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Department of the Treasury Internal Revenue Service

SCANNED AUG 27 2010

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2009

Open to Public Inspection ► The organization may have to use a copy of this return to satisfy state reporting requirements.

	For th	ie 2009 calen	dar year,	or tax year beginning	, 2009	9, and ending				,	
В	Check if	f applicable		C	<u> </u>		D	Employe	er Identi	fication Number	
	Ad	dress change	Please use IRS label	VISION OF HOPE, IN	IC			73-1	126	958	
	$\boldsymbol{\vdash}$	me change	or print or type.	P O BOX 6272			E	Telephor			
	-	tial return	See	LAWTON, OK 73506				•		-8700	
	\vdash		specific Instruc-				\vdash	300	-22	3,00	
	\vdash	rmination	tions.				۔ ا	_		120	002
	\vdash	nended return			M E2 CHAHAN	Τ.		Gross re			803.
	Ар	plication pending			M W. SHAHAN	1.	H(a) Is this a gri H(b) Are all affil			₩	X No
				NW CHESLEY DRIVE LA			If 'No,' atta			tructions) Yes	∐ No
<u>I</u>		-exempt statu			4947(a)(1) or	527					
<u>J</u>	Web	osite: ► WW		pe.org			H(c) Group exer	nption nu	mber P	-	
K	Form	of organization	X Corpora	ation Trust Association	Other ► L	Year of Formation	on 1985	M s	tate of le	egal domicile OK	
Pa		Summa									
	1	Briefly descri	be the or	ganization's mission or most s	significant activities: _V	<u>/ision_of</u>	f Hope e	xist:	s_fo	r the	
اه		spreadin	a of t	he Gospel of Jesus	Christ through	h the in	fluence	of c	amps	<u>, clinics</u>	/
Ě		and spec	ial mi	nistry activities.	These activi	ties_inc	lude_sur	port	_for	_children	
Ĕ		whose pa	rents	are incarcerated a	nd_for_men_ius	t releas	ed from	inca	rcei	ation	
S		Check this bo		if the organization discontinu							
ğ	3	Number of vo		nbers of the governing body (f				L	3		3
ab ab	4	Number of in	depender	nt voting members of the gove	rning body (Part VI, Iir	ne 1b)		[4		3
윭	5	Total number	of emplo	yees (Part V, line 2a)				Į	5		0
Activitles & Governance				teers (estimate if necessary)				ļ	6		6
Ř				business revenue from Part V				}	7a		0.
	b	Net unrelated	d business	s taxable income from Form 9	90-T, line 34			l	7b		0.
							Prio	r Year	1	Current Ye	ar
	8	Contributions	and gran	nts (Part VIII, line 1h)				29,1	70.	24,	206.
2				nue (Part VIII, line 2g)				84,9	39.	104,	495.
Revenue	10	Investment in	ncome (Pa	art VIII, column (A), lines 3, 4	, and 7d) .			7	44.		102.
ď	11	Other revenu	e (Part V	III, column (A), lines 5, 6d, 8d	, 9c, 10c, and 11e)						
	12	Total revenue	e – add li	ines 8 through 11 (must equal	Part VIII, column (A),	line 12)]	L14,8	53.	128,	803.
	13	Grants and s	ımılar am	ounts paid (Part IX, column (A), lines 1-3)						
				members (Part IX, column (A							
		•		nsation, employee benefits (F		es 5-10)		13,9	50.	10,	123.
ses				ng fees (Part IX, column (A),		,					
Expenses				-						v ,	
ă	l			nses (Part IX, column (D), lin	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		* * * * * * * * * * * * * * * * * * *		-	<u>% </u>	
_				IX, column (A), lines 11a-11d		VED .		68,0			<u>677.</u>
	18	Total expens	es. Add li	ines 13-17 (must equal Part I)	(, co l umn (A), line 25)	70	<u> </u>	81,9	_		<u>800.</u>
	19	Revenue less	s expense	es. Subtract line 18 from line	2 P AUG 1 1	2010	11	32,8	56.	28,	<u>003.</u>
b 8					1 TO 1 1		Beginni	ng of Y	ear	End of Ye	ar
	20	Total assets	(Part X. I	ine 16)	000			561,4			264.
\$8		Total liabilitie	•		L_OGDEN			206,2			747.
Net Assets or Fund Balances			•	ances Subtract line 21 from l				455,2	59	482	517.
Pa	irt II		ure Blo		inc 20		J.,,	100,2	<u> </u>		
L					urn, unalluduna accompanyuna se	shedules and stat	lements and to	the best o	of my kn	owledge and helief	ıt ıs
		true, correct, a	and complete	declare that I have examined this rete Declaration of preparer other than of	icer) is based on all information	on of which prepa	irer has any kno	wledge	i iiiy Kii	ownedge and ocher,	
Sig	1 D	•			.)		حكما	- 2	.2	010	
He	re re	Signature	of officer	monxound			Date	<u>~</u>			
110				TIA NI			Drogid	ont			
		KIM Type or o	rint name an	HAN			Presid	enc			
		турс ог р		1 10 11		Date			TPr	eparer's identifying i	number
D.	:		KI	mbelled 1		m /	Check self-	_	(s	ee instructions)	
Pa Pro		Preparer's	170		_	1 1/12/1	emple	oyed P	Щ.,	/3	
	e- rer's	signature		berly A. Furrh, CP.		$\square \square \bigcirc \square$	U		Į N	<u>/A</u>	
Us		Firm's name (RRH & ASSOCIATES, P	<u> </u>						
On		yours if self- employed),	► <u>304</u>	NW 19TH ST			EIN		/A		
		address, and ZIP + 4	LAW	TON, OK 73507-6307			Phon	е по ▶	(580		_
Mar	v the l	IRS discuss th	us return	with the preparer shown above	/e? (see instructions)					X Yes	No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 12/29/09

Form 990 (2009)

