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Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2012

Department of the Treasury
Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For	cale	endar year 2012, e	or tax year beginning	, 2012	, and ending		,	
LA	ST)	NG HOPE, I	NC.			A	Employer identification num 20-0815589	
		MCCOLLUM PA ESAW, GA 30				В	Telephone number (see the (770) 442-510	
						С	If exemption application is	pending, check here
G	Che	ck all that apply	Initial return	Initial return of a form	mer public charity	D	1 Foreign organizations, chec	k here
			Final return Address change	Amended return Name change			2 Foreign organizations meet	ing the 85% test, check
Н	Çŀ	neck type of organ	nization X Section 50	1(c)(3) exempt private t		1	here and attach computation	n •
-,	_[_	Section 4947(a)	(1) nonexempt charitable t	trust Other taxable productions of the counting method X C	private foundation ash Accrual	E	If private foundation status under section 507(b)(1)(A)	
1	(fr	om Part II, column (c)		Other (specify)	asii Accidai	F	If the foundation is in a 60-	
	<u> </u>			, column (d) must be or	r cash basis)	İ.,	under section 507(b)(1)(B)	, check here
Pa	rt I	Expenses (columns (b), (c	Revenue and The total of amounts in c), and (d) may not necese amounts in column (a)	(a) Revenue and expenses per books	(b) Net investme income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		(seé instructioi		92,307.				1
			the foundn is not req to att Sch B	92,307.				
		3 Interest on cash invest	savings and temporary ments	2.		2.	2.	
		4 Dividends and	interest from securities	984.	98	84.	984.	
		5 a Gross rents b Net rental incor						
R	!		from sale of assets not on line 10	-414.			RECEIVE	
V		b Gross sales pri- assets on line 6	$\frac{15,025.}{}$			0.,		ED
E N			et income (from Part IV, line 2) erm capital gain			0.	NOV 2 1 Oc	13 9
U E		9 Income mo 10 a Gross sales les returns and			_		JA 60	13 0
		allowances					OGDEN	
	ŀ	b Less Cost of goods sold					JODLIA, C	/
		c Gross profit/(I	ne (attach schedule)					
u(-)		10 T. 						
(1)			of officers, directors, trustees, etc	92,879. 0.	9	86.	986.	
另		14 Other employe	e salaries and wages					
		15 Pension pla 16a Legal fees (att	ans, employee benefits					
Ü	A D M	b Accounting fee	-					
Z,	Ņ	c Other prof fees	s (attach sch) SEE ST 1	674.	6	74.		
NOVE	S	17 Interest 18 Taxes (attach sched	dute)(see instrs)					
®R M A UTI	R A T	19 Depreciation sch) and de	n (attach				-	
	i V E	20 Occupancy						
2600 a			ferences, and meetings d publications					
N D	E X P		nses (attach schedule)					
	EN	24 Total opera	SEE STATEMENT 2	50.				
	S E S	expenses.	Ating and administrative Add lines 13 through 23	724.	6	74.		
			gifts, grants paid PART XV nses and disbursements.	44,075.				44,075.
		Add lines 2	24 and 25	44,799.	6	74.	0.	44,075.
		a Excess of I	ne 26 from line 12 revenue over expenses		-			
		and disbur	sements	48,080.	3	12.	-	
			t income (if negative, enter -0-) ncome (if negative, enter -0-)		3	17.	986.	
5.4	A F		duction Act Notice see ins	structions	1 .	TEE	AD504L 12/23/12	Form 990-PF (2012)

12,

Unrestricted N E T U Temporarily restricted Ν D 26 Permanently restricted ASSETS Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. В 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, building, and equipment fund 55,787. 103,867 29 Retained earnings, accumulated income, endowment, or other funds 0 Total net assets or fund balances (see instructions) 55,787. 103,867 Total liabilities and net assets/fund balances 55,787. (see instructions) 103,867

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year— Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	55,787.
2	Enter amount from Part I, line 27a	2	48,080.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	103,867.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)- Part II, column (b), line 30	6	103,867.

