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

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

A For the 2011 calendar year, or tax year beginning and ending

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

C Name of organization
HOSANNA HOMES
 Doing Business As
 Number and street (or P O box if mail is not delivered to street address) Room/suite
9998 CROW CANYON RD
 City or town, state or country, and ZIP + 4
CASTRO VALLEY, CA 94552

D Employer identification number
94-2978777

E Telephone number
510-538-8117

F Name and address of principal officer: **VERNE TEYLER**
9998 CROW CANYON ROAD, CASTRO VALLEY, CA 94

G Gross receipts \$ **315795.**

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)

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

J Website: ▶ **HOSANNAHOMES.ORG**

K Form of organization Corporation Trust Association Other ▶

L Year of formation **1989** **M State of legal domicile** **CA**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: HOSANNA HOMES IS LICENSED BY THE STATE OF CALIFORNIA TO OPERATE AS AN FFA IN TEN COUNTIES OF THE SAN		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	5
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	0
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	6
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 62801.	Current Year 93176.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5743.	-223050.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	21758.	39695.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	90302.	-90179.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	152761.	74657.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	180010.	183309.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	332771.	257966.
19 Revenue less expenses. Subtract line 18 from line 12	-242469.	-348145.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 2111188.	End of Year 1751202.
	21 Total liabilities (Part X, line 26)	70737.	58896.
	22 Net assets or fund balances. Subtract line 21 from line 20	2040451.	1692306.

Part II Signature Block

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

Sign Here
 Signature of officer: **VERNE TEYLER, EXECUTIVE DIRECTOR**
 Date: **8-18-12**

Paid Preparer Use Only
 Print/Type preparer's name: **DAVID M. LOW**
 Preparer's signature: *David M. Low*
 Date: **8/16/12**
 Check if self-employed: PTIN: **P00369286**
 Firm's name: **LOW ACCOUNTANCY**
 Firm's address: **236 LATERA COURT SAN RAMON, CA 94582-4680**
 Firm's EIN: **20-5790801**
 Phone no: **(925) 828-7203**

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

SCANNED SEP 25 2012

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:
FOSTER CHILD PLACEMENT AND TEMPORARY HOUSING FOR CHILDREN

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses \$ 251151. including grants of \$) (Revenue \$)
HOSANNA HOMES IS A CALIFORNIA NON-PROFIT PUBLIC BENEFIT CORPORATION ORGANIZED UNDER THE NONPROFIT PUBLIC BENEFIT CORPORATION LAW FOR CHARITABLE PURPOSES. THE CORPORATION IS ORGANIZED TO PROVIDE RESEARCH, SERVICES AND SUPPORT TO ENHANCE INDIVIDUAL, FAMILY, HOME AND COMMUNITY QUALITY OF LIFE WITH PARTICULAR EMPHASIS ON STABILITY AND PERMANENCY FOR CHILDREN AND FAMILIES, UNDER THE STATE OF CALIFORNIA DEPARTMENT OF SOCIAL SERVICES FACILITY NUMBER 010707652. THE CORPORATION IS LICENSED TO OPERATE AS AN FFA IN TEN COUNTIES OF THE SAN FRANCISCO, OAKLAND AND SAN JOSE BAY AREA.

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 251151.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
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 "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b 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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d 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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f 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 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		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? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
25b 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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	X	
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		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):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	X	
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		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	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
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		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for 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?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources 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?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
	5		
1b	Enter the number of voting members included in line 1a, above, who are independent		
	0		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	a The governing body?	X	
8b	b Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?		X
14	Did the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	a The organization's CEO, Executive Director, or top management official		X
15b	b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **CA**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **THE ORGANIZATION - 510-538-8117**
9998 CROW CANYON RD, CASTRO VALLEY, CA 94552

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

Check if Schedule O contains a response to any question in this Part VII

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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, if any. 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) RANDALL WRIGHT DIRECTOR	0.00	X						0.	0.	0.
(2) CHRISTIAN SORENSON DIRECTOR	0.00	X						0.	0.	0.
(3) KARYN SORENSON DIRECTOR	0.00	X						0.	0.	0.
(4) TEYLER SORENSON DIRECTOR	0.00	X						0.	0.	0.
(5) TODD TEYLER DIRECTOR	0.00	X						0.	0.	0.
(6) JAMES TEYLER DIRECTOR	0.00	X						0.	0.	0.
(7) JOHN BILLINGS PRESIDENT	0.00			X				0.	0.	0.
(8) ROBERT LEIVISKA VICE-PRESIDENT	0.00			X				0.	0.	0.
(9) DEBORAH WRIGHT SECRETARY/TREASURER	0.00			X				0.	0.	0.
(10) VERNE TEYLER EXECUTIVE DIRECTOR	40.00							48654.	0.	1212.

