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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

For the 2013 calendar year, or tax year beginning 2013, and ending 20 D Employer identification number C Name of organization Hope House of Milwaukee, Inc. Check if applicable Doing Business As 39-1592900 Address change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Name change Initial return P.O. BOX 04095 414-645-2122 City or town, state or province, country, and ZIP or foreign postal code Terminated G Gross receipts \$ Amended return Milwaukee, WI 53204 Application pending F Name and address of principal officer H(a) Is this a group return for subordinates? Yes Vo No Kenneth Schmidt H(b) Are all subordinates included? Tyes No 209 West Orchard Street, Milwaukee, WI 53204 If "No," attach a list (see instructions) 501(c) (501(c)(3)) ◀ (insert no) ☐ 4947(a)(1) or Tax-exempt status Website: ▶ www.hopehousemke.org H(c) Group exemption number ▶ Form of organization
☐ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation M State of legal domicile Summary Part I Briefly describe the organization's mission or most significant activities: It is the mission of Hope House "To end homelessness and create healthy communities." To this end Hope House provides: emergency and transitional shelter for homeless men, Governance women, and families, permanent housing for homeless individuals, a low-cost medical clinic, and emergency food pantry. 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a). 3 19 Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & 19 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 47 6 Total number of volunteers (estimate if necessary) 5 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 N/A **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 8 2,302,102 2,040,825 9 Program service revenue (Part VIII, line 2g) 0 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) (250,634)(1,437)Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 2,109 3,055 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 2,302,774 1,793,246 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 380,834 333,086 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,470,529 1,360,570 16a Professional fundraising fees (Part IX, column (A), line 11e) . Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 785,714 455,951 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 2,307,314 2,146,284 19 Revenue less expenses. Subtract line 18 from line 12 (4,540)(353,038)Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 1,792,291 1,455,421 21 Total liabilities (Part X, line 26) . . . 180,176 196,344 22 Net assets or fund balances. Subtract line 21 from line 20 1,612,115 1,259,077 Signature Block

	nalties of perjury, I declare that I have examined this return, including accompanying schedules a ect, and complete Declaration of preparer (other than officer) is based on all information of which		ıt
	1. Mara	6-9-14	_
Sign	Signature of officer	Date	
Here	1 taulasmasal, Trensurer		

nere	Type or print name and title	, Masurer			
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date	Check I if self-employed	PTIN
Use Only	Firm's name	Firm's EIN ▶			
	Firm's address ▶		l	Phone no	
May the IRS	discuss this return with the preparer	shown above? (see instructions)			Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form **990** (2013)



Part	III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	. <u>.</u> . 🗸
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:	
	and transitional shelter for homeless men, women, and families, permanent housing for homeless individuals, a low-cost n clinic, emergency food pantry, youth and adult education programs, and protective payee services.	nedical
	chinic, emergency rood pantry, youth and addit 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?	es 🗹 No
	If "Yes," describe these new services on Schedule O	35 <u>M</u> 140
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	es 🗹 No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as me expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations the total expenses, and revenue, if any, for each program service reported	easured by s to others
4a	(Code.) (Expenses \$ 903,570 including grants of \$ 73,160) (Revenue \$	
	Transitional Housing for homeless single adult women and families-Hope House provides transitional housing to 14 single	women
	and 11 families. In 2013, 74% of residents obtained permanent housing upon discharge. In addition, 50% of residents who	
	disabled had obtained employment upon leaving the program, and 97% had utilized 3 or more supportive services during the	
	Fusing best practice research, consumer input, and 27 years experience, Hope House has developed a method that include	es 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	
	Community Base Services Using this method, Hope House has consistently achieved benchmarks that exceed those set to	by the
	Department of Housing and Urban Development for Transitional Housing Programs.	
4b	(Code:) (Expenses \$196,217 including grants of \$23,036) (Revenue \$	
	Emergency Shelter for single adult menThe Threshold Emergency Shelter program is designed to provide short-term shell	lter
	and supportive services to 13 homeless single men at a time. Program Personnel work quickly with the men to develop ga	inful
	employment opportunities and to secure permanent housing. By providing practical, applicable information, education and	
	in a condensed time-frame, men are provided intensive, "life ready" skills in the shortest period possible. The efficient pro	
	moves men into stable housing as swifty as possible, Moreover, they have the necessary resources and tools to help ensu	
	they can maintain their housing. In 2013, 164 single men were served by the Thresholds Programs, and 34% obtained stab	le
	housing upon discharge.	
		·
4c	(Code) (Expenses \$ 175,155 including grants of \$ 167,638) (Revenue \$)
	USS Food Pantry-Food ServicesThe United Southside Food Pantry has developed a multifaceted continuum of services d	lesigned
	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 referral of	
	a positive, proactive and integrative method for recipients to improve and maintain their quality of life. In 2013, total of 3,08	34
	households received emergency food distributions. This amounts to more than 6,253 people, including 4,015 adults and	
	2,238 children.	
		- -
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 594,769 including grants of \$ 69,252) (Revenue \$)	
4e	Total program service expenses ▶ 1,869,711	

Part	Checklist of Required Schedules			
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
1	complete Schedule A	1	√	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
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? <i>If "Yes," complete Schedule D, Part II</i>	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8_		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, 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	√	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	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		✓
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	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	✓	
	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		✓
14 a		14a		1
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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? 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	i	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	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or 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	1	
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		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√
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		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
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		1
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).			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√ √
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	✓	√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? 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 b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 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>		1	
38	Part VI	37	✓	✓
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Form **990** (2013)

Part	V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			_
	Check it Schedule O contains a response of note to any line in this Part V	· · ·	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 6			-
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 47			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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)?	4		/
L	If "Yes," enter the name of the foreign country' ▶	4a		ļ <u> </u>
b	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	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	_		!
	and services provided to the payor?	7a 7b		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		
Ü	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			Ť
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?	7g		✓
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		✓
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			İ
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	-8		√ .
9	Sponsoring organizations maintaining donor advised funds.	00		
a b	Did the organization make any taxable distributions under section 4966?	9a 9b		1
10	Section 501(c)(7) organizations. Enter.	UD.		<u> </u>
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:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			-
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
ь	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
D	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b	i	

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O contains a response or note to any line in this Part VI	See ins	for a	
Secti	on A. Governing Body and Management		Yes	No
4.	Enter the number of veture members of the reversing body at the and of the territory		res	NO
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	l		ļ.,.
3	any other officer, director, trustee, or key employee? 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		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
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:			
a	The governing body?	8a	1	ļ
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	8b	V	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.))
40			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		√
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	1	-
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	110	· ·	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	1
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	ļ
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	√	ļ
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	14	✓	
а	The organization's CEO, Executive Director, or top management official	15a	1	
b	Other officers or key employees of the organization	15b	√	<u> </u>
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 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		√
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
_	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed Wisconsin 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	501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year	erest	policy	y, and
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ► Xuyen Vo, 209 W. Orchard Street, Milwaukee, WI 53204 (414) 645-2122	of the		

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Form	agn	(201	3

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the 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 no	r any relate	d orga	anız	atic	n c	ompe	ensa	ited any curren	t officer, director	r, or trustee.
-				(0	C)			<u> </u>		
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					than one is that		Reportable	Reportable	Estimated
	hours per					or/trust		compensation	compensation from	amount of
	week (list any hours for	유교	Ing	Q.	<u>۵</u>	욕포	Fo	from the	related organizations	other compensation
	related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	다 아	Ö		흥	è co	~	(W-2/1099-MISC)		organization and related
	line)	:rust	1		yee	gg				organizations
		ee	stee			nsa				
				_		8				
(1) Daniel Schley	1									
President	† :	1		1						
(2) Rosemary Morby	1			T						
Vice President	† 	1		1						
(3) Kathy Oman	1			<u> </u>						
Secretary	†	1		✓						
(4) Corina Schoenke	1									
Treasurer		✓		1						
(5) Ivory Britton	1	-	-	-	_					
Board Member		1								
(6) Michelle Kempen	11			Ì						
Board Member	ļ	✓	<u> </u>	_	<u> </u>					
(7) Peter LaBonte	11									
Board Member		✓								
(8) Laurel Nelson-Rowe	11				ļ					
Board Member		/		_	<u> </u>		_			
(9) Brian Peters	11	,								
Board Member		/		_	_				-	
(10) Tim Posnanski	ļ <u>1</u>	,							i	
Board Member		<u> </u>		-	 			· -		
(11) Susan Scot Fry	 1	,								
Board Member	 -	<u> </u>	ļ	 	 -		-			
(12) Paula Smasal	ļ1	/								
Board Member (13) Lindsey Tauber	<u> </u>	 	 	-	├	ļ	-	 		
Board Member	ļ .1	1						1		
(14) Richard Walters	1	 	\vdash	 - 			\vdash	 		
Board Member	 	1			1			1		
Dogra menibei	<u> </u>		L	Ц.,	Ц.	L	Ь	l	<u> </u>	