	Calendar year (or tax year beginning in)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	noncharitable-use assets	(column (b)	divided by column (c))
	2011	51,700.	60,398.		0.85598
	2010	23,207.	59,673.		0.38890
	2009	26, 975.	70,759.	1	0.38122
	2008	24,000.	121,910.		0.19686
	2007	51,393.	158,348.		0.32455
2	Total of line 1, column (d)			2	2.14754
3	Average distribution ratio for the number of years the foundation	he 5-year base period— divide the total n has been in existence if less than 5 y	on line 2 by 5, or by the vears	3	0.42950
4	Enter the net value of nonchar	ritable-use assets for 2012 from Part X,	, line 5	4	72,886
5	Multiply line 4 by line 3			5	31,305
6	Enter 1% of net investment in	come (1% of Part I, line 27b)		6	3
7	Add lines 5 and 6	•		7	31,308
8	Enter qualifying distributions f	rom Part XII, line 4		8	44,075

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e)), or 4948– see	instructio	ns)	_
1 a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter (attach copy of letter if necessary— see instrs	s)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	⊢	1	3	}.
	check here ► X and enter 1% of Part I, line 27b	1			7
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b	a)			<u></u>
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2		<u>.</u>
3	Add lines 1 and 2		3	3	<u>. </u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ers enter -0-)	4	0	<u>.</u>
5	Tax based on investment incomeSubtract line 4 from line 3. If zero or less, enter -0-		5	3	<u>.</u>
6	Credits/Payments.				
а	2012 estimated tax pmts and 2011 overpayment credited to 2012	132.			
b	Exempt foreign organizations – tax withheld at source 6 b				
С	Tax paid with application for extension of time to file (Form 8868) 6 c				- 4
d	Backup withholding erroneously withheld 6 d				4.
7	Total credits and payments. Add lines 6a through 6d		7	132	2.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	ed	8		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9	C).
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter theamount overpaid	•	10	129) .
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax.	funded >	11	C).
Pari	t VIIFAY Statements Regarding Activities				_
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legisla	ation or did it		Yes No	
	participate or intervene in any political campaign?			1a X	<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	5		1 в 🔀	<u> </u>
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of a or distributed by the foundation in connection with the activities	any materials pi	ıblıshed		次着
	Did the foundation file Form 1120-POL for this year?			1 c X	Χ
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the years of the control of the contr	ear. ►\$	•	8.3	
_	(1) On the foundation ► \$ 0. (2) On foundation managers Enter the reimbursement (if any) paid by the foundation during the year for political expenditu	7	0		
•	foundation managers \Rightarrow \$ 0.	are tax imposed	011		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS	S?		2 >	X
_	If 'Yes,' attach a detailed description of the activities				
_					
	Has the foundation made any changes, not previously reported to the IRS, in its governing ins of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the similar instruments?	the changes	:5	3 >	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			21 27/2	X_
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?			4b N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5 }	X
	If 'Yes,' attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	er			
	By language in the governing instrument, or			42	
	• By state legislation that effectively amends the governing instrument so that no mandatory with the state law remain in the governing instrument?	directions that o	conflict	6 X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and F	Part XV		7 X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions	s)			
	GA				
b	olf the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> 2 If 'No,' attach explanation			8b X	
9		tion 4942(i)(3) a	or 4942(1)	STATE STATE OF THE PARTY NAMED IN	17.
3	Is the foundation claiming status as a private operating foundation within the meaning of sect for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV) 7f	'Yes,' complete	Part XIV	9)	X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedu and addresses	ile listing their i	names	10	X
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<u> </u>	Park WILE Statements Regarding Activities for Which Form 4720 May Be Required (continued)							
5a During the year did the foundation pay or incu	-		_	٦., 🖼		į		
(1) Carry on propaganda, or otherwise attemp	ot to influence legislation	n (section 4945(e))?	L	」Yes □X	No			
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	ition drive?				No			
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	L	Yes X	No			
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	ganization described uctions)		Yes X	No			
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	, literary, or or animals?		Yes X	No			
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in	ne transactions fail to q a current notice regard	ualify under the excepti ding disaster assistance	ons			11/2		
(see instructions)? Organizations relying on a current notice rega	rding disaster assistand	ce check here		•	5 b	N/A		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon-	the foundation claim ex sibility for the grant?	emption from the	N/A [ີYes □	No l			
If 'Yes,' attach the statement required by Regi	, .	5-5(d)						
6 a Did the foundation, during the year, receive ar on a personal benefit contract?					No No			
b Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	fit contract?		6 b	X		
7 a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	ction?	Yes X	No			
b If 'Yes,' did the foundation receive any procee				_	N/A 7b			
Information About Officers, Direction and Contractors	ectors, Trustees, Fo	undation Managers	, Highly F	aid Empl	oyees,			
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst	ructions).					
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	plans ar	outions to ee benefit ad deferred ensation		account, owances		
PAUL M. CRAFTON	PRES./DIR.	0.	•	0.		0.		
1971 MCCOLLUM PARKWAY, NW	2.00							
KENNESAW, GA 30144								
CATHY CRAFTON 1971 MCCOLLUM PARKWAY, NW KENNESAW, GA 30144	DIRECTOR 2.00	0.		0.		0.		
			:					
					100151			
2 Compensation of five highest-paid employee					1			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	plans an	ee benefit d deferred ensation	(e) Expense other all	e account, lowances		
NONE				<u> </u>				
		•						
					<u> </u>			
			ī.					
	ļ				ļ			
Total number of other employees paid over \$50,000	<u> </u>			•		0		
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplorant VIII and Contractors (continued)	oyees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	· · · · · · · · · · · · · · · · · · ·
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	•
Total number of others receiving over \$50,000 for professional services ►	0
· · · · · · · · · · · · · · · · · · ·	<u> </u>
Part IX-A Summary of Direct Charitable Activities	
ist the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
<u>N/A</u>	
2	
All other program-related investments See instructions	
3	
	_
Total. Add lines 1 through 3	0.

