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Form **990**

Return of Organization Exempt From Income Tax

2011

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

OMB No 1545-0047

Department of the reasury Internal Revenue Service

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Inspection

A	For the	2011 cale	ndar year, or tax year beginning June 1 , 2011, and ending	May	31	, 20 12		
В		applicable	C Name of organization NewThreads of Hope, Inc	0	Employe	er identification number		
\Box	Address		Doing Business As			39-1674150		
\exists	Name ch	•	Number and street (or P O box if mail is not delivered to street address) Room/suite	E	Telephon	ie number		
Η	Initial ret		2959 North 112th Street			414-443-0060		
\exists	Terminat		City or town, state or country, and ZIP + 4	-				
\vdash			Wauwatosa, Wi 53222	16	Gross re	ceipts \$ 5,899,157		
	Amende					or affiliates? Yes V No		
ш	Applicati	on pending				cluded? Yes No		
	T		✓ 501(c)(3)			list (see instructions)		
<u>+</u> -	Website	mpt status_		H(c) Group e				
<u>-</u>			✓ Corporation Trust Association Other ► L Year of formation	1990		of legal domicile WI		
_	art i	Summ		,,,,,	IN OLLIC	or legal dornlosse 111		
	1		escribe the organization's mission or most significant activities:					
	'	•	ads of Hope, Inc. solicits and receives returned and excess merchandise from corpor	ations sort	s			
9	ŀ		ses and then distributes it to a wide range of chantable organizations. The merchandi					
Jan			d to or used for the care of the poor, the sick, elderly or children					
e l	2		lis box ► If the organization discontinued its operations or disposed of m	ore than ?	25% of	its net assets		
ĝ	3		of voting members of the governing body (Part VI, line 1a)		3	7		
≪5	4		of independent voting members of the governing body (Part VI, line 1b)		4	6		
Activities & Governance	5				5	3		
ξį	6		mber of individuals employed in calendar year 2011 (Fart V, line 24)		6	500		
¥	7a		related business revenue from Part VIII, column (C), line 12		7a	0		
;	1 .				7b	0		
	b	Net unite	lated business taxable income from Form 990-1, line 34	Pnor Yea		Current Year		
an e		Contribu	tions and grants (Part VIII, line 1h)	1 /	457,414	5,899,157		
	8 9		service revenue (Part VIII, line 2g)		101,101			
Revenue	10	•	ent income (Part VIII, column (A), lines 3, 4, and 7d)					
æ	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-			
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1.	457,414	5,899,157		
_	13		nd similar amounts paid (Part IX, column (A), lines 1–3)		467,323	3,843,234		
	14		paid to or for members (Part IX, column (A), line 4)		70.,020	5,512,231		
	1		other compensation, employee benefits (Part IX, column (A), lines 5–10)		141,663	152,477		
Expenses	16a		onal fundraising fees (Part IX, column (A), line 11e)		,			
S e	. Б	Total fur		Fr C	~ t \ @e			
ă	17	Other ex	penses (Part IX, column (A), lines 11a-11d, 11f=24e)	7 208	64,566	101,366		
	18		penses. Add lines 13–17 (must equal Part IX, column (A)/line 25)	2.	673,552	4,097,077		
	19	Revenue	eless expenses. Subtract line 18 from line 12 2013.		216,138	1,802,080		
		110701140		nning of Cur		End of Year		
ats o	20	Total ass	sets (Part X, line 16)	1,	627,675	3,459,755		
Asse	21		sets (Part X, line 16)	· · · · · ·	97,449	127,449		
Net Assets or	22		ets or fund balances. Subtract line 21 from line 20	1,	530,226	3,332,306		
	art II		ture Block					
			ury, I declare that I have examined this return, including accompanying schedules and statemen	ts, and to the	e best of r	my knowledge and belief, it is		
			olete Declaration of preparer (other than officer) is based on all information of which preparer has					
_			Later Burne		01.	14-2013		
Si	gn	7 🙀	nature of officer	Date	е			
Н	ere	P	atrick J. Byrne Treasurer					
		Тур	e or print name and title					
D.	aid	Print/T	ype preparer's name Preparer's signature Date		Check	T f PTIN		
		\r			self-em			
	repare se On	1	name ►	Firm	s EIN ▶			
U	se Uii	יש עי	address ▶	Phor				
M	ay the II		ss this return with the preparer shown above? (see instructions)			Yes No		
_			uction Act Notice, see the separate instructions. Cat No 1	1282Y		Form 990 (2011		

Form	990	(201	I)

Pa	ne	2

Part		
	Check if Schedule O contains a response to any question in this Part III	<u> L</u>
'	NewThreads of Hope, through its innovative gifts-in-kind program, offers support and a renewed sense of hope	A.
	by providing brand-new clothing and household items to the poor, the ill, children, and seniors, so that they may live	
	more self-sufficient, dignified and independent lives	
	The sen sumset, agrined and macpetident aves	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	☐ Yes ☑ No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	☐ Yes 🗹 No
	If "Yes," describe these changes on Schedule O.	
4	Describe the 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 repo	
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 4,058,903 including grants of \$ 3,843,234) (Revenue \$)
	The NewThreads of Hope program, the organization's only program, is a gifts in kind merchandise distribution program	
	New Threads of Hope solicits and receives donations of brand new clothing, bedding, household goods, books	
	and other softgoods from manufacturers, retailers and wholesalers. This merchandise is then warehoused, sorted,	
	processed and then redistributed through a network of other non-profit and governmental organizations to	
	individuals and families in need. This merchandise must be used for either the care of or use of the poor, the sick	
	or children Please see schedule I for a listing of distributions of this gifts in kind merchandise made during	
	the year	
	•	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	······	•-•
4c	(Code.) (Expenses \$ including grants of \$) (Revenue \$	<u> </u>
	, , , , , , , , , , , , , , , , , , ,	'
		**
	' '	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$\frac{\text{including grants of \$}}{\text{(Revenue \$}}\)	
4e	Total program service expenses ► 4,058,903	