	1990 (2009) VISION OF HOPE, INC	13-112695	<u> </u>		age Z
Par	t III Statement of Program Service Accomplishments				
1	Briefly describe the organization's mission:				
	See Schedule 0				
2	Did the organization undertake any significant program services during the year which were not listed on the	prior			
	Form 990 or 990-EZ?		Yes	X	No
	If 'Yes,' describe these new services on Schedule O.				
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es?	Yes	X	No
	If 'Yes,' describe these changes on Schedule O.			_	
	Describe the exempt purpose achievements for each of the organization's three largest program services by	ovnonese Soc	tion 50	1/6)/3	21
4	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and a	locations to oth	ners, th	e tota	í
	expenses, and revenue, if any, for each program service reported				
4 a		renue \$, 82	<u>6.</u>)
	OPERATES A YEAR ROUND CAMP FACILITY FOR USE BY CHURCH GROUPS AND CI			<u>A</u>	
	RESERVATION BASIS. ALSO OPERATES A CAMP OPERATION FOR CHILDREN WHOS	E PARENTS	ARE		
	INCARCERATED DURING THE SUMMER.				
	INGREEMITED BOILERO IMP SCIENCE.				
		-			
41	(Code (Expenses \$ 25,047. including grants of \$) (Rev	renue \$	34	1,85	6.)
-41	PROVIDE TEMPORARY HOUSING AND PROGRAMS FOR MEN WHO HAVE BEEN RELEAS				<u> </u>
			77701	<u>-</u>	
	SUPPORT INCLUDES HOUSING, COUNSELING, MENTOR SHIP, AND WORK PROGRAM	·			
			. – – –		
		_ 			
					_
4		/enue \$		3 <u>,09</u>	<u>9.</u>)
	THE HAITI VISION OF HOPE PROJECT SERVES THE ORPHAN POPULATION IN TH	E COUNTRY	OF		
	HAITI. VISION OF HOPE SUPPORTS HAITIAN HOUSING PROJECTS, FOOD, AND			ECT	ś
	TO SUPPORT THE ORPHANS.			==-:	
	10 SUFFORT THE ORTHANS.				
				_	
4	d Other program services. (Describe in Schedule O)				
	(Expenses \$ including grants of \$) (Revenue \$,)	
	e Total program service expenses ► 89, 448.				
	C TOTAL Program Service expenses F 03/330.				

		_	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	х	
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? If 'Yes,' complete Schedule C, Part I	<u>3</u>		x
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_		_x_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		<u>x</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? 'Yes,' complete Schedule D, Part V			<u>x</u>
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedul</i> , D, Part VI	9 💀		÷
•	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII		×	,
•	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its tot assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	al 🐇		#,
	PDID DID DID DID THE OR PORT OF THE PORT O	ın ,		· ·
•	Poid the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			*
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X	* 3		***
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		х
	Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A			Æ.
	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		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organizatio or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15	ļ	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		<u>x</u>
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? <i>If 'Yes,' complete Schedule H</i>	20		X

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Page 4 **Checklist of Required Schedules** (continued) Yes No 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 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III. 22 X 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, and that was issued after December 31, 2002? *If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25* Х 24 a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a 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 990-EZ? *If 'Yes,' complete* Schedule L, Part I 25b Х Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Х 27 Schedule L, Part III Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 28a Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b Х Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Х X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 31 Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete X Schedule N. Part II 32 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 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Х Part V. line 2 35 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 Х 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 37 Х

Form 990 (2009) BAA

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

		Yes	No	
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S Information Returns. Enter -0- if not applicable . 1a	0			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	4		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c			
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	0	,	*	
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b			
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			ž.	
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 Q	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)?	4 a		Х	
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	٠, ١	<i>*</i>		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>X</u>	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х	
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c			
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Х	
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were no deductible?				
7 Organizations that may receive deductible contributions under section 170(c).	<i>a</i> •	*		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service provided to the payor?	es 7 a	*	X	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b			
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х	
d If 'Yes,' indicate the number of Forms 8282 filed during the year				
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X	
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 h			
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.	,			
a Did the organization make any taxable distributions under section 4966?	9a			
b Did the organization make any distribution to a donor, donor advisor, or related person?	9b			
10 Section 501(c)(7) organizations. Enter:	- ·		ı,	
a Initiation fees and capital contributions included on Part VIII, line 12	'		Ą	
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	7	y 1		
11 Section 501(c)(12) organizations. Enter:	7	*		
a Gross income from other members or shareholders				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		3		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	L	Ĺ,	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b				

BAA Form **990** (2009)

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.