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yees			lighe	st C	ompensated E	mployees (co	ntınue	ed)		
			i		•	C)								
	(A)	(B)	(do n	ot ch		nori more	e than o	one	(D)	(E) Reportable			(F)	
	Name and title	Average	box,	unles	s pe	erson	is both	an	Reportable				mated ount of	
		hours per week (list any	 	· ·	_	T	or/trust	,- <u>-</u> -	compensation from	compensation f related			ther	
		hours for	or d	nstr	Officer	Key employee	ang H	Former	the	organizations			ensatio	'n
		related organizations	lrec du	ţ	er	em	loye	ner	organization (W-2/1099-MISC)	(W-2/1099-MIS	(C)		n the nization	,
		below dotted	학학	nal		항	e con		(17 2, 1000 111100)			_	related	
		line)	Individual trustee or director	Institutional trustee		99	pen		ì			organ	zation	S
			0	tee			Highest compensated employee							
(15) Jo	hn Herreman	1												
<u>Board</u>	Member		1								\perp			
	nda Culver	11												
	Member		✓			ļ. —		_			-			
	hn Grisson	11	1											
	Member		 	\vdash		\vdash					+			
	m Heeley Member	1	1											
	en Mattison	1	 	\vdash			<u> </u>				+			
	Member	 	1											
	enneth Schmidt	40	<u> </u>							-	\top			
	tive Director	T	İ		✓		1		83,278		0			3,418
	ıyen Vo	35	-											
	nting Coordinator		1		✓				51,877		0		1	4,410
(22)														
			<u> </u>								\perp			
(23)		ļ												
						ļ		ļ						
(24)		 	ļ											
(0.5)											\rightarrow			
(25)		ļ	}											
	Sub total						L	<u> </u>	405.455					7.00
C	Sub-total			•					135,155 0		-			7,828
d	Total (add lines 1b and 1c)	-			•	•			135,155		+			7,828
2	Total number of individuals (including but					ed:	ahove	2) W			1,000,6	of		7,020
-	reportable compensation from the organi		10 11	.000	1101	·ou	above	., ••	no received m	ore triair wrot	,,000 (O1		
		-				_	_						Yes	No
3	Did the organization list any former of									est compens	sated			
	employee on line 1a? If "Yes," complete											3		✓
4	For any individual listed on line 1a, is the													
	organization and related organizations	_					f "Ye		•	edule J for	such			
_	Individual											4		✓
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or indiv	iduai	<u> </u>		
Saction	on B. Independent Contractors	11 103, 0	Jorripi			1001	110 0 1		——————	•	<u> </u>	5		
1	Complete this table for your five highest	compensat	ed inc	dene	end	ent	contr	acto	ors that receive	ed more than	\$100	വാധ വ		
•	compensation from the organization. Rep													ЭX
	year								, .		3-			
	(A)							<u> </u>	(B)			(C)		•
	Name and business add	ress							Description of s	ervices	C	ompens	ation	
NONE														
							_							
<u> </u>			 -			-								
								-						
2	Total number of independent contractor	rs (includir	ng bi	ıt n	ot I	lımıt	ed to	L th	nose listed abo	ove) who				
-	received more than \$100,000 of compens								iodo notou api	3.3, 1110				

Part	VIII	Statement of Revenue		noneo	- بجاف ما مسال برسم	Dort \/III		
		Check if Schedule O contains	a res	ponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ıts	1a	Federated campaigns .	1a	12,386				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	, , ,				
s, G	С	Fundraising events	1c					
ar /	d	Related organizations	1d					
imi	е	Government grants (contributions)	1e	1,278,065	ł			
tion r S	f	All other contributions, gifts, grants,						
ibu'		and similar amounts not included above	1f	750,374				
d C	g	Noncash contributions included in lines 1a		334,309				
	h	Total. Add lines 1a-1f		•	2,040,825			
nue	_			Business Code				
eve	2a							
e.	b							<u> </u>
Ŋi	C							
J Se	d							
Program Service Revenue	e f	All other program service reven						
Proç	g	Total. Add lines 2a–2f		•				
_	3	Investment income (including			-			
		and other similar amounts) .		>	3,085	3,085		3,085
	4	Income from investment of tax-exe	mpt b	ond proceeds ▶				1
	5	Royalties		<u>.</u> >				
		(ı) Rea	d	(II) Personal				
	6a	Gross rents .						1
	b	Less. rental expenses						
	С	Rental income or (loss)		1				
	_d	Net rental income or (loss)	· · ·	>	-			
	7a	Gross amount from sales of (i) Securi	ues	(II) Other				
	ь	Less: cost or other basis						
	"	and sales expenses .						
	С	Gain or (loss)						
	d	Net gain or (loss)						
	"	1101 gain or (1000)	•				•	
- 9 -	- 8a	Gross income from fundraising	- —		-			+
venue		events (not including \$						
		of contributions reported on line 1	c).					
Other Re		See Part IV, line 18	· a					
₹		Less: direct expenses .	. b					
		Net income or (loss) from fundra	_	events . ►				
	9a	Gross income from gaming activ						
	١.	See Part IV, line 19						
		Less direct expenses Net income or (loss) from gamin						
		Gross sales of inventory,	_	ivides .				-
	100	returns and allowances .						
	ь	Less. cost of goods sold .	b					
	C	Net income or (loss) from sales						<u> </u>
		Miscellaneous Revenue		Business Code				
	11a	Returned/Refunded Assistance		541900	130	130		130
	b	Miscellaneous		541900	2,925	2,925		2,925
	С							
	d	All other revenue						
	e	Total. Add lines 11a-11d			3,055			
	12	Total revenue. See instructions	3	▶	2,046,965	6,140		_6,140

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising expenses Do not include amounts reported on lines 6b, 7b, (A) Total expenses (B) Program service expenses (C) Management and general expenses 8b, 9b, and 10b of Part VIII. 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 22 333.086 333.086 Grants and other assistance to governments, organizations, and individuals outside the United States, See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 5 trustees, and key employees 156,433 150,176 6,257 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 7 Other salaries and wages 926,304 867,670 544 58,090 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 12.065 12,016 49 Other employee benefits 9 149,015 145,613 217 3,185 Payroll taxes . . . 10 116,753 99,072 11.072 6,609 11 Fees for services (non-employees): Management а . . . Legal h c Accounting . . 10,300 10,300 **d** Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees f Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) <u>23,7</u>08 23,708 12 Advertising and promotion 13 Office expenses 101,894 91,458 8,069 2,367 14 Information technology . 16,447 12,873 2,724 850 15 Royalties Occupancy . 16 73,095 72,706 389 Travel . 17 6,544 6,173 350 21 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 2,253 2,113 140 20 Interest Payments to affiliates 21 22 Depreciation, depletion, and amortization 108,178 101,714 6.464 23 Insurance 16,749 16,749 24 Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Youth Education supplies & field trip 5,315 5,315 Membership, Dues & Fees 5,019 5,330 257 54 Direct Clients Benefit 14,750 14,750 Food-Perishable & Non-Perishable 53,691 572 53,119 All other expenses Miscellaneous 14,374 3,055 11,319 Total functional expenses. Add lines 1 through 24e 25 2,146,284 199,091 1,869,711 77,482 Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

P	art X				
		Check if Schedule O contains a response or note to any line in this Par			<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	434,007	1	426,287
	2	Savings and temporary cash investments	100.544	2	101,011
	3	Pledges and grants receivable, net	100,344	3	101,011
	4	Accounts receivable, net	333,958	4	333,268
	5	Loans and other receivables from current and former officers, directors,	303,550		000,200
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
Ø		organizations (see instructions) Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	-	7	
As	8	Inventories for sale or use	21,642	8	22,540
	9	Prepaid expenses and deferred charges	9,059	9	5,883
	10a	Land, buildings, and equipment: cost or	•		
		other basis. Complete Part VI of Schedule D 10a 2,437,175			
	b	Less accumulated depreciation 10b 1,870,743	893,081	10c	566,432
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11	·	13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,792,291	16	1,455,421
!	17	Accounts payable and accrued expenses	95,285	17	99,749
	18	Grants payable		18	
	19	Deferred revenue	0	19	11,000
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D .		21	
ies	22	Loans and other payables to current and former officers, directors,			
Ħ		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on-lines 17-24) Complete-Part X-			
		of Schedule D	84 884	25	05.505
	26	Total liabilities. Add lines 17 through 25	84,891 180,176	-	85,595 196,344
	20	Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and	180,170		130,344
es		complete lines 27 through 29, and lines 33 and 34.			
Š	27	Unrestricted net assets	1,577,966	27	1,214,689
ale	28	Temporarily restricted net assets	34,149		44,388
d E	29	Permanently restricted net assets		29	
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
ř	ŀ	complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund	•	31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Jet	33	Total net assets or fund balances	1,612,115	33	1,259,077
_	34	Total liabilities and net assets/fund balances	1,792,291	34	1,455,421
	· ·				Form 990 (2013)

Form 9	90 (2013)			Pa	ige 12	
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,04	16,965	
2	Total expenses (must equal Part IX, column (A), line 25)	2			16,284	
3	Revenue less expenses. Subtract line 2 from line 1	3		(9	9,319)	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,61	12,115	
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		(25	3,719)	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		1,25	5 9,077	
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
_	Schedule O.					
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	The trial of the control of the cont	. •	2b	✓		
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a				
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis			<u> </u>		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over the suidit review or completion of its finencial statements and calculation of an endors and assume the suidit review of the suidit revie					
	of the audit, review, or compilation of its financial statements and selection of an independent accou		2c	✓	<u> </u>	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O	piain in				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in				
•	the Single Audit Act and OMB Circular A-133?		3a	1		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not unde	rgo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3ь	✓		

Form **990** (2013)

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.