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	74758.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	18418.				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f			93176.			
	Program Service Revenue	2 a _____ Business Code					
b _____							
c _____							
d _____							
e _____							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)						
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		2424.	180500.				
		b Less: cost or other basis and sales expenses					
		2156.	403818.				
	c Gain or (loss)						
	268.	-223318.					
	d Net gain or (loss)			-223050.	-223050.		
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
		c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities. See Part IV, line 19	a					
		b Less: direct expenses	b				
		c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11 a RENTAL INCOME		900099	38000.	38000.			
b PARENT PROJECT AND MIS		900099	1695.	1695.			
c _____							
d All other revenue							
e Total. Add lines 11a-11d			39695.				
12 Total revenue. See instructions			-90179.	-183355.	0.	0.	

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).

Check if Schedule O contains a response to any question in this Part IX

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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 United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	48654.	46820.	1834.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	11702.	11702.		
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	8497.	8270.	227.	
10 Payroll taxes	5804.	5620.	184.	
11 Fees for services (non-employees):				
a Management	117.	117.		
b Legal				
c Accounting	4500.	4500.		
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	4272.	4272.		
14 Information technology				
15 Royalties				
16 Occupancy	12746.	12746.		
17 Travel	5172.	5172.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	464.	464.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	67083.	63506.	3577.	
23 Insurance	7247.	7247.		
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOSTER CARE	38867.	38867.		
b PROPERTY TAXES AND LICE	19409.	19409.		
c EQUIPMENT REPAIR AND MA	7256.	7256.		
d UTILITIES	6448.	6448.		
e All other expenses	9728.	8735.	993.	
25 Total functional expenses. Add lines 1 through 24e	257966.	251151.	6815.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	3402.	1	36313.
	2 Savings and temporary cash investments	2337.	2	181.
	3 Pledges and grants receivable, net	3287.	3	1679.
	4 Accounts receivable, net	9125.	4	93500.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	4853.	9	926.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2177219.		
	b Less: accumulated depreciation	10b 559936.	10c	1617283.
	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	0.	15	1320.
16 Total assets. Add lines 1 through 15 (must equal line 34)	2111188.	16	1751202.	
Liabilities	17 Accounts payable and accrued expenses	2111.	17	4344.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	49000.	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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	19626.	25	54552.
	26 Total liabilities. Add lines 17 through 25	70737.	26	58896.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2037542.	27	1689297.
	28 Temporarily restricted net assets	2909.	28	3009.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	2040451.	33	1692306.
34 Total liabilities and net assets/fund balances	2111188.	34	1751202.	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	-90179.
2	Total expenses (must equal Part IX, column (A), line 25)	2	257966.
3	Revenue less expenses. Subtract line 2 from line 1	3	-348145.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2040451.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1692306.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 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 separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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.

	Yes	No
2a	X	
2b		X
2c		X
3a		X
3b		

Form 990 (2011)

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14		%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15		%
16a 33 1/3% support test - 2011. 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 <input type="checkbox"/>			
b 33 1/3% support test - 2010. 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 <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2011. 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 <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2010. 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 <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>			

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	764713.	258586.	168383.	62801.	48471.	1302954.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	764713.	258586.	168383.	62801.	48471.	1302954.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b						0.
8 Public support (Subtract line 7c from line 6)						1302954.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	764713.	258586.	168383.	62801.	48471.	1302954.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	53769.	25150.	10237.	1987.		91143.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	53769.	25150.	10237.	1987.		91143.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	130853.	33848.	-35602.	25514.	-183353.	-28740.
13 Total support (Add lines 9, 10c, 11, and 12)	949335.	317584.	143018.	90302.	-134882.	1365357.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	95.43 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	88.95 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	6.68 %
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	5.54 %

19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2011
Open to Public Inspection

Name of the organization **HOSANNA HOMES** Employer identification number **94-2978777**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

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

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

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV.