<u>Sec</u>	<u>tion A.</u>	Governin	g Body a	<u>ınd Ma</u>	nagen	<u>nent</u>										
															Yes	No
1 a	Enter the	number of v	oting mem	bers of t	he gove	erning bo	ody				1a			3		
b	Enter the	number of v	oting mem	bers that	t are inc	depende	nt				1 b			3		
2	Did any o	officer, direct	or, trustee, ee or key e	or key e mployee	mploye	e have a	a family	relation	ship or a t	ousiness i	relation	ship with	any othe	r	X	, ,
3	Did the o	rganization o	delegate co	ntrol ove	er manad	gement	duties cu	ustomai	rily perforn	ned by or	under	the direc	t supervis	ion 3		Х
4		rganization r		-			•			•	3011.			4		X
7		prior Form 9	-	_	Conding	C3 10 113	Organiza	,	aocamonic	•						
		rganization t			-		material	l diversi	on of the o	organizati	on's as	sets?		5		<u>X</u>
6	Does the	organization	have men	nbers or	stockho	lders?								6	1	<u>X</u>
7 a	Does the governing	organizatior g body?	have men	nbers, sto	ockholde	ers, or o	ther per	sons wh	no may ele	ect one or	more i	members 	of the	7 8		Х
b	Are any	decisions of t	he governi	ng body	subject	to appro	oval by n	nember	s, stockho	lders, or o	other p	ersons?		7 t	<u> </u>	X
8	Did the o	rganization o	ontempora:	neously	docume	ent the m	neetings	held or	written ac	ctions und	lertake	n during	the year b	by T	,	<i>Y Y Y Y Y Y Y Y Y Y</i>
а		rning body?												88	X	
	-	nmittee with	authority to	act on I	behalf o	of the go	verning 1	body?						81	Х	
		any officer, d	_						II, Section	A, who c	annot b	e reache	ed at the	9		Х
		Policies	(Thic S	oction	B real	ine nam	format	tion at	out poli	cies not	realli	red by	the Inte			
	nue Code		(IIIIS S	ection t	J requ	16313 111	iioiiiiat	CIOIT GE	out pon	103 1101	requi	rea by	ine mie	11101		
Teve	inue coue	:.)		-									_		Yes	No
10-	Does the	organization	have loca	I chanter	s hranc	ches or	affiliates	ç?						10 a	-	X
		does the orga ches to ensu							erning the	activities	of such	n chaptei	s, affiliate			
		cries to ensu organization												11	1	X
		ın Schedule											nedule			<u> </u>
		organization									,,	CC 50.	·cuurc	12:		X
											s that c	ould aw	e rise	, <u>, , , , , , , , , , , , , , , , , , </u>	1	
		ers, directors ets?												121		
	Schedule	organization O how this	ıs done				•	torce co	mpliance	with the p	olicy?	it Yes,	aescribe ii	120		v
		organization												13	 -	X
		organization												14	* /	Х
15	Did the persons,	rocess for de comparabilit	etermining sy data, and	compens contem	sation of poraned	f the foll ous subs	lowing postantiation	ersons on of the	ınclude a r e deliberat	eview and d	d appro ecision	oval by in?	depender	nt	ļ	14
ā	The orga	nization's CE	EO, Execut	ive Direc	tor, or t	op mana	agement	t official						15:	_	L
t	Other off	ficers of key	employees	of the or	rganızat	tion							•	151	X	
	If 'Yes' to	o line 15a or	15b, descr	ibe the p	rocess	ın Sched	dule O ((See ins	structions)					Ä,		,
16 a		organization i		ontribute	assets	to, or pa	articipate	e in a jo	oint venture	or simila	ar arrar	ngement	with a tax	able 16	1	X
t	. If 'Yes ' I	has the organ	nization ad	opted a v	written r	oolicy or	procedu	ure requ	uring the o	rganızatı	on to ev	valuate it	s participa	ation	,	*
	status wi	th respect to	such arrai	ngements	s?	ederai ta	ax law, c	anu take	en sieps id		iu ine c	nyanizat	IOII 2 EXCI	16	0	
		Disclosu						1	37.5-							
17		states with w										-				
18	Section (6104 requires on, Indicate h	s an organi ow yo <u>u</u> ma	zation to ike these	make i availat	ts Forms	s 1023 (c ck all tha	or 1024 at apply	if applicat	ole), 990,	and 99	0-T (501	(c)(3)s on	ly) avaıla	ole for	public
	Own	website	[\nother's	website	•	_	Upon re	quest							
19	Describe statemer	ın Schedule nts avaılable	O whether	· (and if s lic.	so, how) the org	janizatio	n make	s its gover	ning doci	uments	, conflict	of interes	st policy,	and fina	ancial
		e name, phys											ords of the	e organiza	ation:	
	VIM M	· _SUADAIN	_ / / 20 _ 1	CUE	5557	DVIAE	- T-57		ow 1226	2 200	202	, ±20_				

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations'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 employees'
- 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

employees, and former such persons

X Check this box if the organization did not compensate any current officer, director, or trustee

(A) (B) (c) (D) (E)

(A)	(B)				c)			(D)	(E)	(F)
Name and Title	Average hours per week				_	hat app empl	y) 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
		Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	ier		, ,	amount of other compensation from the organization and related organizations
		stee	ustee			ensated				
KIM W. SHAHAN President	20	Х		Х				0.	0.	0.
BILLY G. SHAHAN Vice President	5	Х		Х				0.	0.1	0.
BRYAN BAIZ		_^_		^				0.		
Secretary	5	_X		Χ				0.	0.	0.
										<u> </u>
						İ				
										,
										<u>. </u>

Name and Title	A	I _								
		age Position (cl			_	_	_	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation
	hours per week	vidual trustee irector	tutional trustee	Officer	employee	Highest compensated employee		(W-2/1038-MISC)	(W-2/1099-MISC)	from the organization and related organizations
	-								,	
	-								_	
	-									
	-									
	-									
	_									
	-									
	_									
	-									
	-									
	-			_	ļ					
	_	,					<u> </u>			
1 b Total							_	0.	0	
2 Total number of individuals (including but not limit from the organization ► 0	ed to tho	se li	stec	ab.	ove)) wh	o re	ceived more than	\$100,000 in repoi	Yes No
3 Did the organization list any former officer, directo on line 1a? If 'Yes,' complete Schedule J for such	r or trust	ee,	key	emp	oloy	ee,	or hi	ighest compensat	ed employee	3 X
4 For any individual listed on line 1a, is the sum of r the organization and related organizations greater individual	eoortable	e cor	npe 00?	nsa If 'Y	tion 'es'	and com	l oth	er compensation e Schedule J for s	from such	4 X
5 Did any person listed on line 1a receive or accrue rendered to the organization? If 'Yes,' complete So	compens	satio <i>I for</i>	n fro	om a	any erso	unre	elate	ed organization for	services	5 X
Section B. Independent Contractors										
Complete this table for your five highest compensation from the organization.	ated inde	pend	dent	COI	ntra	ctors	s tha	t received more t	han \$100,000 of	
(A) Name and business addre	ss		·					Description o	of Services	(C) Compensation
						_				
Total number of independent contractors (including		_								