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Part XXX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations,

see instructions.)		
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		40.000
a Average monthly fair market value of securities	1 a	48,928.
b Average of monthly cash balances	1 b	25,068.
c Fair market value of all other assets (see instructions)	1 c	72.006
d Total (add lines 1a, b, and c)	1 d	73,996.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	*3**3	
(attach detailed explanation) 1 e 0.		0
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	73,996.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,110.
5 Net value of noncharitable-use assetsSubtract line 4 from line 3. Enter here and on Part V, line 4	5	72,886.
6 Minimum investment return Enter 5% of line 5	6	3,644.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper	ating fo	oundations
and certain foreign organizations check here ► and do not complete this part.)	, ,	
1 Minimum investment return from Part X, line 6	1	3,644.
2 a Tax on investment income for 2012 from Part VI, line 5	<u>.</u>	
b Income tax for 2012. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2 c	3.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	3,641.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	3,641.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amountas adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,641.
Part·XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes. a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1 a	44,075.
b Program-related investments – total from Part IX-B	1 b	11,070.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	44,075.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	3.
6 Adjusted qualifying distributions Subtract line 5 from line 4	6	44,072.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

,		(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 f	from Part XI,				
Inne 7 2 Undistributed income, if any, as of the	and of 2012				3,641.
a Enter amount for 2011 only	elio di 2012			0.	
-	, 20		0.		-
3 Excess distributions carryover, if any, to	o 2012				
a From 2007	43,894.				
b From 2008	17,920.				
c From 2009 d From 2010	23,440.				
e From 2011	48,722.				
f Total of lines 3a through e	10,722.	154,285.			
4 Qualifying distributions for 201	2 from Part	•			
	44,075.	•			
a Applied to 2011, but not more	than line 2a			0.	
b Applied to undistributed incom (Election required — see instru			0.		
c Treated as distributions out of (Election required – see instru		0.			
d Applied to 2012 distributable a	·				3,641.
e Remaining amount distributed	out of corpus	40,434.			•
5 Excess distributions carryover applied to		0.			0.
(If an amount appears in colur same amount must be shown	nn (a), tne In column (a))				
6 Enter the net total of each coll indicated below:	umn as				
a Corpus Add lines 3f, 4c, and 4e Subtr	act line 5	194,719.			
b Prior years' undistributed incor		151,7131			
line 4b from line 2b			0.		
c Enter the amount of prior year ed income for which a notice of	s' undistribut-			-	
has been issued, or on which t	the section (
4942(a) tax has been previous	assessed		0.		
d Subtract line 6c from line 6b 7 amount — see instructions	Гахаble		0.		
	et line de from		0.		
 Undistributed income for 2011 Subtra line 2a Taxable amount — see instruct 				0.	
f Undistributed income for 2012	Subtract lines				
4d and 5 from line 1. This amo					_
distributed in 2013 7 Amounts treated as distribution	ns out of				0.
corpus to satisfy requirements	imposed				
by section 170(b)(1)(F) or 4942 (see instructions)	2(g)(3)	0.			
8 Excess distributions carryover	from 2007 not				
applied on line 5 or line 7 (see		43,894.			
9 Excess distributions carryove Subtract lines 7 and 8 from lin	er to 2013. le 6a	150,825.			
10 Analysis of line 9					
a Excess from 2008	17,920.				
b Excess from 2009	23,440.				
c Excess from 2010 d Excess from 2011	20,309.				
e Excess from 2012	48,722.				
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			rt VII-A, question		N/A
1 a If the foundation has received a ruling or of is effective for 2012, enter the date of the	letermination lette ruling	r that it is a private	operating foundation	n, and the ruling	
b Check box to indicate whether the foundat	ion is a private op	erating foundation	described in section	4942(J)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities		-			
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					. .
3 Complete 3a, b, or c for the alternative test relied upon:				1	
a 'Assets' alternative test - enter					
(1) Value of all assets(2) Value of assets qualifying under					
section 4942(j)(3)(B)(i) b 'Endowment' alternative test— enter 2/3 of		4.6			
minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test – enter:					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income				1.45.000	•
Supplementary Information assets at any time during the	(Complete this le vear — see i	s part only it th nstructions.)	e foundation had	a \$5,000 or more	· in
1 Information Regarding Foundation Managers at List any managers of the foundation who close of any tax year (but only if they have SEE STATEMENT 5	have contributed ne contributed more	e than \$5,000) (Se	e section 50/(d)(2).)		
b List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more foundation has a	of the stock of a co 10% or greater into	orporation (or an equerest.	ually large portion of	the ownership o
2 Information Regarding Contribution, Gra Check here ► X if the foundation only requests for funds If the foundation make complete items 2a, b, c, and d.	makes contribution	ns to preselected ch	narıtable organızatıor		
a The name, address, and telephone number	er or e-mail of the	person to whom a	pplications should be	e addressed.	
b The form in which applications should be	submitted and info	ormation and mater	rials they should incl	ude:	
c Any submission deadlines:					