art I	Checklist of Required Schedules		V I	
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	Yes	No .
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	V	
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? If "Yes," complete Schedule C, Part II	4		~
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? If "Yes," complete Schedule C, Part III.	5		~
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? If "Yes," complete Schedule D, Part I	6		>
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		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		•
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		,
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	,	
	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	11b		,
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	~	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		~
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		14a		~
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? If "Yes," complete Schedule F, Parts I and IV	14b		_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		,
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, Parts III and IV	16		~
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		~
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		v
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		~
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		V
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Form 99	0 (2011)		F	Page 4
Part	Checklist of Required Schedules (continued)			
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? If "Yes," complete Schedule I, Parts I and II	21	Yes	No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		,
23	Did the organization-answer—"Yes" to Part-VII, Section A,—line 3,-4, or 5-about-compensation-of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		· ·
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		v
С	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		v v
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		v
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		,
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		,
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? If "Yes," complete Schedule L, Part III	27		,
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):			4
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		V
С	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? If "Yes," complete Schedule L, Part IV	28c		,
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	V	v
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		,
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>	33		,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		V
36	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		~
37	related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		•
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		,
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	,	
			000	

art	V Statements Regarding Other IRS Filings and Tax Compliance			
	Gheck if Schedule O contains a response to any question in this Part V	<u></u>	<u></u>	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			İ
С	reportable gaming (gambling) winnings to prize winners?	1c	1	J
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 3	,	•	ł
b	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 (see instructions)	,	`]
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u> </u>
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		/
_	If "Yes," enter the name of the foreign country:	4a	£5. ,	
Ь	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			ř
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
7	gifts were not tax deductible?	6b		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		a [*]	
-	and services provided to the payor?	7a	~	~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		~
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			ا ر: ا
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7e 7f		~
f g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	-	~
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	7.7	,	لـنــا
	organization, have excess business holdings at any time during the year?	8		Ļ
9	Sponsoring organizations maintaining donor advised funds.		44 × "	├
a	Did the organization make any taxable distributions under section 4966?	9a 9b	ļ	├─
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?	90	=	- 7
а	Initiation fees and capital contributions included on Part VIII, line 12	* ^*		9
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1:		
11	Section 501(c)(12) organizations. Enter:	,	₹' *	
а	Gross income from members or shareholders		4° 87	٧.
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	1		- ;
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a	 	 -
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	† 	\Box
_	Note. See the instructions for additional information the organization must report on Schedule O.		<u> </u>	
b	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	1		:
С	Enter the amount of reserves on hand	1	<u> </u>	 '
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	\vdash	·
þ	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b For) (2011)
		1 01	001	, (-011)

Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
Conti	Check if Schedule O contains a response to any question in this Part VI	<u>· · · </u>		
Secti	on A. Governing Body and Management		Yes	No
4.0	Enter the number of voting members of the sevening had at the end of the territory		res	NO
ıa	Enter the number of voting members of the governing body at the end of the tax year 1a 7	-	, ,	
	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.	, * *	ì	
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 6	*′		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	†	۵',	
	any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		~
6	Did the organization have members or stockholders?	6		~
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?	7a		~
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			~
	stockholders, or persons other than the governing body?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		ŝ	·
	the year by the following:		233	
a	The governing body?	8a	~	
p	Each committee with authority to act on behalf of the governing body?	8b	~	ļ
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	_ !		
Sooti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	9		-
Secu	on b. Policies (This Section b requests information about policies not required by the internal Rever	ue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	V
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	IVa	ļ	-
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	<u>-</u>	-	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	"	i
13	Did the organization have a written whistleblower policy?	13		~
14	Did the organization have a written document retention and destruction policy?	14		~
15	Did the process for determining compensation of the following persons include a review and approval by	»ć		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		1.13%	المنطقة
a	The organization's CEO, Executive Director, or top management official	15a	~	
b	Other officers or key employees of the organization	15b	~	ļ,
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		٠,٠	[
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?	ا ءة ا		
L		16a	-	-
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?	16b		
Secti	on C. Disclosure	LIOD	l	<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ► Wisconsin			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501(c)(3)s	onlv)
	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	f inte	rest p	olicy,
	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: ► Dennis J Brand President 2959 N 112th Street Waijwatosa WI 53222 (414-443-0060)			