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

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

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment ▶ _____ %
 - b Permanent endowment ▶ _____ %
 - c Temporarily restricted endowment ▶ _____ %
- The percentages in lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		330164.		330164.
b Buildings		1627815.	370366.	1257449.
c Leasehold improvements		59230.	30697.	28533.
d Equipment		64955.	63917.	1038.
e Other		95055.	94956.	99.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1617283.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12) ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13) ▶		

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED EXPENSES	42616.
(3) SELF INSURED UNEMPLOYMENT ACCRUAL	11936.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	54552.

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
MR. VERNE TEYLER	EXECUTIVE DIRECTOR	12746.	MAIN PREMIS		X

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:

(A) NAME OF PERSON: MR. VERNE TEYLER

(A) PURPOSE OF LOAN: FUNDS PROVIDED TO MEET EVERYDAY OPERATING EXPENSES.

(A) NAME OF PERSON: MR. VERNE TEYLER

(A) PURPOSE OF LOAN: FUNDS DUE TO HOSANNA HOMES FROM SALE OF PROPERTY

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: MR. VERNE TEYLER

(D) DESCRIPTION OF TRANSACTION: MAIN PREMISES, CLASSROOM AND OFFICE SPACE OCCUPIED BY HOSANNA HOMES ARE RENTED FROM MR. AND MRS. VERNE TEYLER.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011
Open to Public
Inspection

Name of the organization

HOSANNA HOMES

Employer identification number

94-2978777

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

FRANCISCO BAY AREA TO PROVIDE FOSTER CHILD PLACEMENT AND TEMPORARY
HOUSING FOR CHILDREN IN NEED.

FORM 990, PART VI, SECTION B, LINE 11: THE COMPLETED FORM 990 IS DELIVERED
TO MR. VERNE TEYLER, EXECUTIVE DIRECTOR, AT HOSANNA HOME'S OFFICE, WHERE IT
IS REVIEWED BY THE EXECUTIVE DIRECTOR AND AVAILABLE FOR REVIEW BY ALL BOARD
MEMBERS BEFORE FILING WITH THE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD MEMBERS AND DIRECTORS
REPORT ANNUALLY TO THE BOARD ANY AREAS WHICH THEY VIEW AS A POSSIBLE
CONFLICT OF INTEREST. ALL PROBLEM AREAS ARE DICUSSED AMOUNG THE BOARD AND
RESOLVED.

FORM 990, PART VI, SECTION C, LINE 19: HOSANNA HOMES' GOVERNING DOCUMENTS,
CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS AND FEDERAL AND STATE
FILINGS ARE RETAINED AT THEIR OFFICE IN CASTRO VALLEY CALIFORNIA AND ARE
AVAILABLE FOR PUBLIC INSPECTION DURING REGULAR BUSINESS HOURS.

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	6615 CROW CANYON WIP 12/31/06	010108SL		27.50	16	202924.			202924.	22137.		7379.
2	6615 CROW CANYON WIP 12/31/06	010108SL		27.50	16	2037.			2037.	222.		74.
3	6615 CROW CANYON WIP 12/31/06	010108SL		27.50	16	1048664.			1048664.	114399.		38133.
4	6615 CROW CANYON WIP 12/31/07	010108SL		27.50	16	79162.			79162.	8637.		2879.
5	6615 CROW CANYON FENCING	101708SL		15.00	16	7132.			7132.	1029.		475.
85	LAND	010108SL				330164.			330164.			0.
	* 990 PAGE 10 TOTAL					1670083.		0.	1670083.	146424.	0.	48940.
6	(D) "D" STREET, HAYWARD	022807NC		.000		383560.			383560.			0.
7	(D) "D" STREET, HAYWARD	123108NC		.000		3631.			3631.			0.
87	(D) "D" STREET, HAYWARD (W.SAVAGE-E123109NC	0123109NC		.000		10109.			10109.			0.
89	(D) "D" STREET, HAYWARD (ENG & ENV1123110NC	1123110NC		.000		5718.			5718.			0.
	* 990 PAGE 10 TOTAL					403018.		0.	403018.	0.	0.	0.
8	PAVING WORK	120190SL		10.00	16	10478.			10478.	10478.		0.
9	PATIO DECK BLOCK RETAINING	091196SL		10.00	16	658.			658.	658.		0.
10	WALL WELL DRILLING-9998	100198SL		10.00	16	1337.			1337.	1337.		0.
11	CROW CANYON STEEL RETAINING	022802SL		20.00	16	10588.			10588.	4678.		529.
12	WALL WELL & PUMP-9998	100802SL		10.00	16	2663.			2663.	2129.		266.
13	CROW CANYON	091504SL		20.00	16	17512.			17512.	5510.		876.

