

#### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# 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)

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

Open to Public Inspection

<u> </u>	For the	2009 cai	<u>endar ye</u>	ar, or tax	year beginnii	ng				,	and en	iding				
ВС	heck if ap	plicable	Please use IRS	C Name	of organization	PRID	E ANI	HOPE I	MINIST	RY			D Employer	dentification	number	
ַ ַ ַ ַ ַ ַ	ddress o	change	ange label or Doing Business As  print or Number and street (or P O box if mail is not delivered to street address) Room/										72-1481855			
ַ∟ַוּ	lame cha	ange	print or type	Numb	er and street (or	PO box if ma	aıl ıs no	t delivered t	o street a	ddress)	Ro	om/suite	E Telephone	number		
<u></u> "	nitial retu	ım	See	25502 F	HIGHWAY 20	)							(985) 986-28	308		
ד⊡	erminate	ed	Specific Instruc-	City or	r town, state or c	ountry, and ZI	P + 4		-							
	mended	l return	tions.	ANGIE				L	A	704	426		G Gross rece	rpts \$	1,7	42,929
	pplication	n pending	FN	lame and	address of prii	ncipal office	г					H(a) is t	his a group retur	n for affiliates	? Yes	X No
			MYRA	MAGEE	31298 JERR	Y MOSES	ROA	D. ANGIE	E. LA 70	0426		H(b) Are	e all affiliates inc	luded?	X Yes	□ No
	ay-eyer	npt status		01(c) (	3) <b>∢</b> (inse			947(a)(1)		527			No," attach a list			
		: ► NA	, <u>[V] v</u>	J1(C) (	0 / 4 (113		<u> </u>	347 (0)(1)	<u> </u>	<u> </u>			oup exemption n	•	,	
			₩.		<u> </u>	<del>1 </del>		٦								
		ganization		orporation	Trust	Association	n	_ Other ▶			L Year	of forma	tion 2001	M State o	f legal domicile	LA
Р	art l		mmary													
	1	-		_	nization's mi			-								
ø					O AT-RISK II											
auc					TIONAL, AND			AL WILL	HELP I	PREVE	NT A	ND BRE	AK THE CY	CLE OF I	NSTITUTIO	NALIZA
Ë					CHILDREN A											
24Hities & Governance	2				f the organiza						osed	of more	than 25% o	f its net as	sets.	
<b>ક</b>	3			-	ers of the gov	-			-					3		7
ties	4				voting memb		gover	ning body	y (Part \	VI, lıne	1b) .			4		
3	5				ees (Part V, li	•		•	•					5		
<b>X</b>	6				ers (estimate		• .							6	·····	
M	7a				siness reven					e 12 .	•		•	7a		
<del>-02</del>	b	Net unre	elated b	<u>usiness t</u>	axable incom	ne from Fo	rm 99	0-1, line	<u>34 .</u>		•			7b		
Z		C = =4=21b.	.4		(Dest ) (III )	4h)							Prior Year	7 007	Current Yea	
⊋	8				s (Part VIII, lir			•				<b></b>		7,087		5,000
enu	9	_			e (Part VIII, li					•		<del></del>	1,50	7,136	1,4	737,929
	10 11			-	t VIII, column , column (A),				and 11a		•					
MNEGO UGUN	12			•						-	• •		1.524	4,223	1 7	42,929
-26	13	Grante	and sim	Jar and	inter belov (Pe	LY COUR	nn (Δ)	lines 1	A), IIIIE 3)	12)				7,485	1,1	20,389
SCA	14				embers (Part				· .	•	•			,400		20,303
	15				etion, emplo				 ımn (A)	lines	5–10)	<del></del>	1 191	3,596	1.3	343,417
ses	16a	Profess	ional ful	Salaising	fees (Part IX	Columb (	A) lin	ne 11e)	arriir (7 t)	,	0 .0,		1,100	,,000	',\	710, 111
Expenses	b				es (Part IX,				•	•	•					
页	17				द्धि क्रिकेट (A)।								107	7,847		64,780
	18				s 13–17 (mu				(A), line	25).				3,928		28,586
	19		-		Subtract line	-								5,295		214,343
nt Assets or		•										Begini	ning of Current		End of Yea	
sets	20	Total as	sets (Pa	art X, line	<del>:</del> 16)								21	5,295	2	219,343
A A	21	Total lia	bilities (	Part X, III	ne 26) .		•									
\$ E	22	Net ass	ets or fu	ind balan	ices Subtrac	t line 21 fr	om lır	ne 20 .				l.	21	5,295		219,343
Pa	rt II			Block		·										
		Unde	er penaltie:	s of perjury,	I declare that I h	nave examine	d this re	eturn, includi	ing accom	panying	schedul	es and st	atements, and to	the best of n	ny knowledge	
		and	Dellet, It is	Me, correct	t, and complete	Declaration of	и ргера	rer (otner tri	an onicer,	) is based	on an i	mormado	ri or which prepa 	— / .	lowleage /	$\mathcal{D}$
			$\mathcal{A}_{I}$	$\langle \lambda \lambda \lambda \rangle$		$\mathcal{A} \setminus \mathcal{A}$	_	US S	2 /				15		120/	9
Sig	n		Signature	of office				<del>- X</del>					Date		, ,	
He	re		•	(1	RECTOR			U			05-13	-2009	24.5			
		Ì₽		orint name a							00 .0		<del></del>			•
		Prep	arer's		2 2 2 2				Date		CI	neck if		Preparer's in	dentifying numb	per
Pai	d		ature							4.00.15	se		▶X	(see instruction	ons)	
Pre	parer's	s	'n nom = /:		BRUMFIELD				5/1	<u>1/2010</u>	en	nployed	<u> </u>			
	Only	Firm	Firm's name (or yours if self-employed),  SOLID FINANCIAL SERVICES						EIN ▶							
		1 00.	address, and ZIP + 4 2124 WASHINGTON ST , FRANKLINTON, LA 70438					Phone no ▶ 985 795-9144								
May	the IF	RS discu	ss this r	eturn witl	h the prepare	er shown a	bove?	(see ins	truction	s)					X Yes	□ No

CAN POINT 3

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		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," complete Schedule C, Part I	3		Χ_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Х
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		
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	j		
	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	Х	
•	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		. 6	
_	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.		\$	ĺ
•	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		4	
-	Schedule D, Parts XI, XII, and XIII	12		Х
12A	Was the organization included in consolidated, independent audited financial statements for the tax Yes No		3	
	year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		Х
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			l
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ļ	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	<b>_</b>	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.	20	<u> </u>	<u>  X                                   </u>