Par	t VIII Statement of Revenue					
٠,	, , , , , , , , , , , , , , , , , , ,		(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
1	* * *	»		function revenue	revenue	under sections 512, 513, or 514
<u>'</u>	1 a Federated campaigns 1a			7010110		0,2,0,0,0,0,0
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	b Membership dues 1b				n 42 . 31	*
85	c Fundraising events.		**		i 4 , ,	* '
₹.¥	d Related organizations 1d		* \$	* 4 1		* *
53	——————————————————————————————————————		* }	<. 1 35		à n
S S	, , , , , , , , , , , , , , , , , , ,			,		* * '
로테	f All other contributions, gifts, grants, and	24 206	. * * *			ŕ
25	similar amounts not included above . 1f	24,206.	/ * 1	*	,	7
동위	g Noncash contribus included in lns 1a-1f: \$_		24 206	. 🥻 .	**	/4 w
٥٦	h Total. Add lines 1a-1f .	Business Code	24,206.	8 × · ½ · ×	<i></i>	* *
Ž	2 TUGOUT TROVE CLUB CROVERS		40 217	10 217		
<u> </u>		713940	48,317.	48,317.		
Ä		713940	34,856.	34,856.		
Ž		313000	13,099.	13,099.		
<u> </u>		713940	5,526.	5,526.		
3AM		713940	2,697.	2,697.		
<u>0</u>	f All other program service revenue		104 405			
<u></u>	g Total. Add lines 2a-2f	•	104,495.	* ` - **	3 00 1	ŧ* × ∰
	3 Investment income (including dividends	, interest and	102.	:		102.
	other similar amounts)					102.
i	4 Income from investment of tax-exempt	boria proceeds			-	
	5 Royalties (i) Real	(ii) Personal		** * * *	ALY , A	
		(II) Fersonal		, · · · · ·		
	6a Gross Rents		* *	, *, 111 - **	* * *	**
	b Less: rental expenses		, , , , ,	, «''	d et a	~ × + × -
- 1	c Rental income or (loss)					
	d Net rental income or (loss)	(v) Other		<i>**</i> ***	. % 3	\$ *** v.
	7a Gross amount from sales of (i) Securities	(ii) Other				
	assets other than inventory	ļ	* ***			, ,
- 1	b Less: cost or other basis		***			7* 4
	and sales expenses				- n1 💣	2 1,5 ,3
	c Gain or (loss)					
	d Net gain or (loss)			* ** * *	3.46 4.1	₩ å
ш	8a Gross income from fundraising events			* * * *		* * *
-	(not including \$, , ,		**
OTHER REVEN	of contributions reported on line 1c).		· · · · · · · · · · · · · · · · · · ·	· ##	* 4 ,	* **
ER	See Part IV, line 18 . a		` > ∤ 《 · *	· · · · · · · · · · · · · · · · · · ·	<i>i</i> , <i>i</i> , <i>i</i> ,	y & 16.
OTE	b Less direct expenses b	<u>'</u>				
	c Net income or (loss) from fundraising e	vents	× ×	. 2	₹₹ * * #	
	9a Gross income from gaming activities See Part IV, line 19 a		· , , , , , , , , , , , , , , , , , , ,		to 8	
			* ' '	i a		*
	b Less: direct expensesc Net income or (loss) from gaming activities					[
	, , ,	illes .				8, ,%
	10a Gross sales of inventory, less returns and allowances a		, %, \$;	1 4 4	· * *	- , 4,4
	b Less cost of goods sold		*		: • / *	9 %
	c Net income or (loss) from sales of invei		<u> </u>	***************************************		*
	Miscellaneous Revenue	Business Code				
	11a		5			
	b					
	d All other revenue	-		· · · · · · · · · · · · · · · · · · ·		1
	e Total. Add lines 11a-11d	•		< . 3	2 \$	* .
	12 Total revenue. See instructions	▶	128,803.	104,495.	0.	102.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S See Part IV, line 21			v	,
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22			· ¥	* .
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16			* *	** * *
4	Benefits paid to or for members			}	
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	10,123.	10,123.		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)	·····			
	a Management				
_	D Legal				
	Accounting				
	Lobbying				
	3 5				
	Prof fundraising svcs. See Part IV, In 17			<u> </u>	
	Investment management fees			··	
	Other		 	- · · · · · · · · · · · · · · · · · · ·	
12	Advertising and promotion				
13	Office expenses	6,989.	6,528.	461.	
14	Information technology	423.		423.	
15	Royalties			~	
16	Occupancy	12,771.	9,520.	3,251.	<u> </u>
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	5,000.		5,000.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,507.	13,956.	1,551.	
23	Insurance	4,614.	4,153.	461.	
24	Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed			2 1	- & <i>a</i>
	5% of total expenses shown on line 25 below).	* ,	1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m	4 .5 . 4 .4.	2 to 180 s
	Special Ministry Expense	39,051.	39,051.	<u> </u>	
	Repairs and Maintenance	5,402.	5,402.		
	• Vehicle Expense	794.	715.	79.	
		794.	/13.	79.	
	Dues and Subscriptions			70. 56.	
	Postage and Shipping	56.		56.	
	All other expenses	100 000		11 252	
	Total functional expenses. Add lines 1 through 24f	100,800.	89,448.	11,352.	0.
26	Joint costs. Check here ► If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
BAA			·	·	Form 990 (2009)

Pa	<u>ırt X</u>	Balance Sheet				
		•		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		35,237.	1	52,972.
	2	Savings and temporary cash investments	i	43,185.	2	43,287.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, director and highest compensated employees. Complete Part	rs, trustees, key employees, II of Schedule L		5	
	6	Receivables from other disqualified persons (as define	ed under section 4958(f)(1))	* . * .	<u> </u>	<u>k</u> ,
		and persons described in section 4958(c)(3)(B) Comp	plete Part II of Schedule L		6	
S	7	Notes and loans receivable, net			7	
ASSETS	8	Inventories for sale or use			8	
S	9	Prepaid expenses and deferred charges			9	
	10 a	Land, buildings, and equipment: cost or other basis.	10a 752,405.	* *,* *	18	
		Complete Part VI of Schedule D				4 × ,
	Ь	Less accumulated depreciation	10b 170,400.	583,062.	10 c	582,005.
	11	Investments - publicly-traded securities			11	
	12	Investments – other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11		•	13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		<u></u>	15	
	16_	Total assets. Add lines 1 through 15 (must equal line	34)	661,484.	16	678,264.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable .		18		
	19	Deferred revenue	6,225.	19	6,900.	
L	20	Tax-exempt bond liabilities .			20	
A B	21	Escrow or custodial account liability Complete Part I	V of Schedule D		21	
ABILITIES	22	Payables to current and former officers, directors, tru highest compensated employees, and disqualified per	stees, key employees, rsons Complete Part II			, , , , , , , , , , , , , , , , , , ,
į		of Schedule L		200, <u>000</u> .	22	<u>188,847.</u>
S	23	Secured mortgages and notes payable to unrelated the	nird parties		23	
	24	Unsecured notes and loans payable to unrelated third	l parties	· · · · · · · · · · · · · · · · · · ·	24	
	25	Other liabilities. Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		206,225.	26	195,747.
N E		Organizations that follow SFAS 117, check here ▶	X and complete lines			· · · · · ·
		27 through 29 and lines 33 and 34.				<u> </u>
S S	27	Unrestricted net assets	•	455,259.	27	482,517.
Ĕ	28	Temporarily restricted net assets	•		28	
	29	Permanently restricted net assets			29	*
R F.		Organizations that do not follow SFAS 117, check he lines 30 through 34.	ere ►			
FUZD	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, and equip	oment fund		31	
Ļ	32	Retained earnings, endowment, accumulated income			32_	
BALAZCES	33	Total net assets or fund balances.		455,259.	33	482,517.
E S	34	Total liabilities and net assets/fund balances.		661,484.	34	678,264.

