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Department of the Treasury

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements OMB No 1545-0047

inte	na never	ide Seivice	- The organization may have	то сестиновру стине полити		<u> </u>			
<u>A</u>	For the	2012 cale	ndar year, or tax year beginning	, 2	012, and end	ing		, 20	
В	Check if	applicable	C Name of organization Hope House	e of Milwaukee, Inc.			D Employe	er identification r	number
	Address	change	Doing Business As					39-1592900	
	Name cl	hange	Number and street (or P O box if ma	ul is not delivered to street address	s) Room/s	suite	E Telephor	ne number	
	Initial ref	turn	PO Box 04095					414-645-2122	
	Termina	ted	City, town or post office, state, and 2	IP code					
\Box									2,302,774
\Box		tion pending	T	Kenneth Schmidt		H(a) Is this	a group return t	for affiliates? Ye	s 🗸 No
	пррпоаг	non penang	209 West Orchard Street, Milway					cluded? Ye	s \square No
	Tay ava	mpt status	501(c)(3) 501(c) () ◀ (insert no) ☐ 4947(a)(1) or 527			list (see instructi	
÷	Website		w.hopehousemke.org) 4 (macreno) (4947(a)(1) 01 327	H(c) Grou	p exemption	number >	N/A
7				tion ☐ Other ►	L Year of form			of legal domicile	WI
K				tion Carler -	L rear or tom	1967	IN Otate	or regar dorniere	441
F	art I	Summ						n - 4	
	1		escribe the organization's missi						
ě			sness and create healthy commu						
j Governance		homeless	s men, women, and families, pern	nanent housing for homeles	s individuals,	, a low-cost m	edical clin	ic, emergency	food
Ĕ			outh and adult education progran						
Š	2	Check th	nis box ▶ ☐ if the organization o	discontinued its operations	or disposed	d of more tha	n 25¦% of _i	its net assets.	•
	3	Number	of voting members of the gover	rning body (Part VI, line 1a)			. 3		14
⊃s S	4	Number	of independent voting member	s of the governing body (Pa	art VI, line 11	o)	. 4		14
Ĭ,	5	Total nur	mber of individuals employed in	ı calendar year 2012 (Part \	/, line 2a)		. 5	_	50
1 & LU A	6	Total nur	mber of volunteers (estimate if r	necessary)			. 6		5
	7a		related business revenue from F	- ·					0
	b		lated business taxable income				. 7b		N/A
<u>=</u> }—	 ~	1101 01110		.,		Pnor Y	'ear	Current \	
	8	Contribu	itions and grants (Part VIII, line	1h)			2,243,121		2,302,102
Revenue	9		service revenue (Part VIII, line :			-	0		<i>L,002,102</i>
- F	10	_	ent income (Part VIII, column (A				109		(1,437)
Reve	1		•	•					
5	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)						282		2,109
<u>~</u>	12		· · · · · · · · · · · · · · · · · · ·			 	2,243,512		2,302,774
₹ \$9 \$1	13		ınd similar amounts paid (Part I				352,806		380,834
10	14		paid to or for members (Part IX	• • • • • • • • • • • • • • • • • • • •			0		0
Se	15	-	other compensation, employee t	•			1,441,793		1,470,529
Expenses	16a		onal fundraising fees (Part IX, c				0		0
ă	b		ndraising expenses (Part IX, coli						
Ü	17	Other ex	penses (Part IX, column (A), line	es 11a-11d, 11f-24e) .			453,86 <u>8</u>		455,951
	18	Total exp	penses. Add lines 13-17 (must	equal Part IX, column (A), i	ine 25) .		2,248,467		2,307,314
	19	Revenue	e less expenses. Subtract line 1	8 from line 12	<u>.</u>		(4,955)		(4,540)
	3	· ·		RECEIVED	1	Beginning of C	urrent Year	End of Y	'ear
ets or	20	Total ass	sets (Part X, line 16)				1,795,536		1,792,291
Net Assel	21		bilities (Part X, line 26) පු		S		178,881		180,176
ž	22		ets or fund balances. Subtract	ine 21 from line 20013	άl		1,616,655		1,612,115
_	art II		iture Block		n l		.,		
-	nder nen	altes of nerii	ury I declare that I have examined this	refunding accompanying so	hedules and sta	etements, and to	the best of	mv knowledge ar	nd belief, it is
tr	ie, corre	ct, and comp	ury, I declare that I have examined this in older Declaration of preparer (other than	officer) is based on all information	o which prepa	arer has any kno	wledge	, ,	
		T1	(being than	1			-5/	13/13	
Si	gn	Sign	nature of officer				Date		
	ere	, J. J.g.							
	51 C	7.00	11 casino						
			pe or print name and title	Proporario signatura		Date	- 	PTIN	
P	aid	Printi	ype preparer's name	Preparer's signature		Dale	Check	□ "	
Pi	repar	er					self-em	pioyea	
	se On	1	name •			F	rm's EIN ▶		
		Firm's	address ▶			P	hone no		
М	ay the I	IRS discus	ss this return with the preparer	shown above? (see instruc	tions)	<u> </u>	<u> </u>		es 🗌 No
Fo	r Paper	work Red	uction Act Notice, see the separa	ite instructions.	Car	t No 11282Y		Form	1 990 (2012)





Form 99	90 (2012) Page 2
Part	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	It is the mission of Hope House "to end homelessness & create healthy communities." To this end Hope House provides:
	emergency and transitional shelter for homeless men, women, and families, permanent housing for homeless individuals, a low-cost
	medical clinic, emergency food youth and adult education programs, and protective payee services.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by
7	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$927,411 including grants of \$ 80,828) (Revenue \$)
	Transitional Housing for homeless single adult women and families-Hope House provides transitional housing to 14 single women
	and 1 (families. In 2012, 79% of residents obtained permanent housing upon discharge. In addition, 39% of residents who were not
	disabled had obtained employment upon leaving the program, and 97% had utilized 3 or more supportive services during their stay.
	Fusing best practice research, consumer input, and 20 years experience, Hope House has developed a method that includes the
	following. 1. Extended Shelter and Supportive Case Management, 2. Comprehensive Assessment and Service Planning,
	3. Practical On site Education, 4. Consistent Reinforcement and Role Modeling, and 5. Referral, Linkage, and Engagement of
	Community Based Services. Using this method, Hope House has consistently achieved benchmarks that exceed those set by the Department of Housing and Urban Development for Transitional Housing Programs.
	(Code:) (Expenses \$ 179,586 including grants of \$ 27,193) (Revenue \$)
	Emergency Shelter for single adult menThe Thresholds Emergency Shelter program is designed to provide short-term shelter
	and supportive services to 13 homeless single men at a time. Program Personnel work quickly with the men to develop gainful
	employment opportunities and to secure permanent housing. By providing practical, applicable information, education and services
	in a condensed time-frame, men are provided intensive, "life ready" skills in the shortest period possible. The efficient process
	moves men into stable housing as swiftly as possible. Moreover, they have the necessary resources and tools to help ensure
	they can maintain their housing. In 2012, 160 single men were served by the Thresholds Programs, and 39% obtained stable
	housing upon discharge.
4c	(Code:) (Expenses \$
	USS Food Pantry-Food ServicesThe United Southside Food Pantry has developed a multifaceted continuum of services designed
	to provide emergency food distribution, reduce hunger, improve nutrition, and enhance the quality of life for households in the 53204
	zip code. The three tiershealthful food distribution, applicable education on nutrition, and relevant service and referralcreate
	a positive, proactive and integrative method for recipients to improve and maintain their quality of life, In 2012, total of 3,642
	households received emergency food distributions. This amounts to more than 9,822 people, including 5,512 adults and
	4,310 children.
4d	Other program services (Describe in Schedule O.) (Expenses \$ 704.140 including grants of \$ 73.874) (Revenue \$)
	(Expenses \$ 704,140 including grants of \$ 73,874) (Revenue \$) Total program service expenses ▶ 2.018.538
	. U 1

arτ	Checklist of Required Schedules		1	
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	2	✓	-
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		<u>▼</u>
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, for escrow or custodial account liability; 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	- ✓	1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	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 and XII is optional	12b	·	✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
	Did the organization maintain an office, employees, or agents outside of the United States?	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		1
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		1
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		1
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		1
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		1
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		1
20 a		20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Part l	Checklist of Required Schedules (continued)			
			Yes	No_
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
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		√
040	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		<u> </u>
24a	\$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		✓
	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		
_1	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		√
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, highest 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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
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		1
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	✓	1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R</i> ,			
	Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	
			000	10040

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	-		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	✓	
Za	Statements, filed for the calendar year ending with or within the year covered by this return 2a 50			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	2.0	•	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	<u> </u>		- -
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		V
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		V
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		/
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<u> </u>		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	<u> </u>		
	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	ļ	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	70		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	7c		-
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	 	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		1
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	1	ļ	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	<u> </u> _	ļ. ——	
_	organization, have excess business holdings at any time during the year?	8	ļ	✓
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		1
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:	-		•
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b] N/A			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
40-	against amounts due or received from them.)			
12a b	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	1	
	Note. See the instructions for additional information the organization must report on Schedule O.		1	
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
C	Enter the amount of reserves on hand			<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	
-	IT "YOR " DOC IT THAT A HORM /ULL TO FAROR TRACE ROUMANTO" If "NA " provide an evaluation in Cahadula C	1 4 4 1		1

Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S Check if Schedule O contains a response to any question in this Part VI	ee ins	tructi	ons.					
Section	on A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 14								
	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.								
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 14								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		✓					
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		✓					
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? .								
6	Did the organization have members or stockholders?	6		<u> </u>					
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 the year by the following:								
а	The governing body?	8a	1						
b	Each committee with authority to act on behalf of the governing body?	8b	✓						
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	9		1					
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.)						
		\longrightarrow	Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		✓					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	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	✓_	<u></u> ,					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	i		[]					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u> </u>					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40.	,						
40	describe in Schedule O how this was done	12c	√						
13 14	Did the organization have a written whistleblower policy?	13	1						
15	Did the process for determining compensation of the following persons include a review and approval by	1-4	<u> </u>						
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	1	<i>-</i> -'					
	Other officers or key employees of the organization	15b							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
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?	16a	I	 					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			<u> </u>					
	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							
Section	on C. Disclosure	,		1					
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 available for public inspection. Indicate how you made these available. Check all that apply.	า 501(c)(3)s	only)					
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	of inter	rest p	oolicy,					
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	•						
	organization: ► Xuven Vo. 209 W. Orchard Street, Milwaukee, WI 53204 (414) 645-2122								

Earm	000	(2012)	

Page 7

Part VII	Compensation of Officers, Dir	ectors, Trustees,	Key Employees, I	Highest C	ompensated Em	ployees,	and
	Independent Contractors						

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A) (B) Name and Title Average hours per week (list any hours for related			(C) Position (do not check more than of box, unless person is both officer and a director/trust) Y Or director (C) (C) Position (Haphes) (Haphes) (F) (Haphes) (Hap					(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)		Institutional trustee	er	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(1) Daniel Schley										
President		\		✓				0	o	0
(2) Rosemary Morby									1	
Vice President		\		\				o	o	0
(3) Katherine Durben										•
Secretary		✓		✓				О	0	0
(4) Corina Schoenke										
Treasurer		\		\		L		O	o	0
(5) Ivory Britton										
Board Member		✓						0	0	0
(6) Michelle Kempen							[]			
Board Member		✓						O	о	0
(7) Peter G. LaBonte										
Board Member		\						о	0	0
(8) Laurel Nelson-Rowe										-
Board Member_		✓					1	O	l o	o
(9) Kathy Oman										-
Board Member		✓						o	0	0
(10) Brian Peters										
Board Member		✓						О .	o	0
(11) Tim Posnanski										
Board Member		✓						o	o	o
(12) Susan Scot Fry								, i		
Board Member	1	✓						l 0	l 0	o
(13) Lindsey Tauber										<u>-</u>
Board Member	T	1		Ì				۰ ا	l 0	0
(14) Richard Walters								<u> </u>		
Board Member		✓			L	<u> </u>	L	0	0	0
										· · · · · · · · · · · · · · · · · · ·