Form	990 (2009) PRIDE AND HOPE MINISTRY 72	<u>-1481855</u>	Р	age 4
Par	t 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	Χ	
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		Х
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	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		Х
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	1		
	990-EZ? If "Yes," complete Schedule L, Part I	. 25b		Х
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		Х
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)			
а	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		х
С	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
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		Х
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		Х
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		Х
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		Х
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		Х
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	- 1		
	W	37	l	l 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

orm 9		1481855	Р	age 5
Par	Statements Regarding Other IRS Filings and Tax Compliance			
_			Yes	No
1а	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	U.S. Information Returns Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1b.	-		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	-		
C	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	''		$\vdash$
20	Statements, filed for the calendar year ending with or within the year covered by this return  2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	⊣ 2b		1
-	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 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		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	1 1		
_	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
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6		
7	gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).	6b		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a	-	Ì
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
•	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	7 1		
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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		ļ
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?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the organization make any taxable distributions under section 4966?	9a 9b		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	30		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12			
a 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			
b	Gross income from other sources (Do not net amounts due or paid to other sources	7		
~	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

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

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body . 1a 7			
b	Enter the number of voting members that are independent	1		*
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	2		Х
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		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		Х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	9a		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal			
Reve	enue Code )			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Х
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		Х
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	ļ		
	rise to conflicts?	12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1		
	describe in Schedule O how this is done	12c		<u></u>
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official.	15a		
b	Other officers or key employees of the organization	15b		<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			ļ
	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		ļ	[
	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	<u> </u>	
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► LA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s of the control of the contro	niy)		
	available for public inspection. Indicate how you make these available. Check all that apply.			
	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 interesting the second sec	est		
	policy, and financial statements available to the public	L _		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ► MYRA MAGEE (985) 732-94	194		
	22502 HWY 21, ANGIE, LA 70426			

72-1481855 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors** 

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year 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 compe	ensate any curre	ent off	ice	r, dı	irec	tor, o	r trı	ustee		
(A)	(B)			((	C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee o or director	Institutional trustee Individual trustee or director			Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
MYRA MAGEE EXECUTIVE DIRECTOR	40	Х						7,580		
										į
										_
					Γ					

Form	990 (2009) PRIDE AND HOPE MINISTRY									72-14818	
–Pa₁	Section A. Officers, Directors, Tru	ustees, Key Er	nploy	ees,	, and	l Hig	hest	Col	mpensated Em	ployees (continu	ued)
	, (A)	(B)			-	C)			(D)	(E)	(F)
•	Name and title	Average hours per week	Individual trustee or director	Institutional trustee	(chec Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
											I
							_				
						_			<u> </u>		
							-				
		! !									
<u>1b</u>	Total				<u> </u>	<del></del>		<b>&gt;</b>	7,580		<u> </u>
2	Total number of individuals (including but no reportable compensation from the organization)		se lisi	ted a	abov	e) w	no re	ceiv	ed more than \$1	100,000 in	
3	Did the organization list any former officer,					yee	, or h	ighe	st compensated		Yes No
4	employee on line 1a? If "Yes," complete Sc For any individual listed on line 1a, is the su	ım of reportable	e com	pen	satio					o <b>m</b>	3 X
	the organization and related organizations of individual	preater than \$1 	50,00	0? li	f "Ye	s," c	ompi	lete :	Schedule J for s		4 X
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Y								rganization for		5 X
Sec	tion B. Independent Contractors	<del></del>							<del></del>		
1	Complete this table for your five highest cor compensation from the organization.	mpensated inde	epend ———	ent	contr	racto	ors th	at re		an \$100,000 of	
	(A) Name and business a	address							(B) Description of ser	vices Co	(C) mpensation
									<del></del>		
2	Total number of independent contractors (in more than \$100,000 in compensation from			ed to	tho	se li	sted	abov	e) who received	i	

Form 99	0 (200	<u> </u>						72-148	1855 Page
Part	VIII	Statement of Revenue							
•	•			<b></b>		(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					
gra	b	Membership dues		1b		İ			
ts, am	С	Fundraising events		1c					
gif Iar	d	Related organizations .		1d					
ns, imi		Government grants (contributions)		1e					
ıtio er s	f	All other contributions, gifts, grants	, and						
ib.		similar amounts not included above	Э	<u>1f</u>	5,000				
ont od (	g	Noncash contributions included in	lines 1a-1f	\$					
ā ŭ	h	Total. Add lines 1a-1f	<u> </u>		. >	5,000			<u> </u>
ne					Business Code				=
ven	2a		<b></b>		900099	1,672,706	1,672,706		
Program Service Revenue	b	STATE OF MISSISSIPPI			900099	65,223	65,223		
vice	С		<b></b>						
Ser	d		<b></b> -						
ä	е								
rog.	f	All other program service revenue							
•	g	Total. Add lines 2a-2f			▶	1,737,929			
	3	Investment income (including divid	ends, interes	t, ar	nd				
		other similar amounts) .			. ▶				
	4				ds . ▶				
	5	Royalties			<b>•</b>				
			(ı) Real		(II) Personal				
	6a	Gross Rents .							
	b	Less rental expenses							ļ
	С	Rental income or (loss)							
	d	Net rental income or (loss)						u	
	7a	Gross amount from sales of	(ı) Securitie	s	(II) Other				
		assets other than inventory							
	b	Less cost or other basis							
		and sales expenses							
	С	Gain or (loss)	L						
	d	Net gain or (loss)			▶				
Ð	8a	Gross income from fundraising							
ב		events (not including \$				}			
Š		of contributions reported on line 1c	)						
ď		See Part IV, line 18	•	а		:			
Other Revenue	b	Less direct expenses	•	b	L				
ŏ	С	Net income or (loss) from fundraisi	-	- •	<b>D</b>				ļ
	9a	Gross income from gaming activities	es			1			
	_	See Part IV, line 19	•	. а					
		Less direct expenses	•	b	L			<del></del>	<del></del>
		Net income or (loss) from gaming a	activities		· •				
	10a	Gross sales of inventory, less				1			
		returns and allowances .		а					
		Less cost of goods sold		b					
	<u> </u>	Net income or (loss) from sales of	nventory	<u></u>	▶				
		Miscellaneous Revenue			Business Code	1			
	11a			-	<u> </u>				
	b			-	<u> </u>		-		1
	C	All all and an annual an annua			<del></del>				
	a	All other revenue	•		L				
	e 42	Total revenue See instructions		•	.▶	1 742 020	1 727 020	<del></del>	<del></del>
		TOTAL FOUNDING SAA INCIDIOTIONS					7 7 7 7 (117)		· ·