BAA Form 990 (2009)

Form 990 (2009	n VISION	OF	HOPE.	INC

73-1126958

Page 12

10000 (2003) 1202011 01 10012/ 2010			-gc
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990: X Cash Accrual Other	ł		
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?	2 a	1	Х
b Were the organization's financial statements audited by an independent accountant?	. 2t)	X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant?	tht of the audit,	;	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1	<i>4</i>	*
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year wer consolidated basis, separate basis, or both:	e issued on a		
Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth a Audit Act and OMB Circular A-133?	in the Single	,	х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ne required audit		

BAA

Form 990 (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.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Name o	ame of the organization Employer identification number								lon number	
VIS	VISION OF HOPE, INC 73-1126958									
Part	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions									
The c	The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)									
1	1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).									
2	A school described	in section 170(b)(1)(/	A)(ii). (Attach Schedule E	Ξ)						
3	A hospital or coope	erative hospital service	e organization described	ın secti	on 170(l)(1)(A)(iii).			
4	—	·-	d in conjunction with a h					0(b)(1)(A)(iii) En	ter the hospital's
	name, city, and sta	-	•	,						·
5	An organization op 170(b)(1)(A)(iv). (C)	erated for the benefit complete Part II)	of a college or university			-		nmental	unit des	scribed in section
6 7	An organization that	local government or gat normally receives a (A)(vi). (Complete P	governmental unit descri substantial part of its su art II.)	bed in support fr	ection 1 om a go	70(b)(1) vernme	(A)(v). ntal uni	or from	the ger	neral public described
8	A community trust	described in section	170(b)(1)(A)(vi). (Comple	te Part I	l.)					
9	from activities related investment income June 30, 1975. See	d to its exempt function and unrelated busine e section 509(a)(2). (C		eptions, a section	and (2) n 511 tax)	o more t from bi	han 33- usinessi	1/3 % of es acqui	its suppo	ort from aross
10	An organization org	ganized and operated	exclusively to test for pu	ıblıc safe	ety. See	section	509(a)	(4).		
11	more publicly supp	orted organizations of	exclusively for the benef lescribed in section 509(a zation and complete lines	a)(1) or	section	509(a)(2	ctions o 2). See	of, or car section	ry out th 509(a)(3)	ne purposes of one or). Check the box that
	a Type I	b Type II	c ☐ Type III	I – Fund	ctionally	ıntegraf	ed		d 🗌	Type III - Other
е	By checking this both than foundation ma 509(a)(2)	ox, I certify that the or anagers and other tha	ganization is not controll n one or more publicly si	led direc upportec	tly or in d organi	directly zations	by one describe	or more ed in sec	disquali ction 509	fied persons other (a)(1) or section
f	If the organization check this box	received a written det	ermination from the IRS	that is a	a Type I	, Type II	or Typ	e III sup	porting o	organization,
g	Since August 17, 2	006, has the organiza	ition accepted any gift o	r contrib	oution fro	om any	of the fo	ollowing	persons	?
•										Yes No
	(i) a person who below, the go	directly or indirectly overning body of the s	controls, either alone or upported organization?	together	with pe	rsons d	escribed	in (ii) a	and (III)	11 g (i)
	(ii) a famıly mem	nber of a person desc	cribed in (i) above?							11 g (ii)
	(iii) a 35% contro	lled entity of a persor	described in (i) or (ii) a	bove?						11 g (iii)
h	Provide the following	ng information about t	the supported organization	ons.						
	(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiza (i) liste	(iv) Is the organization in col (i) listed in your governing document? (v) Did you notify the organization in col (i) of your support?			(vi) Is the organization in col (i) organized in the US?		(vii) Amount of Support
				Yes	No	Yes	No	Yes	No	
				1						
				<u> </u>	ļ	ļ			<u> </u>	
				1	1					
			<u> </u>	↓	ļ					
				1						
	····	-		1					 	
Total		* **	**************************************			4,		,	* .	

Schedule A (Form 990 or 990-EZ) 2009 VISION OF HOPE, INC Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part 1) Section A. Public Support Calendar year (or fiscal year (b) 2006 (d) 2008 (a) 2005 (c) 2007 (e) 2009 (f) Total beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge Total. Add lines 1-through 3 The portion of total Ž., 2 ' {;²'[®] contributions by each person (other than a governmental 100 y 318 unit or publicly supported organization) included on line 1 that exceeds 2% of the amount ,; ,**p>** A. × 3 ,3 Ŵ, shown on line 11, column (f) À. Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ► (d) 2008 (e) 2009 (f) Total (b) 2006 (c) 2007 (a) 2005 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, rovalties and income form sımılar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) J.S. Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 % 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 % 16a 33-1/3 support test — 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test - 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here**. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.