Part	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	d ox individua	ot ch	Pos eck s pe	c) ition more	n c than	one an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportab compensatior related organizatic (W-2/1099-N	le n from	Estii arno o' compi froi orgar and	mated ount of ther ensation the nization related izations	1
	nneth Schmidt				1									
	ive Director yen Vo	-			•				80,638		0			3,426
Accoun	nting Coordinator				✓				50,307		0		1	14,163
(18)							:							
(19)														
(20)														
(21)														
(22)										-				
(23)														
(24)														
(25)														
1b c	Sub-total	VII, Sectio	n A					>	130,945 0					17,589 0
d 2	Total (add lines 1b and 1c)	not limited						<u>►</u> e) w	ho received m	<u> </u>	00,000	of	1	17,589
3	Did the organization list any former of		_							est compe	nsated		Yes	
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	portal	ble d	con	пре	nsatio	n a	and other comp					√
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or inc	dividual 			√
	n B. Independent Contractors									•				
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	iress							(B) Description of s	ervices	((C) Compens	ation	
NONE	·							-						
										_				
								\vdash						
2	Total number of independent contractor received more than \$100,000 of compens							o th	nose listed ab	ove) who				

Form **990** (2012)

Part	VIII	Statement of Revenue					
		Check if Schedule O contains a re	esponse to any ques	tion in this Part VI (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns	1a 13,468				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b]			
s, G	С	Fundraising events	1c]			
Gift lar,	d		1d]			
ıs, (imi	е	Government grants (contributions)	1e 1,470,312]			
tior sr S	f	All other contributions, gifts, grants,					
ibu		and similar amounts not included above	1f 818,322				
d C	g	Noncash contributions included in lines 1a-1					
	h	Total. Add lines 1a-1f		2,302,102			
Jue .			Business Code				
ever	2a						
e R	b						
Ş	С						
Sei	d						
ra m	е						
Program Service Revenue	f	All other program service revenue		ļ			
_	<u>g</u> 3	Total. Add lines 2a–2f	i				
	٦	and other similar amounts)			242		
	4	Income from investment of tax-exem		616	616		616
	5		•				
	3	Royalties	(II) Personal				
	6a	Gross rents	(4) 1 21221121	1			
	b	Less rental expenses		1			
	c	Rental income or (loss)	+	1			
	d	Net rental income or (loss)		1			
	7a	Gross amount from sales of (i) Securitie	s (II) Other	 			i
		assets other than inventory		1			
	b	Less cost or other basis		1			
		and sales expenses .	2,053				
	С	Gain or (loss)	(2,053)	1 1			
	d	Net gain or (loss)		(2,053)	(2,053)		(2,053)
_					• • •		
venue	8a	Gross income from fundraising		1			
		events (not including \$	_				
Other Re		of contributions reported on line 1c					
ĕ		See Part IV, line 18	a]			
ᅙ	1	Less: direct expenses					<u> </u>
		Net income or (loss) from fundrais					ļ.,,
	9a	Gross income from gaming activiti					
	١.	See Part IV, line 19		↓			
	b	Less: direct expenses		 			-
		Net income or (loss) from gaming					
	iva	Gross sales of inventory, le returns and allowances	1				
				- 1			1
	b	Less: cost of goods sold Net income or (loss) from sales or		∮			-
	_ <u>c</u>	Miscellaneous Revenue	Business Code				
	11a	Returned/Refunded Assistance		125	125		425
	b			135	135 1,974		135
	C	Miscellaneous		1,574	1,974		1,374
	ď	All other revenue		†			† · · · · · · · · · · · · · · · · · · ·
	e	Total. Add lines 11a-11d		2,109			
	12	Total revenue. See instructions.		2,302,774	672		672

Form 9	• 90 (2012)				Page 10
	t IX Statement of Functional Expenses				
	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. A	II other organization	s must complete colu	mn (A).
	Check if Schedule O contains a respons				🗆
	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				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	380,834	380,834		
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			147.045	4.225
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	152,080		147,845	4,235
7	Other salaries and wages	1,002,472	945,783	246	56,443
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	13,001	12,954		47
9	Other employee benefits	172,008	166,437		5,571
10	Payroll taxes	130,968	111,787	12,071	7,110
11	Fees for services (non-employees):	•	,		
а	Management				
b	Legal	2,500		2,500	
С	Accounting	9,800		9,800	
d	Lobbying	,		•	
е	Professional fundraising services. See Part IV, line 17	1			
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule O.)	18,660	18,660		
12	Advertising and promotion [
13	Office expenses [94,632	71,461	18,853	4,318
14	Information technology	10,977	5,984	4,142	850
15	Royalties				
16	Occupancy	84,083	84,083		
17	Travel	9,034	8,677	357	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	1,509	1,459	50	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	107,837	101,457	6,380	
23	Insurance [14,463	14,463		

8,803

5,047

23,344

43,731

21,531

2,307,314

8,803

23,344

43,396

18,627

2,018,538

329

4,718

2,101

209,310

24

25

26

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.) Youth Education supplies and field trip

Membership, Dues and Fees

All other expenses Miscellaneous

Total functional expenses. Add lines 1 through 24e

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 following SOP 98-2 (ASC 958-720)

Direct Clients Benefit

Food-Perishable & Non-Perishable

88

804

79,466

Pa	art X	Balance Sheet					
		Check if Schedule O contains a response to	any question in	this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		430,400	1	434,007	
ļ	2	Savings and temporary cash investments		[100,000	2	100,544
	3	Pledges and grants receivable, net		· · L		3	
	4	Accounts receivable, net	258,481	4	333,958		
	5	Loans and other receivables from current and f					
		trustees, key employees, and highest co					
		Complete Part II of Schedule L		⊢		5	
	6	Loans and other receivables from other disqualified pers					
		4958(f)(1)), persons described in section 4958(c)(3)(B), an sponsoring organizations of section 501(c)(9) volun					
.,		organizations (see instructions). Complete Part II of Sche		6			
Assets	7	Notes and loans receivable, net		⊢		7	
Ass	8	Inventories for sale or use			17,647	8	21,642
`	9	Prepaid expenses and deferred charges		· ·	6,406	9	9,059
	_	Land, buildings, and equipment: cost or	· · · · · ·	· ·	0,400		0,000
		other basis. Complete Part VI of Schedule D	10a	2,655,647			
	b	Less: accumulated depreciation		1.762.566	982,602	10c	893,081
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 1	11			12	
	13	Investments-program-related See Part IV, line	-	13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equa			1,795,536	16	1,792,291
	17	Accounts payable and accrued expenses		_	88,162		95,285
	18	Grants payable			-	18	
	19	Deferred revenue			1,601	19	0
	20	Tax-exempt bond liabilities		_		20	
40	21	Escrow or custodial account liability. Complete i				21	
Liabilities	22	Loans and other payables to current and for trustees, key employees, highest compen					
Ε		disqualified persons. Complete Part II of Schedu		-		22	
Lial	23	Secured mortgages and notes payable to unrela		<u> </u>		23	· · · · · · · · · · · · · · · · · · ·
	24	Unsecured notes and loans payable to unrelated	•			24	
	25	Other liabilities (including federal income tax,		· · · -			
		parties, and other liabilities not included on lines					
		of Schedule D			89,118	25	84,891
	26	Total liabilities. Add lines 17 through 25			178,881	26	180,176
(0	-	Organizations that follow SFAS 117 (ASC 958)		and			
ë		complete lines 27 through 29, and lines 33 and		}.			
lan.	27	Unrestricted net assets			1,599,534		1,577,966
Ba	28	Temporarily restricted net assets			17,121	 	34,149
2	29	Permanently restricted net assets				29	
Ē		Organizations that do not follow SFAS 117 (ASC 98 complete lines 30 through 34.	58), cneck nere ►	□ and			
Net Assets or Fund Balances	20	-		}-		30	
šets	30 31	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or ed				31	
ASS	32	Retained earnings, endowment, accumulated in		_		32	
et	33	Total net assets or fund balances			1,616,655		1,612,115
Z	34	Total liabilities and net assets/fund balances .			1,795,536	} 	1,792,291
_				·	11. 2.2.2.2.2.		Form 990 (2012)

Page	1	2

01111 99	(2012)					90 I =
Part	XI Reconciliation of Net Assets					
	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			2,30	2,774
2	Total expenses (must equal Part IX, column (A), line 25)	2			2,30	7,314
3	Revenue less expenses. Subtract line 2 from line 1	3			(4	1 <u>,540)</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			1,61	<u>6,655</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10			1,61	<u> 2,115</u>
Part	· · · ·					_
	Check if Schedule O contains a response to any question in this Part XII			<u> </u>		<u> </u>
			-		Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other	–	<u> </u>			j
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	in			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were com	pilea (or			
	reviewed on a separate basis, consolidated basis, or both:					
_	Separate basis Consolidated basis Both consolidated and separate basis		}-			
þ	Were the organization's financial statements audited by an independent accountant?		·	2b	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ea on	a			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis	!_				
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			2¢	✓	
	Schedule O.	piairi	""			
0-	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in			اــــا
3a	the Single Audit Act and OMB Circular A-133?			За		
L	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo			Sa	✓	<u> </u>
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		16	3b		
	required addit of addits, explain willy in schedule of and describe any steps taken to undergo such a	uuito	<u> </u>		000	(2012)
				For	n 990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0047

Name of the organization						E	mployer ic	lentificatio	number	
Hope House of Milwauke							39-1592900			
		rity Status (All orga						nstructio	ns.	
2 A school desc 3 A hospital or a 4 A medical resc	vention of church ribed in section a cooperative hos	hes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjunc	churches ch Sched ation desc	s describe ule E.) cribed in s	ed in sec section 1	tion 170(170(b)(1)((b)(1)(A)(i A)(iii).		(iii). Enter tl	he
5 An organization	on operated for the complete of the complete o	the benefit of a colleg	ge or uni	versity ov	wned or	operated	by a go	vernment	tal unit des	cribed in
7 An organization	on that normally	nment or governmenta receives a substantia (A)(vi). (Complete Par	al part of					nit or fron	n the gener	ral public
9 An organization receipts from support from	on that normally activities related gross investme	n section 170(b)(1)(A) receives: (1) more that d to its exempt function int income and unrelater June 30, 1975. Se	an 331/3% ions—sul lated bus	of its subject to desiness tax	upport fro certain ex xable inc	ceptions	s, and (2) ss sectio	no more	e than 331/3	3% of its
11 An organization purposes of contractions	on organized are one or more pub ock the box that	operated exclusively nd operated exclusive blicly supported organ describes the type of	ely for th nizations supportin	e benefit described ig organiz	t of, to p d in sect zation and	perform to non 509(and dicomple	the funct a)(1) or se te lines 1	ions of, ection 50 1e throug	9(a)(2). See gh 11h	esection
	indation manage	II c Type III that the organization ers and other than one	ıs not co	ntrolled d	- lirectly or	indirectl	y by one	or more		persons
organization, o	check this box .								e III suppo	orting
g Since August following pers		he organization accep	pted any	gift or co	ontributio	n from a	ny of the)		
		ndirectly controls, eitlody of the supported of							nd \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Yes No
(iii) A 35% coi	ntrolled entity of	on described in (i) abo a person described in	n (i) or (ii) a	above? .					11g(ii) 11g(iii)	
	, <u> </u>	ion about the support			ı —		1		T	
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	the organ	ou notify nization in of your port?	organiza (i) organi	ls the tion in col zed in the S?	(vii) Amount o supp	
			Yes	No	Yes	No	Yes	No		
(A)										
(B)										
(C)										
(D)										
(E)										