#### 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				nd (D).
	not include amounts reported on lines 6b, 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	7,689	7,689		
2	Grants and other assistance to individuals in	1			
	the U S See Part IV, line 22	12,700	12,700		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	7.500		7.500	
c	trustees, and key employees	7,580		7,580	<del></del>
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1			
7	Other salaries and wages	1,118,954	1,118,954		<del></del>
8	Pension plan contributions (include section 401(k)	1,110,334	1,110,334		
•	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	216,883	216,883		
11	Fees for services (non-employees)	=,			
а	Management .				
b	Legal	1,640	1,640		<u> </u>
С	Accounting [	10,807		10,807	<del></del>
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other .				
12	Advertising and promotion .				
13	Office expenses	41,524		41,524	
14	Information technology	4,459		4,459	
15 16	Royalties .	15,446		15,446	
17	Occupancy	2,538	2,538	10,440	
18	Payments of travel or entertainment expenses	2,000	2,000		<u> </u>
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,261		9,261	
23	Insurance .	23,537	20,504	3,033	
24	Other expenses Itemize expenses not		1		
	covered above (Expenses grouped together			į	
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below )				
a	STIPENDS FOR VOLUNTEERS	2,975	2,975		
b	CAMPS AND YOUTH OUTINGS	27,057	27,057	GEO	
c d	LICENSE RENEWAL REPAIRS	650 5,486		650 5,486	
u e	LAND PURCHASE	5,000	<del></del>	5,000	·····
-	All other expenses PROGRAM TRAINING	14,400	14,400	3,000	
25	Total functional expenses. Add lines 1 through 24f	1,528,586	1,425,340	103,246	
26	Joint costs. Check here ▶ if following	.,020,000	.,, .	.55,2 10	
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined		ļ		
	educational campaign and fundraising	1			
	solicitation				
					Form 990 (2009)

72-1481855

	•		(A)		(B)
			Beginning of year		End of year
•	1	Cash—non-interest-bearing	215,295	1	214,343
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3_	
\ssets	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of		_	_
	_ ا	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		_	~
G	_	Part II of Schedule L		6	
set	7	Notes and loans receivable, net		7	
Ąŝ	8	Inventories for sale or use		8	<del> </del>
•	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or 10a 5,000			
	١.	other basis Complete Part VI of Schedule D			
		Less accumulated depreciation . 10b		10c	5,000
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12 13	
	13 14	Investments—program-related. See Part IV, line 11	· · ·	14	
	15	Intangible assets Other assets See Part IV, line 11		15	<u> </u>
	16	Total assets. Add lines 1 through 15 (must equal line 34)	215,295		219,343
	17	Accounts payable and accrued expenses	210,290	17	219,343
	18	Grants payable .		18	
	19	Deferred revenue	<del></del>	19	
	20	Tax-exempt bond liabilities .		20	
s	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
Ē		employees, highest compensated employees, and disqualified			
Ë		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties .		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
S		Organizations that follow SFAS 117, check here ▶ and complete lines 27 through 29, and lines 33 and 34.			
ĕ					
<u>a</u>	27	Unrestricted net assets		27	·
8	28	Temporarily restricted net assets		28 29	
Ĕ	29	Permanently restricted net assets		29	-
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ► X			
		and complete lines 30 through 34.			_
	30	Capital stock or trust principal, or current funds	215,295		219,343
ASS	31	Paid-in or capital surplus, or land, building, or equipment fund .		31	
et.	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	215,295		219,343
	34	Total liabilities and net assets/fund balances	215,295	34	219,343

Part	XI Financial Statements and Reporting			
	<u> </u>		Yes	No
1	Accounting method used to prepare the Form 990: X 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	Х	
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
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?	2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
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.	l _		_
	Separate basis X 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	Х	
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	Х	

Form **990** (2009)

#### SCHEDULE A (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

OMB No 1545-0047
2009

Department of the Treasury Internal Revenue Service

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

► See separate instructions.

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Name of the organization

Employer identification number

L KIL	<u>IE Al</u>	AD HOPE MIN	NISTRY						l	12-14	481855		
Pai	_			narity Status (All org						<u>nstructio</u>	ns		_
	orgar			ation because it is (Fo									
1	$\square$			rches, or association o			ed in sec	tion 170(	(b)(1)(A)(i	).			
2	$\square$			on 170(b)(1)(A)(ii). (At									
3	Ц	A hospital or	a cooperative h	rospital service organi	zation de	scribed in	section	170(b)(1)	(A)(iii).				
4			search organiza me, city, and sta	ation operated in conju ate	inction wi	th a hospi	tal descri	bed in <b>se</b>	ction 170	(b)(1)(A)	(iii). Ent	er the	
5				r the benefit of a collect (Complete Part II)	ge or univ	ersity owr	ned or op	erated by	a govern	mental ur	nit descr	ıbed	
6		A federal, sta	ate, or local gov	ernment or governme	ntal unit d	escribed	ın sectioi	n 170(b)(	1)(A)(v).				
7	X	•		y receives a substanti (1)(A)(vi). (Complete I	•	its suppoi	rt from a g	governme	ental unit o	or from th	e genera	al publi	ic
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II )											
9	Ħ		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 organizat	tion organized a	nd operated exclusive	ly to test	for public	safety S	ee <b>sectio</b>	n 509(a)(	4).			
11	$\Box$	An organizat	ion organized a	nd operated exclusive	ly for the	benefit of	, to perfoi	rm the fur	nctions of,	or to car	ry out th	e	
			-	blicly supported organ	-		-				-		on
				at describes the type of	f support	ıng organı	zation an	d comple	te lines 1	1e throug	h 11h		
		a Type	i b [	Type II c	Type	e III–Fund	tionally in	ntegrated		d 🔲 1	Type III-	-Other	
е		-		y that the organization			-	-	-		•		
		-		on managers and othe	r than on	e or more	publicly s	supported	l organiza	tions des	cribed ii	n section	on
			section 509(a)(2										
f		_	ation received : check this box	a written determinatior	n from the	RS that	ıt ıs a Typ	pe I, Type	II, or Typ	e III supp	orting		Γ
g		_		the organization acce	nted anv	aift or con	itribution 1	from any	of the			•	<u> </u>
9		following per		the organization door	picu uny	giit or con	illibation	nom any	01 1110				
				or indirectly controls,	either alo	ne or toge	ther with	persons	described	ın (ıi)		Yes	No
		•	•	verning body of the su		rganizatıc	n?		•	•	11g(i)		
			-	person described in (i			_		•		11g(ii)		
				y of a person describe				•		•	11g(iii)		
<u>h</u>			T	ation about the suppor				ou notify	(vi)	Is the	(viii)	Amount	of
(1)		e of supported anization	(n) E!N	(described on lines 1-9	in col (i) li	sted in your	the organ	nization in	organizat	tion in col		support	
	O.g.			above or IRC section (see instructions))	governing	document?		of your port?		zed in the S ?	İ		
				(See motradions),	Yes	No	Yes	No	Yes	No	1		
								1					
				<u> </u>	<u> </u>			<del> </del> -	1	<u> </u>			
-													_
									<del>                                     </del>	<del> </del>	<del> </del> -		
										<u> </u>	ļ		
				· · · · · · · · · · · · · · · · · · ·	<del> </del>	<del>                                     </del>		<del>                                     </del>					