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name	of the organization						E	Employer id	lentificatio	n number	
	e House of Milwauk	ee, Inc.	11. 01-1 /01				11	4 / O		92900	
Par			ity Status (All organ						nstruction	ons.	
The c 1 2 3 4	A church, conv A school description A hospital or a A medical reservation	vention of church ribed in section cooperative hos	tion because it is: (Foldes, or association of 170(b)(1)(A)(ii). (Attaction of association of the spital service organization operated in conjuncts.	churches th Schedu tion desc	describe ule E.) cribed in s	ed in sec section 1	tion 170(70(b)(1)(b)(1)(A)(i A)(iii).		(iii). Enter the	
5	☐ An organizatio		he benefit of a collect	ge or univ	versity ov	wned or	operated	by a go	vernmen	tal unit descri	bed in
6 7	An organizatio	n that normally	nment or governmenta receives a substantia (A)(vi). (Complete Par	I part of					nit or fror	n the general	public
8	•		section 170(b)(1)(A)								
9	receipts from support from acquired by th	activities related gross investme e organization a	receives: (1) more that I to its exempt functi Int income and unrel Iter June 30, 1975. Se	ions—sub lated bus ee sectio i	oject to c siness tax n 509(a)(certain ex xable inc 2). (Comp	ceptions ome (les olete Part	s, and (2) ss section t III.)	no more n 511 ta	e than 331/3%	of its
10 11	An organization purposes of o	on organized an ne or more pub	operated exclusively d operated exclusive licly supported organ describes the type of s	ely for th nizations o supportin	e benefit described g organiz	t of, to p d in sect zation and	perform to on 509(addicomple	the funct a)(1) or se te lines 1	ions of, ection 50 1e throu	9(a)(2) See s gh 11h	ection
е	a ☐ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Non-functionally integrated e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)										
f								ing			
g	Since August following person		ne organization accep	oted any	gift or co	ontributio	n from a	ny of the)		
			ndirectly controls, eithody of the supported o			her with	persons · ·	describe	d in (ii) a · ·	nd Yes	No
	(ii) A family m	ember of a perso	on described in (i) abo	ve?	<i>:</i>	·		·		– - 11g(ii) –	
			a person described in							11g(iii)	<u> </u>
h			on about the supporte					·		T	
(i)	Name of supported organization	(iı) 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?	organizat (i) organi	ts the tion in col zed in the S?	(vii) Amount of r support	
				Yes	No	Yes	No	Yes	No		
(A)											
(B)											
(C)											
(D)											
(E)											
		İ	l	1		1			1		

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (d) 2012 Calendar year (or fiscal year beginning in) ▶ (a) 2009 **(b)** 2010 (c) 2011 (e) 2013 (f) Total Gifts. grants, contributions, membership fees received. (Do not include any "unusual grants.") . . . 2,128,082 2,302,102 2,040,825 2,240,942 2,243,121 10,955,072 revenues levied for organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 2,128,082 2,240,942 2,243,121 2,302,102 2,040,825 10,955,072 The portion of total contributions by person each (other than governmental publicly unit or supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. 10,955,072 Section B. Total Support (a) 2009 (d) 2012 (e) 2013 Calendar year (or fiscal year beginning in) **(b)** 2010 (c) 2011 (f) Total Amounts from line 4 2,128,082 2,240,942 2,243,121 2,302,102 2,040,825 10,955,072 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . 1,392 280 109 616 3,085 5,482 Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 1,952 867 282 2,109 3,055 8,265 11 Total support. Add lines 7 through 10 10,968,819 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 99.8747 % 15 Public support percentage from 2012 Schedule A, Part II, line 14 15 331/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 16a box and **stop here.** The organization qualifies as a publicly supported organization . . . \square 331/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	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						
	organization without charge						,
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .				1		
b	Amounts included on lines 2 and 3						
-	received from other than disqualified						
	persons that exceed the greater of \$5,000				1		
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support	<u>. </u>					
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b		<u> </u>				
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						
_	organization, check this box and stop he						> [
	on C. Computation of Public Support						
15	Public support percentage for 2013 (line		•				<u>%</u>
16	Public support percentage from 2012 Sc			<u></u>		16	<u>%</u>
	on D. Computation of Investment In			1	(0)		
17	Investment income percentage for 2013 (•		-	mn (t))	17	<u>%</u>
18	Investment income percentage from 2013				 	18	% and line
19a	331/3% support tests—2013. If the organ						
	17 is not more than 331/2%, check this box	-	_			_	_
b	331/3% support tests—2012. If the organization 19 is not more than 331/2%, shock this						
	line 18 is not more than 331/3%, check this	-	_	-		•	_
20	Private foundation, If the organization d	ia not check a	I DOX OD IIDE 14	198 OF 190	CHECK THIS DOY	and see instru	ctions 🕨 🗀

(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		
62	195	99	135	130		
1,890	672	183	1,974	2,925		
1,952	867	282	2,109	3,055		
						
						
						
			· · · · · · · · · · · · · · · · · · ·			
					···	
						
	1,890	62 195 1,890 672 1,952 867	62 195 99 1,890 672 183 1,952 867 282	62 195 99 135 1,890 672 183 1,974 1,952 867 282 2,109	62 195 99 135 130 1,890 672 183 1,974 2,925 1,952 867 282 2,109 3,055	62 195 99 135 130 1,890 672 183 1,974 2,925 1,952 867 282 2,109 3,055

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047 2013

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990.
► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Hope House of Milwaukee, Inc. 39-1592900 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) . . . Aggregate value at end of year 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ 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 conferring impermissible private benefit? . . . Conservation Easements. Part II Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area ☐ Preservation of a certified historic structure ☐ Protection of natural habitat 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 . 2b 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 historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No 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) R (i) and section 170(h)(4)(B)(ii)? 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Part	III Organizations Maintaining	Collections of	Art, His	torical 1	Treasures	, or Ot	her Similar	Assets (continued)
3	Using the organization's acquisition, collection items (check all that apply)							
а	☐ Public exhibition		d	☐ Loan	or exchang	ge prog	rams	
b	☐ Scholarly research		е					
С	☐ Preservation for future generations							
4	Provide a description of the organizat XIII	tion's collections a	and expla	ain how t	hey further	the org	janization's ex	empt purpose in Pa
5	During the year, did the organization assets to be sold to raise funds rather							nilar Yes 🗀 No
Part	V Escrow and Custodial Arra	ingements.						
	Complete if the organization 990, Part X, line 21.						-	
1a	Is the organization an agent, trustee, included on Form 990, Part X?	custodian or oth	er intern	nediary fo			other assets	not .
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	llowing to	able:			
								Amount
С	Beginning balance					1c	;	
d	Additions during the year					1d	<u> </u>	
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amour				•			
	If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the ex	xplanatio	n has been	provide	ed in Part XIII	<u> </u>
Part								
	Complete if the organization						(n =)	777.75
		(a) Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years b	ack (e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of t			e (line 1g	, column (a	ı)) held a	as·	
a	Board designated or quasi-endowmer	nt ▶	_%					
b	Permanent endowment >	%						
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2							
3a	Are there endowment funds not in the	e possession of th	ie organi	zation tha	at are held	and ad	ministered for	the
	organization by							Yes No
	(i) unrelated organizations .							. 3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" to 3a(ii), are the related organi		•					3b
4	Describe in Part XIII the intended uses		on's endo	wment fu	unds.			
Part								
	Complete if the organization	answered "Yes'	" to Forr			11a. S	See Form 990), Part X, line 10.
	Description of property	(a) Cost or oti			or other basis ther)		Accumulated epreciation	(d) Book value
1a	Land				40,000	The section		40,000
b	Buildings				1,997,321		1,537,321	460,000
С	Leasehold improvements							
d	Equipment				363,144		301,591	61,553
е	Other			1	36,710		31,831	4,879
Total.	Add lines 1a through 1e. (Column (d) m	nust equal Form 99	90, Part)	K, column	(B), line 10)(c).) .		566,432

Part VII	Investments—Other Securities. Complete if the organization answ	vered "Yes" to For	m 990 Part IV	Line 11b. See For	m 990, Part X, line 12
	(a) Description of security or category (including name of security)	103 1010	(b) Book value	e (c) f	Method of valuation end-of-year market value
(4) = 1					
(1) Financial					
	neld equity interests				
(A)					
(B)					
(C)					
(D)			1		
(E)					
(F)					
(G)					
(H)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		ļ		
Part VIII	Investments—Program Related				
	Complete if the organization answ	vered "Yes" to For			
	(a) Description of investment		(b) Book valu		Method of valuation end-of-year market value
(1)					
(2)		., .,			
(3)					
<u>(4)</u>			 		
(5)			<u> </u>		
<u>(6)</u> (7)					
(8)					
(9)					
	(b) must equal Form 990, Part X, col. (B) line 13) ▶				
Part IX	Other Assets.				
	Complete if the organization answ	vered "Yes" to For	rm 990, Part IV	, line 11d. See For	m 990, Part X, line 15.
	(a) Description			(b) Book value
_(1)					
(2)					
_(3)					
(4)					
(5)					
(6)				-	-
(7)					
(8)					<u>,</u>
(9)	ımn (b) must equal Form 990, Part X, co	ol (R) line 15.)			-
Part X	Other Liabilities.	(B) iii le lei, .			
raitx	Complete if the organization answ	wered "Yes" to Fo	rm 990, Part IV	/, line 11e or 11f. S	ee Form 990, Part X,
4	line 25.	/L\ Da-trust	 -	·	
1. (1) Fadarel	(a) Description of liability	(b) Book value			
	ncome taxes				
	ive Payee		58,046		
(3) Capital (4)	Lease		27,549		
(5)	<u> </u>	_			
(6)					
(7)					
(8)					
(9)					
	(b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	85,595		
	or uncertain tax positions. In Part XIII, provi			zation's financial state	ements that reports the
	's liability for uncertain tax positions under				