Part							
	(Complete only if you checked th				_	•	ality under
Casti	Part III. If the organization fails to	quality unde	er the tests lis	stea below, pi	ease comple	te Part III.)	
	on A. Public Support	(-) 0000	(t-) 0000	(-) 0010	(4) 0044	(-) 0010	(f) Total
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(i) lotal
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	4 607 000	0.400.000	0.040.040	0.040.404	2 202 402	10 552 055
2	Tax revenues levied for the	1,637,808	2,128,082	2,240,942	2,243,121	2,302,102	10,552,055
2	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,637,808	2,128,082	2,240,942	2,243,121	2,302,102	10,552,055
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						10,552,055
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	1,637,808	2,128,082	2,240,942	2,243,121	2,302,102	10,552,055
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,073	1,392	280	109	616	9,470
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	360	1,952	867	282	2,109	5,570
11	Total support. Add lines 7 through 10						10,567,095
12	Gross receipts from related activities, etc					12	0
13	First five years. If the Form 990 is for the						
	organization, check this box and stop he			<u> </u>			<u> </u>
	on C. Computation of Public Suppor					1 44 1	
14	Public support percentage for 2012 (line					15	99.8577 %
15 16a	Public support percentage from 2011 Sci 331/3% support test—2012. If the organi						99.7057 %
IUa	box and stop here . The organization qua						
b	331/3% support test—2011. If the organ check this box and stop here. The organ	nization did no	ot check a box	x on line 13 o	r 16a, and line		
17a	10%-facts-and-circumstances test—2010% or more, and if the organization me Part IV how the organization meets the "torganization	ets the "facts-	and-circumsta	inces" test, ch	eck this box ar	nd stop here. i	lıne 14 is Explain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza Explain in Part IV how the organization in supported organization	tion meets the neets the "fact	e "facts-and-c	ircumstances" stances" test. T	test, check th	nis box and st	top here.
18	Private foundation. If the organization d				a, or 17b, chec	k this box and	

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 que	ualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)	

Secti	on A. Public Support	dilder tile te	ists listed ben	ow, picase co	ompiete i art	11.,	
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees	(,	(2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2	(0) = 0.10	(4) 2011	(0, =0:=	(7)
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						-
	furnished by a governmental unit to the					1	
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3		}				
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С 8	Add lines 7a and 7b						
0	line 6.)				i		
Secti	on B. Total Support		J	<u> </u>		1	
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	(2) 2000	(6) 2003	(0) 2010	(u) 2011	(6) 2012	(i) Total
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,]	
	royalties and income from similar sources .						İ
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses					ļ	
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets					1	
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)		<u> </u>	l		<u> </u>	
14	First five years. If the Form 990 is for the	-			•		
Coot	organization, check this box and stop he		· · · · ·	· · · · ·	• • • • •		▶ _
<u>5ecu</u>	on C. Computation of Public Suppor Public support percentage for 2012 (line 8			3 column (6)		15	%
16	Public support percentage from 2011 Sch					16	
	on D. Computation of Investment In			· · · · · ·		1 10	70
17	Investment income percentage for 2012 (v line 13. colu	mn (f))	17	%
18	Investment income percentage from 2011					18	// // %
19a	331/3% support tests—2012. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests - 2011. If the organiz		_			-	_
_	line 18 is not more than 331/3%, check this I						
20	Private foundation. If the organization di						· · · · · · · · · · · · · · · · · · ·

Part IV	Supplemental Inf Part II, line 17a or instructions).	formation. Co 17b; and Par	omplete this t III, line 12.	part to prov Also compl	vide the exp ete this part	planations requi t for any additio	red by Part II, line 10; onal information. (See
Part II, Secti	on B, Line 10:			•••			
Description		(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	
Returned/Re	fund Assistance	15	62	195	99	135	
Miscellaneo	us Income	345	1,890	672	183	1,974	
Total Line 10)	360	1,952	867	282	2,109	
							
			•••••••				
							

SCHEDULE D (Form 990)

Supplemental Financial Statements

20**12**

Open to Public Inspection

Department of the Treasury Internal Revenue Service ➤ 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.

Name of the organization Employer identification number Hope House of Milwaukee, Inc. 39-1592900 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) . 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? ☐ Yes ☐ No 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 ☐ Yes ☐ No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II 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. Held at the End of the Tax Year Total number of conservation easements . . 2a Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c 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 3 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 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) Я In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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 XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: 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:

Assets included in Form 990, Part X

ech/	aduda	'n	Form	aan	2012
SCR	eaule	$\boldsymbol{\nu}$	rom	3901	2012

Part	Organizations Maintaining C	collections of A	<u>Art,</u> Hist	orical T	reasures,	or Ot	her Similar As	ssets (continued)
3	Using the organization's acquisition, accollection items (check all that apply):	cession, and oth	ner recor	ds, chec	k any of the	follow	ving that are a s	significant use of its
а	☐ Public exhibition		d [☐ Loan	or exchange	e progr	rams	
b	☐ Scholarly research							
С	☐ Preservation for future generations		-					
4	Provide a description of the organization	on's collections a	ınd expla	in how tl	ney further t	the org	anization's exer	mpt purpose in Part
	XIII.							
5	During the year, did the organization s assets to be sold to raise funds rather to	olicit or receive i han to be mainta	donation: ined as p	s of art, part of the	historical tre e organizatio	easure: on's co	s, or other simil dlection?	ar ☐ Yes ☐ No
Part		gements. Cor	mplete if	the org				
1a	Is the organization an agent, trustee, or		er interm	ediary fo				
b	If "Yes," explain the arrangement in Par					r		Amount
_	D					-	 	MITOUTIL
C	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 amount	-						
	If "Yes," explain the arrangement in Par							
Part	V Endowment Funds. Complet							
	<u>_</u>	(a) Current year	(b) Pno	or year	(c) Two years	s back	(d) Three years bac	k (e) Four years back
1a	Beginning of year balance							
b	Contributions							
C	Net investment earnings, gains, and							ļ
	losses							
d	Grants or scholarships							
е	Other expenditures for facilities and							
	programs							İ
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of th	e current vear en	d balanc	e (line 1c	. column (a))) held	as:	
а	Board designated or quasi-endowment	· •	%	· (,,	,,		
b	Permanent endowment ▶							
c	Tomporarily restricted and sument	20						
•	The percentages in lines 2a, 2b, and 2c		nn%					
За	Are there endowment funds not in the			zation th	at are held :	and ad	lministered for t	he
	organization by:	, , , , , , , , , , , , , , , , , , , ,	o organi		ar are mora r	ua u.		Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations					• •		3a(ii)
b	If "Yes" to 3a(ii), are the related organiz							3b
4	Describe in Part XIII the intended uses							30
Pari								
ı ai	Description of property	(a) Cost or of			or other basis	(0)	Accumulated	(d) Book value
		(investm		1 ' '	other)		epreciation	(d) Book value
1a	Land			<u> </u>	40,000			40,000
ь	Buildings			 	2,233,413		1,444,042	789,371
С	Leasehold improvements			<u> </u>				
đ	Equipment	\		<u> </u>	349,981		287,299	62,682
е	Other				32,253		31,225	1,028
Total.	Add lines 1a through 1e. (Column (d) me	ust equal Form 9	90, Part .	X, columi	n (B), line 10)(c).)	•	893,081

Part VII	Investments - Other Securities	. See Form 990, Part X, I	ine 12.	
	(a) Description of secunty or category (including name of secunty)	(b) Book value	(c) Method of valua Cost or end-of-year mar	
(1) Financia	al derivatives			
	-held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I)	A must agual Form 000. Part V. col. (P) line 121			
Part VIII	n (b) must equal Form 990, Part X, col. (B) line 12.) ► Investments — Program Related	See Form 990 Part Y	line 13	
Part VIII	(a) Description of investment type	(b) Book value	(c) Method of value	tion ————
	(a) Description of investment type	(b) Book value	Cost or end-of-year mar	
_(1)				
(2)			<u> </u>	
_(3)				
_(4)				
(5)				
_(6)				
_(7)				
(8)				
(9)				
(10)	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Pa	art X. line 15.	L	
		a) Description		(b) Book value
(1)		- 		
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
_(8)	· · · · · · · · · · · · · · · · · · ·			
(9)				
(10)	<u> </u>	(0) " 45)		
Part X	lumn (b) must equal Form 990, Part X, c Other Liabilities. See Form 990		<u></u>	
1.	(a) Description of liability	(b) Book value	T	
	al income taxes	(b) Book value	4	
	ctive Payee	64.564	1	
-(a)	al Lease	64,564 20,327		
(4)	ai Lease	20,321	1	
(5)			1	
(6)	· · · · · · · · · · · · · · · · · · ·		1	
(7)			1	
(8)]	
(9)]	
(10)]	
(11)]	
	nn (b) must equal Form 990, Part X, col. (B) line 25.)	84,891		
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the	text of the footnote to the org	ganization's financial statements that i	reports the organization's
liability for	uncertain tax positions under FIN 48 (ASC	740). Check here if the text of	the footnote has been provided in Pa	ırt XIII

Schedule	D (F	orm	990)	2012
		_		

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ď	u	ш	_

Part	XI Reconciliation of Revenue per Audited Financial Statements W	/ith Revenue per	Return
1	Total revenue, gains, and other support per audited financial statements		1 2,304,505
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	1,731	
С	Recoveries of prior year grants	-	
d	Other (Describe in Part XIII.)		1
е	Add lines 2a through 2d		2e 1,731
3	Subtract line 2e from line 1		3 2,302,774
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5 2,302,774
Part	XII Reconciliation of Expenses per Audited Financial Statements \		
1	Total expenses and losses per audited financial statements		1 2,309,045
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a	1,731	
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e 1,731
3	Subtract line 2e from line 1		3 2,307,314
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		-
С	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) .		5 2,307,314
Part	XIII Supplemental Information		
Comp Part V inform	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also dation.	III, lines 1a and 4; P complete this part to	Part IV, lines 1b and 2b; o provide any additional
	·	·	
	······································		

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations.

OMB No 1545-0047

(Form 990)		Ğ	overnments, and	and Individ	uals in the	Governments, and Individuals in the United States	Ş	2012
Department of the Treasury Internal Revenue Service		J	complete if the orgal	nization answered "Yes" to Fo ▶ Attach to Form 990.	'Yes" to Form 990, Form 990.	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.	a!	Open to Public Inspection
Name of the organization							Empl	Employer identification number
Hope House of Milwaukee, Inc.	tee, Inc.							39-1592900
Part I General	Information	General Information on Grants and Assistance	Assistance					
1 Does the organ	rization mainta	Does the organization maintain records to substantiate the are the selection criteria used to award the grants or assistance?		nt of the grants or	assistance, the g	rantees' eligibility fo	the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ince?	ce, and
2 Describe in Par	rt IV the organi	zation's procedu	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	the use of grant fu	nds in the United	States.		3
Part II Grants a	and Other As ine 21, for an	sistance to Go	vernments and received more the	Organizations ian \$5,000. Part	in the United Si Il can be duplica	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	f the organization ans space is needed.	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	of organization	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)								
(2)								
(3)								
(4)								
(5)								
(9)								
(7)								
(8)								
(6)								
(10)								
(11)				,				
(12)								
2 Enter total num 3 Enter total num	ber of section ber of other or	Enter total number of section 501(c)(3) and government Enter total number of other organizations listed in the lin	Enter total number of section 501(c)(3) and government organizat Enter total number of other organizations listed in the line 1 table	organizations listed in the line 1 table ie 1 table	ine 1 table			A A
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	on Act Notice, 8	see the Instruction	ns for Form 990.	-	Ö	Cat. No 50055P		Schedule I (Form 990) (2012)

Schedule I (Form 990) (2012)

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. Part III

(a) Type of grant or assistance	(b) Number of recipients	(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. In Kind Donation	104		\$ 1,583	Donor Stated Value	Books and Publications
2. In Kind Donation	355		\$ 59,219	Donor Stated Value	Clothing and Household Goods
3. In Kind Donation	9,822		\$ 237,458	237,458 Donor Stated Value	Food
4. In Kind Donation	355		\$ 10,344	10,344 Donor Stated Value	Hygiene
5. In Kind Donation	28		\$ 7,391	Donor Stated Value	Furniture
6. In Kind Donation	35		\$ 3,173	Donor Stated Value	Event Tickets
7. In Kind Donation	212		\$ 28,132	28,132 Donor Stated Value	Toys
8. In Kind Donation	235		\$ 5,053	5,053 Donor Stated Value	Holiday Gift Bags
9. In Kind Donation	604		\$ 30,863	Donor Stated Value	Office/School Supplies
10. In Kind Donation	1,315		\$ 2,305	2,305 Donor Stated Value	Drugs & Medical Supplies
11. In Kind Donation	8		900	90 Donor Stated Value	Infant Items
12. In Kind Donation	409		\$ 8,053	8,053 Donor Stated Value	Other
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	ete this part to pr	ovide the information	required in Part I, line 2, a	nd any other additional informati	on.