Total

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") 110,757 574,747 1,047,821 1,507,136 1,742,929 4,983,390 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 Total. Add lines 1 through 3 110,757 574,747 1,047,821 1,507,136 1,742,929 4,983,390 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) Public support. Subtract line 5 from line 4 4,983,390 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 4 110,757 574,747 1,047,821 1,507,136 1,742,929 4,983,390 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 4,983,390 Gross receipts from related activities, etc. (see instructions) 4,983,390 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 100 00% 15 Public support percentage from 2008 Schedule A, Part II, line 14 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 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.

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

Par				tion 509(a)(2)			-
<u> </u>	(Complete only if you checked the	ne box on line	9 of Part I)				
	ion A. Public Support endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
_		(a) 2003	(b) 2000	(6) 2007	(u) 2000	(e) 2003	(I) TOTAL
1	Gifts, grants, contributions, and membership fees received (Do not			1			
	include any "unusual grants")						
•	· · · · · · · · · · · · · · · · · · ·		<del></del>				
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						1
5	its behalf The value of services or facilities					-	+
3	furnished by a governmental unit to the						
	organization without charge				1		
6	<b>Total.</b> 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						
U	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the	l					
	amount on line 13 for the year			İ	1	ļ	
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from		j i		ł		
_	line 6 )				<u> </u>	l	
	tion B. Total Support	(-) 0005	4. 2000	(-) 0007	(4) 2000	(-) 2000	(D.T. tl
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						ļ
	payments received on securities loans,				}		
	rents, royalties and income from similar		• [	1		ŀ	
b	sources Unrelated business taxable incorne (less		<del>  </del>		<del> </del>		
	section 511 taxes) from businesses		İ				
	acquired after June 30, 1975				ļ		
С	Add lines 10a and 10b		!				
11	Net income from unrelated business		1			ł	
	activities not included in line 10b,				1		
	whether or not the business is regularly					1	
12	carried on . Other income Do not include gain or	<u> </u>		<del>                                     </del>	<del> </del>		<del>-</del>
	loss from the sale of capital assets	i					
	(Explain in Part IV )		!				
13	Total support. (Add lines 9, 10c, 11,		1				
	and 12)	1		<u> </u>	<u> </u>	1	
14	First five years. If the Form 990 is for the organic	ganization's fir	st, second, thir	d, fourth, or fift	h tax year as a	a section 501	(c)(3)
	organization, check this box and stop here			· · · · · · · · · · · · · · · · · · ·		· · ·	. ▶ ∟
	tion C. Computation of Public Support						
15	Public support percentage for 2009 (line 8, co				•	15	
16	Public support percentage from 2008 Schedu			· · · · · · · · · · · · · · · · · · ·	•	16	
	tion D. Computation of Investment Inc			20 12 201:	(f)	17	
17	Investment income percentage for 2009 (line			ne 13, column	(1))	17	
18	Investment income percentage from 2008 Sc 33 1/3% support tests—2009. If the organiza	.nedule A, Par	unii, iirie 17	Dine 14 and b	ne 15 is more:		6 and line 17 is
19a	not more than 33 1/3%, check this box and s	ton here. The	Organization o	ualifies as a n	ublicly support	ed organizat	ion •
b		lid not check a h	ox on line 14 or	line 19a, and line	e 16 is more than	1 33 1/3% and	. <u></u>
U	line 18 is not more than 33 1/3%, check this box al	nd stop here. T	he organization of	qualifies as a pul	olicly supported	organization	▶□
20	Private foundation. If the organization did n						ions ▶ 🗀
-			•				

Schedule A (Form	990 or 990-EZ) 2009	PRIDE AND	HOPE MINISTE	RY		72-1481855	Page 4
Part-IV <sup>1</sup>				part to provide the explanation	s required		0,
·				Provide any other additional in			
	<u></u>						
<b></b>							
					•••••		
					• • • • • • • • • •		
			• • • • • • • • • • • • • • • • • • • •				

#### **SCHEDULE D** (Form 990)

# **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

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

PRID	E AND HOPE MINISTRY		7	<sup>7</sup> 2-1481855
Part	Organizations Maintaining Done	or Advised Funds or Other Similar Fu	nds or Accou	nts. Complete if
	the organization answered "Yes" to			•
		(a) Donor advised funds	(b) Funds a	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 d	onor advisors in writing that the assets held	in donor advise	ed b
	funds are the organization's property, subject	-		Yes No
6	Did the organization inform all grantees, dor			
	used only for charitable purposes and not for		or for any other	
	purpose conferring impermissible private be			Yes No
Par	Conservation Easements. Comp	elete if the organization answered "Yes"	to Form 990, F	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.		of an historically	important land area
	Protection of natural habitat		of a certified his	·
		1 10001 Valion		torio otraotaro
2	Preservation of open space Complete lines 2a through 2d if the organization	ation hold a gualified consequation contribut	on in the form o	f a concentration
_	easement on the last day of the tax year	ation field a qualified conservation contributi	on in the form o	r a conservation
	obsolution the last day of the tax year		Hall	d at the End of the Tay Veer
а	Total number of conservation easements		. 2a	d at the End of the Tax Year
b	Total acreage restricted by conservation ea	sements	2b	
c	Number of conservation easements on a ce		2c	
d	Number of conservation easements include	· ·	2d	
3	Number of conservation easements modifie	• • •		organization
	during the tax year ▶		,	J
4	Number of states where property subject to	conservation easement is located		
5	Does the organization have a written policy	regarding the periodic monitoring, inspectio	n, handling of	
	violations, and enforcement of the conserva	tion easements it holds?.		Yes No
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing conservation	n easements dui	ring the year
	<b>•</b>			
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation eas	ements during t	he year
	<b>\$</b>			
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 r	•		
	balance sheet, and include, if applicable, the		nancial statemei	nts that describes
Pari	the organization's accounting for conservati	on easements ons of Art, Historical Treasures, or Other	Similar Assets	
r al	Complete if the organization answere		Similar Assets	·
4-			otomont and ha	lance shoot works of
та	If the organization elected, as permitted und art, historical treasures, or other similar assi			
	service, provide, in Part XIV, the text of the			
ь	If the organization elected, as permitted und			
_	historical treasures, or other similar assets h			
	service, provide the following amounts relati			•
	(i) Revenues included in Form 990, Part VII	I, 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 ass		
	following amounts required to be reported u			-
а	Revenues included in Form 990, Part VIII, li	<del>-</del>		\$
h	Assets included in Form 990, Part X		<b>▶</b> :	<b>S</b>