Part	· · · · · · · · · · · · · · · · · · ·		-	Retu	rn.
	Complete if the organization answered "Yes" to Form 990, F		/, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	• •		1	2,053,743
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12. Net unrealized gains on investments	20			
a	Net unrealized gains on investments	2a 2b	6.770		
b		2c	6,778		
c d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	6,778
3	Subtract line 2e from line 1	• •	•	3	2,046,965
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	Ī ļ	•		2,040,000
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
C	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	2,046,965
Part	XII Reconciliation of Expenses per Audited Financial Statem	ents	With Expenses pe	r Rei	
	Complete if the organization answered "Yes" to Form 990, F				
1	Total expenses and losses per audited financial statements			1	2,153,062
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	6,778		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d			2e	6,778
3	Subtract line 2e from line 1			3	2,146,284
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)	4b			
_C	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	9 18)	· · · _ · · ·	5	2,146,284
Part		145	1971 41 101		W.P. A.B. AVI
	le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and t XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part				
ine O	ganization is exempt from income tax under Section 501 (c) (3) of the Internal	keven	ue Code and is classifi	ed as	otner than a private
farmele	stien. Management has reviewed all tay positions recognized in previously file	d 4 ~ ~ ~	atuums and those avno	ne nel e c	ho takan in futura
iounga	ation. Management has reviewed all tax positions recognized in previously file	ı tax r	eturns and those expe	ctea to	De taken in future
tov rot	turns. As of December 21, 2012 and 2012, the Organization had no amounts rel	atad t	unrecognized income	tay h	onofite and no
lax ret	urns. As of December 31, 2013 and 2012, the Organization had no amounts rel	ateu t	uni ecognizea income	lax D	enents and no
amour	nts related to accrued interest and penalties. The Organization does not anticip	ato ar	v significant changes	to unr	acognizad incoma
amour	its related to accided interest and penalties. The organization does not uniterp	ate ai	ly significant changes	to dill	cognized income
tax be	nefits over the next year. Federal tax returns for the year 2009 and beyond rem	ain su	blect to examination b	v the I	nternal Revenue
iux Do	10110 0101 110 11011 1001 11 1011 110			<i>J.</i>	
Servic	e.				
		-			

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection OMB No. 1545-0047 2013

Schedule I (Form 990) (2013) Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, **%**□ (h) Purpose of grant or assistance **Employer identification number** √ Yes 39-1592900 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (e) Amount of non- (f) Method of valuation cash assistance (book, FMV, appraisal, other) Cat. No. 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance (P) EIN 1 (a) Name and address of organization Hope House of Milwaukee, Inc. or government Name of the organization Part Part II 9 N E 8 ପ € 9 **®** 9 5 2

Schedule I (Form 990) (2013)

<u> Park M</u>

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

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) non-cash assistance (d) Amount of (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

	Suppledion.			
1. In Kind Donation	338	\$ 5,033	Donor Stated Value	Books and Publications
2 In Kind Donation	178	\$ 30,019	Donor Stated Value	Clothing and Household Goods
3 In Kind Donation	6.253	\$ 197,758	197,758 Donor Stated Value	Food
5. In Kind Donation	429	\$ 12,945	12,945 Donor Stated Value	Hygiene
4. In Kind Donation	29		Donor Stated Value	Furniture
6. In Kind Donation	235	\$ 12,924	12,924 Donor Stated Value	Linen
7. In Kind Donation	106	\$ 13,762	13,762 Donor Stated Value	Toys
9 In Kind Donation	117		26.122 Donor Stated Value	Holiday Gift Bags
9. In Kind Donation	523	\$ 22,575	Donor Stated Value	Office/School Supplies
10 In Kind Donation	336	3,736	3,736 Donor Stated Value	Infant Items
15. In Kind Donation	315	\$ 5.923	5.923 Donor Stated Value	Other
II. III Kilid Dolladoli	2			

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

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

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

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

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

2013

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization \blacktriangleright Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

irs.gov/form990. Inspection
Employer identification number

Hope	House of Milwaukee, Inc.					39	<u>-15929</u>	00		
Part	Types of Property									
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash con amounts repo Form 990, Part	orted on		lethod o			
1	Art – Works of art									
2	Art - Historical treasures .									
3	Art – Fractional interests .									
4	Books and publications .	1			5.033	Dono	r stated	l valu		
5	Clothing and household	·····			0,000	20110	Juice	· vaia		
	goods	✓			30,019	Dono	r stated	l value	es	
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities-Publicly traded									
10	Securities—Closely held stock .									
11	Securities-Partnership, LLC,									
	or trust interests									
12	Securities-Miscellaneous .	\								
13	Qualified conservation				-					
.0	contribution—Historic									
	structures									
14	Qualified conservation									
1-7	contribution—Other									
15	Real estate-Residential									
16	Real estate-Commercial .									
17	Real estate—Other									
18	Collectibles							<u>-</u>		
19	Food inventory	√	700		197,758	Dono	r stated	value	35	
20	Drugs and medical supplies	—	1	-			r stated			
21	Taxidermy		•			50.10	. 5.0.00			
22	Historical artifacts				-					
23	Scientific specimens									
		✓	440	••	40.045	D				
25	Other ► (Hygiene)		110	· · · · · · · · · · · · · · · · · · ·			r stated			
26	Other ► (Office/school supp.)	√	25				r stated	_		
27	Other ► (Holiday gift bags)	√	55		26,122					
28	Other ► (Miscellaneous)	. √	78	, , ,	39,822	Dono	r stated	valu	es	
29	Number of Forms 8283 received									
	which the organization completed	FORM 8283	s, Part IV, Donee Acknowled	agement	•	29			1.	
								,	Yes	NO
30a	During the year, did the organizat									
	it must hold for at least three year			ition, and which	is not req	uired	to be			
	used for exempt purposes for the	entire hold	ing period?					30a		✓_
b	If "Yes," describe the arrangemen	t in Part II								
31	Does the organization have a		tance policy that require	s the review	of any no	n-star	ndard			
	_							31		1
32a	Does the organization hire or use	e third part	les or related organization	s to solicit. pro	cess, or se	ell nor	cash	<u> </u>		<u> </u>
		•						32a		1
b	If "Yes," describe in Part II.					•		<u> </u>		7
33	If the organization did not report a	amount in	column (c) for a type of pro	nerty for which	column (a) i	s che	rked			
•	describe in Part II.	. amount III	ocianiii (o, ioi a type oi pic	Porty for William	column (d) i	5 0116	oncu,			

Part II	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
Part 1, Line	28 - Furniture \$3,512 + Linens \$12,924 + Toys \$13,762 + Infant items \$3,736 + Others \$5,888 = \$39,822.
"Others" in	cludes craft materials, bus tickets, bicycle, Plans, ticket (event), etc.
	······································

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

Name of the organization		Employer identification number					
Hope House of Milwaukee, Inc		39-1592900					
Part III Line 4d Description of Other Program Services	Expenses						
Part III Line 40 Description of Other Program Services	Expenses						
Protective Payee Services for disabled adults and families (Expenses \$104,447 including Grant of \$ 3,230) (Revenue \$)							
The Protective Payee Program is designed to provide financial oversight, budget counseling and supportive case management for individual							
with severe mental illness and other disabilities who need that little extra support to prevent homelessness. The program provides careful							
financial oversight for individuals with limited disability in	come, so that the individual stays in housing	and has the resources to provide for					
basic needs.							
Homeless Management Information Systems	(Expenses \$32,278 including Grant of \$) (Revenue \$)					
Single Room Occupancy-Surgeon's Quarters	(Expenses \$56,366 including Grant of \$ 1	0,146) (Revenue \$)					
Angel of Hope Clinic-Medical Services	(Expenses \$19,460 including Grant of \$) (Revenue \$)					
Shining Star-Youth Education Program	(Expenses \$119,697 including Grant of \$	21,926) (Revenue \$)					
Community Outreach	(Expenses \$77,377 including Grant of \$ 2	7,279) (Revenue \$)					
Mercy Housing-Johnston & Catherine Center Resident Services (Expenses \$171,743 including Grant of \$4,413) (Revenue \$)							
Path to Progress	(Expenses \$5,386 including Grant of \$ 2,	258) (Revenue \$)					
Special Case Management	(Expenses \$8,015 including Grant of \$) (Revenue \$)					
Total Other Program Services Part III Line 4d	(Expenses \$594,769 including Grant of \$ 6	9,252) (Revenue \$)					
	••••••••••••••••••••••••••••••••••••••						
Part VI Section B. Policies							
Line 11b - At the time of annual financial audit approval pr	ocess the 990 form is presented to the execu	utive Director, Finance-Personnel					
Committee and Board of Directors.							
Line 12c - Board member sign acknowledgement of receip	ot of policy, Board signs off on purchases me	ore than \$5,000 including monitoring					
of vendor.							
Line 15a and Line 15b - The organization monitors local w	age studies issued by the NonProfit Center (of Milwaukee and the salary range					
for officers of similar sized non-profits operating in South	eastern Wisconsin.						
Part VI Section C. Disclosure							