All Other Assistance are in-kind donations Donors record in-kind item descriptions and value, records are kept on all donations. The donations are distributed

through appropriate program area. Food is the largest in-kind item, its distribution is made to clients of the Food Pantry and Residential Programs. Client

files record food distributions and meals served. In addition food pantry inventory is audited annually. Other donated items including School Supplies (distributed

at an annual Street Fair/Shinning Stars Programs), Household Goods (graduates of Residential Programs), Holiday Gift Bags (Community Outreach, Residential

Programs), Hygiene Items (Food pantry, Residential Programs). All donations are stored in secure locations prior to distribution.

SCHEDULE M `(Form 990)

Noncash Contributions

OMB No 1545-0047 2012

Open To Public Inspection

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

Employer identification number

Hope I	House of Milwaukee, Inc.					39-15929	00		
Part	Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash cont amounts repo Form 990, Part V	rted on	Method o	(d) of determin tribution a		ts
1	Art - Works of art		-						
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications	-			1.583	Donor stated	l values		
5	Clothing and household								
	goods	✓			59.219	Donor stated	lvalues		
6	Cars and other vehicles		·		55,275				
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								
14	Qualified conservation								_
	contribution-Other								
15	Real estate-Residential								_
16	Real estate—Commercial								
17	Real estate—Other								_
18	Collectibles								_
19	Food inventory	/	708		241 453	Donor stated			_
20	Drugs and medical supplies		12			Donor stated			
21	Taxidermy		12			Donor States	I Values		
22	Historical artifacts								_
23	Scientific specimens								_
24	Archeological artifacts								_
25	Other ► (Hygiene items)	✓	107		10 344	Donor stated			_
26	Other ► (Office/School suppl)	—	61			Donor stated			_
27	Other ► (Holiday Gift items)	—	126			Donor stated			
28	Other ► (Miscellaneous)		44			Donor stated			
29	Number of Forms 8283 received			year for contribu		DOMO: State	· values_		_
	which the organization completed	Form 8283	3, Part IV, Donee Acknowle	dgement		29			
						<u> </u>	Ye	s N	0
30a	During the year, did the organiza	tion receive	by contribution any prope	erty reported in l	Part I. lines	s 1-28 that			_
	it must hold for at least three year						1 1		
	used for exempt purposes for the				•		30a		_
b	If "Yes," describe the arrangemen							. 34	
31	Does the organization have a		stance policy that require	es the review o	of anv no	n-standard			
							31	7	
32a	Does the organization hire or us	e third par	ties or related organization	ns to solicit pro	cess or se	ell noncash	 	+	_
	contributions?		•				32a	,	,
b	If "Yes," describe in Part II.	•				· - ·	75	+	—
33	If the organization did not report a	n amount ir	column (c) for a type of pro	operty for which	column (a) i	is checked			
	describe in Part II		. 15.3 (5) 151 a type of pre	oporty for willoff t	Joidinii (d)	o oncorea,		5	

Part II	Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, 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.
Doet 1 Line	20. hun tipleste #240 . diemore #E40 . furmiture #7 204 . infant items #00 . plante #146 . Event tipleste/reffle #2 172 .
	28 - bus tickets \$210 + diapers \$540 + furniture \$7,391 + infant items \$90 + plants \$146 + Event tickets/raffle \$3,173 +
others \$7,1	57. "Others" includes craft materials, games, misc. garden and outdoor items, etc.
- -	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2012

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization 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.

Hope House of Milwaukee, Inc.		39-1592900
Part III Line 4d Description of Other Program Services	Expenses	
Protective Payee Services for disabled adults and families	(Expenses \$141,440 including Grant of \$ 1	10,360) (Revenue \$)
The Protective Payee Program is designed to provide finance	ial oversight, budget counseling and supp	ortive case management for individual
with severe mental illness and other disabilities who need th	nat little extra support to prevent homeless	ness. The program provides careful
financial oversight for individuals with limited disability inco	me, so that the individual stays in housing	and has the resources to provide for
basic needs.		
Homeless Management Information Systems	Expenses \$90,177 including Grant of \$) (Revenue \$)
Single Room Occupancy-Surgeon's Quarters	(Expenses \$51,980 including Grant of \$ 5	,280) (Revenue \$)
Angle of Hope Clinic-Medical Services	(Expenses \$14,337 including Grant of \$ 1	,327) (Revenue \$)
Shining Star-Youth Education Program	(Expenses \$129,155 including Grant of \$	17,232) (Revenue \$)
Community Outreach	Expenses \$74,149 including Grant of \$ 3	2,021) (Revenue \$)
Mercy Housing-Johnston Center Resident Services	Expenses \$152,526 including Grant of \$ 3	,910) (Revenue \$)
Homelessness Prevention & Rapid Re-Housing	(Expenses \$39,008 including Grant of \$ 1	,005) (Revenue \$)
Path to Progress	(Expenses \$7,236 including Grant of \$ 2,	739) (Revenue \$)
Special Case Management	(Expenses \$4,132 including Grant of \$) (Revenue \$)
Total Other Program Services Part III Line 4d	(Expenses \$704,140 including Grant of \$ 7	3,874) (Revenue \$)
Part VI Section B. Policies		
Line 11b - At the time of annual financial audit approval pro	cess the 990 form is presented to the exect	tive Director, Finance-Personnel
Committee and Board of Directors.		
Line 12c - Board member sign acknowledgement of receipt	of policy, Board signs off on purchases mo	ore than \$5,000 including monitoring
of vendor.		
Line 15a and Line 15b - The organization monitors local way	ge studies issued by the NonProfit Center o	of Milwaukee and the salary range
for officers of similar sized non-profits operating in Souther	astern Wisconsin.	
Part VI Section C. Disclosure		

HOPE HOUSE OF MILWAUKEE, INCORPORATED

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Independent Auditor's Report

Board of Directors
Hope House of Milwaukee, Incorporated

Report on the Financial Statements

We have audited the accompanying financial statements of Hope House of Milwaukee, Incorporated which comprise the balance sheets as of December 31, 2012 and 2011, and the related statements of activities and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair representation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Organization's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Hope House of Milwaukee, Incorporated as of December 31, 2012 and 2011, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America

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Board of Directors
Hope House of Milwaukee, Incorporated

Supplementary and Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedules of unrestricted functional revenue and expenses and program revenue and expenses are presented for purposes of additional analysis and are not a required part of the basic financial statements. The accompanying schedule of expenditures of federal and state awards is presented for purposes of additional analysis as required by U.S. Office of Management and Budget Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, and in accordance with the *State Single Audit Guidelines* and is also not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the basic financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated April 11, 2013, on our consideration of Hope House of Milwaukee, Incorporated's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Hope House of Milwaukee. Incorporated's internal control over financial reporting and compliance.

RITZ HOLMAN LLP

Certified Public Accountants

Milwaukee, Wisconsin April 11, 2013

HOPE HOUSE OF MILWAUKEE, INCORPORATED BALANCE SHEETS DECEMBER 31, 2012 AND 2011

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		2012		2011
CURRENT ASSETS Cash and Cash Equivalents	\$	369,443	\$	366,898
Accounts Receivable		65,155		46,175
Grants Receivable		268,803		212,306
Investments		100,544		100,000
Inventory		21,642		17,647
Prepaid Expenses		9,059		6,406
Total Current Assets	\$	834,646	\$	749,432
FIXED ASSETS	•	10.000	•	40.000
Land	\$	40,000	\$	40,000
Building and Improvements		2,233,413		2,223,383
Furniture and Equipment		382,234		375,745
Less: Accumulated Depreciation	_	(1,762,566)		(1,656,526)
Total Fixed Assets	<u>\$</u>	893,081	<u>\$</u>	982,602
OTHER ASSETS	Œ	64,564	œ	63,502
Cash - Protective Payee Accounts Total Other Assets	<u>\$</u> \$	64,564	<u>\$</u> \$	63,502
Total Other Assets	Ψ_	04,304_		
TOTAL ASSETS	<u>\$</u>	1,792,291	<u>\$</u>	1,795,536
LIABILITIES AND NET ASSETS				
CURRENT LIABILITIES				
Accounts Payable	\$	32,638	\$	21,956
Accrued Payroll		51,922		55,365
Accrued Vacation		10,725		12,442
Current Portion of Long-Term Liabilities		5,714		5,289
Total Current Liabilities	<u>\$</u>	100,999	\$	95,052
LONG-TERM LIABILITIES				
Capital Leases	\$	20,327	\$	25,616
Less: Current Portion of Capital Leases		(5,714)		(5,289)
Total Long-Term Liabilities	\$	14,613	\$	20,327
OTHER LIABILITIES	_			00.500
Protective Payee Liability	\$ \$ \$	64,564	\$	63,502
Total Other Liabilities	\$	64,564	\$	63,502
Total Liabilities	<u>\$</u>	180,176	\$	178,881
NET ASSETS		4 577 000	_	4 500 504
Unrestricted	\$	1,577,966	\$	1,599,534
Temporarily Restricted	_	34,149	_	17,121
Total Net Assets	<u>\$</u>	1,612,115	\$	1,616,655
TOTAL LIABILITIES AND NET ASSETS	<u>\$</u>	1,792,291	\$	1,795,536

The accompanying notes are an integral part of these financial statements.

HOPE HOUSE OF MILWAUKEE, INCORPORATED STATEMENTS OF ACTIVITIES FOR THE YEARS ENDED DECEMBER 31, 2012 AND 2011

				2012						2011		
			To	emporarily			-	_	To	emporarily		
	ι	Inrestricted		Restricted		Total	L	Inrestricted	F	Restricted		Total
REVENUE												
Department of Housing and												
Urban Development												
Supportive Housing Program	\$	560,757	\$		\$	560,757	\$	584,741	\$		\$	584,741
Homeless Management												
Information System		63,824				63,824		67,160				67,160
Supportive Services -												
Single Room Occupancy Program		29,260				29,260		31,423				31,423
City of Milwaukee												
Shelter Grant		110,694				110,694		96,520				96,520
Community Organizer		42,471				42,471		44,563				44,563
HPRP Families		42,994				42,994		72,673				72,673
Youth Program		27,978				27,978		27,233				27,233
Emergency Shelter Grant		95,310				95,310		86,971				86,971
Emergency Transitional Housing		21,140				21,140						
Outreach Community Health Center												
State Shelter		19,900				19,900		21,664				21,664
Angel of Hope Clinic		9,995				9,995		10,000				10,000
Department of Public Instruction		23,386				23,386		23,979				23,979
Mercy Housing		141,534				141,534		141,534				141,534
Milwaukee County -												
Department of Health Services												
Adult Service		20,482				20,482		20,482				20,482
Community Advocates		·				•						
Protective Payee		97,049				97,049		96,826				96,826
Emergency Shelter Grant		23,206				23,206		28,945				28,945
Emergency Food and Shelter		20,413				20,413		21,174				21,174
Brighter Futures		73,002		-		73,002		71,436				71,436
Wisconsin Housing and Economic		, 0,000				,		,				,
Development Authority		6,000				6,000						
Hunger Task Force		16,781				16,781						
Other Governmental Grants		19,969				19,969		13,447				13,447
Other Service Grant - Cardinal		4,167				4,167						
Community Shares		13,468				13,468		14,869				14,869
Contributions		386,514		34,149		420,663		393,252		17,121		410,373
Interest Income		616				616		109				109
Donated Goods and Services		399,390				399,390		360,025				360,025
Other Income		2,109				2,109		282				282
Loss on Disposal of Fixed Assets		(2,053)				(2,053)						
Net Assets Released From Restrictions		17,121		(17,121)		(2,000)		27,439		(27,439)		
Total Revenue	\$	2,287,477	\$	17,028	\$	2,304,505	\$	2,256,747	\$	(10,318)	<u>s</u>	2,246,429
, otal (torolla)	<u>~</u>		<u> </u>	17,020	<u> </u>	2,001,000	<u> </u>		<u> </u>	(10,010)	Ť	2,2 10,120
EXPENSES												
Program Services	\$	2,020,269	\$		\$	2,020,269	\$	1,994,890	\$		\$	1,994,890
Management and General		209,310				209,310		203,857				203,857
Fund-Raising		79,466				79,466		52,637				52,637
Total Expenses	\$	2,309,045	\$		\$	2,309,045	\$	2,251,384	\$		\$	2,251,384
CHANGE IN NET ASSETS	\$	(21,568)	\$	17,028	\$	(4,540)	\$	5,363	\$	(10,318)	\$	(4,955)
Net Assets, Beginning of Year	_	1,599,534		17,121	_	1,616,655	_	1,594,171		27,439		1,621,610
NET ASSETS, END OF YEAR	\$	1,577,966	\$	34,149	\$	1,612,115	\$_	1,599,534	\$	17,121	\$	1,616,655

The accompanying notes are an integral part of these financial statements.