Part	t III Organizations Maintaining	<u> Collections of</u>	Art, Hist	orical 1	<u>reasures,</u>	or Ot	<u>her Similar Ass</u>	ets (continued)
3	Using the organization's acquisition, use of its collection items (check all		other recor	ds, chec	k any of the	follow	ring that are a sig	nıficant
а	Public exhibition	mat apply).	d $\square$	Loan	or exchange	e progr	ams	
b	Scholarly research		e 🗀	Other	_			
			<b>е</b> Ш	Other				
С	Preservation for future genera	itions						
4	Provide a description of the organization Part XIV	ation's collections	and expla	ın how t	hey further t	the org	anization's exem	ot purpose in
5	During the year, did the organization assets to be sold to raise funds rather							Yes No
Part	Escrow and Custodial Art IV, line 9, or reported an an	-		-	_	answe	ered "Yes" to Fo	rm 990, Part
1a	Is the organization an agent, trustee included on Form 990, Part X?	, custodian or oth	er interme	diary for	r contributio	ns or o	ther assets not	Yes No
b	If "Yes," explain the arrangement in	Part XIV and com	plete the t	following	table		_,	
							Ar	nount
С	Beginning balance					10	<del></del>	
d	Additions during the year					10	<del></del>	
е	Distributions during the year		•		•	1e		·····
f	Ending balance			•	•	1f	`L	
<b>2</b> a	Did the organization include an amo		Part X, lin	e 21?			•	Yes X No
b	If 'Yes," explain the arrangement in							
Part	V Endowment Funds. Comp	<u>plete if the organ</u>	<u>jization ai</u>	nswere	d "Yes" to I	Form 9		10
		(a) Current year	(b) Prio	r year	(c) Two year	s back	(d) Three years back	(e) Four years back
1a	Beginning of year balance							
þ	Contributions							ļ <u> </u>
С	Net investment earnings, gains,							
	and losses		ļ		<u> </u>			
d	Grants or scholarships			<u> </u>				-
е	Other expenditures for facilities	İ	İ		<u></u>			
£	and programs Administrative expenses		-		<del></del>			
f	End of year balance		<u> </u>					
g 2	Provide the estimated percentage of	f the year end hal	ance held	26	i		·	I
a	Board designated or quasi-endowme	•	ance neid	as				
b	Permanent endowment							
c	Term endov/ment ▶							
3a	Are there endowment funds not in the	ne possession of t	he organiz	zation th	at are held	and ad	ministered for the	)
	organization by	•	J					Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations			•				3a(ii)
b	If "Yes" to 3a(ii), are the related orga	anizations listed a	s required	on Sch	edule R?.		•	3b
4	Describe in Part XIV the intended us							
Párt	VI Investments—Land, Build	dings, and Equ	ipment.	See For	rm 990, Pa	rt X, lı	ne 10	
	Description of investment	(a) Cost or ot (investm			st or other s (other)	, ,	Accumulated epreciation	(d) Book value
1a	Land		5,000					5,000
b	Buildings					-		
С	Leasehold improvements							
d	Equipment .							
<u>e</u>	Other .							
Tota	I. Add lines 1a through 1e. (Column (	d) must equal For	m 990, Pa	rt X, col	lumn (B), lın	e 10(c)	)) <b>&gt;</b>	5,000

Schedule D (Form 990) 2009

		•
Por	•	
rav	10	•

Part VII Investments—Other Sec	curities. See Form 990, Part X,	line 12	- rage (
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market v	alue
Financial derivatives			
Closely-held equity interests			
Other			
• • • • • • • • • • • • • • • • • • • •			<del></del>
			<del>-</del>
		-	<del></del> _
• • • • • • • • • • • • • • • • • • • •			
Total (Column (b) must equal Form 990, Part X, col (B) line 12	2) ▶		
Part VIII Investments—Program	Related. See Form 990, Part X	line 13	
(a) Description of investment type	(b) Book value	(c) Method of valuation	
	(3) 23011212	Cost or end-of-year market v	alue
			<u></u>
		-	
	····		
Total (Column (b) must equal Form 990, Part X, col (B) line 13	) <b>&gt;</b>		
Part IX Other Assets. See Form	<u> </u>	<u> </u>	<del></del>
Cart IX	(a) Description		(b) Book value
			(=, ===================================
			<del> </del>
T-A-1 (Sa ware (b) reveal a reval Form 000 (	Ded V. ani (D) in a 45 )		<del></del>
Total. (Column (b) must equal Form 990, F Part X Other Liabilities. See Fo		<u> </u>	
	(b) Amount	<del></del>	
1. (a) Description of liability Federal income taxes	(b) Amount		
NO OUTSTANDING LIABILITIES		· <del></del>	
110 OUTSTAINDING EIABIEITIES	···	<del> </del>	
		<del></del>	
· · · · · · · · · · · · · · · · · · ·			