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

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 relate	d orga	anız	atio	n c	ompe	nsa	ited any curren	t officer, director	, or trustee.
	(C)									
(A)	(B)	(B) Position (do not check more than one					200	(D)	(E)	(F)
Name and Title	Average	box, unless person is both an						Reportable	Reportable	Estimated
	hours per week		er and		_	or/trust		compensation from	compensation from related	amount of other
	(describe	Individual trustee or director	hst	Officer	Key employee	emp)	Former	the	organizations	compensation
	hours for related	rect	Institutional trustee	ě	<u>9</u>	nest oloye	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	현함	mal		ջ	eom	ļ	,		and related
	ın Schedule O)	ste	trus		8	pen				organizations
]	, œ	tee			Highest compensated employee				
(4) Donnes I Prond										
(1) Dennis J, Brand President	40	,		,		ŀ		74,423	o	0
(2) Patrick J·Byme		Ť		Ť		-		7 1,120		
Chairman and Treasurer	5	,		~				0	0	0
(3) Br Bob Smith										
Secretary	1	·						0	0	0
(4) Ronald Schmeling										
	5	~		~				0	0	0
(5) Erica P John										
Vice President	1	~		~	<u> </u>		<u> </u>	0	0	0
(6) Pastor Jerome Spencer	_	١.,	ŀ							
(=) L == 10(a)	5	~	⊢		├—			0	0	0
(7) Les Weil	1	1	ļ		ļ			0	o	0
(8)	'	-	 	\vdash			┢	<u> </u>		
(6)	•									
(9)										
(10)										
(11)				-						
(40)			<u> </u>	-	ļ		_			
(12)	-									
(13)										
(14)										

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title	(B) Average hours per week	(do n box, office	ot ch unles	Pos neck ss pe	tion more rson irect	than one that the that the that the that the that the that the the that the that the the the the the the the the the th	one an ee)	(D) Reportable compensation from	(E) Reportable compensation related	le n from	(F) Estimated amount of other	
	<u> </u>	(describe hours for related organizations in Schedule	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the —organization— (W-2/1099-MISC)	organızatı (W-2/1099-N		compensate from the organizatio and relate organizatio	on ed
(15)							ed						···
(16)		-									_		
(17)				_						1	+		
(18)								-					
(19)							_					<u> </u>	
(20)													
(21)													
(22)										·			
(23)													
(24)			-										
(25)		-											
1b c d	Sub-total			•				> >	74,423 74,423		0		0
2	Total number of individuals (including but reportable compensation from the organi	not limited	i to th				above	e) w		ore than \$1		of	
3	Did the organization list any former of employee on line 1a? If "Yes," complete s									est compe	nsated	Yes	1 2 3
4	For any individual listed on line 1a, is the organization and related organizations individual												
5	Did any person listed on line 1a receive of for services rendered to the organization								_	ation or inc			V
Section	n B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Repyear.	compensate oort compe	ed inc nsatio	depe on fo	endo or th	ent ie c	contra alend	acto ar y	ors that receive rear ending wit	ed more that h or within	n \$100 the org	0,000 of janization's	tax
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compensation	-
None													None
				-									
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who	: 4	, a	

Part	VIII	Statement of Revenue				
		A*s	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
its its	1a	Federated campaigns 1a		revenue	,	512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	b c	Membership dues 1b Fundraising events 1c			,	· .
ns, Gif Similar	d e	Related organizations 1d Government grants (contributions) 1e				
ibutio	f	All other contributions, gifts, grants, and similar amounts not included above 1,899,157	\ \{\tau_{i}^{\tau}\}		```	
Conti	g h	Noncash contributions included in lines 1a-1f \$ 5,675,658 Total. Add lines 1a-1f ▶	5,899,157	7.40 2.40		
Program Service Revenue	2a	Business Code				
vice Re	b c					
am Ser	d e					
Progra	f g	All other program service revenue . Total. Add lines 2a–2f		3 55, × 153≒#		
	3	Investment income (including dividends, interest, and other similar amounts)				
	4 5	Income from investment of tax-exempt bond proceeds ► Royalties				
	6a b	Gross rents Less rental expenses				
	C	Rental income or (loss)				
	d 7a	Net rental income or (loss)				
	b	Less cost or other basis and sales expenses .				
	d	Gain or (loss) ▶				
evenue	8a	Gross income from fundraising events (not including \$				
Other R		of contributions reported on line 1c). See Part IV, line 18				
ō	b c	Less: direct expenses b Net income or (loss) from fundraising events . b				
	9a	Gross income from gaming activities See Part IV, line 19 a				
		Less: direct expenses b Net income or (loss) from gaming activities ▶ Gross sales of inventory, less		*>	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	b	Less: cost of goods sold b Net income or (loss) from sales of inventory ▶				
	C	Miscellaneous Revenue Business Code			<u> </u>	
	11a b					
	d	All other revenue				
	e	Total. Add lines 11a–11d	5 000 455	7		
	12	Total revenue. See instructions	5,899,157	<u> </u>	1.	