HOPE HOUSE OF MILWAUKEE, INCORPORATED STATEMENTS OF CASH FLOWS FOR THE YEARS ENDED DECEMBER 31, 2012 AND 2011

		2012		2011
CASH FLOWS FROM OPERATING ACTIVITIES Change in Net Assets	\$	(4,540)	\$	(4,955)
Adjustments to Reconcile Change in Net Assets to Net Cash Provided by Operating Activities				
Depreciation		107,837		107,520
Loss on Disposal of Fixed Assets		2,053		·
(Increase) Decrease in Accounts Receivable		(18,980)		2,295
Increase in Grants Receivable		(56,497)		(435)
Increase in Inventory		(3,995)		(2,616)
(Increase) Decrease in Prepaid Expenses		(2,653)		3,205
(Increase) Decrease in Other Assets				13,213
Increase (Decrease) in Accounts Payable		10,682		(5,396)
Increase (Decrease) in Accrued Payroll		(3,443)		2,810
Increase (Decrease) in Accrued Vacation		(1,717)		1,844
Net Cash Provided by Operating Activities	\$	28,747	\$	117,485
CASH FLOWS FROM INVESTING ACTIVITIES				
Purchase of Fixed Assets	\$	(20,369)	\$	(17,017)
Purchase of CD Investment		(544)	_	(100,000)
Net Cash Used by Investing Activities	<u>\$</u>	(20,913)	<u>\$</u>	(117,017)
CASH FLOWS FROM FINANCING ACTIVITIES				
Payments on Mortgage	\$		\$	(34,400)
Payments on Capital Lease		(5,289)		(3,600)
Net Cash Used by Financing Activities	\$	(5,289)	\$	(38,000)
Net Increase (Decrease) in Cash and Cash Equivalents	\$	2,545	\$	(37,532)
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR		366,898	_	404,430
CASH AND CASH EQUIVALENTS AT END OF YEAR	<u>\$</u>	369,443	\$	366,898
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION Interest Paid	\$	1,809	\$	2,162

NOTES TO THE FINANCIAL STATEMENTS

DECEMBER 31, 2012 AND 2011

HOPE HOUSE OF MILWAUKEE, INCORPORATED NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2012 AND 2011

NOTE A - Summary of Significant Accounting Policies

Organization

Hope House of Milwaukee, Incorporated (the "Organization") is a not-for-profit corporation organized under the laws of the State of Wisconsin The mission of the Organization is to end homelessness and create healthy communities within the city of Milwaukee

Financial Statement Presentation

The Organization follows accounting standards contained in the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) The ASC is the single source of authoritative accounting principles generally accepted in the United States (GAAP) for nongovernmental entities.

Cash and Cash Equivalents

The Organization considers all highly liquid debt instruments with original maturities of three months or less to be cash equivalents.

The Organization currently services protective payee accounts. Included in the protective payee accounts is cash, which is required to be held in a separate bank account. Restricted cash as of December 31, 2012 and 2011 was \$64,564 and \$63,502, respectively.

Fixed Assets

Fixed Assets are recorded at cost. Depreciation is computed on a straight-line basis over the estimated useful lives of buildings (27 years), improvements (5 to 27 years) and furniture and equipment (3 to 10 years). Equipment under capital lease obligations is amortized on the straight-line method over the shorter period of the lease term or the estimated useful life of the equipment. The Organization capitalizes all fixed assets greater than \$1,500.

Accounts Receivable

Accounts and grants receivable are considered fully collectible, therefore, no allowance for doubtful accounts is considered necessary. It is the policy of the Organization to write off doubtful amounts directly to expense when deemed uncollectible

Inventory

Donated product inventory is computed using the average wholesale value of one pound of product and the number of cases of formula as reported by a local food pantry.

Basis of Presentation

The Organization reports information regarding its financial position and activities according to three classes of net assets unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. Assets of the restricted classes are created only by donor-imposed restrictions.

HOPE HOUSE OF MILWAUKEE, INCORPORATED NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2012 AND 2011

NOTE A - Summary of Significant Accounting Policies (continued)

Contributions

All contributions are considered available for the Organization's general programs unless specifically restricted by the donor. Amounts received that are designated for future periods or restricted by the donor are reported as temporarily or permanently restricted support and increase the respective class of net assets. Contributions received with temporary restrictions that are met in the same reporting period are reported as unrestricted support and increase unrestricted net assets. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the Statement of Activities as net assets released from restrictions. Investment income that is limited to specific uses by donor restrictions is reported as increases in unrestricted net assets if the restrictions are met in the same reporting period as the income is recognized.

Contract Services

Contract Services revenue represents grants and contracts with various funding sources. Revenue is recognized on cost reimbursement contracts in the accounting period when the expenses are incurred. Revenue is recognized on performance contracts in the accounting period based on the accomplishment of contract objectives without regard for expenditures. Grants and contracts received by the various funding sources remain subject to audit for all years not closed by grantors. In the opinion of management, no provision is needed for any adjustments that may result from such audits

Contributions of Volunteer Services and Personal Property

The accompanying financial statements reflect the value of individuals providing the Organization with certain specialized skills (i.e. doctor or teacher). Contributed volunteer services are recorded based upon the actual number of hours provided at the volunteer's prevailing hourly rates. Other unpaid volunteers provide services to the Organization, but these services do not meet the criteria for recognition as contributed services and, therefore, are not reflected in the accompanying financial statements.

Donations of personal property are recorded as contributions based upon estimated fair market value Personal property includes items such as equipment, food and clothing.

The accompanying financial statements include volunteer services and personal property as donated goods and services and amounted to \$399,390 and \$360,025 for the years ended December 31, 2012 and 2011, respectively. Included in this amount is \$21,642 and \$17,647, which is reflected as inventory on the financial statements as of December 31, 2012 and 2011, respectively. All donations, including those classified as general and administrative, are passed through to clients.

Allocation of Functional Expenses

Functional expenses are allocated to each program based on direct expenditures incurred. Any expenditure not directly chargeable is allocated to the programs based on the (1) appropriate level of employee full-time equivalents worked within that program or (2) square footage available to the applicable program

HOPE HOUSE OF MILWAUKEE, INCORPORATED NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2012 AND 2011

NOTE A - Summary of Significant Accounting Policies (continued)

Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

NOTE B - Grants Receivable

Grants Receivable consists of the following as of December 31:

Source	<u>2012</u>	<u>2011</u>
U S. Department of Housing and Urban Development	\$ 80,464	\$ 89,122
City of Milwaukee	72,849	38,368
Outreach Community Health Center	1,235	4,247
Department of Public Instruction	4,361	3,526
Mercy Housing	19,812	3,695
Community Advocates	82,150	66,395
Department of Health and Human Services	3,414	3,414
Hunger Task Force	2,851	
Other Government	1,667	<u>3,539</u>
Total	<u>\$268,803</u>	<u>\$212,306</u>

NOTE C - Temporarily Restricted Net Assets

At December 31, 2012 and 2011, the Organization had temporarily restricted net assets that were available for the following purposes:

	<u>2012</u>	<u>2011</u>
Protective Payee	\$	\$ 10,000
Shining Star Food Pantry	29,291 <u>4,858</u>	
Total	<u>\$ 34,149</u>	\$ 17,121

NOTE D - Concentration of Risk

The Organization received grants from various agencies whose programs rely on the availability of funding from the United States government. For the years ended December 31, 2012 and 2011, approximately 64% and 66%, respectively, of the Organization's revenue was from sources which relied on revenue from the United States government.

HOPE HOUSE OF MILWAUKEE, INCORPORATED NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2012 AND 2011

NOTE E - Operating Leases

The Organization leases certain office equipment under terms of non-cancelable operating leases ending at various times. Rent expense for the office equipment was \$12,357 and \$10,322 for the years ended December 31, 2012 and 2011, respectively.

The following is a schedule, by years, of the future minimum payments required under the leases as of December 31, 2012:

<u>Year</u>	<u>Amount</u>
2013	\$ 2,895
2014	1,879
2015	1,371
2016	686
Total	\$ 6,831

NOTE F - Capital Leases

During 2011, the Organization entered into two capital lease obligations. The cost of \$29,216 is included in fixed assets. Total accumulated depreciation was \$10,172 and \$4,329 for the years ended December 31, 2012 and 2011, respectively. Amortization of the capital lease is included in depreciation expense for the years ended December 31, 2012 and 2011

Future minimum lease payments are as follows:

<u>Year</u>	<u>Amount</u>
2013 2014 2015 2016 Less amount representing interest	\$ 7,098 7,098 7,098 1,754 (2,721)
Total	\$ 20.327

NOTE G - Retirement Plan

The Organization made a discretionary payment of the lesser of three percent of an employee's gross wages or the employee's annual contribution to the plan. Employer contributions to the plan during the years ended December 31, 2012 and 2011, were \$17,030 and \$18,602, respectively.

HOPE HOUSE OF MILWAUKEE, INCORPORATED NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2012 AND 2011

NOTE H - Line of Credit

The Organization has a \$100,000 line of credit which matures November 15, 2013. Amounts borrowed under this agreement bear interest at the prime rate plus 2.75%, but not less than 5.0%. The line of credit is secured by the Organization's investments. As of December 31, 2012 and 2011, none of the line of credit was drawn upon.

NOTE I - Legal Matter

The Organization is involved in a litigation in the State of Wisconsin Department of Workforce Development Equal Rights Division with an individual who is alleging violation of the Wisconsin Fair Housing Act by the Organization. An evaluation of the likelihood of a favorable or unfavorable outcome is unable to be determined and as such no contingent liability is recorded as of December 31, 2012.

NOTE J - Income Taxes

The Organization is exempt from income tax under Section 501(c)(3) of the Internal Revenue Code and is classified as other than a private foundation. Management has reviewed all tax positions recognized in previously filed tax returns and those expected to be taken in future tax returns. As of December 31, 2012 and 2011, the Organization had no amounts related to unrecognized income tax benefits and no amounts related to accrued interest and penalties. The Organization does not anticipate any significant changes to unrecognized income tax benefits over the next year. Federal tax returns for the years 2009 and beyond remain subject to examination by the internal revenue service.

NOTE K - Subsequent Events

The Organization has evaluated events and transactions occurring after December 31, 2012 through April 11, 2013, the date the financial statements were available to be issued, for possible adjustments to the financial statements or disclosures The Organization has determined that no subsequent events need to be disclosed.