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3	3 Grants and Contributions Paid During the Year or Approved for Future Payment							
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount			
	Name and address (home or business)	substantial contributor	recipient					
	Paid during the year STATEMENT 6							
	Total			▶ 3a	44,075.			
E	Approved for future payment							
	Tabel		1	▶ 31				
	Total			- 31	^			

Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by s	ection 512, 513, or 514	(e)
. 1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
a					
b					
с					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	2.	
4 Dividends and interest from securities			14	984.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property			1		_
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	-461.	47.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
С					
d					
е					
12 Subtotal Add columns (b), (d), and (e)				525.	47.
13 Total. Add line 12, columns (b), (d), and (e)				13	572.
(See worksheet in line 13 instructions to verify calculate	ons.)				

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes	importantly to the s) (See instructions)
N/A		
	<u> </u>	
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Form 990-PF (2012) LASTING HOPE, INC. Park XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

describe	organization directly ed in section 501(c) to political organiza	of the Code (oth	gage in any of the following ier than section 501(c)(3) org	with any other ganizations) or	organization in section 527,	Tes No
J			noncharitable exempt orgai	nization of:		
(1) Cas	·	9 , 5 4				1 a (1) X
• •	er assets					1 a (2) X
` '	ansactions:					
(1) Sale	es of assets to a noi	ncharitable exen	npt organization			1 b (1) X
` '			le exempt organization			1 b (2) X
(3) Rer	ntal of facilities, equi	pment, or other	assets			1 b (3) X
(4) Reii	mbursement arrange	ements				1 b (4) X
(5) Loa	ns or Ioan guarante	es				1 b (5) X
(6) Per	formance of service	s or membership	or fundraising solicitations			1 b (6) X
c Sharing	of facilities, equipm	nent, mailing list	s, other assets, or paid emp	loyees		1 c X
any trar	nsaction or sharing a	arrangement, sh	omplete the following sched by the reporting foundation I bow in column(d) the value of	the goods, oth	ier assets, or services rec	eived
(a) Line no.	(b) Amount involved	(c) Name of	noncharitable exempt organization	(d) Des	cription of transfers, transactions	s, and sharing arrangements
N/A						
		_				
					· 	
describ	oundation directly or ed in section 501(c) complete the folloy	of the Code (otl	ted with, or related to, one oner than section 501(c)(3)) o	or more tax-exe r in section 52	empt organizations 7?	Yes XNo
) Name of organiza		(b) Type of organizat	ion	(c) Description	of relationship
N/A	<u> </u>		(17)			
	•		······································		,	
· · · · · · · · · · · · · · · · · · ·						
Sign Here	penaties of penyty, I declare and complete Declaration	e that I have examined in of preparer (other the preparer to t	this return, including accompanying sche nan taxpayer) is based on all information	dules and statements on of which prepare	n, and to the best of my knowledge a r has any knowledge PRESIDEN	May the IRS discuss this return with the preparer shown below (see instructions)?
	Print/Type preparer's na	ame	Preparer's signature	D:	ate Check	If PTIN
Paid	1	, JR., CPA	1C.2-16	L CPA	// -/2 -/3 self-employe	-
		C. DEV HAY		0		8-2251152
Preparer Use Only	_	P.O. BOX 1				
USE OILLY	_	ALPHARETTA			Phone no	(770) 442-2828
BAA			, <u></u>	 		Form 990-PF (2012)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No 1545-0047