Schedule A (Form 990 or 990-EZ) 2009

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

Page 3

Schedule A (Form 990 or 990-EZ) 2009 VISION OF HOPE, INC 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			_			
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1		229,355.	331,437.	46,667.	29,170.	24,206.	660,835.
2	Gross receipts from	223,333.	331, 437.	10,007.	23,170.		
2	admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	42,470.	47,180.	42,634.	84,939.	104,495.	321,718.
3	Gross receipts from activities that are not an unrelated trade or business under section 513	12, 1701	1.,2001		0 1,7 0 5		0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		· -				0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1 through 5	271,825.	378,617.	89,301.	114,109.	128,701.	982,553.
	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the						
	year	0.	0.	0.	0.	0.	0.
(: Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support (Subtract line	\$24		* 15 - 100 - 10 - 10 - 10 - 10 - 10 - 10		, #2	
	7c from line 6)	ř		è	**}	,	98 <u>2,553.</u>
Sec	tion B. Total Support						
0-1-	-den seem (or fiscal or beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Cale	ndar year (or fiscal yr beginning in) 🟲						
9	Amounts from line 6	271,825.	378,617.	89,301.	114,109.	128,701.	982,553.
9	• • • • • • •	271,825.	378,617.	89,301.		128,701.	982,553.
9 10 a	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form	271,825. 278.	378,617. 514.	89,301. 2,442.	744.	128,701.	982,553. 4,080. 0.
9 10 a	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources • Unrelated business taxable income (less section 511 taxes) from businesses	271,825.	378,617.	89,301.		128,701.	982,553.
9 10 a	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources O Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	271,825. 278.	378,617. 514.	89,301. 2,442.	744.	128,701.	982,553. 4,080. 0.
9 10 a	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is	271,825. 278.	378,617. 514.	89,301. 2,442.	744.	128,701.	982,553. 4,080. 0. 4,080.
9 10 a 11 12 13	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support, (add ins 9, 10c, 11, and 12)	271,825. 278. 278.	378,617. 514.	2,442. 2,442.	744.	128,701. 102.	982,553. 4,080. 0. 4,080. 0. 986,633.
9 10 a 11 12 13	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support, (add ins 9, 10c, 11, and 12)	271,825. 278. 278.	378,617. 514.	2,442. 2,442.	744.	128,701. 102.	982,553. 4,080. 0. 4,080. 0. 986,633.
9 10a 1 11 12 13 14	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	271, 825. 278. 278. is for the organization here	378, 617. 514. 514. ation's first, secon	2,442. 2,442.	744.	128,701. 102.	982,553. 4,080. 0. 4,080. 0. 986,633.
9 10a 1 11 12 13 14 Sec	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	271, 825. 278. 278. is for the organization here iblic Support F	378, 617. 514. 514. ation's first, secon	89, 301. 2, 442. 2, 442.	744.	102. 102. s a section 501(c)	982,553. 4,080. 0. 4,080. 0. 986,633. (3)
9 10a 11 11 12 13 14 Sec 15	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Deformed (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and capital support percentage for 20.	271, 825. 278. 278. is for the organized stop here iblic Support F 009 (line 8, column	378, 617. 514. 514. ation's first, secon	89, 301. 2, 442. 2, 442.	744.	102. 102. 102. 105 a section 501(c)	982,553. 4,080. 0. 4,080. 0. 986,633. (3) 99.6%
9 10a 11 11 12 13 14 Sec 15 16	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Deformed (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and capital support percentage for 20 Public support percentage from	271, 825. 278. 278. s for the organized stop here blic Support F 009 (line 8, colum 2008 Schedule A)	378, 617. 514. 514. ation's first, secon Percentage n (f) divided by lin. Part III, line 15	89, 301. 2, 442. 2, 442. 3, 442.	744.	102. 102. s a section 501(c)	982,553. 4,080. 0. 4,080. 0. 986,633. (3)
9 10a 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and capital support percentage for 20 Public support percentage from extion D. Computation of Investion D. Computation of Investion D. Computation of Investion Section D. Computation of Investigation in Section D. Computation Investigation in Section D. Computation Investigation in Section Investigation in Section Investigation in Section Investigation in	271, 825. 278. 278. 278. is for the organized stop here is blic Support Foog (line 8, column 2008 Schedule A, restment Incompared to the column 2008 Schedule A, restment 2008	378, 617. 514. 514. ation's first, secon Percentage n (f) divided by lin Part III, line 15 me Percentage	89, 301. 2, 442. 2, 442. 3, 442. 4, 442.	744.	102. 102. 102. 103. 105. 105. 106.	982,553. 4,080. 0. 4,080. 0. 986,633. (3) 99.6% 0.0%
9 10a 11 12 13 14 Secc 15 16 Sec 17	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources O Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and cition C. Computation of Pupulic support percentage from cition D. Computation of Inventored.	271, 825. 278. 278. 278. is for the organized stop here blic Support Foog (line 8, column 2008 Schedule A) vestment Incor	378, 617. 514. 514. 514. cation's first, second recentage n (f) divided by limits and percentage n (Part III, line 15 me Percentage column (f) divided	89, 301. 2, 442. 2, 442. 2, 442. do, third, fourth, ne 13, column (f)) d by line 13, column	744.	102. 102. 102. 105. 106. 117.	982,553. 4,080. 0. 4,080. 0. 986,633. 99.6% 0.0%
9 10a 11 12 13 14 Sec 15 16 Sec 17 18	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and computation of Pupulic support percentage from the computation of Investment income percentage.	271, 825. 278. 278. 278. 278. is for the organized stop here is blic Support Foog (line 8, columno 2008 Schedule A) vestment Incomplete (line 10c, from 2008 Schedule Schedule A)	ation's first, secondercentage n (f) divided by lin. Part III, line 15 me Percentage column (f) divide ile A, Part III, line	89, 301. 2, 442. 2, 442. 2, 442. do, third, fourth, lee 13, column (f)) d by line 13, column 17	744.	102. 102. 102. 103. 104. 105. 106. 176. 18	982,553. 4,080. 0. 4,080. 0. 986,633. (3) 99.6% 0.0%
9 10a 11 12 13 14 Sec 15 16 Sec 17 18 19:	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and capital support percentage for 20 Public support percentage from investment income percentage. In In	271, 825. 278. 278. 278. 278. us for the organization did not box and stop here the organization did not box and stop here	ation's first, secon Percentage In (f) divided by lin, Part III, line 15 The Percentage In column (f) divided by line and the box on line in the organization and not check a box in the organization and not check and not chec	89, 301. 2, 442. 2, 442. 2, 442. 3, 442. 4, 442. 17, 410. 18 d by line 13, column (f)) 2 d by line 13, column (f) 3 column (f) 4 con line 14 or 19	744. 744. 744. or fifth tax year as simm (f)) us more than 33-1/3 ublicly supported as, and line 16 is r	128, 701. 102. 102. 102. 15 16 17 18 18, and line 17 is no organization more than 33-1/39	982,553. 4,080. 0. 4,080. 0. 986,633. (3) 99.6% 0.0% 0.4% 0.0% X 6, and line 18
9 10a 11 12 13 14 Sec 17 18 19:	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and capital support percentage for 20. Public support percentage from investment income percentage. Investment income percentage.	271, 825. 278. 278. 278. 278. 278. 278. Us for the organization did not pook and stop here the organization did not pook and stop here the organization did not box and stop here the organiza	378, 617. 514. 514. 514. Percentage In (f) divided by linity. Part III, line 15 IN Percentage In column (f) divided by linity. In Part III, line 15 In Percentage In A, Part III, line 15 In the organization of the organization of the check a boop here. The organization of th	3, 442. 2, 442. 2, 442. 2, 442. 2, 442. 3, 442. 4, 442. 4, 442. 4, 442. 4, 442. 5, 442. 6, 442.	or fifth tax year as the summ (f)) Is more than 33-1/3 ablicly supported to a, and line 16 is reas a publicly supp	102. 102. 102. 102. 103. 104. 105. 106. 176. 186. 177. 187. 188. 189., and line 17 is no organization more than 33-1/3% orted organization orted organization.	982,553. 4,080. 0. 4,080. 0. 986,633. (3) 99.6% 0.0% 0.4% 0.0% X 6, and line 18