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 respon	se to any question	in this Part IX		
	ot include amounts reported on lines 6b, 7b, b, 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 United States. See Part IV, line 21	3,843,234	3,843,234	^	
2	Grants and other assistance to individuals in the United States. See Part IV, line 22		<u> </u>	,	
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	74,423	52,096	11,163	11.164
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 8	Other salaries and wages	51,682	51,682		
9	Other employee benefits	16,616	13,293	1,662	and the same of th
10 11 a	Payroll taxes	9,756	7,804	976	976
b c d	Legal				
e f	Professional fundraising services. See Part IV, line 17 Investment management fees			* 1441(1)	
9	Other				
12	Advertising and promotion				
13	Office expenses	3,452	2,826	313	
14	Information technology	909	636	91	182
15	Royalties				
16	Occupancy	88,475	79,655	4,410	·
17 18	Travel	384	307		77
19	Conferences, conventions, and meetings .				
20	Interest	970	874	48	48
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	1,166	1,166		
23	Insurance	5,228	4,705	261	262
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.)		`		** : ** (* *)
а	Vehicle Exense	610	488	61	61
b	Miscellaneous	172	137	18	17
c d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,097,077	4,058,903	19,003	19,171
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)				

Pá	art X	Balance Sheet			
		•	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	3,579	1	5,550
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
ļ	5	Receivables from current and former officers, directors, trustees, key	,		9
		employees, and highest compensated employees. Complete Part II of	,	5+ 1	
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section	in XXX		
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		, L.	
		employers and sponsoring organizations of section 501(c)(9) voluntary	<u> </u>	ئىدىلا	
sts		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
۷	8	Inventories for sale or use	500	8	400
	9	Prepaid expenses and deferred charges	580	9	406
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 20,630		,,	
			4,634	10c	16,448
	b		7,007	11	10,440
	11	Investments – publicly traded securities		12	
	12 13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV. line 11	1,618,882	15	3,437,351
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,627,675		3,459,755
	17	Accounts payable and accrued expenses	76,449	17	95,993
	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	
S	22	Payables to current and former officers, directors, trustees, key			
Ĕ		employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
3	23	Secured mortgages and notes payable to unrelated third parties		23	04.450
	24	Unsecured notes and loans payable to unrelated third parties	21,000	24	31,456
	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		25	
	26	Total liabilities. Add lines 17 through 25	97,449	-	127,449
	20	Organizations that follow SFAS 117, check here ▶ □ and complete		86 000	
es		lines 27 through 29, and lines 33 and 34.			
Ĕ	27	Unrestricted net assets	1,530,226	27	3,332,306
3als	28	Temporarily restricted net assets	···········	28	
Ā	29	Permanently restricted net assets		29	
٦		Organizations that do not follow SFAS 117, check here ▶ □ and	71		
P.		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ţ	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ž	33	Total net assets or fund balances	1,530,226	+	3,332,306
	34	Total liabilities and net assets/fund balances	1,627,675	34	3,459,755

Form 9	990 (2011)			Pa	ige 1 2
Par	T XI Reconciliation of Net Assets				90 11
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>		<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,899	9,157
2	Total expenses (must equal Part IX, column (A), line 25)	2		4,09	7,077
3	Revenue less expenses. Subtract line 2 from line 1	3		1,802	2,080
4-	- Net assets or fund balances at beginning of year (must equal-Part-X, line 33, column (A))	4		-1-53(0,226
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
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		3,332	2,306
	Check if Schedule O contains a response to any question in this Part XII	· · · · · ·		Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plaın ın			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		~
b	Were the organization's financial statements audited by an independent accountant?		2b		~
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account		2c		
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain in	3 (s)	2 3 8 3	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the yellissued on a separate basis, consolidated basis, or both:	ar were			

☐ Consolidated basis ☐ Both consolidated and separate basis As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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

За

3b

Form 990 (2011)

☐ Separate basis

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number NewThreads of Hope, Inc. 39-1674150 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated **b** Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No 11a(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (ii) EIN (i) Name of supported (iii) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of in col (i) listed in your the organization in organization in col. organization (described on lines 1-9) support (i) organized in the governing document? col (i) of your above or IRC section support? US? (see instructions)) No Yes No Yes Yes No (A) (B) (C) (D) (E) Total

Page 2

							
Part							
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, p	lease comple	te Part III.)	
	on A. Public Support	1 () 0007	(1.) 0000	4.3.0000	(4) 0040	(-) 0014	40 T + 1
	dar 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	Ì		}			
	organization without charge	Ì					
4	Total. Add lines 1 through 3						
5	The portion of total contributions by		4.5	1:1 10 Ports			
	each person (other than a	14 14 54		1945 S			
	governmental unit or publicly						
	supported organization) included on		the Edition				
	line 1 that exceeds 2% of the amount shown on line 11, column (f)						
_					20 20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
Socti	on B. Total Support On B. Total Support	Section 2	Section 1989	F-72.28	[@4E-1-88838-1-1-]	52.5°C (4.000)2°C	
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	(4) 2007	(5) 2000	(0) 2000	(4) 2010	(6) 2011	(i) rotai
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						
44	(Explain in Part IV.)	7 N. S. S. S. S. S.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	March Alteria	-anni 1964 y 21	USAU PARSO E7 DU	
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	(see instruction				12	
13	First five years. If the Form 990 is for the						n 501(c)(3)
	organization, check this box and stop he						
Secti	on C. Computation of Public Suppo						
14	Public support percentage for 2011 (line			1, column (f))		14	%
15	Public support percentage from 2010 Sc					15	%
16a	331/3% support test-2011. If the organi						
	box and stop here. The organization qua			-			
b	331/3% support test-2010. If the orga						•
	check this box and stop here. The organ				-		ـــا
17a	10%-facts-and-circumstances test-2						
	10% or more, and if the organization me Part IV how the organization meets the "						
	organization				•	•	• •
							L.
p	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza						
	Explain in Part IV how the organization n						
	supported organization				-	•	
18	Private foundation. If the organization d						
	instructions						_

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I 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.)