#### PRIDE AND HOPE MINISTRY

Sched	ule D (Form 990) 2009				Page <b>4</b>
Par	Reconciliation of Change in Net Assets from Form 990 to	Audited Financia	Stat	tements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		1,742,929
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,528,586
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		214,343
4	Net unrealized gains (losses) on investments	•	4		
5	Donated services and use of facilities		_5		
6	Investment expenses	•	6	<u> </u>	
7	Prior period adjustments		7		
8	Other (Describe in Part XIV)		8		
9	Total adjustments (net) Add lines 4 through 8		9		
10	Excess or (deficit) for the year per audited financial statements. Combine lin		10		214,343
Par	Reconciliation of Revenue per Audited Financial Stateme	ents 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				
а	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			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1		L	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
Э	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b .		Ŀ	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	12) .		5	
-Par	Reconciliation of Expenses per Audited Financial Statem	nents With Expens	es p	er 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		ļ		
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses .	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Sub ract line 2e from line 1 .		_	3	·
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
d	Other (Describe in Part XIV.)	4b			
С	Add lines 4a and 4b .		<u> </u>	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	18)		5	
Par	t XIV. Supplemental Information				
and	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and part to provide any additional information	Part XIII, lines 2d and			
			<b></b>		<del>-</del>

# PRIDE AND HOPE MINISTRY 72-1481855 Schedule D (Form 990) 2009 Page 5 Supplemental Information (continued)

# SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization PRIDE AND HOPE MINISTRY

oPart L

General Information on Grants and Assistance

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

Compleie if the organization answered "Yes" on Form 990, Part IV, lines 21 -: - 22. ► Attach to Form 990.

OMB No 1545-0047	2009	Open to Public
------------------	------	----------------

Inspection Employer identification number

72-1481855

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	tain recoids to s	substantiate the am	nount of the grants or a	ssistance, the grantee	s' eligibility for the grar	its or assistance, and	
the selection criteria used to award the grants or assistance?  2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	award the grar nization's proce	nts or assistance? edures foi monitorir	ng the usc of grant fund	Is in the United States			X Yes
Assistance to Governments and Other Assistance to Governments	Assistance to	Governments a	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990. Part IV, the 21-formation and programmed more than \$5,000. Use	of the United States	. Complete if the org	anization answered	1 "Yes" to
Part IV and Schedule I-1 (Form 990) if additional	le I-1 (Form 9)	90) if additional s	space is needed				
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Arnount 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
CENTER BAPTIST CHURCH 29825 HWY 21 ANGIE, LA 70426			2,500				DONATION
ANGIE PEE WEE WILDCATS 30523 E WESLEY RAY ROAD AN			2,500				EQUIPMENT PURCH
VARNADO HIGH SCHOOL 25543 WASHINGTON STREET A			700				EQUIPMENT PURC
AMERICAN RED CROSS 400 MEMPHIS STREET BOGALU			700				DONATION
COMMUNITY YOUTH 63206 HOLLIS LESLEY RD ANGI			1,209				UNIFORM PURCHAS
2 Enter total number of section 501(c)(3) and government organizations	n 501(c)(3) and	government organ	izations .				
3 Enter total number of other organizations	organizations	,			•	•	3

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

Schedule I (Form 990) 2009

Page 2

Schedule I (Form 990) 2009
Residual Grants and Other Assistance to individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

(6) Mathod of yalughon (book, (f) Description of non-cash assistance	appraisal, other)						and any other additional information						
							line 2, and				1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1
(t) amount of	non-cash assistance						equired in Part I,	1 1 1 1 1 1 1 1 1 1 1 1 1				; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(c) Anount c'	cash grant	1,700	10,800	200			to provide the information required in Part I, line 2,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(b) Number of	recipients		-	7				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1
Use Part IV and Schedule I-1 (Form 990) if additional space is needed (a) Type of grant or arcs arcs (b) Number of (c) Anount of		BRIDEGETTE COLE	TINA WILLIAMS	MAPLE MARTIN			Perative Supplemental Information. Complete this part						

#### SCHEDULE O (Form 990)

## Supplemental Information to Form 990

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

PRIDE AND HOPE MINISTRY

► Attach to Form 990.

Open to Public Inspection Employer identification number 72-1481855 Form 990 Part VI Line 19 PRIDE AND HOPE MINISTRY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,

# Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasury Internal Revenue Service

(99)

► See separate instructions. ► Attach to your tax return.