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

(D) - Asset disposed

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
14	WELL-9998 CROW CANYON	022505SL		20.00	16	2181.			2181.	637.		109.
15	WELL SOLAR PANEL	050405SL		20.00	16	644.			644.	182.		32.
16	UPGRADE 4 WELLS * 990 PAGE 10 TOTAL	010907SL		20.00	16	13169.		0.	13169.	2618.		658.
17	OFFICES	120188SL		20.00	16	59230.		0.	59230.	28227.	0.	2470.
18	WATER TANK #1	113094SL		10.00	16	4072.			4072.	4072.		0.
19	TRAINING	100195SL		20.00	16	45151.			45151.	34430.		2258.
20	HEATER FOR #1	032196SL		10.00	16	4032.			4032.	4018.		0.
21	TRAINING	070596SL		20.00	16	368.			368.	264.		18.
22	STORAGE CONTAINER	123196SL		7.00	16	2807.			2807.	2807.		0.
23	WATER TANK #2	031099SL		10.00	16	3680.			3680.	3671.		0.
24	A/C UPDATE	043001SL		20.00	16	3025.			3025.	1462.		151.
25	STORAGE MODULE	063001SL		20.00	16	19770.			19770.	9136.		989.
26	WATER TANK--TRUCK	103101SL		10.00	16	3663.			3663.	3357.		306.
27	HEATING & A/C	021502SL		10.00	16	8806.			8806.	7816.		881.
28	SCHOOL MODULE	123002SL		20.00	16	164705.			164705.	65882.		8235.
29	DIVIDER DOOR * 990 PAGE 10 TOTAL	032404SL		20.00	16	3545.		0.	3545.	1196.		177.
						287896.		0.	287896.	161987.	0.	13015.

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
30	ADVANTAGE BUSINESS	10/14/98	SL	5.00	16	3875.			3875.	3875.		0.
31	PHONE TREE	01/04/00	SL	5.00	16	1307.			1307.	1307.		0.
32	SERVER/OFFICE SUITE	08/26/05	SL	5.00	16	463.			463.	463.		0.
33	FOSTER TRAK BASIC	03/21/06	SL	5.00	16	863.			863.	827.		36.
	* 990 PAGE 10 TOTAL					6508.		0.	6508.	6472.	0.	36.
34	SERVERS	08/09/95	SL	7.00	16	1844.			1844.	1844.		0.
35	3 PENTIUM 74 COMPUTERS	05/11/96	SL	7.00	16	2271.			2271.	2271.		0.
36	COMPUTER EQUIP MISC	07/25/96	SL	7.00	16	1121.			1121.	1121.		0.
37	HP LASER, SCANNER, INKJET	08/27/96	SL	5.00	16	2497.			2497.	2497.		0.
38	NETWORK SETUP	09/01/96	SL	7.00	16	4504.			4504.	4504.		0.
39	SERVER UPGRADE	02/01/98	SL	7.00	16	2948.			2948.	2948.		0.
40	MX MOTHER BOARDS	03/10/98	SL	7.00	16	831.			831.	831.		0.
41	HP 4000 LASER	08/01/98	SL	7.00	16	1996.			1996.	1996.		0.
42	WORKSTATION UPGRADE	11/01/98	SL	7.00	16	3000.			3000.	3000.		0.
43	EPSON FX 1180 PRINTER	12/23/98	SL	7.00	16	576.			576.	576.		0.
44	TWO MONITORS	01/01/99	SL	7.00	16	1138.			1138.	1138.		0.
45	LAPTOP COMPUTER	02/28/99	SL	7.00	16	2100.			2100.	2100.		0.
46	INTEL 400 COMP & MON	07/09/99	SL	7.00	16	2163.			2163.	2163.		0.