Schedule A	(Form 990 or 9	90-EZ) 20	009 V	ISION	OF	HOPE	3,	INC				73-	- <u>1</u> 12695	8	Page 4
Part IV	Supplement	tal Infor	mation	. Com	plete	this	par	t to pr	ovide	the o	explanations r additional in	required	by Part	II. line 1	0:
L	Part II, line	17a or`1	7b; an	d Part	111, 1	ine 12	2. F	rovide	any	other	r additional in	formati	on. See	instructio	ns.
														·	
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				- -										-	
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions <u> 2009</u>

OMB No 1545-0047

Open to Public Inspection

VISTON OF HOPE. I

Employer Identification number

V 1.	TON OF HOLE, THE		73-1126958
Par	t Organizations Maintaining Donor	Advised Funds or Other Similar Fur	nds or Accounts Complete if
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year).	-	
3	Aggregate grants from (during year)	" · · · · · · · · · · · · · · · · · · ·	
4	Aggregate value at end of year		
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the assets held in d	donor advised Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or donor advisor or for	nds may be rany other Yes No
Par	t II Conservation Easements Comple	ete if the organization answered 'Yes'	to Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held by	···-	
	Preservation of land for public use (e.g., r		of an historically important land area
	Protection of natural habitat		of certified historic structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation contribution in	
			Held at the End of the Year
a	Total number of conservation easements		
	Total acreage restricted by conservation ease		2b
	: Number of conservation easements on a certi		2c
	Number of conservation easements included i		2d
3	Number of conservation easements modified,	transferred, released, extinguished, or termina	ated by the organization during the tax
4	year ►Number of states where property subject to co	onservation easement is located >	_
5	Does the organization have a written policy re and enforcement of the conservation easemen	nt it holds?	. Yes No
6	Staff and volunteer hours devoted to monitoring the year ▶		
7	Amount of expenses incurred in monitoring, in during the year ►	nspecting, and enforcing conservation easeme	nts \$
8	Does each conservation easement reported of 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of so	ection Yes No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements.	s conservation easements in its revenue and expe to the organization's financial statements that	ense statement, and balance sheet, and describes the organization's accounting for
Pai	t III . Organizations Maintaining Colle	ctions of Art, Historical Treasures, o	r Other Similar Assets
	Complete if the organization ans	wered 'Yes' to Form 990, Part IV, line	e 8
1 a	alf the organization elected, as permitted unde treasures, or other similar assets held for pub the text of the footnote to its financial stateme	lic exhibition, education, or research in further	nent and balance sheet works of art, historical rance of public service, provide, in Part XIV,
ı	 If the organization elected, as permitted unde treasures, or other similar assets held for pub amounts relating to these items: 	r SFAS 116, to report in its revenue statement lic exhibition, education, or research in further	rance of public service, provide the following
	(i) Revenues included in Form 990, Part VIII,	, line 1	. •\$ •\$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of a amounts required to be reported under SFAS	ort, historical treasures, or other similar assets 116 relating to these items:	
	a Revenues included in Form 990, Part VIII, line		
l	Assets included in Form 990, Part X .		. > \$

4 9											
Schedule D (Form 990) 2009 VISIO	M OE HOI	T T	NC				73-	.112	6958		Dono 2
Part III Organizations Mainta				orical Trea	sures. c	r Other				ontini	Page 2 <i>ied</i>)
3 Using the organization's acquisiti items (check all that apply):											
a Public exhibition			d ☐ Loan	or exchange	programs						
b Scholarly research			e Other	_	p 9						
c Preservation for future gener	ations										
4 Provide a description of the orga Part XIV.		lections	and explain ho	w they furthe	r the orga	nızatıon's	exempt p	ourpos	se ın		
5 During the year, did the organiza assets to be sold to raise funds r									Yes		No
Part IV Escrow and Custodia	Arrangen	nents	Complete if o	rganızatio	n answe	ered 'Ye	s' to Fo	rm 99	90, Pa	rt IV,	line
9, or reported an amo	unt on For	m 990	, Part X, line	21					_	_	
1 a Is the organization an agent, trus included on Form 990, Part X?					tions or of	ther asse	ts not	[Yes	[No
b If 'Yes,' explain the arrangement	in Part XIV a	and con	nplete the follow	ing table:							
						<u> </u>	<u> </u>		Amount		
c Beginning balance	•					. 19	÷				
d Additions during the year						10	4				
 Distributions during the year 			•	•	•	1.0	<u> </u>				
f Ending balance						11	<u> </u>				
2a Did the organization include an a	mount on Fo	rm 990,	, Part X, line 217	•				[Yes		No
b If 'Yes,' explain the arrangement	ın Part XIV.						_				
Part V Endowment Funds Cor	nplete if o	rganız	ation answer	ed 'Yes' to	Form 9	90, Par	t IV, line	= 10.			
	(a) Current	year	(b) Prior yea	r (c) T	wo years bad	ck (d)	Three years	back	(e) F	our year	s back
1 a Beginning of year balance				*		3	*	*			
b Contributions							*,				į
·				,	* 3	Ŋ,	^ %·	***	1	Ņ.	* ^x
c Net Investment earnings, gains, and losses					*		<u>'</u>	÷		<u> </u>	
d Grants or scholarships			L	· · · · · · · · · · · · · · · · · · ·			<u> </u>		<u> </u>	<u> </u>	
 e Other expenditures for facilities and programs 				· **	- As-		,\$-	*	, ,	<u> </u>	¥ ∴
f Administrative expenses			<u> </u>	-al-		4-	*.a &	.%	<u> </u>		
g End of year balance			<u>L</u>				<u> </u>	•	<u> </u>		
2 Provide the estimated percentage	of the year	end ba	lance held as:								
a Board designated or quasi-endow	/ment ►		8								
b Permanent endowment ▶	8										
c Term endowment ►	%										
3a Are there endowment funds not a organization by	n the posses	sion of	the organization	that are held	d and adm	ninistered	for the			Yes	No
(i) unrelated organizations									3a(i)		
(ii) related organizations .									3a(ii)		
b If 'Yes' to 3a(II), are the related of	rganizations	listed a	s required on So	chedule R?					3b	-	
4 Describe in Part XIV the intended	_										
Part VI Investments-Land, B). Part X	(, line 1	0.				
Description of investment		(a) Cos	st or other basis nvestment)	(b) Cost of basis (c	or other	(c) A	ccumulate preciation	d	(d) E	Book V	alue
1a Land		,				, Villa					
b Buildings				66	2,757.		94,7	10.		568	,047.
c I easehold improvements											