	11 the organization land to quality	arraor trio to	oto notou bort	m, piedee ee	inplote l'arti	<u>''')</u>	
Section	en A. Public Support						
Calen	dar 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")	3,094,699	3,579,550	4,125,632	1,457,414	5,899,157	18,156,452
2	Gross receipts from admissions, merchandise				i		
	sold or services performed, or facilities						
	furnished in any activity that is related to the				į		
•	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	ĺ					
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	3,094,699	3,579,550	4,125,632	1,457,414	5,899,157	18,156,452
	Amounts included on lines 1, 2, and 3	3,034,033	3,373,330	4,125,052	1,707,1	3,099,137	10,130,432
ra	• •						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000					,	
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	17 - 18 - 18 - 18 - 18 - 18 - 18 - 18 -	1.10 多数音樂		TO STATE OF THE ST	2000年100日	
	line 6.)		44.00				18,156,452
Section	on B. Total Support	735 1.557,611,435		71	**.C. Y 13.551		
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	3,094,699	3,579,550	4,125,632	1,457,414	5,899,157	18,156,452
10a	Gross income from interest, dividends,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , , , , ,		,,,
	payments received on securities loans, rents,						
	royalties and income from similar sources .	0	О	o	o	0	0
		ļ					
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975	0	0	0	0	0	0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on	0	0	0	o	o	0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	l o	0	0	o	ol	0
13	Total support. (Add lines 9, 10c, 11,						····
	and 12.)	3,094,699	3,579,550	4,125,632	1,457,414	5,899,157	18,156,452
14	First five years. If the Form 990 is for the						
• •	organization, check this box and stop he				-		· · · · · · · · · · · · · · · · · · ·
Secti	on C. Computation of Public Support			· · · · ·	· · · · ·	<u> </u>	<u> </u>
				2		Tarl	100.00.0/
15	Public support percentage for 2011 (line		=			15	100 00 %
16	Public support percentage from 2010 Sci				· · · ·	[16]	100 00 %
	on D. Computation of Investment In				····	11	
17	Investment income percentage for 2011 (17	0 00 %
18	Investment income percentage from 2010	•	•			18	0 00 %
19a	331/3% support tests—2011. If the organ						
	17 is not more than 331/3%, check this box	and stop here.	The organization	on qualifies as a	a publicly suppo	orted organizati	on . 🕨 🗹
b	331/3% support tests - 2010. If the organization	zation did not c	heck a box on	tine 14 or line 1	9a, and line 16	is more than 3	31/3%, and
	line 18 is not more than 331/3%, check this	box and stop h	ere. The organ	ızatıon qualıfies	as a publicly si	upported organ	ization 🕨 🥅
~~	Private foundation If the organization d	م باممطم قمم آم	hay an line 14	10a ar 10b a	haali khia haii		=

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
	,
•	

SCHEDULE D (Form 990)

Supplemental Financial Statements

201

Employer identification number

Department of the Treasury
Internal Revenue Service
Name of the organization

► 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.

Open to Public Inspection

OMB No 1545-0047

NewThreads of Hone, Inc. 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 Total number at end of year Aggregate contributions to (during year) . 2 3 Aggregate grants from (during year) . . Aggregate value at end of year 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? 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 Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 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 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. Total number of conservation easements 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c С Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 8 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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. 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 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 . . . _ _ .

_	
Page	4

Part	III Organizations Maintaining	Coll	ections of	Art, His	torical T	reasures	, or Ot	her Similar Ass	sets (cc	ntinu	ıed)
3	Using the organization's acquisition, collection items (check all that apply):	acces	sion, and o	ther reco	ds, chec	k any of th	e follow	ving that are a si	gnificant	use	of its
а	Public exhibition			d	Loan	or exchang	ae progr	rams		•	
	Scholarly research										
	☐ Preservation for future generations	3		•							
4	Provide a description of the organization	ion's	collections	and expla	un how t	hey further	the org	anızatıon's exem	pt purp	ose ir	Part
	XIV.									···	
5	During the year, did the organization										
	assets to be sold to raise funds rather										
Part	line 9, or reported an amour					anization	answei	red "Yes" to Fo	rm 990,	, Part	: IV,
1a	Is the organization an agent, trustee	cust	odian or oth	ner intern	nediary fo	or contribut	tions or	other assets no	t		
	included on Form 990, Part X?								□ Ye	es 🗌	No
b	If "Yes," explain the arrangement in P	art XI	V and compl	lete the fo	llowing to	able:					
								Ar	nount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amou			art X, line	21? .				□ Y	es L	No
	If "Yes," explain the arrangement in P Endowment Funds. Compl			action or	oworod	"Voo" to E	O	00 Dort IV line	10		
Fair	Endowment Funds. Compr		Current year	(b) Pri				(d) Three years back		vears	back
10	Reginning of year balance		- Carron you	(5)		(6) 1.10) 54	- Duoit	(a) Third your back	(c) : ca	9 5 T. H	# 7/ss ;
1a	Beginning of year balance			 	-				20 Jan 1	2 7 3 3 2 1 2 7 3 3 2 1	Market 1
b C	Net investment earnings, gains, and		-	 					W. Jua		
·	losses										
d	Grants or scholarships								FC M	() ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	· * · ·
e	Other expenditures for facilities and								100 (C)	31 cj. v v	
•	programs									The State of	
f	Administrative expenses			1		··-··			3000		
g	End of year balance								27.74		
2	Provide the estimated percentage of	he cu	irrent year ei	nd balanc	e (line 1g	, column (a	a)) held a	as:	1	and show eds.	33,3
а	Board designated or quasi-endowme				•	,	.,				
b	Permanent endowment ▶	%									
С	Temporarily restricted endowment ▶		%								
	The percentages in lines 2a, 2b, and 2			00%.							
3a	Are there endowment funds not in the	e pos	session of t	he organi	zation the	at are held	and ad	ministered for the	9		
	organization by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(iı), are the related organ								3b		
4	Describe in Part XIV the intended use										
Pari		mer									
	Description of property		(a) Cost or of (investment)			or other basis other)		Accumulated epreciation	(d) Boo	ok value	9
1a	Land						1889	(ME14444), 85			
b	Buildings										
С	Leasehold improvements										
d	Equipment					20,630		4,182		1	6,448
е	Other										
Total.	Add lines 1a through 1e. (Column (d) r	nust e	equal Form 9	990, Part	X, columr	n (B), line 10	0(c).)	▶		1	6,448
								0-1-	1.1.5.75		