HOPE HOUSE OF MILWAUKEE, INCORPORATED SCHEDULE OF UNRESTRICTED FUNCTIONAL REVENUE AND EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2012

REVENUES Department of Housing and Urban Development	Transitional	HMIS	Threshold - Emergency	SRO	Food Service	Angel of Hope Clinic	Star	Path to Progress	Community Outreach	Protective Payee	Mercy Housing	Re-Housing	Special Case Management	General	Fund- Raising	Total
Department of Housing and Urban Development																
Supportive Housing Program \$	\$ 757,095	!	i	1		1	I	ı	1	!	1	 •	1	i •		560,757
Information Custom	1	A2 824	!	1	ı	ı	i	ı	I	ł	i	ı	ı	ı	ı	63 824
Homeless Management	l	7	ı	i	ŀ											
Information System Expansion	ı	ı	i	I	1	i	I	I	ı	ı	ŀ	1	ı	I	1	i
Supportive Services -																
Single Room Occupancy Program	i	!	i	29,260	1	ı	ı	I	ı	ł	1	i	1	i	i	29,260
City of Milwaukee																
Shelter Grant	90,059	i	20,635	j	i	ļ	1	i	ı	I	l	1	i	I	ı	110,694
Community Organizer	1	!	ı	i	į	!	!	i	42 471	i	I	i	I	I	1	42 471
HPRP Families	ı	7,082	i	ı	!	ı	ı	•	ı	1	i	35,912	i	i	ı	42,994
Youth Program	ł	ı	ı	ł	i	i	27,978	ı	ŀ	ı	1	1	I	1	1	27,978
Emergency Shelter Grant	73,967	l	21,343	1	i	i	1	I	!	ı	ŀ	!	i	1	ı	95,310
Emergency Transitional Housing	11,785	!	9,355	1	ı	1	ı	I	ŀ	i	ì	i	ı	1	ı	21,140
Outreach Community Health Center																
State Shelter	ı	1	19,900	!	i	i	1	i	i	ı	l	i	I	I	i	008.61
Angel of Hope Clinic	ı	1	i	l	1	9,995	i	i	i	i	ł	I	I	ł	ı	666
Department of Public Instruction	23 386	ł	i	i	1	!	i	i	ł	I	ŀ	i	i	i	i	23,386
Mercy Housing	i	i	i	i	i	ı	i	i	ì	I	141,534	i	I	i	i	141,534
Milwaukee County - DHHS			00,00													20.482
Adult Service	ł	i	20 482	ı	ŀ	I	i	ı	i	I	i	ŀ	I	ł	i	794 07
Community Advocates			i	1	1	!	1	i	ı	97 049	1	!	ı	1	ı	97 049
	8	l		ı	1								. :	ļ	1	300 20
Emergency cheren Grant	201.0	!	13,423	I	I	!	1	1	! !	!	1	l i		1		20.413
Detailed States	i	i	7 t.07	1	1	! !	23.002	: 1	: !	: 1	i	!	1	ı	l	73 002
Digital Fateres Mecones Housing and Economic	I	i	I	I	l	ı	700'0	l	İ	I	I		l			
Development Authority	6.000	!	ı	ı	I	i	l	l	i	i	ı	i	i	I	1	6,000
Hunger Task Force	16,781	i	ŀ	ł	I	ı	ı	ı	i	1	i	!	i	l	!	16,781
Other covernmental grants		19 969	į	!	ŀ	ı	ł	1	i	ı	I	i	i	ł	i	19,969
Other service grant - Cardinal	i	į	i	ı	1	i	ı	!	i	i	i	i	4 167	i	ı	4,167
Community Shares	i	i	1	i	1	i	i	1	ı	ı	1	i	I	i	13,468	13,468
Contributions	98 080	ŀ	25.250	13 750	10 132	i	23 785	i	ł	ı	7,320	l	I	208,107	8	386,514
Interest income	ı	1	i	i	i	1	ł	!	i	i	i	i	ı	616	1	919
Donated goods and services	82,157	ł	27,497	5,279	200,544	1,327	19,621	2,114	32 646	10 360	4,010	1,005	i	12,830	ı	399,390
Other income	ı	1	1	ł	ı	1	i	135	i	i	I	1	i	1,974	1	2,109
Loss on disposal of fixed assets	i	I	i	1	ı	ŀ	i	I	I	!	i	Ì	i	(2.053)	I	(2,053)
Net Assets Released From					!											į
Restrictions	1	1	ı	1	7 121			1		10,000		!				17,121

HOPE HOUSE OF MILWAUKEE, INCORPORATED SCHEDULE OF UNRESTRICTED FUNCTIONAL REVENUE AND EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2012

	Chrysalis-						Angel of	<u>o</u>		>	Protective				Management and	Fund.	:
	Transitional	<u> </u>	1	-		•		!		3	i .	!	Ke-Housing	Aanagement	General	Kaising	l Otal
Total Revenue (Brought Forward)	\$ 972,755	_	80,875 \$	178 298 \$	48 289	217,797	11,322 \$	144,386 \$	2,249 \$	75,117	117 409 \$	152,864 \$	36,917 \$	4,167	\$ 221,474	\$ 13,558 \$	2,287,477
EXPENSES																	
Salaries and wages	\$ 519,401	۰,	61,898 \$	96,134 \$	33,238 \$	2,860 \$	7,179 \$	82 940 \$	11,192 \$	31,596 \$	86 848 \$	113,458 \$	24,193 \$	2,702	\$ 2.911	\$ 60,507 \$	1,137,057
Retirement			882	978	1,151	8	1	1,037	220	316	1 514	3 234	i	1	8	169	17 030
Payroll taxes	37,941		4 624	7,073	2,413	213	\$49	6,255	836	2,285	6 287	8,166	1 684	187	454	4,526	83,493
Unemployment insurance	7,094		816	1 475	334	2 :	8	1,455	18	494	891	1,372	388	11	96	685	15 690
Worker compensation	14,065		1,975	2,677	1,069	6 5	237	1,901	113	955	2,541	3,370	977	26	8 8	1 899	31,785
Health, dental, disability ins	83,966		6,370	13,824	7,622	272	d.	5,204 409	2 65	6 633	15,744	27 738	66./ 6	1,145	8	5,620	185,473
Iraining	659		٠,	8 K	1 8	1 5	۱ 4	804	} •	1 5	9	3 5	1 5	۱۹	25.20	l	1,509
Total amployee expenses	671.480		76 905	122 256	46 792	3 505	8 165	99 2 10	13 310	42.466	117 741	158.759	37.964	4 132	4.980	73 406	1.481.071
Outside Services			200		-		3			}				<u>.</u>			
Professional fees	!	~	8,820	ı	ı	i	I	200	i	ı	9,640	i	i	!	2 500	į	21 160
Audri fees	7,644	_	300	882	ı	ı	ı	2 8	96	i	I	1	ı	1	582	1	9,800
Insurance	10,992	٠.	434	1,446	ı	434	289	289	145	i	434	i	I	1	1	ı	14,463
Advertising	1		1	i	ı	ı	i	!	!	i	i	!	l	l	110	i	110
Recrutment	162	۲.	i	28	ı	20	i	S S	i	•	i	4	i	i	275	ı	575
Membership, dues and fees	43		ļ	Ξ	ı	i	i	S	i	225	ı	1	1	1	4,718	1	5 047
Subscriptions	ı		1	i	i	i	1	ı	i	i	ŀ	ı	i	ŀ	98	43	139
Bank fees and interest	1,375	٠,	3	181	ı	Z	1	36	92	ŀ	554	ı	ł	1	2,569	i	4,841
Total outside services	20,216		809'6	2,548	ı	909	289	821	359	225	10,628	4	i	i	10,850	43	56 135
Operating Expenses			!		•	•		ì		•		ç				;	,
Food-penshable and non-penshable	31,891		6	9.247	232	₹	ı	8	i	200	l	2 5	ł	i	212	8	95,030
General program expenses	S	. ~	į	62 83	1 5	! 5	18	000	1 \$	1 5	į	5 5	♀	i :	£,03	! #B !	5,2/3 5,786
Office supplies	80		1065	8 1	S 1	ā i	8 1	2 1	2	9 1	7	5 !	2	1	3512	058	5.427
Postage solitable	1 8		3 1	1	! !	1	i !	2	i I	9	640		20	i I	286	1.871	2.917
Printing/publication	3 !		i i	۱ 1	! !			1	 	3 !	632	: !	} !	I	89	674	1.374
Total operating expenses	32.672		1.327	9 860	765	145	69	1,198	5	168	1,729	449	39	ı	7,161	5,164	61,479
Client Expenses			<u>!</u>												-		
Adult education fees	ı		ł	ŀ	I	1	i	i	180	ı	1	i	i	i	l	i	180
Youth education field trip/workshop	1		ł	i	1	I	ì	8 803	i	ł	i	ł	i	J	1	i	8,803
Beneficiary supplies	291	_	i	259	ı	1	i	i	1	5	7,038	505	i	i	1	ł	8,108
Transportation assistance	3,747	_	ŀ	3 500	ı	ı	i	6,732	ŀ	i	ı	866	I	i	i	ı	14,977
Rent assistance	1		ı	1	ì	l	l	!	1	1	•	I	I	1	i	i	I i
Clothing assistance	8		i	73	1 :	1	i	i	1	ł	l ;	1 ;	1 ;	ı	1 1	ı	6/
Donated services and supplies	82,158	~	i	27,397	5,280	198 939	1 327	17,330	2,739	32 020	10,360	4 010	1,005	I	12,830	ı	395,395
Total client expenses	86 246	co.	i	31,185	5 280	198 939	1,327	32,865	2 919	32 035	17,398	5,513	1,005	i	12,830	į	427,542
Building Operating Expenses	10.407		758	2 5.45	t	759	ş	417	252	1	759	i	i	ı	ı	1	25 640
Building maintenance services	28.516		2 2	3.057	; 1	974	611	612	306	ł	917	ı	ı	!	i	i	35 910
Ktchen supplies	89		: 1	1	ı	1	1	ı	i	i	i	1	1	1	i	ł	89
Equipment	1.956		1.520	651	i	i	i	4,539	i	i	ı	1	i	1	61	804	9,531
Equipment maintenance	4,465		114	680	ı	174	ı	116	28	i	114	ı	i	I	238	1	5 959
Equipment rental	10 174	_	284	1,424	65	432	12	268	133	824	584	i	!	ł	572	49	14 521
Storage rent	•		ı	i	ı	i	i	ı	ı	i	i	i	ı	i	i	!	ì
Furnishings	7,568	•	ŀ	2,086	ì	I	ł	i	I	!	i	i	I	i	1	ı	9 654
Telephone	11,397		986	1,413	461	420	280	954	140	461	1,686	967	i	I	800	i	19,975
Internet services	3,815		151	205	1	151	ì	9	္မွ	i	151	!	l	ł	630	i	5,550
	36,612		1,445	4.817	l	1,445	963	964	482	1	1,445	1	1	!	1 8	ı	48,173
Depreciation	81,965		53	10,750	L	3 225	2,115	2222	1,075	1	26.	1 5	i	i	6,380	1 8	707,837
Total Expenses	\$ 1 016 637	_	94 078	27,925	53.420 \$	210,677 \$	14.337 \$	144.386 \$	19.094	76.902	152.904 \$	165 728 \$	39 008	4.132	\$ 44.502	\$ 79.466 \$	2,309,045
	1				i												
CHANGE IN NET ASSETS	\$ (43 882)		(3 203) \$	(15,476) \$	(5,131) \$	7,120	(3015) \$	1	(16,845)	(1,785) \$	(35,495) \$	(12,864) \$	(2,091)	35	\$ 176,972	\$ (65,908) \$	(21.568)
CAPITAL EXPENSES	\$ 5,339	\$	ľ	4 200 \$	i	!	1	4 341 \$	ı	1	1	!	1	i 	\$ 6.489	s	20 369

HOPE HOUSE OF MILWAUKEE, INCORPORATED SCHEDULE OF UNRESTRICTED FUNCTIONAL REVENUE AND EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2011