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization	Employer identification number
Hope House of Milwaukee, Inc	39-1592900
Part XI Line 9 - The Organization had an appraisal during 2013 on the Office/Group Home Building. The a comparison approach. Long-lived asset impairment charges totalling \$253,719 was recorded during the y	
	·
	

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, 2013 and 2012, 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, 2013 and 2012, 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 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 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 24, 2014, 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

ht Holand CP

Milwaukee, Wisconsın April 24, 2014

HOPE HOUSE OF MILWAUKEE, INCORPORATED BALANCE SHEETS DECEMBER 31, 2013 AND 2012

Λ	SS	re
n	JO	0

ASSETS		
	2013	2012
CURRENT ASSETS	6 000.044	m 200 442
Cash and Cash Equivalents	\$ 368,241 44,054	
Accounts Receivable Grants Receivable	289,214	
Investments	101,011	·
Investments	22,540	
Prepaid Expenses	5,883	-
Total Current Assets	\$ 830,943	
FIXED ASSETS	\$ 40,000	\$ 40,000
Land Building and Improvements	1,997,321	
Building and Improvements Furniture and Equipment	399,854	
Less: Accumulated Depreciation	(1,870,743	•
Total Fixed Assets	\$ 566,432	
10011 7007 10000	3 331	
OTHER ASSETS		
Cash - Protective Payee Accounts	\$ 58,046 \$ 58,046	
Total Other Assets	\$ 58,046	\$ 64,564
TOTAL ASSETS	<u>\$ 1,455,421</u>	\$ 1,792,291
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Accounts Payable	\$ 38,505	5 \$ 32,638
Accrued Payroll	50,011	
Accrued Vacation	11,233	
Deferred Revenue	11,000	
Current Portion of Long-Term Liabilities	9,549	
Total_Current_Liabilities	<u>\$- —120,298</u>	<u>3-</u> - <u>\$ 100,999</u> -
LONG-TERM LIABILITIES		
Capital Leases	\$ 27,549	\$ 20,327
Less Current Portion of Capital Leases	(9,549	
Total Long-Term Liabilities	\$ 18,000	\$ 14,613
OTHER LIABILITIES		
Protective Payee Liability	\$ 58,046	<u>\$ 64,564</u>
Total Other Liabilities	\$ 58,046 \$ 58,046 \$ 196,344	
Total Liabilities	\$ 196,344	
		
NET ASSETS	0 404400	
Unrestricted Temperarily Restricted	\$ 1,214,689	
Temporarily Restricted Total Net Assets	44,388 \$ 1,259,077	
I Utal Net Vooeto	Ψ 1,209,07	<u> </u>
TOTAL LIABILITIES AND NET ASSETS	<u>\$ 1,455,42°</u>	<u>\$ 1,792,291</u>

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, 2013 AND 2012

	2013				2012								
			Te	трогапіу						emporanly			
	Un	restricted	R	estricted	_	Total	U	nrestricted		Restricted		Total	
REVENUE													
Department of Housing and													
Urban Development	_		_			500.450		500 757	•			500.757	
Supportive Housing Program	\$	560,153	\$		\$	560,153	\$	560,757	\$		\$	560,757	
Homeless Management		44.00=				44.007		62 924				62 924	
Information System		14,387				14,387		63,824				63,824	
Supportive Services -		00.050				22.052		20.200				20.260	
Single Room Occupancy Program		32,852				32,852		29,260				29,260	
City of Milwaukee		150 604				150,694		110,694				110,694	
Shelter Grant		150,694 44,501				44,501		42,471				42,471	
Community Organizer		44,501				44,501		42,994				42,994	
HPRP Families		29,117				29,117		27,978				27,978	
Youth Program		27,681				27,681		95,310				95,310	
Emergency Shelter Grant Emergency Transitional Housing		35,468				35,468		21,140				21,140	
Outreach Community Health Center		33,400				33,400		21,140				21,140	
State Shelter		19,929				19,929		19,900				19,900	
Angel of Hope Clinic		9,995				9,995		9,995				9,995	
Department of Public Instruction		23,459				23,459		23,386				23,386	
Mercy Housing		174,276				174,276		141,534				141,534	
Milwaukee County -		174,270				1. 1,2.0		,				,	
Department of Health Services													
Adult Service		20,482				20,482		20,482				20,482	
Community Advocates		20,702											
Protective Payee		75,699				75,699		97.049				97,049	
Emergency Shelter Grant								23,206				23,206	
Emergency Food and Shelter		1				1		20,413				20,413	
Brighter Futures								73,002		_		73,002	
Wisconsin Housing and Economic								·				•	
Development Authority								6,000				6,000	
Hunger Task Force		34,371				34,371		16,781		_		16,781	
Other Governmental Grants		15,000				15,000		19,969				19,969	
Other Service Grant - Cardinal		10,000				10,000		4,167				4,167	
Community Shares		12,386				12,386		13,468				13,468	
Contributions		397,374		18,691		416,065		386,514		34,149		420,663	
Interest Income		3,085				3,085		616				616	
Donated Goods and Services		341,087				341,087		399,390				399,390	
Other Income		3,055				3,055		2,109				2,109	
Loss on Disposal of Fixed Assets								(2,053)				(2,053)	
Net Assets Released From Restrictions		8,452		(8,452)				17,121		(17,121)			
Total Revenue	\$	2,043,504	\$	10,239	\$	2,053,743	\$	2,287,477	\$	17,028	\$	2,304,505	
EXPENSES													
Program Services	\$	1,876,489	\$		\$	1,876,489	\$	2,020,269	\$	_	\$	2,020,269	
Management and General	Ψ	199.091	Ψ		Ψ	199,091	Ψ	209,310	Ψ		Ψ	209,310	
Fund-Raising		77,482				77,482		79,466				79,466	
Total Expenses	\$	2,153,062	\$		\$	2,153,062	\$	2,309,045	\$		\$	2,309,045	
Total Expenses	Ψ	2,100,002	Ψ		۳	2,100,002	•	2,000,040	•		•	2,000,040	
Loss on Impairment of Building		253,719			_	253,719	_				_		
Total Expenses and Losses	\$	2,406,781	\$		<u>\$</u>	2,406,781	\$_	2,309,045	\$		\$	2,309,045	
CHANGE IN NET ASSETS	\$	(363,277)	\$	10,239	\$	(353,038)	\$	(21,568)	\$	17,028	\$	(4,540)	
Net Assets, Beginning of Year		1,577,966		34,149	_	1,612,115		1,599,534	_	17,121	_	1,616,655	
NET ASSETS, END OF YEAR	\$	1,214,689	<u>\$</u>	44,388	\$	1,259,077	\$	1,577,966	\$	34,149	\$	1,612,115	

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, 2013 AND 2012

	2013			2012		
CASH FLOWS FROM OPERATING ACTIVITIES Change in Net Assets Adjustments to Reconcile Change in Net Assets to	\$	(353,038)	\$	(4,540)		
Net Cash Provided by Operating Activities Depreciation Loss on Disposal of Fixed Assets		108,178		107,837 2,053		
Impairment Loss (Increase) Decrease in Accounts Receivable Increase in Grants Receivable		253,719 21,101 (20,411)		(18,980) (56,497)		
Increase in Inventory (Increase) Decrease in Prepaid Expenses Increase in Accounts Payable		(898) 3,176 5,867		(3,995) (2,653) 10,682		
Decrease in Accrued Payroll Increase (Decrease) in Accrued Vacation Increase in Deferred Revenue		(1,911) 508 11,000		(3,443) (1,717) 		
Net Cash Provided by Operating Activities	<u>\$</u>	27,291	\$	28,747		
CASH FLOWS FROM INVESTING ACTIVITIES Purchase of Fixed Assets Purchase of CD Investment	\$	(35,248) (467)	\$	(20,369) (544)		
Net Cash Used by Investing Activities	\$	(35,715)	\$	(20,913)		
CASH FLOWS FROM FINANCING ACTIVITIES Proceeds From Capital Lease Payments on Capital Lease	\$	13,164 (5,942)	\$	 (5,289)		
Net Cash Provided (Used) by Financing Activities	\$	7,222	\$	(5,289)		
Net (Decrease) Increase in Cash and Cash Equivalents	\$_	_ (1,202)	_\$_	2,545_		
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR		369,443		366,898		
CASH AND CASH EQUIVALENTS AT END OF YEAR	<u>\$</u>	368,241	\$	369,443		
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION Interest Paid	\$	1,488	\$	1,809		

Capital lease obligation of \$13,164 was incurred when the Organization entered into a new lease for a copier in 2013.