2012

Name of the organization		Employer identification number			
LASTING HOPE, INC.		20-0815589			
Organization type(check one):					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trustnot treated a	as a private foundation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a	a private foundation			
	501(c)(3) taxable private foundation				
Check if your organization is covered by the Ge					
Note. Only a section 501(c)(7), (8), or (10) org	anization can check boxes for both the General Rule an	d a Special Rule. See instructions			
General Rule					
X For an organization filing Form 990, 990-E contributor (Complete Parts I and II)	Z, or 990-PF that received, during the year, \$5,000 or m	nore (in money or property) from any one			
Special Rules					
509(a)(1) and $170(b)(1)(A)(v)$ and receive	Form 990 or 990-EZ that met the 33-1/3% support test on the same one contributor, during the year, a contributor of the year, a contributor of the same that one (ii) Form 990-EZ, line 1 Complete Part	on of the greater of \$5,000 or			
For a section 501(c)(7), (8), or (10) organition total contributions of more than \$1,000 for the prevention of cruelty to children or anii	zation filing Form 990 or 990-EZ that received from any use <i>exclusively</i> for religious, charitable, scientific, literar mals Complete Parts I, II, and III	one contributor, during the year, y, or educational purposes, or			
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc, purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for arexclusively religious, charitable, etc, purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year					
Caution: An organization that is not covered by the General answer 'No' on Part IV, line 2, of its Form 990, or check meet the filing requirements of Schedule B (Form	Rule and/or the Special Rules does not file Schedule B (Form 990, 990-E k the box on line H of its Form 990-EZ or on Part I, line 2, of its Form orm 990, 990-EZ, or 990-PF)	EZ, or 990 PF) but it must m 990-PF, to certify that it does not			
BAA For Paperwork Reduction Act Notice, se	ee the Instructions for Form 990, 990EZ, Schedu	lle B (Form 990, 990-EZ, or 990-PF) (2012			

	B (Form 990, 990-EZ, or 990-PF) (2012)	Pa	
Name of org	IG HOPE, INC.		mployer identification number
	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		.0 0013303
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PAUL AND CATHY CRAFTON 1971 MCCOLLUM PARKWAY, NW	\$92,3	Person X Payroll Noncash
	KENNESAW, GA 30144		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution s
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page

1 to

1 of Part II

Name of organization

Employer identification number

LASTING HOPE, INC.

20-0815589

Pati W	Noncash Property	(see instructions). Use duplicate copies of Part	II if additional spa	ce is needed.	
(a) No. from Part I		(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
,	N/A				
			\$		<u>.</u>
(a) No. from Part I		(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
			\$		
(a) No. from Part I		(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
			ş		
(a) No. from Part I		(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
			ş	1	
(a) No. from Part I		(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		·			
	-		<u> </u>	•	
(a) No. from Part I		(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
				•	

BAA

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2012)

1 to

▶\$

of **Part III**

Name of organization
LASTING HOPE, INC.

Employer identification number 20-0815589

Parim	Exclusively religious,	charitable, etc	, individual con	tributio	ons to section 5	501(c)(7), (8)	or (10)	•
	organizations that to							line entry.

For organizations completing Part III, enter total of exclusively religious, charitable, etc, contributions of \$1,000 or less for the year (Enter this information once See instructions.) Use duplicate copies of Part III if additional space is needed.