Part VII	Investments—Other Securities	. See Form 990, Part	X, line 12.	
(;	Description of security or category (including name of security)	(b) Book value	(c) Method of value Cost or end-of-year m	
(1) Financia	I derivatives			
(2) Closely-	held equity interests			
(3) Other				
(A)				······································
(B)				
(C)				
(D) (E)				
(E) (F)				
(G)				
(H)				
(1)				
	(b) must equal Form 990, Part X, col (B) line 12.)			ANT THE WASTERS OF
Part VIII	Investments—Program Related	. See Form 990. Part		***************************************
	(a) Description of investment type	(b) Book value	(c) Method of val	uation
		.,	Cost or end-of-year m	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	41 45 000 5 44 4015			
	(b) must equal Form 990, Part X, col (B) line 13)	and V. June 4.5	the water that we will be	(B) · A · K(C) · A · A · A · A · A · A · A · A · A ·
Part IX	Other Assets. See Form 990, Pa	IT X, IINE 15. i) Description		(b) Book value
(1) Other a	ssets as of May 31, 2012 is comprised of do		ng brand new	3,437,351
	, household goods, linens and books that wi		ig brand new	3,437,331
	le organizations to be used for the care or u			
	or elderly			
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	ımn (b) must equal Form 990, Part X, co		<u> </u>	3,437,351
Part X	Other Liabilities. See Form 990,			
1.	(a) Description of liability	(b) Book value		"快点"就是语句的"这种
	Income taxes			
(2)				
(3)				
(4) (5)				
(5)				
(6)				
(8)				
(9)				,
(10)		<u></u>	-	e e e e e e e e e e e e e e e e e e e
(11)			⊣ ,	
	(b) must equal Form 990, Part X, col (B) line 25)			
	ASC 740) Footnote In Part XIV, provide	the text of the footnote	to the organization's financial states	nents that reports the
	n's liability for uncertain tax positions u		<u> </u>	

Part	Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Staten	nents
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1
2	Total expenses (Form 990, Part IX, column (A), line 25)		2 ,
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3
4	Net unrealized gains (losses) on investments		4
5	Donated services and use of facilities		5
6	Investment expenses		6
7	Prior period adjustments		_7
8	Other (Describe in Part XIV.)		8
9	Total adjustments (net). Add lines 4 through 8		9
10	Excess or (deficit) for the year per audited financial statements. Combine		10
Part	XII Reconciliation of Revenue per Audited Financial Statem		r Return
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities		die
С	Recoveries of prior year grants	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 VIII, line 12, but not on line 1:	1 1	322
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)		1.3 1
C	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		
Part	Reconciliation of Expenses per Audited Financial Stater		
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	1
b	Prior year adjustments	2b	
С	Other losses		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		44.5
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)		
C	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lir		
Part	XIV Supplemental Information		
Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, and, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII ditional information.		

schedule D (Fo		Page 5
Part XIV	Supplemental Information (continued)	
		
•		
•		

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No 1545-0047 201

Open to Public Inspection

Employer identification number

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

Schedule I (Form 990) (2011) **%** □ (h) Purpose of grant or assistance 82 to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. ✓ Yes 39-1674150 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes' See Below Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance See Below (f) Method of valuation (book, FMV, appraisal, other) 3,843,234 Sch M-Part 2 Cat No 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 0 (d) Amount of cash grant Part II can be duplicated if additional space is needed Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance 501(c)(3) (P) EIN (2) 1 (a) Name and address of organization (1) Various - see attached or government NewThreads of Hope, Inc. Part I Part II ල 9 8 5 € 3 9 8