Attachment Sequence No **67** 

	IDE AND HOPE MINISTRY	990	nty to winch this i	om relates		72-1481855		
	rt I Election To Expense Certain		er Section 17	'9		12 1401000		
	Note: If you have any listed property, co.	• -						
1	Maximum amount. See the instructions for a						1	250,000
	Total cost of section 179 property placed in					•	2	200,000
	Threshold cost of section 179 property befo				• •	•	3	800,000
	Reduction in limitation Subtract line 3 from		•	•		•	4	
	Dollar limitation for tax year Subtract line 4				ried filina	•		
	separately, see instructions						. 5	250,000
6	(a) Description of property		(b) Cos	st (business use	only)	(c) Elected co	<del>'' '</del>	
					<i>)</i>	(9/ =:00:00 0:	-	
						_		
7	Listed property Enter the amount from line	29			7			
	Total elected cost of section 179 property		column (c). line	es 6 and 7			8	
	Tentative deduction Enter the smaller of li			_			9	-
	Carryover of disallowed deduction from line		Form 4562				10	
	Business income limitation Enter the smaller			than zero) or	line 5 (see in:	structions)	11	
	Section 179 expense deduction Add lines						12	
	Carryover of disallowed deduction to 2010				. ▶ 13	•	1	
	te: Do not use Part II or Part III below for list							
	rt II Special Depreciation Allowar				lude listed p	roperty) (See	ınstru	ictions)
14	Special depreciation allowance for qualified							
	during the tax year (see instructions)		, ,				14	
15	Property subject to section 168(f)(1) election	n .					15	
	Other depreciation (including ACRS)						16	
		unclude lieted	property ) (Se	e instruction	s.)			
Рa	rt 川間	. IIICIUUE IISIEU						
Рa	rt III MACRS Depreciation (Do not	. molade listed	Section A					
	MACRS Depreciation (Do not		Section A				17	449
17		vice in tax years	Section A beginning before	ore 2009			17	449
17	MACRS deductions for assets placed in ser	vice in tax years	Section A beginning before	ore 2009		▶ □	17	449
17	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here	vice in tax years ed in service dui	Section A s beginning beforing the tax yea	ore 2009 r into one or n	nore	► □		449
17	MACRS deductions for assets placed in ser If you are electing to group any assets place	vice in tax years ed in service dui n Service Durin	Section A s beginning beforing the tax yea g 2009 Tax Ye	ore 2009 r into one or n ar Using the	nore  General Dep			
17	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here Section B - Assets Placed in	vice in tax years ed in service dui . 1 Service Durin (b) Month and	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for	ore 2009 r into one or n . ar Using the	nore  General Dep (e)	(f)	m 	(g)
17	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here	vice in tax years ed in service durin Service Durin (b) Month and year placed	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation	ar Using the (d) Recovery	nore  General Dep		m 	
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property	vice in tax years ed in service dui . 1 Service Durin (b) Month and	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for	ar Using the (d) Recovery	nore  General Dep (e)	(f)	m 	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed ir  (a) Classification of property  a 3-year property	vice in tax years ed in service durin Service Durin (b) Month and year placed	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation	ar Using the (d) Recovery	nore  General Dep (e)	(f)	m 	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property  b 5-year property	vice in tax years ed in service durin Service Durin (b) Month and year placed	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation	ar Using the (d) Recovery	nore  General Dep (e)	(f)	m 	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed ir  (a) Classification of property  a 3-year property  b 5-year property  c 7-year property	vice in tax years ed in service durin Service Durin (b) Month and year placed	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation	ar Using the (d) Recovery	nore  General Dep (e)	(f)	m 	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property	vice in tax years ed in service durin Service Durin (b) Month and year placed	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation	ar Using the (d) Recovery	nore  General Dep (e)	(f)	m 	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property	vice in tax years ed in service durin Service Durin (b) Month and year placed	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation	ar Using the (d) Recovery	nore  General Dep (e)	(f)	m 	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property	vice in tax years ed in service durin Service Durin (b) Month and year placed	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation	ar Using the (d) Recovery period	nore  General Dep (e)	(f)	m 	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property	vice in tax years ed in service durin Service Durin (b) Month and year placed	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation	ar Using the (d) Recovery period	nore  General Dep (e)	(f) Method	m 	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental	vice in tax years ed in service durin Service Durin (b) Month and year placed	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation	ar Using the dispersion of the	General Dep (e) Convention	(f) Method	m 	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property	vice in tax years ed in service durin Service Durin (b) Month and year placed	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation	ar Using the (d) Recovery period  25 yrs. 27 5 yrs. 27 5 yrs.	MM MM	(f) Method	m 	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real	vice in tax years ed in service durin Service Durin (b) Month and year placed	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation	ar Using the dispersion of the	General Dep (e) Convention	(f) Method  S/L S/L S/L S/L S/L	m 	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property	vice in tax years ed in service dui  n Service Durin (b) Month and year placed in service	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation (business/investment)	25 yrs. 27 5 yrs. 39 yrs	MM MM MM MM MM	(f) Method  S/L S/L S/L S/L S/L S/L	Depre	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property f 20-year property h Residential rental property i Nonresidential real property Section C - Assets Placed in S	vice in tax years ed in service dui  n Service Durin (b) Month and year placed in service	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation (business/investment)	25 yrs. 27 5 yrs. 39 yrs	MM MM MM MM MM	(f) Method  S/L S/L S/L S/L S/L S/L	Depre	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Assets Placed in Sa Class life	vice in tax years ed in service dui  n Service Durin (b) Month and year placed in service	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation (business/investment)	ar Using the (d) Recovery period  25 yrs. 27 5 yrs. 27 5 yrs. 39 yrs  Using the Alternative of the period of the p	MM MM MM MM MM	(f) Method  S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	Depre	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property f 20-year property h Residential rental property i Nonresidential real property Section C - Assets Placed in S a Class life b 12-year	vice in tax years ed in service dui  n Service Durin (b) Month and year placed in service	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation (business/investment)	ar Using the (d) Recovery period  25 yrs. 27 5 yrs. 27 5 yrs 39 yrs  Using the Alt	MM MM MM MM MM MM MM MM MM MM MM MM MM	(f) Method  S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	Depre	(g)
19	MACRS deductions for assets placed in ser If you are electing to group any assets place general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property f 20-year property h Residential rental property i Nonresidential real property Section C - Assets Placed in S a Class life b 12-year c 40-year	vice in tax years ed in service dui  n Service Durin (b) Month and year placed in service	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation (business/investment)	ar Using the (d) Recovery period  25 yrs. 27 5 yrs. 27 5 yrs. 39 yrs  Using the Alternative of the period of the p	MM MM MM MM MM	(f) Method  S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	Depre	(g)
17 18	MACRS deductions for assets placed in ser If you are electing to group any assets placed general asset accounts, check here  Section B - Assets Placed in (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property f 20-year property h Residential rental property i Nonresidential rental property Section C - Assets Placed in S a Class life b 12-year c 40-year rt IV <sup>0</sup> Summary (See instructions)	vice in tax years ed in service dui  n Service Durin (b) Month and year placed in service	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation (business/investment)	ar Using the (d) Recovery period  25 yrs. 27 5 yrs. 27 5 yrs 39 yrs  Using the Alt	MM MM MM MM MM MM MM MM MM MM MM MM MM	(f) Method  S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	Depre	(g) eciation deduction
17 18 19 20 Pa 21	MACRS deductions for assets placed in ser If you are electing to group any assets placed general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property f 20-year property h Residential rental property i Nonresidential rental property section C - Assets Placed in Section C - A	vice in tax years ed in service dui  n Service Durin (b) Month and year placed in service  Service During	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation (business/investment)	25 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 40 yrs.	MM MM MM MM MM MM MM MM MM MM MM MM MM	(f) Method  S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	Depre	(g)
17 18 19 20 Pa 21	MACRS deductions for assets placed in ser If you are electing to group any assets placed general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property f 20-year property h Residential rental property i Nonresidential real property section C - Assets Placed in Section C - Ass	Service During  Service During  (b) Month and year placed in service  Service During	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation (business/investment) 2009 Tax Year	25 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 29 yrs	MM MM MM MM MM MM MM MM MM MM MM MM MM	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	Depre	(g) eciation deduction
17 18 19 20 Pa 21 22	MACRS deductions for assets placed in ser If you are electing to group any assets placed general asset accounts, check here  Section B - Assets Placed in  (a) Classification of property  a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property f 20-year property h Residential rental property i Nonresidential rental property section C - Assets Placed in Section C - A	Service During  Service During  (b) Month and year placed in service  Service During  Service During	Section A s beginning beforing the tax yea g 2009 Tax Ye (c) Basis for depreciation (business/investment) 2009 Tax Year	25 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 27 5 yrs. 28 yrs. 29 yrs.	MM MM MM MM MM MM MM MM MM MM MM MM MM	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	Depre	(g) eciation deduction

