Undown Road, Suite 102, Knoxville, TN Calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial Yes No		•	42D		V
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN ZIP + 4 S 37934 e calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial Yes No 42b					
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN c calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial needs to be a count of the foreign country:		and Financial Accounts.			
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN c calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial to the of the foreign country: ne of the foreign country: or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	С		42c		1
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of ▶ Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN c calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial ne of the foreign country: ▶ or exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank ints.	43	- · · · · · · · · · · · · · · · · · · ·		. 1	▶ □
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of ► Susan Carol B Hagemeyer udoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 e calendar year, did the organization have an interest in or a signature or other authority unt in a foreign country (such as a bank account, securities account, or other financial	43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		.	▶ □
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of ▶ Susan Carol B Hagemeyer Indoun Road, Suite 102, Knoxville, TN Indoun Road, Suite 102, Knoxville, The Indoun Road, Suite 102, Indoun Road, Sui		and enter the amount of tax-exempt interest received of accrued during the tax year		Yes	No
Located at ► 111 Loudoun Road, Suite 102, Knoxville, TN ZIP + 4 ► 37934 b 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)?	oks are in care of Susan Carol B Hagemeyer Indour Road, Suite 102, Knoxville, TN Indour Road, Suite 102, Knoxville, Th Indour Road,	44	E 000 F7	44		✓
b 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)?	oks are in care of ▶ Susan Carol B Hagemeyer Indour Road, Suite 102, Knoxville, TN Indour Road, Suite 102, Knoxville, Th Indour Roa	45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		✓
b 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)? If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If	oks are in care of ▶ Susan Carol B Hagemeyer Indoor Road, Suite 102, Knoxville, TN Indoor Road, Suite 102, Knoxville, Th Indoor Roa				-FZ	(2009)

Part	Section 501(c)(3) organizations and 501(c)(3) organizations and section 4 and complete the tables for lines 50 a	947(a)(1) nonexempt char	exempt charitat itable trusts mus	ole trusts only. A st answer questio	ll sections 46–	on 49b
46	Did the organization engage in direct or indire				Y	es No
	candidates for public office? If "Yes," complete				46	1
47	Did the organization engage in lobbying activiti				47	√
48	Is the organization a school as described in sect				48	
	Did the organization make any transfers to an e		~		49a	
	If "Yes," was the related organization a section				49b	
	Complete this table for the organization's five employees) who each received more than \$100					
		(b) Title and average	(c) Compensation	(d) Contributions to		pense
	(a) Name and address of each employee paid more than \$100,000	hours per week devoted to position		employee benefit plans & deferred compensation	accou	int and owances
-None-				doi:2100 doi:1001100110011	Other an	Owances
						•
				,		
	Total number of other employees paid over \$10		0			
-None-	(a) Name and address of each independent contractor	or paid more than \$100,000	(b) 1y	pe of service	(c) Comp	ensation
d	Total number of other independent contractors	each receiving over \$100,0	00▶	0	-	
	Under penalties of perjury, I declare that I have exam and belief, it is true, correct, and complete Declaration					
Sign Here	Signature of officer	Tark	1	9 2 1 C	<u> </u>	
		ark, Treas				
Paid	Preparer's signature	Date	Check if self- employed ▶	Preparer's identifying num	ber (See in:	structions)
Prepare	Firm's name (or		Ell	'I		
Use On	y yours if self-employed), address, and ZIP + 4			one no 🕨		
May the	e IRS discuss this return with the preparer show	vn above? See instructions			Yes	No
						EZ (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047
2009
Open to Public

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Homes of Love Inc

Employer Identification number

HOI	lie5	or Love, mc.							02 .		03203	<u>-</u>	
Pa	rt I	Reason	for Public Ch	arity Status (All or	ganizatio	ons mus	t comple	ete this	part.) Se	e instruc	ctions.		
The	ne organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)												
1			-	rches, or association		_		_					
2	$\overline{\Box}$			on 170(b)(1)(A)(ii). (Att					(-)(-)(-	707			
3	ñ			nospital service organ			ın sectio	n 170(h)	(1)(A)(iii)				
4	_			ition operated in conj						170/b)/1	VAVIII)	Ente	r the
4			-						ii Section	170(0)(1)(~)(ייי).	LINE	
_		hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
5	Ш	section 170(b)(1)(A)(iv). (Complete Part II.)											
6			_	ernment or governme									
7	Ц	-	-	/ receives a substantia (1)(A)(vi). (Complete F	-	ns suppo	nt irom a	governm	ientai unii	or trom	ine ger	ierai p	אווטשכ
8		A community	y trust described	in section 170(b)(1)	(A)(vi). (C	Complete	Part II.)						
9	\mathbf{Z}			receives: (1) more that				m contrib	utions, m	embershi	p fees,	and g	gross
				ed to its exempt funct									
				ent income and unre									
				after June 30, 1975.									
10	\Box	An organizat	ion organized a	nd operated exclusive	alv to test	for nubl	ic eafaty	See sec	tion 500(a\/4\			
11	H			and operated exclusive							r to ca	m/ OI	rt the
• •	ш												
	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.									00.0.			
	a ☐ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Other												
е	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	f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting												
			, check this box										L.
8		Since Augus following per	_	the organization acce	epted any	gift or c	ontributio	on from a	iny of the				
		(i) A persor	who directly or	r indirectly controls, e	either alo	ne or toa	ether wit	th persor	ns describ	ed in (ii)		Yes	No
				ning body of the sup							11g(i)		
			-	rson described in (i) a		Ŭ					11g(ii)		
				of a person described		(ii) above	?				11g(iii)		
h				ation about the suppo									
	Name	e of supported	(ii) EIN	(iii) Type of organization		organization		ou notify	(vi) (s the	(vii)	Amount	of
117		ganization	(,	(described on lines 1-9	in col. (i) la	sted in your	the organ	nization in	organizat	on in col		upport	
				above or IRC section (see instructions))	governing	document?		of your port?	(i) organiz	red in the			
				(see insu ocuons)	Yes	No	Yes	No	Yes	No			
]							
				1	1	1 '	l	1		1			