Figure F		Chrysalis-		Threshold -		US Food Pantry	Angel of	Shining	Path to	Community	Protective	Mercy		Management and	Fund-	
The state of the s		Transitional	HMIS	Emergency	SRO	Food Service	Hope Cinic	Star	Progress	Outreach	Payee	Housing	Re-Housing	General	Raising	Total
Frequency 5 64,356 5 64,569 5 7,185 5 7,185 5 7,185 6 7,185 6 7,185 6 7,185 6 7,185 6 7,185 7	EVENUES															
Part Part	Department of Housing and															
Principle of the control of the cont	Urban Development					•							•			504 744
The state of the s	Supportive Housing Program				•	l v	!	282		i	!	i		l -	i	304,140
primaria (marine) 10-10-10-10-10-10-10-10-10-10-10-10-10-1	Total Samuel Samuel		67 150			ļ	1	1	1	1	ı	1	ļ	1	ı	67,160
The state of the	Injointailor System	Ì	3	i	i											
teath companion begans at the continue of the	חסוופופס ואופוופלטוויפויי										!	ļ	1	١	1	ı
Total Contro	Information System Expansion	I	i	I	!	I	ŀ	i	i	i	I	i	i	ľ	I	I
Note 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	Supportive Services -															
Fine Continuo Continu	Single Room Occupancy Program	i	:	1	31,423	i	l	I	i	i	ŀ	i	l	ı	ŀ	51,423
76410	City of Milwaukee															
14,304	Shelter Grant	76,410	i	20,110	1	i	!	i	ł	i	•	I	i	1	ı	96,520
14,936	Community Organizer	!	l	!	1	i	I	I	i	44,563	i	ı	i	I	1	44,563
74,936	HPRP Families	i	4,031	I	i	I	1	i	i	1	!	1	68,642	l	I	72,673
74,936 — 12,035 — 10,005 — 10,000 — 10,	Youth Process	i	. 1	i	ļ	1	Ĭ	27,233	i	ı	1	i	1	i	İ	27,233
2.3.979	Emergency Shelter Grant	74.936	i	12.035	I	i	I	ŀ	I	i	I	i	l	i	1	86,971
23.979	Outreach Community Health Center															
HS HS	State Shelter	i	I	21,664	!	t	ı	I	-	i	1	i	i	l	i	21,66
HS HS LS 29.99 LS 20.482 L	Angel of Hope Clinic	i	i	1	i	i	10,000	i	ł	i	1	ı	i	i	ı	10,000
HSS	Department of Public Instruction	23,979	i	I	i	i	ł	ı	i	i	i	I	i	ł	i	23,979
H4S	Mercy Housing	ł	i	l	I	ł	I	ì	1	i	1	141,534	ł	ì	ı	141,53
17,371	Milwaukee County - DHHS															
17,371	Adult Service	i	ì	20,482	!	1	!	i	I	i	l	i	l	!	!	20,482
Fricant 17,371 — 11,574 — 21,174 — 6 2 6 2 6 2 6 2 6 2 6 2 6 2 6 2 6 2 6	Community Advocates															
r Grant 17,371 — 11,374 — — 21,174 — — 21,174 —<	Protective Payse	1	i	!	ł		i	ŀ	!	!	96,826	ŀ	i	!	I	96,82
Grants	Emergency Shetter Grant	17,371	i	11,574	l	i	•	1	ı	ı	ı	1	i	i	ł	28,945
grants	Emergency Food and Shelter	i	i	21,174	I	l	i	ı	i	l	i	ŀ	i	l	I	21,17
grants — 13,447 — — — — — — — — — — — — — — — — — —	Bughter Futures	i	i	i	l	I	i	71,436	-	l	l	ł	l	i	l	71,43
29,030	Other governmental grants	I	13,447	I	I	l	I	ì	i	I	1	I	l	ı	I	13,447
29,030 — 44,300 1 000 12,926 — 19,304 7,500 — 25 000 — 254,092 100 — 10,543 — 10,543 — 17,472 — 1,733 — 14,746 — 8,915 — 3,300 7,402 — 2,134 — 10,543 — 10,543 — 12,000 — 11,484 — 11,484 — 11,484 — 11,484 — 11,484 — 11,489 § 14,1850 § 14	Community Shares	i	1	ı	!	i	i	ı	i	i	ı	i	l	i	14,869	14 86
91,543 — 21,785 5,512 185,483 — 17,472 1,733 14,746 8,915 3,300 7,402 2,134 — 103 —	Contributions	29.030	1	44,300			i	19,304	7,500	i	25 000	ŀ	i	254,092	9	393,252
91,543 — 21,785 5,512 185,483 — 17,772 1,733 14,746 8,915 3,300 7,402 2,134 — — — — — — — — — 103 — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — — <td>Interest income</td> <td>i</td> <td>1</td> <td></td> <td>1</td> <td>i</td> <td>ŧ</td> <td>i</td> <td>ı</td> <td>ł</td> <td>i</td> <td>i</td> <td>i</td> <td>109</td> <td>i</td> <td>109</td>	Interest income	i	1		1	i	ŧ	i	ı	ł	i	i	i	109	i	109
	Donated goods and services	91,543	ŀ	21,785			1	17,472	1,733	14,746	8,915	3,300	7,402	2,134	i	360,025
897,625 \$ 84,638 \$ 173,124 \$ 37,935 \$ 202,364 \$ 10,000 \$ 147,830 \$ 9,412 \$ 59,309 \$ 130,741 \$ 156,318 \$ 76,044 \$ 256,438 \$ 14,969 \$	Other Income	. !	i				i	l	179	I	ı	1	I	103	l	282
8 887,625 \$ 84,638 \$ 173,124 \$ 37,935 \$ 202,364 \$ 10,000 \$ 147,830 \$ 9,412 \$ 59,309 \$ 130,741 \$ 156,318 \$ 76,044 \$ 256,438 \$ 14,969 \$	Loss on disposal of fixed assets	ı	i	i	l	i	i	i	ŀ	I	ı	I	I	l	1	1
and) \$ 897,625 \$ 84,638 \$ 173,124 \$ 37,835 \$ 202,364 \$ 10,000 \$ 147,830 \$ 9,412 \$ 59,309 \$ 130,741 \$ 156,318 \$ 76,044 \$ 256,438 \$ 14,969 \$	Net Assets Released From Restrictions	1	ŀ		1	3,955	•	12,000	!	1	-	11,484		1	i	27,439
\$ 897,625 \$ 84,638 \$ 173,124 \$ 37,835 \$ 202,364 \$ 10,000 \$ 147,830 \$ 9,412 \$ 59,309 \$ 130,741 \$ 156,318 \$ 76,044 \$ 256,438 \$ 14,969 \$	Total Revenue															
_	(Carned Forward)				37,93	s	45		9,412	59,309	130,741			256 438		\$ 2,256,747

HOPE HOUSE OF MILWAUKEE, INCORPORATED SCHEDULE OF UNRESTRICTED FUNCTIONAL REVENUE AND EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2011

	Chrysalis-		Threshold -		,		Angel of	B						D.L.S	5	
	Transitional	HWIS	Emergency	SRO	Food	Food Service Ho	Hope Clinic	Star	Progress	Outreach	Payee	Housing	Re-Housing	General	Raising	Total
Total Revenue (Brought Forward)	\$ 897,625	\$ 84,638	\$ 173,124	4 \$ 37 935	~	202,364 \$	10,000	147,830	\$ 9,412	\$ 59,309	\$ 130,741	\$ 156,318	\$ 76,044	\$ 256,438	\$ 14,969	\$ 2,256,747
EXPENSES																
Employee Expenses				,	,	:						•		44.200	90	44.7 660
Salanes and wages	\$ 521,112	v)	5 91,303	30	s :	2,641	\$ 6Z0'/	82,672	12,669)	3,082	008,111	196,74	95711	50,409	18 602
Keurement	6,199		a	906	3 =	107	637	433	8/6	2.432	6.774	8 536	3 362	718	2 843	84 100
Payroll taxes	701.0S	đ		•	9 9	è	5 5	0.10	£ 8	754.7	127	6,00	300	5 4	2,5	12,746
Unemployment insurance	67/6			6.00	3 :	P (à ;	22.	8 8	7	77.	230,-	3 8	3 5	670	25,57
Worker compensation	10,540		1,74	٠	= 1	2 6	247	4/0'0	67	/90	40,1	705,2	98	B 00	47.0	470.704
Health, dental, disability ins	78,127			, ,	ŝ	AC7	ě	6,00	<u> </u>	CAC D	166,11	60,02	0	730	000	200'0
Training	1				ı	i	!	2	1	6	an .	332	9	3	1 !	2,265
Travel	1,243	1,847			71	121	ĸ	င္က	6	154	3,413	1,074	2,392	238	16	1.84
Total employee expenses	663,113	3 80,313	11,794	4 40,318	18	3,379	7,877	100,271	15,442	46,177	117,656	161,872	74,010	13,918	42,866	1,479,006
Outside Services	•															
Professional fees	í	4.016	i		!	į	I	150	I	I	•	I	1	432	ı	4,598
200	7 600		٥		,	ı	i	190	190	l	1	!	i	279	i	9.500
ייינינו פפא	Ď.				ł		970	2 2	3 5		9				ı	17 201
Insurance	13,141	519	1,728		ı	916	340	280	2	ŀ	S.C.	ŀ	1	1 ;	i	67'/1
Advertising	•		•		i	!	i	I	1	ŀ	i	1	l	175	ł	22
Recruitment	405	5 5	2		ı	ŀ	i	5	ı	ı	!	!	1	i	ı	625
Membership dues and fees	43	88	=	_	1	ı	ı	¥	1	131	ŀ	i	ı	5,253	1,390	6,970
Subscriptions	1				i	i	ł	1	i	I	ł	1	i	25	43	89
Bank fees and interest	1.401		48		1	55	4	37	18	ì	20	i	I	2,650	i	4,449
Total outside services	22.590	9	7		ł	574	350	877	381	131	969	i	1	8,814	1,433	43,676
Operating Expenses	İ															
Food-penshable and non-penshable																
General program expenses	31,448		14,022		231	2,708	i	1,101	i	272	ı	ł	ł	589	200	50,569
Office supplies	128				i	52	ŀ	l	ı	l	!	I	i	1,126	400	1,71
Computer software	275	5 145	505		12	276	8	464	4	126	579	446	89	2,158	1,249	6,534
Postage	1	•		i	i	ı	i	1	!	1	1	I	i	2,654	1,073	3,72,
Printing/publication	90				15	I	ı	15	I	8	480	15	15	237	1,030	1,897
Subscriptions	965		74		ı	22	4	5	7	i	544	I	ı	217	393	1,85
Total operating expenses	32,444	145	14,640		58	3,029	22	1,595	=	458	1,603	461	<u>5</u>	6,981	4,345	66,29
Client Expenses																•
Adult education fees	i			ĺ	;	1	ı	I	437	!	!	ł	i	i	i	437
Youth education field trip/workshop	ı	•		:	ı	l	i	5 481	1	!	I	ı		i	I	5,481
Beneficiary supplies	448	!	. 227	7	ŧ	ı	i	I	9	I	-	1,086	i	i	ŀ	1,77,1
Transportation assistance	2,839		2,730		ı	i	i	5,808	1	!	!	1,260	l	ı	1	12,637
Rent assistance	1	!	•	1	i	1	ļ	l	i	I	1	I	ł	i	I	ı
Clothing assistance		•	•			1	ŀ	1	i	I	i			ŀ	i	•
Donated services and supplies	91,543					183,472	ı	17,317	1,733	14,746	8,915	3,300	7,402	1,584	150	357,409
Total client expenses	94,830	-	. 24,742			183,472	1	28,606	2,186	14,746	8,916			1,584	150	377,742
Building Operating Expenses																
Building supplies	21,102	2 819		9 0	1	819	546	546	273	1	819	i	i	153	1	27,825
Building maintenance services	19,293	3 632	3,112	7	i	632	421	421	210	I	632	ŀ	ì	I	ı	25,35,
Kitchen supplies	149			ı	ı	i	ì	I	ŀ	ł	i	l	I	1 }	I	94.
Equipment	=			;	i	i	i	1,657	i	ŀ	ł	ŀ	i	8	i	2,729
Equipment maintenance	8,786			õ	1	288	i	132	8	I	109		i	309	!	10,63
Equipment rental	12,959	386	1,702	12	ŀ	581	12	339	170	892	387		i	(189)	2 179	19.40
Storage rent	•	i		1	ļ	į	1	ı	i -	23	1	I	i	I	1,655	1,678
Fumishings	1,790				ı	ł	i	I	!	i	i	1		1	i	2,1/3
Telephone	20,219		7		505	773	515	1,063	•	e e e	2,113	550,r		i	1 9	30,943
Internet services	6,021				ł	238	158	158 158		!	867	!	i	۱ ۹	מ	17'0
Ottities	38,472	-		ve «	i	1,439	900	828	•	i	404.	!		7 503	i	47,378
Depreciation	80,679				i :	5,183	2,033	2,123	3 5	1 5	5			260,7		120,101
Total building operating expenses	207,481	.	27,364		6	66, 60	0,000	1,390	2,397	024.)	134 581	460 032	A 81 516	39 806	\$ 52,637	\$ 2251384
Total Expenses	1,020,436	200,12		,	. 	- 1				705,000	ı	,	.			
CHANGE IN NET ASSETS			(0 500)			2 065	010			(0000)	•				•	
	(166,000)	3, 3, (5,123)	_	,	(0,000)	2 822	(2,910)	200.5	(CO2)	(3,023)	3 840)	(12,714)	5 (5,472)	\$ 210,032	3,,000	2000