89,648. 75,690. 13,958. **d** Equipment Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

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582,005. Schedule **D** (Form 990) 2009

Schedule D (Form 990) 2009 VISION OF HOPE, I	NC		73-112	6958	Page 3
Part VII Investments—Other Securities See Fo		ne 12. N/A			
(a) Description of security or category (including name of security)	(b) Book value	(c) Cost or	Method of valuat end-of-year mark	ion ket value	
Financial derivatives .					
Closely-held equity interests					
Other					
			_		
	-				
		· 			
			-		
Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.)		» distribution	2 D C '	<i>M</i> *	
Part VIII Investments-Program Related (See	Form 990, Part X, I	line 13) N/A			
(a) Description of investment type	(b) Book value	(c)	Method of valuat	ion	
	<u> </u>	Cost or	end-of-year mark	et value	
					
				-	
	-				
					_
Total (Column (b) must equal Form 990, Part X, Col (B) line 13)	15\ 15\				
Part IX Other Assets (See Form 990, Part X,		<u> </u>			
(a) De	scription			(b) Book va	lue
					
	·				
					
***************************************	<u>.</u>				
			 +		
Total. (Column (b) must equal Form 990, Part X, col.(B), I			<u> </u>		
Part X Other Liabilities (See Form 990, Part					
(a) Description of Liability	(b) Amount		*		
Federal Income Taxes			* **	* /	, ν
		 -	z. 4.	·	s
		* *	1 M.	1. 4.0	` '
		, \$1 you	1/0	4	
		* *	*	, ×	
		2 ,	*,		
				` .	,,
		* *	*	» ·	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ►		<u> </u>			
2. FIN 48 Footpote In Part XIV provide the text of the foot	note to the organization	n's financial statements	s that renorts the	organization's	hability

		3-112	26958	Page 4
Parl	XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		N/A	
1	Total revenue (Form 990, Part VIII,column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25).			
3	Excess or (deficit) for the year. Subtract line 2 from line 1			
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities .			
6	Investment expenses			
7	Prior period adjustments			
	Other (Describe in Part XIV)			
	Total adjustments (net). Add lines 4 through 8			
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn	N/A	
	Total revenue, gains, and other support per audited financial statements	1		
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	Net unrealized gains on investments . 2a			
	Donated services and use of facilities . 2b	1 /		
	Recoveries of prior year grants . 2c	1		
	Other (Describe in Part XIV).	1	1	
	Add lines 2a through 2d.	2e		
	Subtract line 2e from line 1	3		
	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
	Investments expenses not included on Form 990, Part VIII, line 7b 4a	8	Į	
		1 1		
		4c		
	Add lines 4a and 4b	- 40		
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	Dotu	wn N/A	
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	1 - 1	ITH N/A	Mr.c.
	Total expenses and losses per audited financial statements .			
	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	Donated services and use of facilities 2a	-		
	Prior year adjustments 2b	4		
С	Other losses 2c	-		
d	Other (Describe in Part XIV).	-		
е	Add lines 2a through 2d.	2e		
3	Subtract line 2e from line 1 .	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investments expenses not included on Form 990, Part VIII, line 7b.	1, 4		
b	Other (Describe in Part XIV)			
С	Add lines 4a and 4b	4c		
5_	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5		
Pari	XIV Supplemental Information			
line 4	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this penation	/, lines art to p	1b and 2b, Parovide any ad	art V, Iditional

TEEA3304L 02/02/10

Schedule D (Form 990) 2009

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Schedule D (Form 990) 2009 VISION OF HOPE, INC	73-1126958	Page 5
Schedule D (Form 990) 2009 VISION OF HOPE, INC Part XIV Supplemental Information (continued)		
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TEEA3305L 07/10/09

Schedule **D** (Form 990) 2009

BAA

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

or 990-EZ.

Transactions with Interested Persons

► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization Employer identification number VISION OF HOPE. INC 73-1126958 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. Part I (c) Corrected? 1 (a) Name of disqualified person (b) Description of transaction 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under Ś 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Ś Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a. (b) Loan to or from the organization? (c) Original principal amount (f) Approved by board or committee? (g) Written agreement? (a) Name of interested person and purpose (d) Balance due (e) In default? No No No From Yes Yes Yes То 200,000 Х X Х BILL G. SHAHAN X 188,847 REAL ESTATE MORTGAGE 188,847 **Total** Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 27. (b) Relationship between interested person and the organization (c) Amount and type of assistance (a) Name of interested person Part IV **Business Transactions Involving Interested Persons.** Complete if the organization answered'Yes' on Form 990, Part IV, line 28a, 28b, or 28c. (b) Relationship between interested person and the organization (e) Sharing of organization's revenues? (a) Name of interested person (c) Amount of transaction \$ (d) Description of transaction Yes Nο BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 Schedule L (Form 990 or 990-EZ) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990.

VISION OF HOPE, INC	73-1126958
Form 990, Part Jll, Line 1 - Organization Mission	
Vision of Hope exists for the spreading of the Gospel o	f Jesus Christ through the
influence of camps, clinics, and special ministry activ	ities. These activities
include support for children whose parents are incarcer	ated and for men just
released from incarceration.	
Form 990, Part VI, Line 11 - Form 990 Review Process	
No review was or will be conducted.	

Schedule 0 (Form 990) 2009	Page 2
Name of the organization VISION OF HOPE, INC	Employer identification number 73-1126958
VISION OF HOLE, INC	
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