N/A

	Use duplicate copies of Part III if additional s	space is needed.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	N/A			
		· "		
		(e) Transfer of gift		
	Transferee's name, addres	s, and ZIP + 4	Rela	ationship of transferor to transferee
			<u></u>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer of gift		
	Transferee's name, addres		Rela	ationship of transferor to transferee
(a)	(b)	(c)		(d)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
- I ait I		<u></u>		
		(a)		
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	· -	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift address, and ZIP + 4 Relationship of transferor to transfere		

(Rev January 2013)

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

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,	re filing for an Automatic 3-Month Extensio	•			- X
-	re filing for an Additional (Not Automatic) 3				
	nplete Part II unless you have already been o				
corporation request an Associated	filing (e-file). You can electronically file Form required to file Form 990-T), or an addition extension of time to file any of the forms lis With Certain Personal Benefit Contracts, willing of this form, visitwww irs gov/efile and	al (not automatic) sted in Part I or Pa hich must be sent	3-month extension of time You can eleart II with the exception of Form 8870, Into the IRS in paper format (see instruct	ectronically file Form nformation Return for	8868 to Transfers
Part I	Automatic 3-Month Extension of Ti	me. Only subm	it original (no copies needed).		
A corporation	on required to file Form 990-T and requesting	ng an automatic 6.	month extension- check this box and co	omplete Part I only	-
All other co	orporations (including 1120-C filers), partner returns	ships, REMICs, an			
	Name of exempt organization or other filer, see instruc	tions	Enter Her's Identi	fying number, see in Employer identification nu	
Type or	Traine of exempt organization of outer many observed	40.10			
print	LASTING HOPE, INC.			20-0815589	
File by the	Number, street, and room or suite number If a P O bo	ox, see instructions		Social security num	ber (SSN)
due date for	1971 MCCOLLUM PARKWAY, NW				
filing your return See	City, town or post office, state, and ZIP code For a for	eign address, see instru	ctions		· · · · · ·
instructions	KENNESAW, GA 30144				
Application Is For	Return code for the return that this application	Return Code	Application Is For		04 Return Code
	or Form 990-EZ	01	Form 990-T (corporation)		07
Form 990-E		02	Form 1041-A		08
Form 4720	(individual)	03	Form 4720		09
Form 990-F	PF	04	Form 5227		10
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T	(trust other than above)	06	Form 8870		12
Telepho If the o If this is check to the extended to the exten	one No (770) 422-5100 rganization does not have an office or place of a Group Return, enter the organization this box If it is for part of the gension is for. Lest an automatic 3-month (6 months for a extension is for the organization's return for a category of the organization's return for the organization's return for the organization of the organization's return for the organi	FAX Note of business in the street of the street o	e United States, check this box Exemption Number (GEN) ox I and attach a list with the named to file Form 990-T) extension of time turn for the organization named above	f this is for the whole ames and EINs of all	_ , .
2 If the	tax year entered in line 1 is for less than 1	2 months chack r	eason Unitial return Fi	nal return	
∠ iritne	lax year entered in line i is for less than i	z monuis, check r	cason	iai ietuiii	

3 a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3 a |\$ 3. b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax 132. 3 ы \$ payments made Include any prior year overpayment allowed as a credit c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

Change in accounting period

0.

3 c |\$

Form 886 8	3 (Rev 1-2013)				Page 2
	are filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Part Hand check this	box	<u>► X</u>
Note. Only	complete Part II if you have already been granted	l an automat	tic 3-month extension on a previous	ly filed Form 8868	ت
• If you a	are filing for an Automatic 3-Month Extension, com	plete only P	art (on page 1)		
Part II	Additional (Not Automatic) 3-Month Exte	ension of	Time. Only file the original (no	copies needed).	
				dentifying number, see	instructions
	Name of exempt organization or other filer, see instructions			Employer identification number	
_					
Type or print	rint LASTING HOPE, INC. 20-			20-0815589 Social security number (SSN)	
File by the	Number, street, and room or suite number. If a P.O. box, see instructions			Social Security number (SSIV)	
extended due date for filing your	C. DEV HAYS, JR., CPA, PC P.O. BOX 1087				
return See instructions	City, town or post office, state, and ZIP code. For a foreign addre	ess, see instruction	ons		
	ALPHARETTA, GA 30009				
Enter the	Return code for the return that this application is for	or (file a sep	parate application for each return)		04
Application	on	Return Code	Application Is For		Return Code
Form 990	or Form 990-EZ	01			
Form 990	-BL	02	Form 1041-A		08
Form 472	0 (ındıvıdual)	03	Form 4720		09
Form 990	-PF	04	Form 5227		10
Form 990	-T (section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T (trust other than above) 06 Form 8870				12	
Telepl If the If this whole gro	none No (770) 422-5100 organization does not have an office or place of but is for a Group Return, enter the organization's four place, this box oup, check this box the extension is for	r digit Group	e United States, check this box		► ☐ s is for the
5 For6 If th7 State		ng oths, check r	, 20 , and ending _		 0
	is application is for Form 990-BL, 990-PF, 990-T, 4 refundable credits. See instructions	720, or 6069	9, enter the tentative tax, less any	8 a \$	3.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.					132.
c Bala EFT	ance due. Subtract line 8b from line 8a Include you PS (Electronic Federal Tax Payment System) See	ur payment v	with this form, if required, by using	8 c \$	0.
	Signature and Verific	ation mu	st be completed for Part II or	nly.	
Under penalticorrect, and	es of perjury, I declare that I have examined this form, including accomplete, and that I am authorized to prepare this form Title		and statements, and to the best of my knowledge a		14-13
BAA	00	FIFZ0502L	01/21/13	Form 8868 (