Form	4562 (2009)				PRIDE	AND H	OPE MII	NIST	RY			,	72-148	1855	Page 2
Part		Property (In	nclude automo	biles, d						phone	s. certa				1 age 2
			ntertainment, r								-,			-,	
		•	for which you a				•	rate	or deduc	cting le	ase exp	ense, d	comple	te	
	only 24	a, 24b, colum	nns (a) through (	c) of S	ection /	A, all of	Section E	3, a <u>n</u>	d Section	n C if a	pplicabl	le			
Secti	ion A—Depreciation	on and Other	r Information (	Caution	n: See	the instr	uctions f	or lin	nits for pa	sseng	er autoi	mobiles	3)		
24a	Do you have evidence	e to support the	business/investmen	it use cla	ımed?	X Yes	No		24b     f "Y	'es." ıs t	he evide	ence writ	tten?	X Yes	No
	(a)	(b)	(c) Business/				isis for dep-	-+-	(f)	r- <sup>-</sup>			h)	<del>-</del>	
	Type of property	Date placed	investment use	1	<b>d)</b> st or	1	n (business	i	Recovery	1	g) :hod/		ciation	Elected se	•
	(list vehicles first)	in service	percentage	ì	basis		ent use onl		period	l	ention		iction	CO	
25	Special depreciati		<del></del>					<del></del>			<u> </u>			<del></del>	<del></del>
	year and used mo		•	•							25	ł			
26	Property used mo						,		•						
	GE APV	1/1/2006	100 00%		14,500		11,5	40	5	200D	B - HY		835		
	OE SUV	10/1/2008	100 00%		41,984	<del></del>	20,9		5		B - MQ		7,977		
		1											. 1		
27	Property used 50°	% or less in a	qualified busing	ess use		•				•		<del></del>			
		<u> </u>								S/L -					
										S/L -	•				
										S/L -				j	
28	Add amounts in c	olumn (h), lın	es 25 through 2	7 Ente	r here	and on li	ine 21, p	age	1		28		8,812		
29	Add amounts in c	olumn (ı), line	e 26 Enter here	and or	line 7,	page 1						•	29		
			Sect	ion B-	-Inforn	nation o	n Use o	f Vel	nicles						
Comp	olete this section for v	ehicles used by	y a sole proprietor	, partne	r, or oth	er "more	than 5% o	owner	r," or relate	ed perso	n If you	ı provide	ed vehic	les to	
your e	employees, first answ	er the question	is in Section C to	see if yo	u meet	an excep	tion to co	mplet	ing this se	ection fo	r those v	vehicles		· · · · · · · · · · · · · · · · · · ·	
30	Total business/inves	stment miles di	riven	(	a)	(1	b)		(c)	(	d)	(4	e)	(1	I)
	during the year (do	not include co	mmuting		ıcle 1		ıcle 2	Ve	ehicle 3	Veh	ıcle 4	Veh	icle 5	Vehi	cle 6
	miles)				15,972		23,753							<u> </u>	
31	· · · · · · · · · · · · · · · · · · ·		• ,			<u> </u>								ļ	
32	Total other personal	I (noncommutir	ng)	<u> </u>		<u> </u>				ļ				<u> </u>	
	miles driven					ļ				ļ		<b></b>		<u> </u>	
33	Total miles driven d			ļ		<del> </del>				<u> </u>				<u> </u>	
	Add lines 30 through				15,972		23,753				1			ļ	
34	Was the vehicle ava	•	onal	Yes	No	Yes	No	Yes	No No	Yes	No	Yes	No	Yes	No
0.5	use during off-duty I			<b></b> -	X		X							<u> </u>	
35	Was the vehicle use		a more than	<u> </u>		ļ	<del>                                     </del>		-	-		-		<del>                                     </del>	1
26	5% owner or related	•			X	<u> </u>	X							<del>                                     </del>	1
36		valiable for		$\vdash$	<del>                                     </del>	-	1			<del> </del>	<del> </del>	<del> </del>	<del></del> -	<del> </del>	
	personal use?	Section C	Questions for E	mploy	ore W/	O Provi	ide Vehi	cles	for ilea	by The	ir Emp	lovees	<u> </u>	<u> </u>	<b></b>
Ancu	ver these questions									•	•	-			
	not more than 5% c		•	•		-	ig Secili	ט ווע	ioi veriici	es use	u by en	ipioyee	55 WIIU		
alc I	iot more than 570 C	WIICIS OF TOR	itea persons (se		uctions	<i></i>								Yes	No
37	Do you maintain a v	vritten policy st	atement that proh	ibits all i	persona	Luse of v	ehicles ir	ncludi	na comm	utına.					
٠.	by your employees?		atomotiv that pro-		p0.00a	. 455 51 1	JJ.J.								ĺ
38	• • • •		atement that proh	ıbıts per	sonal us	se of vehi	icles, exce	ept co	mmuting.	by your	employ	ees?			
	See the instructions	•		-					_	,,	• •				ł
39	Do you treat all use														
40	Do you provide mor					formation	from you	ır em	ployees al	bout					
	the use of the vehic			-											
41	Do you meet the red	quirements cor	ncerning qualified	automol	bile dem	nstratio	n use? (S	ee in	structions	)					
	Note: If your answe	er to 37, 38, 39,	40, or 41 is "Yes,	" do no	t comple	te Sectio	n B for th	e cov	ered vehic	cles				<u> </u>	L
Part															
		(a)			(b)	Date	(c	:)		d)		(e)		(	f)
	D	escription of cost	s		amo	rtization	Amort	ızable	C	ode	Amo	rtization j	period	Amortiz	ation for
						egins	amo		se	ction	Or	percenta	age	this	year
42	Amortization of co	osts that begi	ns during your 2	2009 ta	x year (	see inst	ructions)	)						,	
					<u> </u>						ļ			<u> </u>	
					<u> </u>		1		L_		1			<b></b>	
43		_	-		-	_					•		43	<b></b>	
44	Total. Add amou	ints in column	n (f) See the ins	truction	<u>ns for </u> w	here to	report						44	<u></u>	

# Use of Vehicles (4562 Part V, Section B) - 990

	•		Business	Commuting	commuting Other Tot		Personal Use Off Duty?		More than 5% owner?		Another vehicle avail for use?	
_		Vehicle Description	Miles	Miles	Miles	Miles	Υ	N.	Y	N	Y	N
	11	DODGE APV	15,972			15,972		Х		Х	Х	
	2	TOHOE SUV	23,753			23,753		Χ		Χ	X	