HOPE HOUSE OF MILWAUKEE, INCORPORATED

NOTES TO THE FINANCIAL STATEMENTS

DECEMBER 31, 2013 AND 2012

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2013 AND 2012

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, 2013 and 2012 was \$58,046 and \$64,564, respectively

The Organization maintains cash balances in banks. These balances are insured by the Federal Deposit Insurance Corporation. As of December 31, 2013 and 2012, the uninsured portion of this balance was \$217,260 and \$-0-, 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, 2013 AND 2012

NOTE A - Summary of Significant Accounting Policies (continued)

Impairment of Long-Lived Assets .

The Organization reviews long-lived assets, primarily property and equipment, for impairment whenever events or changes in business circumstances indicate that the carrying amount of an asset may not be fully recoverable. An impairment loss would be recognized when the estimated future cash flows from the use of the asset are less than the carrying amount of that asset. See Note I for the calculated impairment loss

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 \$341,087 and \$399,390 for the years ended December 31, 2013 and 2012, respectively. Included in this amount is \$22,540 and \$21,642, which is reflected as inventory on the financial statements as of December 31, 2013 and 2012, respectively. All donations, including those classified as general and administrative, are passed through to clients

HOPE HOUSE OF MILWAUKEE, INCORPORATED NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2013 AND 2012

NOTE A - Summary of Significant Accounting Policies (continued)

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

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>2013</u>	<u>2012</u>
U S Department of Housing		
and Urban Development	\$129,849	\$ 80,464
City of Milwaukee	52,318	72,849
Outreach Community Health Center	853	1,235
Department of Public Instruction	4,689	4,361
Mercy Housing	59,902	19,812
Community Advocates	11,678	82,150
Department of Health and Human Services	3,414	3,414
Hunger Task Force	25,678	2,851
Other Government	833	1,667
Total	<u>\$289,214</u>	<u>\$268,803</u>

NOTE C - Temporarily Restricted Net Assets

At December 31, 2013 and 2012, the Organization had temporarily restricted net assets that were available for the following purposes:

	<u>2013</u>	<u>2012</u>
Shining Star Food Pantry	\$20,839 23,549	\$29,291 4,858
Total	\$44,388	\$34,149

HOPE HOUSE OF MILWAUKEE, INCORPORATED NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2013 AND 2012

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, 2013 and 2012, approximately 70% and 64%, respectively, of the Organization's revenue was from sources which relied on revenue from the United States government.

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 \$2,895 and \$12,357 for the years ended December 31, 2013 and 2012, respectively

The following is a schedule, by years, of the future minimum payments required under the leases as of December 31, 2013

<u>Year</u>	Amount
2014	\$1,879
2015	1,371
2016	686
Total	<u>\$3,936</u>

NOTE F - Capital Leases

During 2011, the Organization entered into two capital lease obligations, and another one in 2013. The cost of \$42,379 is included in fixed assets. Total accumulated depreciation was \$16,837 and \$10,172 for the years ended December 31, 2013 and 2012, respectively. Amortization of the capital lease is included in depreciation expense for the years ended December 31, 2013 and 2012.

Future minimum lease payments are as follows:

<u>Year</u>	<u>Amount</u>
2014 2015 2016 2017	\$11,724 11,063 5,719 2,974
Less amount representing interest	<u>(3,931</u>)
Total	\$27,549

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, 2013 and 2012, were \$16,223 and \$17,030, respectively.

HOPE HOUSE OF MILWAUKEE, INCORPORATED NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2013 AND 2012

NOTE H - Line of Credit

The Organization has a \$250,000 line of credit which matures October 1, 2015. Amounts borrowed under this agreement bear interest at the index rate plus 75%, but not less than 4.0%. The line of credit is secured by the Organization's building. As of December 31, 2013 and 2012, the line of credit was not drawn on.

NOTE I - Impairment Loss

The Organization had an appraisal done during 2013 on the Office/Group Home Building. The appraisal was done using the sales comparison approach Based on the impairment evaluation methodology described in Note A, long-lived asset impairment charges totaling \$253,719 was recorded during the year ended December 31, 2013 The impairment related to the Organization's Building and Improvements Fixed Assets The carrying amount of the Building and Improvements Fixed Assets prior to impairment was \$753,719.

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, 2013 and 2012, 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, 2013 through April 24, 2014, 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, 2013

	Chrysalis-		Threshold -	Ç	US Food Pantry	Angel of	Shining	Path to	Community	Protective	Mercy	Special Case Management	Management and General	Fund- Raising	Total
	Transitional	TIMIS	Emergency	SKO	LOOG SHIVE		900	220							
REVENUES Department of Housing and		•													
Urban Development							27.0		1	1	!	1		!	560,153
Supportive Housing Program	\$ 559,879	•	i_		1			!	•			,	,		
Homeless Management	1	14 387	—i	i	i	ł	i	i	i	ı	ł	i	i	I	14,387
Supportive Secures -	ļ	7													
Single Room Occupancy Program	1	1	-i -	32,852	ŀ	ı	l	i	i	!	i	ŀ	I	ı	32,852
City of Milwaukee															150.694
Shelter Grant	135 023	ı	15,671	I	i	į	1	1	1	i	ļ	I	ı	1	130,034
Community Organizer	i	I	- 1-	1	l	1	ì	İ	44,501	i	i	i	I	1	00'4
Youth Program	i	1	- 1	i	I	ı	29,117	:	l	I	1	ŀ	I	ł	/LL'62
Ememency Shelter Grant	3.960	I	23,721	!	i	!	i	ŀ	I	I	i	ŀ	1	i	27 681
Emergency Transitional Housing	20 752	ł	14,716	I	i	ŀ	i	!	1	i	1	1	ŀ	I	35 468
Outreach Community Health Center															000
State Shetter	i	!	19,929	i	ł	!	i	ì	i	I	l	i	i	!	9000
Angel of Hope Clinic	1	İ	-1-	l	I	3,995	I	1	!	i	1	1	I	•	93.459
Department of Public Instruction	23 459	ı	_1_	i	I	1	i	ļ	ł	1	1 6	i	1		174 276
Mercy Housing	I	ł	I _	i	ì	l	l	1	I	i	0/5,4/1	l	ì	l	
Miwaukee County - DHHS												!	ı	i	20.482
Adult Service	I	1	20,482	i	i	1	i	ļ	i	i	!	l]		
Community Advocates								;	1	75,699	1	i	i	I	75,699
Protective Payee	I	•	-l _	!	I	i	i	I	1			1	ı	ł	-
Emergency Food and Shelter	1	i	<u>-</u>	1	i	i	i	i	i	I	l	l		· i	34 371
Hunger Task Force	ł	i	29,883	i	4,488	I	i	I	1	ŀ	1	i		İ	45,000
Other Governmental Grants	ı	15,000	i	I	1	i	1	1	1	i	I	1 8	i	I	9 6
Other Service Grant - Cardinal	ı	i	.1.	i	1	I	ı	i	I	Į.	I	000'01	I	!	900,01
Community Shares	ŀ	I	_1	I	i	I	i	!	i	!	l	1	i	12 386	12 386
Community Creates	040 040	ŀ	20.800	3.000	7,159	ı	76,750	1	1	i	1	i	239,665	750	397,374
		i	<u> </u>	ı		i	1	1	1	ł	1	i	3,085	I	3,085
Imerest modifie	78 244	: 1	23 714	10 148	168.672	203	22,832	2 325	26,779	3,433	4,413	ı	326	I	341,087
Other locate			.1	ı		2,195	!	130	ł	i	I	ł	730	i	3,055
Net Assets Released From			_												97.0
Restrictions	1	1	_1	:	1		8,452			1	1			i	7040
Total Revenue							!				470	9	908 676		13 136 \$ 2 043 504
(Camed Forward)	\$ 870,567	\$ 29387 \$	\$ 168,917 \$	\$ 45 998	\$ 180319 \$	\$ 12.393 \$	\$ 137,425 \$	2,455	00711		19,132 4 170,000 4	ı	ı	Į	

HOPE HOUSE OF MILWAUKEE, INCORPORATED SCHEDULE OF UNRESTRICTED FUNCTIONAL REVENUE AND EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2013