201	2
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FEDERAL STATEMENTS

PAGE 1

LASTING HOPE, INC.

20-0815589

STATE	MENT 1			
FORM	990-PF,	PARTI	, LINE	16C
OTHEI	R PROFI	ESSION	AL FE	ES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT ADVISORY FEES	TOTAL \$\frac{\\$}{\frac{1}{2}}	674. 674.	\$ 674. \$ 674.	\$ 0.	\$ 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

	(A)	(B) NET	(C)	(D)
	EXPENSES	INVESTMENT	ADJUSTED	CHARITABLE
	PER BOOKS	INCOME	NET INCOME	PURPOSES
ANNUAL CORPORATE REGISTRATION TOTAL	\$ 50. \$ 50.	\$ 0.	\$ 0.	\$ 0.

STATEMENT 3 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	VALUE VALUE	FAIR MARKET VALUE			
CORPORATE STOCKS	COST \$	50,823. 50,823.	\$ 50,823. \$ 50,823.			

STATEMENT 4 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM 1 2 3 4 5 6 7 8	0.07 SOUTH 150 RPC INC 67.067 PERI 101 SOUTHE 38 WISDOMT 100 FREEPOI 55 SCHWAB C CAPITAL GA	ERN COPPER MANENT POR RN COPPER (REE DIVIDEN RT-MCMORAN J.S. SMALL	FOLIO CORP. ND EX-FINAN COPPER & G CAP ETF	CIALS ETF	(B) ACQU: PURCH PURCH PURCH PURCH PURCH PURCH	AC) DATE <u>OUIRED</u> /28/2012 /26/2011 /13/2008 /28/2012 /10/2012 /31/2011 /10/2012	(D) DATE SOLD 2/28/2012 3/28/2012 6/27/2012 7/11/2012 7/11/2012 7/11/2012 7/11/2012
<u>ITEM</u> 1 2 3 4	(E) GROSS SALES 2. 1,640. 3,100. 3,069.	(F) DEPREC. ALLOWED	(G) COST BASIS 2. 1,763. 2,470. 3,037.	(H) GAIN (LOSS) 0. -123. 630. 32.	(I) FMV <u>12/31/69</u>	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS) \$ 0. -123. 630. 32.

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FEDERAL STATEMENTS

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LASTING HOPE, INC.

20-0815589

STATEMENT 4 (CONTINUED) FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

	(E) GROSS	(F) DEPREC.	(G) COST	(H) GAIN	(I) FMV	(J) ADJ. BAS.	(K) EXCESS		(L) GAIN
ITEM			BASIS	(LOSS)	12/31/69	$\frac{12}{31}$	(I) - (J)		LOSS)
TITEM .	SALES 2,010.	ALLOWED	$\frac{BRS1S}{2,051}$		12/31/09	12/31/09	717-107	6 \	
5	3,225.		4,115.	-41. -890.				Ą	-890.
7	1,932.		2,001.	-69.					-69.
0	1,934.		2,001.	-09.					-0 <i>3</i> . 47.
0							TOTAL	٠	-111
							IOIAL	<u>ې</u>	-414.