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(D) - Asset disposed

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
47	APEX INTERNET & HUB	072899SL	SL	7.00	16	2990.			2990.	2990.		0.
48	SEAGATE TAPE DRIVE	100899SL	SL	7.00	16	717.			717.	717.		0.
49	NEC 1700 LASER PRINTER	032100SL	SL	7.00	16	1434.			1434.	1429.		0.
50	NOTEBOOK COMPUTERS	092501SL	SL	5.00	16	5511.			5511.	5434.		0.
51	12" FLAT SCREEN MONITOR (3)	110103SL	SL	5.00	16	693.			693.	693.		0.
52	SHELLA COMPUTER UPGRADE	090104SL	SL	5.00	16	418.			418.	418.		0.
53	HP 1300 PRINTER	091004SL	SL	5.00	16	513.			513.	513.		0.
54	ACCOUNTING COMPUTER	091104SL	SL	5.00	16	223.			223.	223.		0.
55	IBM THINKPAD	092404SL	SL	5.00	16	652.			652.	652.		0.
56	THREE COMPUTERS	032505SL	SL	5.00	16	1072.			1072.	1072.		0.
57	EPSON 5500 PRINTER	060905SL	SL	5.00	16	543.			543.	543.		0.
58	COMPUTERS (2-2)	061605SL	SL	5.00	16	1335.			1335.	1324.		0.
59	COMPUTERS (1)	061605SL	SL	5.00	16	668.			668.	668.		0.
60	COMPUTERS (1-1)	100505SL	SL	5.00	16	1011.			1011.	1011.		0.
61	COMPUTERS (1-2)	110705SL	SL	5.00	16	505.			505.	505.		0.
62	IBM THINKPAD X31	042506SL	SL	5.00	16	1161.			1161.	1088.		73.
63	COMPUTERS (2)	060706SL	SL	5.00	16	1118.			1118.	1023.		95.
	* 990 PAGE 10 TOTAL					47553.		0.	47553.	47292.	0.	168.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
64	BACKHOE TRACTOR	103198SL		10.00	16	49436.			49436.	49436.		0.
65	RL505 LASER TRAITS	10100SL		10.00	16	1855.			1855.	1855.		0.
66	TRUCK BED	061601SL		10.00	16	10152.			10152.	9685.		467.
67	PRESSURE WASHER	102401SL		10.00	16	917.			917.	844.		73.
68	(D)1990 GMC TRUCK	103101SL		10.00	16	8500.			8500.	7792.		567.
	* 990 PAGE 10 TOTAL					70860.		0.	70860.	69612.	0.	1107.
69	BOOKS	070196SL		7.00	16	109.			109.	109.		0.
70	VIDEOS	070196SL		7.00	16	123.			123.	123.		0.
71	PRIDE SERIES	100198SL		7.00	16	1905.			1905.	1905.		0.
	* 990 PAGE 10 TOTAL					2137.		0.	2137.	2137.	0.	0.
72	XEROX COPIER	122094SL		7.00	16	8606.			8606.	8606.		0.
73	ADDITIONAL PHONES	060195SL		7.00	16	667.			667.	667.		0.
	TABLE/CHAIR-CLASS											
74	ROOM	030899SL		5.00	16	1079.			1079.	1079.		0.
75	NEW PHONE SYSTEM	041299SL		7.00	16	7555.			7555.	7552.		0.
76	SCHOOL FURNITURE	010100SL		7.00	16	714.			714.	714.		0.
77	SONY DIGITAL CAMERA	10100SL		7.00	16	758.			758.	758.		0.
78	PHONE EXPANSION-1	052501SL		7.00	16	3766.			3766.	3766.		0.
79	CHAIRS & FILES	080101SL		7.00	16	3384.			3384.	3384.		0.

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(D) - Asset disposed

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
80	COMPUTER TABLES	100101SL		7.00	16	2415.			2415.	2415.		0.
81	PHONE EXPANSION-2 NEC PORTABLE	010102SL		7.00	16	3496.			3496.	3496.		0.
82	PROJECTOR	021902SL		7.00	16	3651.			3651.	3651.		0.
83	OFFICE ASSOC	092702SL		7.00	16	2224.			2224.	2224.		0.
84	NEC LCD PROJECTOR * 990 PAGE 10 TOTAL	060706SL		5.00	16	542.			542.	494.		45.
85	(D)2003 CHEVY ASTRO VAN * 990 PAGE 10 TOTAL	081204SL		7.00	16	38857.		0.	38857.	38806.	0.	45.
88	1992 MERCURY * 990 PAGE 10 TOTAL	010109SL		5.00	16	2595.			2595.	1038.		519.
	* GRAND TOTAL 990 PAGE 10 DEPR					2605181.		0.	2605181.	516997.	0.	67083.