HOPE HOUSE OF MILWAUKEE, INCORPORATED SCHEDULE OF PROGRAM REVENUE AND EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2012

Program Name : Emergency Shelter

		Actual	A	Approved Budget	/arıance om Budget
REVENUE					
Contributions and donations	\$	52,747	\$	67,272	\$ (14,525)
Grants from government agencies	•	96,250		96,009	241
Department of Human Services revenue		20,482		20,482	
Total Revenue	\$	169,479	\$	183,763	\$ (14,284)
EXPENSES					
Salaries	\$	90,369	\$	90,369	\$
Employee benefits	•	12,356	·	12,356	
Payroll taxes		10,631		10,631	
Professional fees		910		950	(40)
Supplies		589		375	214
Telephone		1,915		2,180	(265)
Postage and shipping		·		50	(50)
Occupancy		21,005		20,605	400
Equipment costs		4,262		3,998	264
Printing and publications				187	(187)
Employee travel		26		100	(74)
Conferences, conventions, and meetings		69		100	(31)
Specific assistance to individuals		36,932		36,957	(25)
Membership dues		11			11
Client transportation		3,500		3,500	
Miscellaneous		2,394		1,405	 989_
Total Expenses	\$	184,969	\$	183,763	\$ 1,206

HOPE HOUSE OF MILWAUKEE, INC. SCHEDULE OF PROGRAM REVENUE AND EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2011

Program Name : Emergency Shelter

		Actual		Approved Budget		/ariance om Budget
REVENUE	•	00.005	•	00.704	•	(40.040)
Contributions and donations	\$	66,085	\$	82,731	\$	(16,646)
Grants from government agencies		86,556		86,912		(356)
Department of Human Services revenue		20,482		20,482		
Total Revenue	<u>\$</u>	173,123	\$	190,125	\$	(17,002)
EXPENSES						
Salaries	\$	91,303	\$	89,960	\$	1,343
Employee benefits		10,784		10,447		337
Payroll taxes		9,683		11,993		(2,310)
Professional fees		970		950		20
Supplies		505		443		62
Telephone		3,373		3,356		17
Postage and shipping				50		(50)
Occupancy		21,456		20,305		1,151
Equipment costs		3,963		3,997		(34)
Printing and publications		74		189		(115)
Employee travel		24		100		(76)
Conferences, conventions, and meetings				200		(200)
Specific assistance to individuals		36,034		45,500		(9,466)
Membership dues		11				11
Client transportation		2,730		1,955		775
Miscellaneous		687		680		7
Total Expenses	\$	181,597	\$	190,125	\$	(8,528)

HOPE HOUSE OF MILWAUKEE, INCORPORATED SCHEDULE OF EXPENDITURES OF FEDERAL AND STATE AWARDS FOR THE YEAR ENDED DECEMBER 31, 2012

Federal Grantor/ Pass-Through Grantor/ Program or Cluster Title	Federal CFDA Number	Pass-Through Entity Identifying Number/ State ID		Federal penditures		Total
FEDERAL EXPENDITURES						
U.S. Department of Agriculture						
State of Wisconsin - Department of Public Instruction Child and Adult Care Food Program	10 558				\$	23,386
Total U.S. Department of Agriculture	10 330				\$	23,386
U.S. Department of Housing and Urban Development						
City of Milwaukee - Community Organizer Community Development Block Grants/Entitlement Grants	14 218		\$	42,471		
City of Milwaukee - Shelter Grant	14210		•	,		
Community Development Block Grants/Entitlement Grants	14 218			110,694		
City of Milwaukee - Youth Programs Community Development Block Grants/Entitlement Grants Total CFDA #14 218	14 218			27,978	\$	181,143
City of Milwaukee - Emergency Shelter Grant						
Emergency Solutions Grant Program	14 231		\$	9,355		
City of Milwaukee - Federal McKinney Emergency Solutions Grant Program	14 231			95,310		
City of Milwaukee - Transitional Housing Program Emergency Solutions Grant Program	14 231			11,785		
Community Advocates - Emergency Shelter/Transitional Housing						
Emergency Solutions Grant Program Total CFDA #14 231	14 231			23,206		139,656
Community Advocates - Protective Payee						
Supportive Housing Program Direct Award - Homeless Management Information System	14 235		\$	97,049		
Supportive Housing Program	14 235			63,824		
Direct Award - SRO Housing Supportive Housing Program	14 235			29,260		
Direct Award - Transitional Housing Program						
Supportive Housing Program Total CFDA #14 235	14 235			560,757		750,890
City of Milwaukee Homelessness Prevention and Rapid Re-Housing- ARRA Total U S Department of Housing and Urban Development	14 257				\$	42,994 1,114,683
U.S. Department of Homeland Security						
Community Advocates - FEMA Emergency Food and Shelter National Board Program - ARRA Total U S Department of Homeland Security	97 024				\$ \$	20,413 20,413
U.S. Department of Health and Social Services						
Community Outreach Health Center - Angel of Hope Clinic						0.005
Consolidated Health Centers State of Wisconsin	93 224				\$	9,995
Community Advocates - Brighter Futures						
Affordable Care Act (ACA) Abstinence Education Program	93 235	437-1001				15,841
State of Wisconsin Community Advocates - Brighter Futures						
Temporary Assistance for Needy Families	93 558	437-1001				8,979
Mitwaukee County Department of Health and Human Services - ESG						•
Foster Care_Title IV-E Total U S. Department of Health and Social Services	93 658				\$	20,482 55,297
TOTAL FEDERAL EXPENDITURES					\$	1,213,779
State Grantor/						State
Pass-Through Grantor/ Program or Cluster Title					Ex	penditures
STATE EXPENDITURES State of Wisconsin						
Community Advocates						
Bnghter Futures		437-1001			\$	48,181
TOTAL STATE EXPENDITURES					<u>\$</u>	48,181

The accompanying note is an integral part of this schedule .

HOPE HOUSE OF MILWAUKEE, INCORPORATED NOTE TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AND STATE AWARDS FOR THE YEAR ENDED DECEMBER 31, 2012

NOTE 1 - Basis of Presentation

The accompanying schedule of expenditures of federal and state awards includes the federal and state grant activity of Hope House of Milwaukee, Incorporated and is presented on the accrual basis of accounting. The information in this schedule is presented in accordance with the requirements of OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations, and the State Single Audit Guidelines Therefore, some amounts presented in this schedule may differ from amounts presented in or used in the preparation of the basic financial statements.



Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance With Government Auditing Standards

To the Board of Directors
Hope House of Milwaukee, Incorporated

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Hope House of Milwaukee, Incorporated, which comprise the balance sheets as of December 31, 2012 and 2011, and the related statements of activities and cash flows for the years then ended and the related notes to the financial statements, and have issued our report thereon dated April 11, 2013.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered Hope House of Milwaukee, Incorporated's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Hope House of Milwaukee, Incorporated's internal control

Accordingly, we do not express an opinion on the effectiveness of Hope House of Milwaukee, Incorporated's internal control

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the Organization's financial statements will not be prevented, or detected and corrected, on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control, that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

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Hope House of Milwaukee, Incorporated Page Two

Compliance and Other Matters

As part of obtaining reasonable assurance about whether Hope House of Milwaukee, Incorporated's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose

TAITZ HOLMAN LLP
Certified Public Accountants

Milwaukee, Wisconsin April 11, 2013



Report on Compliance for Each Major Federal and State Program and Report on Internal Control Over Compliance Required by OMB Circular A-133 and the State Single Audit Guidelines

To the Board of Directors of Hope House of Milwaukee, Incorporated

Report on Compliance for Each Major Federal and State Program

We have audited Hope House of Milwaukee, Incorporated's compliance with the types of compliance requirements described in the *OMB Circular A-133 Compliance Supplement* and the *State Single Audit Guidelines* that could have a direct and material effect on each of Hope House of Milwaukee, Incorporated's major federal and state programs for the years ended December 31, 2012 and 2011 Hope House of Milwaukee, Incorporated's major federal and state programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with the requirements of laws, regulations, contracts, and grants applicable to its federal and state programs

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of Hope House of Milwaukee, Incorporated's major federal and state programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America, the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, and the *State Single Audit Guidelines*. Those standards, OMB Circular A-133 and the *State Single Audit Guidelines* require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal and state program occurred. An audit includes examining, on a test basis, evidence about Hope House of Milwaukee, Incorporated's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal and state program. However, our audit does not provide a legal determination of Hope House of Milwaukee, Incorporated's compliance.

Opinion on Each Major Federal and State Program

In our opinion, Hope House of Milwaukee, Incorporated complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal and state programs for the years ended December 31, 2012 and 2011

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To the Board of Directors of Hope House of Milwaukee, Incorporated Page Two

Report on Internal Control Over Compliance

Management of Hope House of Milwaukee, Incorporated is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered Hope House of Milwaukee, Incorporated's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal and state program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal and state program and to test and report on internal control over compliance in accordance with OMB Circular A-133 and the *State Single Audit Guidelines*, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of Hope House of Milwaukee, Incorporated's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal and state program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal and state program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal and state program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of OMB Circular A-133 and the *State Single Audit Guidelines*. Accordingly, this report is not suitable for any other purpose.

RITZ HOLMAN LLP

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Certified Public Accountants

Milwaukee, Wisconsin April 11, 2013

HOPE HOUSE OF MILWAUKEE, INCORPORATED SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEARS ENDED DECEMBER 31, 2012 AND 2011

A. SUMMARY OF AUDITOR'S RESULTS

Financial Statements

1. Type of auditor's report issued.

Unmodified

Internal control over financial reporting:

a. Material weakness(es) identified?

No

b. Significant deficiencies identified?

None Reported

Noncompliance material to financial statements noted?

No

Federal and State Awards

4. Internal control over major programs:

a Material weakness(es) identified?

No

b. Significant deficiencies identified?

None Reported

Type of auditor's report issued on compliance for major programs.

Unmodified

Federal Awards

6. Any audit findings disclosed that are required to be reported in accordance with Section 510(a) of Circular A-133?

No

- 7. Identification of major federal programs:
 - U.S. Department of Housing and Urban Development **Direct Award** Community Advocates Supportive Housing Program CFDA #14.235
- 8. Dollar threshold used to distinguish between Type A and Type B programs:

Type A - \$300,000 Type B - \$100,000

9. Auditee qualified as low-risk auditee?

No

HOPE HOUSE OF MILWAUKEE, INCORPORATED SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED DECEMBER 31, 2012 AND 2011

A. SUMMARY OF AUDITOR'S RESULTS (continued)

State Awards

10. Any audit findings disclosed that are required to be reported in accordance with *State Single Audit Requirements?*

No

11. Identification of major state programs, not included under federal programs

State of Wisconsin
Department of Health Services
Community Advocates
Brighter Futures

Dollar threshold used to distinguish between Type A and Type B programs
 Type A - \$100,000

Type B - \$25,000

B. FINANCIAL STATEMENT FINDINGS

No matters were reported.

C. FEDERAL AND STATE AWARD FINDINGS AND QUESTIONED COSTS

No matters were reported.

D. OTHER ISSUES

Does the auditor have substantial doubt as to the auditee's ability to continue as a going concern?

No

2 Does the audit report show audit issues (i.e., material noncompliance, non-material noncompliance, questioned costs, material weakness, significant deficiency, management letter comment, excess revenue or excess reserve) related to grants/contracts with funding agencies that require audits to be in accordance with applicable State Single Audit Guidelines?

Department of Children and Families
Department of Health Services
Department of Workforce Development

N/A No

N/A

HOPE HOUSE OF MILWAUKEE, INCORPORATED SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED DECEMBER 31, 2012 AND 2011

3. Was a Management Letter or other document conveying audit comments issued as a result of this audit?

4. Name and signature of partner

5. Date of report

ANDREW C HOLMAN

April 11, 2013