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	ividuals in the U space is needed	nited States. Com	plete if the organiza	tion answered "Yes" to F	orm 990, Part IV, line 22.	
ji	(a) Type of grant or assistance		(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance	1 1
+-							1 1
2							ı
ო							ı
4							ı
5							ı
9							
7							
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	e this part to prov	vide the information	required in Part I,	ine 2, and any other add	tional information.	
Part 1 - Qu€	Part 1 - Question 2 NewTheads of Hope, Inc. distributes its contributed merchandise through a network of governmental and chantable organizations	contributed merchand	lise through a network o	f governmental and char	itable organizations		
VewThread	New Threads regularly monitors these organizations through site visits	site visits and follow u	p reports from the orgar	ilzations as to how the m	and follow up reports from the organizations as to how the merchandise was either used		
by the organ	by the organization or distributed to those in need						
Part 2 - Que	Part 2 - Question 1(g) and 1(h) Vanous manufactures, retailers and wholesalers donate merchandise (primarilly clothing, bed and bath items, books,	lers and wholesalers	donate merchandise (pr	marılly clothing, bed anc	bath items, books,		
5 plohesnou	nousehold goods and other softgoods) to NewThreads for its gifts in kind program. These donated items are then sorted and redistributed to people in need through	gifts in kind program	These donated items a	re then sorted and redis	inbuted to people in need throu	ų.	
other goven	other governmental and charitable organizations. Merchandise is never sold and must be used for the care of or given to the poor, the ill, the elderly or children	se is never sold and n	nust be used for the can	e of or given to the poor,	the ill, the elderly or children		
Merchandis	verchandise is typically distributed by participating agencies either thr	either through local cl	othes closets, food pant	пеs, homeless shelters,	ough local clothes closets, food pantries, homeless shelters, church or school programs		
* 1							
						Schedule I (Form 990) (2011)	. ~

NewThreads of Hope, Inc. Merchandise distributed through New Threads of Hope Program June 1, 2011 - through May 31, 2012

Part II

Form 990 - Schedule I

Description	• • •	
	Address	assistance
American Indian Task Force on Domestic Violence and Vulnerable Populations	Mılwaukee, WI	\$41,431.00
Another Hand Foundation	Mılwaukee, WI	40,206.00
Archbishop Felix Foundation, Inc.	Miamı Beach, FL	258,867.00
Bad River Indian Child Welfare Od	Odanah, WI	40,181.00
BASICS	Mılwaukee, WI	1,150.00
Beautiful Savior Lutheran School	Milwaukee, WI	2,400 00
Benediction Lutheran Church Clothes Closet	Milwaukee, WI	10,923.55
Bethany Lutheran Church Mi	Milwaukee, WI	12,468 84
Blessed Teresa Parish No	North Lake, WI	42,700.00
Career Youth Development Mı	Mılwaukee, WI	9,913.01
Children's Service Society Mi	Milwaukee, WI	64,594.84
Congregation of the Great Spirit	Milwaukee, WI	62,511.00
8	Milwaukee, WI	57,143.17
Destiny Development Corporation	Milwaukee, WI	28,350.00
	Milwaukee, WI	1,150.00
ELCA Kenosha Urban Outreach Ke	Kenosha, WI	37,859.44
Emmaus Lutheran Church - Community Clothes Closet	Mılwaukee, WI	45,665.79
	Milwaukee, WI	1,150.00
Family Life Center	Mılwaukee, WI	6,797.00
Flowering Tree Mi	Milwaukee, WI	40,106.00
otwawtomi Foundation	Milwaukee, WI	461,772.00
Heartlove Place Mi	Milwaukee, WI	1,150.00
Hmong American Peace Academy Mi	Milwaukee, WI	38,022.32
Holton Youth & Family Center	Milwaukee, WI	9,145.00
Holy Ghost Lutheran Church - Community and Free at Last Ministries	Mılwaukee, WI	30,212.95
Hope Schools Mi	Milwaukee, WI	8,325.00
Hope Schools Primary Mi	Mılwaukee, WI	875.00
House of Peace Mi	Mılwaukee, WI	86,179.00
Hunger Task Force	Milwaukee, WI	21,756.00

NewThreads of Hope, Inc. Merchandise distributed through New Threads of Hope Program

June 1, 2011 - through May 31, 2012

Form 990 - Schedule I

Part II

825 00 12,970.00 900.006 12,895.12 103,559.65 575.00 214,792.66 6,047.92 75,207.00 7,210.80 24,080 00 1,125.00 2,900.00 75,581.00 1,450.00 38,326.00 5,435.13 1,725 00 70,240.52 14,520.34 38,951.80 34,295.00 117,855.46 3,836.57 1,750.00 306,103.37 1,175.00 30,916.56 50,000.00 (e) amount of non-cash assistance Milwaukee, WI Mılwaukee, WI Mılwaukee, WI Mılwaukee, WI Mılwaukee, WI Mılwaukee, WI Milwaukee, WI Mılwaukee, WI Mılwaukee, WI Mılwaukee, WI Mılwaukee, WI Milwaukee, WI Mılwaukee, WI Brookfield, WI Mılwaukee, WI Mılwaukee, WI Mılwaukee, WI Mılwaukee, WI Pine Ridge, SD Milwaukee, WI Mılwaukee, WI Brookfield, WI Mılwaukee, Wl Pine Ridge, SD Waukesha, WI St. Louis, MO Crandon, WI Chicago, IL Mılwaukee, Description mmanuel Lutheran Church Outreach Ministries Lutheran Special School & Education Services LUMIN - Lutheran Urban Mission Initiative Metro Milwaukee Lutheran Mission Society Risen Savior Lutheran Church Ministries People Of the Book Lutheran Outreach Lutheran Social Services of Wisconsin New Beginnings Christian Church Indian Mission of Forest County Mount Calvary Lutheran School Red Cliff Indian Child Welfare Risen Saviour Lutheran School New Beginnings Are Possible Nativity Jesuit Middle School ndian Council of the Elderly mmanuel Lutheran Schools MPS - First Nations Project Northwest Lutheran School Messmer Catholic Schools Liberty and Truth Ministry Penfield Children's Center Lighthouse Youth Center Repairers of the Breach Red Cliff Indian School Living Hope Outreach Our Next Generation KIPP Academy Our Space La Causa