STATEMENT 5 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

PAUL M. CRAFTON CATHY CRAFTON

STATEMENT 6 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
AL MENCONIN MINISTRIES PO BOX 131147 CARLSBAD, CA 92013	NONE	501 (C) (3)	TO SUPPORT CHRISTIAN MISSIONARIES.	\$ 300.
AMBASSADORS FOR CHRIST INTERNATIONAL/USA 1355 TERRELL MILL RD, BLDG 1462 MARIETTA, GA 30067	NONE	501(C)(3)	TO SUPPORT CHRISTIAN MISSIONARIES.	4,250.
CRM EMPOWERING LEADERS 1240 N. LAKEVIEW AVE, SUITE 120 ANAHEIM, CA 92807	NONE	501 (C) (3)	TO SUPPORT CHRISTIAN MISSIONARIES.	600.
KIDS ALIVE INT'L. 2507 CUMBERLAND DRIVE VALPARAISO, IN 46384	NONE	501 (C) (3)	TO SUPPORT CHRISTIAN MISSIONARIES.	1,200.
MINISTRY RESOURCE NETWORK 29 SOUTH PEACHTREE STREET NORCROSS, GA 30071	NONE	501(C)(3)	TO SUPPORT CHRISTIAN MISSIONARIES.	1,600.

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FEDERAL STATEMENTS

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LASTING HOPE, INC.

20-0815589

STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
MISSION TEAM INC PO BOX 801302 ACWORTH, GA 30101	NONE	501 (C) (3)	TO SUPPORT CHRISTIAN MISSIONARIES.	\$ 250.
NORTH COBB CHRISTIAN SCHOOL 4500 LAKEVIEW DRIVE KENNESAW, GA 30144	NONE	501(C)(3)	TO SUPPORT CHRISTIAN EDUCATION.	12,000.
PERIMETER CHURCH - MEDICAL MISSIONS MIN. 9500 MEDLOCK BRIDGE ROAD DULUTH, GA 30097	NONE	501 (C) (3)	TO SUPPORT CHRISTIAN MISSIONARIES & DOCTORS.	2,000.
WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD, SUITE 300 JACKSONVILLE, FL 32256	NONE	501 (C) (3)	TO SUPPORT INJURED AMERICAN SOLDIERS.	250.
YOUTH FOR CHRIST - USA PO BOX 4478 ENGLEWOOD, CO 80155	NONE	501(C)(3)	TO SUPPORT CHRISTIAN MISSIONARIES.	1,800.
YOUTH WITH A MISSION - ATLANTA PO BOX 1025 GRAYSON, GA 30017	NONE	501 (C) (3)	TO SUPPORT CHRISTIAN MISSIONARIES.	2,600.
NORTHWEST CHURCH 3575 ACWORTH DUE WEST RD. ACWORTH, GA 30101	NONE	501 (C) (3)	TO SUPPORT CHRISTIAN MISSIONARIES.	100.
THE EXTENSION 1507 CHURCH STREET EXTENSION MARIETTA, GA 30061	NONE	501 (C) (3)	TO SAVE LIVES AND RECONNECT FAMILIES.	5,000.
VOICE TODAY 3855 SHALLOWFORD ROAD, SUITE 110 MARIETTA, GA 30062	NONE	501 (C) (3)	TO END CHILD SEXUAL ABUSE.	2,750.
CAMPUS CRUSADE FOR CHRIST PO BOX 628222 ORLANDO, FL 32862	NONE	501(C)(3)	TO SUPPORT CHRISTIAN MISSIONARIES.	600.
EXPERIENCE MILLSIONS (HUNGARY) 157 PARKMONT LANE DALLAS, GA 30132	NONE	501 (C) (3)	TO SUPPORT CHRISTIAN MISSIONARIES.	200.

2012

FEDERAL STATEMENTS

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LASTING HOPE, INC.

20-0815589

STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE C)F 	 AMOUNT
MOUNT PARAN CHURCH 2055 MOUNT PARAN ROAD ATLANTA, GA 30327	NONE	501 (C) (3)	TO SUPPORT CHRISTIAN MISSIONARIES	•	\$ 75.
PASSION CITY CHURCH PO BOX 5 ROSWELL, GA 30077	NONE	501(C)(3)	TO SUPPORT CHRISTIAN MISSIONARIES		7,800.
UGA - SHAMROCK CHARITY PROJECT 750 SOUTH MILLEDGE AVENUE ATHENS, GA 30605	NONE	501 (C) (3)	TO END CHILD ABUSE.		100.
WDA PO BOX 142437 FAYETTEVILLE, GA 30214	NONE	501(C)(3)	TO SUPPORT T TO AFRICA & SOUTH AMERIC		300.
WEARS VALLEY RANCH 3601 LYON SPRINGS ROAD SEVIERVILLE, TN 37862	NONE	501(C)(3)	TO SUPPORT CHILDREN AT RANCH.	THE	300.
				TOTAL	\$ 44,075.