	Chrysalis- Transitional	S W W	Threshold -	SRO	US Food Pantry Food Service	Angel of Hope Clinic	Shining Star	Path to Progress	Community	Protective Payee	Mercy Housing	Special Case Management	Management and General	Fund- Raising	Total
Total Revenue (Brought Forward)	\$ 870,567	\$ 29,387	أہ أ	\$ 45,998	\$ 180,319	\$ 12,393	\$ 137 425 \$	2,455	\$ 71.280	\$ 79132 \$	178,689	\$ 10,000	\$ 243,806 \$	13,136 \$	2,043,504
EXPENSES															
Employee Expenses Salanes and Wages	\$ 501,339	\$ 6,338	\$ 112,084	\$ 34,570	5,578	\$ 7,616	\$ 78,175 \$	ı	\$ 42 309	\$ 69,707	128,985	\$ 5,143	\$ 9,438 \$	63,634	1,064,910
Retrement	6,963	1:	1453	1,274	125	16	1,416	i	125	594	3,775	į	267	215	16,223
Payroll Taxes	37,455	466	8,305	2 515	411	746	5,936	1;	3,116	5,093	9,323	355 7.7	ž ą	141	18 832
Unemployment insurance	8 029	259	2,002	- 68	2 22	96	1.683	= }	800	1.830	2.821	149	5 5	199	20,832
Worker Compensation Health Dental and Disphility Insurance		1357	11 950	6.861	449	75	2.245	ı	6 404	18,933	28,622	2,286	800	3,731	162,685
Training		10	160	160	1	ŀ	199	ı	ı	815	629	1 ;	140	1 7	2,253
Travel	885	27	101	969	4	21	253	_	2	3,015	1,110	25	320	22.5	6,544
Total Employee Expenses	643,331	8,642	137,927	47,419	6,680	8 861	91 518	18	53,548	100,582	176,993	c LO R	11,624	012,47	906,906,1
Outside Services Professional Fees	481	23.220	l	i	i	I	l	i	ł	ı	7	I	i	i	23,708
Audit Fees	8,085	i	-98	i	i	i	630	105	1	i	I	i	940	ı	10,300
Insurance	12,561	365	1,675	ı	335	503	640	167	i	503	ı	i	1	I	16.749
Advertising	<u>5</u>	i	1-	I	1	i	100	I	I	i	င္ဟ (I	205	l	45.5 45.5 45.5
Recruitment	1	i	-1-	1	i	I	1 5	I	1 8	i	9	i I	5,019	1 3	5330
Membership, Dues and Fees	1 9	I	۱ ۵	1 1	! "	10	60 6	۱ -	3 !	1 1		l ł	327	8	447
Subscriptions	404	! ^	D-6	1 1	- ç	۱ ۱	1 28	. £	ı	245	I	I	2,863	1	4,428
Dank rees and interest Total Outside Services	22,312	23,592	2,670	! i	366	505	1,619	288	92	748	46	i	9,329	114	61,732
Operating Expenses		,	-	;						8	7 760		63	ļ	53.691
Food - Penshable and Non-penshable	37,701	52	13,367	266	i	1	235	1 1	1 1	ያ !		1 1	1.488	1 1	1,488
General Program Expenses	748	1 12	1-1045	269	1 \$	l !	334	12	2	848	159	i	1,692	728	6,183
Computer Software	; ¹	1	! - !	1	!	i	i	1	1	ı	i	i	2,854	850	3,504
Postage	20	i	-1	!	I	i	20	i	90	800	i	i	360	L'e'L	2,83
Pnntng/Publication	i	1:	1	1	F ;	i	1 8	1 9	! ह	263	1 6	i	1 25 0	3 158	212 R7 989
Total Operating Expenses	38,568	50	14,412	535	401	!	£90	71	3	Ř.	070	i	3	3	90.
Client Expenses	•	;	 1	I	1	I	ı	211	i	ı	i	!	ı	ı	211
Youth Education Field Ton Workshop	1	! i		1	i	ı	5 315	1	I	I	ł	ł	ı	ı	5,315
Baneficary Supplies	314	į	237	i	i	1	I	I	i	75	569	1	i	1	1,195
Transportation Assistance	4,691	i	2,558	I	i	I	3 456	ł	i	í	2,132	i	1	I	12 837
Clothing Assistance	310	I	96	1	1	1	i	1	1	1	1 :	ı	1 6	I	200
Donated Services and Supplies	73,160	i	23,036	10,148	167,639	!	21,926	2,257	27,279	3,230	4,413	1	325	i 1	333,411
Total Client Expenses	78,475		26,027	10,146	16/,639	i	30'08/	7 400	617,12	coc's	-	I	250		
Building Operating Expenses	29.703	22	3.940	i	788	1,182	2,307	393	i	1,182	1	ŀ	62	ŀ	39,614
Building Maintenance Services	21,647	119	3,775	1	550	825	1,530	275	i	825	1	I	389	ł	29,935
Kitchen Supplies	411	i	-1	i	1	1	l	i	I	ł	33	1	1 99	1	444
Equpment	7,118		147	i	1 5	377,1	1 8	1 ;	i	1 2	I	i	965	1 1	9,75
Equipment Maintenance	5,660	8	7.38	I	745	800	283	12.5	887	353	1 1	1 1	490	l i	13,261
Equipment Rental	9,301		1350	1	}	: 1	}	1	1	1	1	i	1	1	1,836
Telephone	15,413	145	1,987	483	396	594	1,816	198	483	1,980	1,006	i	1,105	i	25,386
Internet Services	9'626		1,287	I	257	388	718	129	i	386	i	!	9	1	12,943
Utilities	37,455	238	4.994	i	666	1,498	2,767	499	i	984,1	i	•	1 797	1 1	108 178
Dopracation	81,112	1 8	10,844	1 6	2,163	3,220	3,209	1,081	1 270	C7	1 039	1 1	10511	i i	300,518
lotal Building Operating Expenses Total Expenses	\$ 1,000,948	\$ 33,017	\$ 211,386	\$ 58,583	\$ 180,336	\$ 19,663	\$ 137 474	5,558	\$ 82,419	\$ 113,055	\$ 186,871	\$ 8,015	\$ 38,555	\$ 77,482	\$ 2,153,062
												!	253 710	ı	253 719
Loss on impairment of Building	1	!	1	1	1	•	!	i			!		617.557		21,007
Total Expenses and Losses	\$ 1,000,648	\$ 33,017	\$ 211,388	\$ 58 583	\$ 180,336	\$ 19,663	\$ 137,474	\$ 5,558	\$ 82,419	\$ 113 055	\$ 186,871	\$ 8,015	\$ 292,274	\$ 77.482	\$ 2,406,781
CHANGE IN NET ASSETS	\$ (130,081)	(3.630)	\$ (42.469)	\$ (12.585)	\$ (17)	\$ (7.270)	(49)	\$ (3.103)	\$ (11.139)	\$ (33.923)	\$ (8.182)	\$ 1.985	\$ (48,468)	\$ (64,346)	\$ (363.277)
			-						!	•	•		\$ 35.248	•	\$ 35.248
CAPITAL EXPENSES	i	 -	- -	i	i	1	!	i •	•	•	•	•		,	! ! !

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

Properties Pro	Food Service	Hope Clinic Star		4	Paris C	Mercy	Kapid	Special Case	bna Exerce?	Fund-	Total
to thousing and to thousing and to thousing and to thousing and to thousing and to thouse the velopment of the Sharing Program as Seo,757 \$	•		Progress	Oureacn	Layee	fillenou	A LINCOLL	Mariagaillaill		A	
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te 6,000		200			1		1	1	1	i	23 386
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98,080 25,250 62,157 27,487	i	ı	!	i	ı	ì	ı	i	i	i	19,969
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98,080 25,250 82,157 27,497	i	ı	1	l	1	•	i	1	I	13 468	13 46
82,157 27 497 27 497	101		23.785	ı	I	7,320	!	i	208 107	8	386 514
82,157 27,497					i	I	!	i	616	i	616
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	1.4				10 000	i	i	ı		ı	17.121
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(Carried Forward) \$ 972.755 \$ 90.875 \$ 178.298, \$ 48,289 \$	89 \$ 217,797 \$ 11,322	'n	144 386 \$ 2 249	2 249 \$ 75,117	75,117 \$ 117.409 \$ 152.864		\$ 36.91/ \$	5 4,16/ 5	\$ 221 4/4 \$	13 226 \$ 2.28/4//	7 701 41