NewThreads of Hope, Inc. Merchandise distributed through New Threads of Hope Program June 1, 2011 - through May 31, 2012

Part II

Form 990 - Schedule I

		(e) amount of non-cash
Description	Address	assistance
S.O.A R	Racine, WI	59,489 28
Salem Eastside Ministry	Milwaukee, WI	17,344.47
Salvation Army	Joplin, MO	181,360 00
Salvation Army Emergency Lodge	Milwaukee, WI	36,110.00
Sam's Hope	Milwaukee, WI	372,219.47
Sherman Park Lutheran School	Milwaukee, WI	1,150 00
SOS Center	Mılwaukee, WI	15,213.05
Spirit Guided Giving	Milwaukee, WI	40,676.00
St. Aemilian-Lakeside, Inc.	Milwaukee, WI	3,910 00
St. Marcus Lutheran School	Mılwaukee, WI	7,500 00
St. Martını Lutheran Church - Cristo Para Todas Las Naciones Project	Milwaukee, WI	3,170 50
St. Paul Lutheran School	Franklın, WI	00.009
St. Paul Lutheran School	Milwaukee, WI	1,150.00
St. Pauls Lutheran Church	Mılwaukee, WI	14,973.26
St. Rose Family and Youth Center	Milwaukee, WI	3,441.60
Trinity Lutheran Church - Community Clothes Closet	Freistadt, WI	12,388 91
Trinity Lutheran Church - Karemii Ministry	Freistadt, WI	20,754.75
Unity Lutheran Church	Milwaukee, WI	2,078.14
Victory Christian Academy	Mılwaukee, WI	2,325.00
Wheaton Franciscan Health Center	Milwaukee, WI	5,245 00
Works of Mercy	Mılwaukee, WI	133,094.00
Worldwide Hunger Relief	Waukesha, WI	153,176.44
YMCA	Milwaukee, WI	36,110.00
Zion Lutheran School	Mılwaukee, WI	1,500.00
Total merchandise distributed		\$3,843,234.68

SCHEDULE M (Form 990)

Noncash Contributions

2011

Open To Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Name of the organization
NewThreads of Hope, Inc

Employer identification number

39-1674150

Part	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o noncash cont			
1	Art—Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications		5. 17 5% 2 終心衛門					
5	Clothing and household	-						
	goods	~		5,675,658	See Part II Be	elow		
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded					-		
10	Securities—Closely held stock .							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities-Miscellaneous							
13	Qualified conservation							
	contribution-Historic							
	structures				1			
14	Qualified conservation							
	contribution—Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate-Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► (
26	Other (
27	Other ► ()							
28	Other► (
29	Number of Forms 8283 received							_
	which the organization completed	1 Form 828	3, Part IV, Donee Acknowle	dgement	29	None		
							Yes	No
30a	During the year, did the organiza					-		
	it must hold for at least three year			•		· ,	*	
	used for exempt purposes for the		* :			30a		~
	If "Yes," describe the arrangement							
31	Does the organization have a							
						31	~	
32a	Does the organization hire or us	•	•	• • • • • • • • • • • • • • • • • • • •				
						32a		~
b	If "Yes," describe in Part II.							
33	If the organization did not report a	n amount ır	n column (c) for a type of pro	pperty for which column (a)	ıs checked,			İ

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.	
Additional information - Lines 4d & 5d (Methods of determining revenues)	
Various manufactures, retailers and wholesalers donate merchandise (primarilly clothing, bed and bath items, household	
goods and other softgoods) to NewThreads for its gifts in kind program NewThreads takes these donated items, sorts and then	
redistributes these to people in need through its network of other non profit and governmental organizations. This	
merchandise is never sold and must be used for the care of or given to the poor, the ill or children Most donating	
corporations provide NewThreads with a valuation of the merchandise they contributed either based on their cost basis or	
some other valuation method When no valuations are provided by the donor (which rarely happens), NewThreads estimates	
a value by comparing the merchandise donated to similar merhandise being sold in retail stores or through on-line	
retailers	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2011

Department of the Treasury Internal Revenue Service 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.

Open to Public Inspection

OMB No 1545-0047

Name of the organization Employer identification number NewThreads of Hope, Inc. 39-1674150 FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS Form 990 for fiscal 2011-12 was provided to the board of directors for review before filing. The return is signed by the board Chairman and Treasurer FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS OF INTEREST All board members confirm annually conflicts of interest, if any (there were no conflicts of interest during the period) FORM 990, PART VI, LINE 15B - COMPENSATION REVEIW AND APPROVAL PROCESS FOR OFFICERS/KEY EMPLOYEES Compensation of all employees, including the CEO, is approved by the board of directors during the budget process FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE The Form 990 and any other documents are available upon request and are also available on the NewThreads org website