Total

	Support Schedule for Org (Complete only if you chec					and 170(b)(1)(A)(vi)
	tion A. Public Support				,	,	
Ca	lendar 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	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		 			ļ <u></u> -	
5 6	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) Public support. Subtract line 5 from line 4.						
-	tion B. Total Support	<u> </u>	. 			· · · ·	· · · · · · · · · · · · · · · · · · ·
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10 .		<u> </u>			 	1
12	Gross receipts from related activities, etc	•	,			12	· · · · · · · · · · · · · · · · · · ·
13	First five years. If the Form 990 is for organization, check this box and stop he						
Sec	tion C. Computation of Public Su		ntage		<u> </u>	<u> </u>	
14	Public support percentage for 2009 (line			1 column (fl)		14	%
15	Public support percentage from 2008 Sci		•			15	%
16a	33% % support test—2009. If the organic				ine 14 is 33%		
	and stop here. The organization qualifies	as a publicly	supported orga	nızation			▶ [
þ	33% % support test—2008. If the organization qua						· –
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circum	acts-and-circui	mstances" test,	check this box	and stop here	. Explain in Par	t IV how the
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "forganization meets the "facts-and-circumsta Private foundation. If the organization did	acts-and-circun inces" test. The	nstances" test, o organization qua	check this box	and stop here. cly supported or	Explain in Part	IV how the ▶ [
10	THE OLYGINZALON GIO	HOLOHOUR A DE	JA 071 III IG 10, 10	a, 100, 17a, 01	D, CHOOK HIS	SON GIRL SEE III	3.140110113 F L

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

Sec	tion A. Public Support	d the box o	11 11116 3 01 1 8	art 1./						
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
•	action year (or tison year beginning iii)	(a) 2000	(b) 2000	(0) 2001	(u) 2006	(8) 2009	(i) iotai			
1	Gifts, grants, contributions, and membership fees received. (Do not include				177834.82	220580.22	398415.04			
2	any "unusual grants.")				177034.32	220300.22	000413.04			
3	organization's fax-exempt purpose									
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	 			177834.82	220580.22	398415.04			
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .				0	0	0			
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				0	0	0			
	Add lines 7a and 7b				0	0	0			
8	Public support (Subtract line 7c from line 6.)						220580.22			
	tion B. Total Support	4-1 0005	#1 0000	4.3.0007	/ B 0000	4 3 0000	(0 T			
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
9 10a	Amounts from line 6				177834.82	220580.22	398415.04			
b	Unrelated business taxable income (less				3656.12	1042.62	4698.74			
	section 511 taxes) from businesses acquired after June 30, 1975			1	o	o	0			
c	Add lines 10a and 10b				3656.12	1042.62	4698.74			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on				0	0	0			
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)				0	0	0			
13	Total support. (Add lines 9, 10c, 11, and 12)				181490.94	221622.84	403113.78			
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									
	tion C. Computation of Public Sur				-T		00.5			
15 16	Public support percentage for 2009 (line Public support percentage from 2008 S	chedule A, Pa	art III, line 15	ne 13, column	`''	15 16	99.5 % 98 %			
Sec	tion D. Computation of Investmen				T					
17	Investment income percentage for 2009					17	.5 %			
18	Investment income percentage from 20					18	2 %			
19a	331/3 % support tests – 2009. If the orga 17 is not more than 331/3 %, check this bo	ox and stop he	ere. The organi	ization qualifies	s as a publicly s	upported organ	nization 🕨 🗹			
b	33% % support tests—2008. If the organi line 18 is not more than 33% %, check this	box and stop	here. The orga	nization qualifie	s as a publicly s	supported organ	uzation 🕨 🗹			
20	Private foundation. If the organization of	aid not check	a pox on line 1	14. 19a. or 19b	, check this bo	x and see instr	uctions 🕨 🗀			

Part IV	orm 990 or 990-EZ) 2009 Supplemental Information. Part II, line 17a or 17b; and	Complete this Part III, line 12.	part to provide the Provide any other	ne explanations required er additional information.	by Part II, line 10; See instructions.
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PRIMARY EXEMPT PURPOSE

Attachment 1: 990-EZ, Page 2, Part III

For Calendar year 2009 & tax year beginning 01-01-09, ending 12-31-09

EIN: 62-1852652 Homes of Love, Inc.

Homes of Love, Inc. establishes and maintains small, permanent, family-structure homes for orphaned and at-risk children in southeast Asia. Homes of Love is committed to providing long-term care to these children emotionally, physically, educationally, and spiritually. Each home consists of home parent(s) and up to 10 same gender children.