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

	Allegand		Threehold			US Food	Annal of	Solid Co.		Path to	Community	Protective	Webs	R	Special Case	Management se and		Fund	
	Transitional	HMIS	Emergency		SRO	ood Service	Hope Clinic	ļ	1	ŀ	Outreach	Рауве	Housing	Re-Housing	Management	٦	1	Raising	Total
Total Revenue (Brought Forward)	\$ 972,755	55 \$ 90,875		178,298 \$	48 289 \$	217 797	\$ 11 322	\$ 144 386	386 \$	2 249 \$	75,117	\$ 117 409	\$ 152 864	\$ 36,917	\$ 4,167	-	221,474 \$	13 558 \$	2,287,477
EXPENSES																			
Employee Expenses		•				6	1 1 10		97070	100	904	98 98	143 460	24 102	2 703		2011	E0.507	4 437 067
Salanes and Wages	7.355	*	•	2 67 0 2 67 0	33,230	2,000,2	•	,	1037	2002	316	1514	3234	2 I	•	•	• 08 16'3	169	17.030
Payroll Taxes	37.941	4		7.073	2413	213	548		6 255	836	2,285	6,287	8,166	1,684	187	7	Ž	4,528	83,493
Unemployment Insurance	7,094			1 475	334	18	80		1,455	8	494	891	1,372	399	ı		496	685	15,690
Worker Compensation	14,065	_		2 677	1,069	19	23.		1 901	13	822	2,541	3 370	776	o.	2	8	1,899	31,785
Health Dental and Disability Insurance	83,966	6 370		13 824	7 622	272	Ŧ		204	865	6 633	15,744	27,758	9 799	1,145	2	536	5 620	185 473
Training	629	20	9	69	1	!	•		408	į	i	i	337	i	i		20	1	1,509
Travel	1 019			- 8	965	42	•		2	e	187	3,916	1,084	1113			357	1	9 034
Total Employee Expenses	671,480	30 76,905		122,256	46,792	3,505	8,165		99 210	13,310	42,466	117 741	158,759	37,964	4,132		4,980	73 406	1 481 071
Outside Services			ç	-					200	i		0.640	!				2 500	i	21 160
Protessional Fees		20	0.50	1 8	ŧ	i	:		9 5	į	•	0.00	i	!	,		2,300	i	001,12
Audit Fees	449.			782	1	1 3	1 6		8 8	8 5	!	ا ۽	:	i	•	1	205	ı	9 900
Insurance	10,992			1 446	ŧ	484	583		587	<u>5</u>	I	3	i	I	•	ı	1 5	!	403
Advertising		1 :	ı	1 ;	i	! ;	1		1 8	i	1	i	1 9	I	•		2 5	ł) - u
Recultment	=	162	•	- 88	ł	20	ı		S :	ŀ	1 }	ı	2	•	•		6/2	i	0,0
Membership, Dues and Fees	•	43	1	=	į	i	:		20	1	225	i	!	!	•		BL/.4	1 9	, 45,
Subscriptions			i	- 1	i	i	'		:	i	ŀ	1	i	•	•		8	4 5	138
Bank Fees and Interest	1,375			181	ı	2	•		ቋ	6	ı	554	ì	•	•		2,569	i ·	4.841
Total Outside Services	20,216	909'6		2,548	i	909	28	•	821	328	525	10 628	40	I	•		10,850	£	56 135
Operating Expenses				_															
Food - Perishable and Non-penshable				- !	;						1		i e				9	8	900
General Program Expenses	31 891		82	9,247	232	84	I		£ 8	ł	S	l	29.	I	•	i	717	8	2,030
Office Supplies	- ;		1 ;	9 8	į	1 7	1 6		2 5	! \$	1 2	1 5	121	! \$	•		202	1681	5.786
Computer Software	ΣĐ	•	214	986	233	Ď	Ö		283	2	971	ica i	6	<u> </u>	•		1 5.47	850	5.427
Postage			1 065	ı	i	l	•		1 8		1 8	1 240	ł	1 8	•		2,512	1 871	2 817
Finaingrubilcation		3	1	 i	i	I			3	. 1	3 1	633	i !	; !	•		9	674	1374
Total Operation Economics			1337	1 68 0	1 22	145	i ec		1 198	5	6	1 729	677	ę.	•	: 1	7.161	5 164	61 479
	3				3	2	1		}	!		<u> </u>	•						
Adult Education Fees		ı	1	i	i	ł	ı		i	180	1	i	I	I	•		i	1	180
Voith Editorion Field Tdn/Morkshop			1	-	i	i	1		8.803	i	I	1	ŀ	ł	•		ı	ŀ	8,803
Beneficial Supplies	٨	291		259	ı	I	'		ı	í	15	7,038	505	ì	•		ł	ł	8,108
Transportation Assistance	3.747	: 2		3.500	i	ł	:		6,732	i	ł	ı	866	i	•	í	1	ı	14 977
Clothing Assistance		20		58	i	ł	•		ŧ	i	i	I	I	I	•		ı	ı	79
Donated Services and Supplies	82 158	89	1	27.397	5.280	198 939			330	2 739	32 020	10,360	4,010	1,005	•	-	12,830	1	395 395
Total Client Expenses	86 246	9		31,185	5,280	198 939	1 327		32 865	2919	32 035	17 398	5 513	1,005	•		2,830	ı	427 542
Building Operating Expenses																			
Building Supplies	19,487			2 545	22	759	506		517	252	I	759	ł	ı	•	i	I	ı	25,640
Building Maintenance Services	28 516		917	3,057	1	974	19		612	306	i	917	1	I			ı	!	35,910
Kitchen Supplies	•		i	i	I	I	1		!	ι	i	ł	i	l	•	ı	1 ;	L	99
Equipment	1,956		1 520	651	i	1	i		4,539	1 3	I	1 ;	i	i	•	ı	5	đ S	9,531
Equipment Maintenance	4,465		114	089	1 ;	174			91.0	8 5	1 3	40.0	i	i	•	ı	538	! \$	808.0
Equipment Kental	4/101			1 424	8	432	2		90	3	470	*	ł	i	•	!	7/0	P	0 654
rumsnings	,368			990 7	1 5	; ;	OBC.	, ,	. yo	; 5	1 5	1688	750	1			1 2	! !	19 975
- Gleboone	2			2 6	Ģ	77	3		3 5	2	ř	- 1	Š	I	'		23	: !	6.550
Internal Services	282	•		20c	i	101	1 50		3 3	3 5	ı	277	i	i	•	1	3	! !	48 173
Commen	3000				1		,	,	133	1075	i		1	! !			180	ı	107.837
Cepreciation	5 G	č	-	200	: 5	5,22,5		-	2,222	907	1 380	5 40B	750	!			6,681	853	282 B1B
total Building Operating Expenses				:	8	1	ļ		1		507	Į,	П				:		200000
Total Expenses	\$ 1016 637	37 \$ 94 078	اً ۳	193 774 \$	53,420	1	5 14 337	۱,	386	80.61	/6 902	152 904	2 165,728	39 008	4		4,502	004'8)	2,309,040
CHANGE IN NET ASSETS	\$ (43,882)		(3,203) \$ (1	(15,476) \$	(5 131) \$	7,120	\$ (3015)	\$	-∭ -	(16 845) \$	(1 785)	\$ (35 495)	\$ (12,864)	\$ (2,091)	<u>~</u>	35 \$ 17	178 972 \$	(65 908)	(21,568)
				_				,		•			,	,				•	
CAPITAL EXPENSES	\$ 5339	5	<u>د</u> ن	4,200 \$!	i	•	٠ 4	4,341	i	!	i	i •••	!	· ••	n i	6 489 5	i	50 369

HOPE HOUSE OF MILWAUKEE, INC. SCHEDULE OF PROGRAM REVENUE AND EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2013

Program Name · Emergency Shelter

	 Actual	 Approved Budget	/arıance om Budget
REVENUE Contributions and Donations Grants From Government Agencies	\$ 44,514 94,811	\$ 89,917 94,103	\$ ` (45,403) 708
Department of Health and Human Services Revenue	20,482	20,482	
Total Revenue	\$ 159,807	\$ 204,502	\$ (44,695)
EXPENSES			
Salaries	\$ 105,537	\$ 103,378	\$ 2,159
Employee Benefits	11,074	10,041	1,033
Payroll Taxes	11,465	10,944	521
Professional Fees	840	980	(140)
Supplies	1,051	505	546
Telephone	3,274	4,212	(938)
Postage and Shipping		20	(20)
Occupancy	23,737	23,339	398
Equipment Costs	3,602	4,866	(1,264)
Printing and Publications		187	(187)
Employee Travel	101	50	51
Conferences, Conventions and Meetings	160	100	60
Specific Assistance to Individuals	36,836	36,800	36
Client Transportation	2,558	3,080	(522)
Miscellaneous	1,559	800	759
Total Expenses	\$ 201,794	\$ 199,302	\$ 2,492

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

Program Name: Emergency Shelter

DEVENUE	 Actual	 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 Health and 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, INCORPORATED SCHEDULE OF EXPENDITURES OF FEDERAL AND STATE AWARDS FOR THE YEAR ENDED DECEMBER 31, 2013

Federal Grantor/ Pass-Through Grantor/ Program or Cluster Title	Federal CFDA Number	Pass-Through Entity Identifying Number/ State ID		deral nditures		Total
FEDERAL EXPENDITURES						
U.S. Department of Agriculture State of Wisconsin - Department of Public Instruction						
Child and Adult Care Food Program	10 558				\$	23,459
Total U.S. Department of Agriculture					\$	23,459
U.S. Department of Housing and Urban Development						
City of Milwaukee - Community Organizer						
Community Development Block Grants/Entitlement Grants	14 218		\$	44,501		
City of Milwaukee - Shelter Grant	14 218			150,694		
Community Development Block Grants/Entitlement Grants City of Milwaukee - Youth Programs	14 2 10			150,094		
Community Development Block Grants/Entitlement Grants	14 218			29,117		
Total CFDA #14 218					\$	224,312
City of Milwaukee - Emergency Shelter Grant						
Emergency Solutions Grant Program	14 231		\$	14,716		
City of Milwaukee - Federal McKinney				,		
Emergency Solutions Grant Program	14 231			27,681		
City of Milwaukee - Transitional Housing Program	14 231			20.752		
Emergency Solutions Grant Program Total CFDA #14 231	14 23 1			20,752		63,149
Community Advocates - Protective Payee	14 235		•	75 000		
Supportive Housing Program Direct Award - Homeless Management Information System	14 233		\$	75,699		
Supportive Housing Program	14 235			14,387		
Direct Award - SRO Housing						
Supportive Housing Program	14 235			32,852		
Direct Award - Transitional Housing Program	14 235			ECO 153		
Supportive Housing Program Total CFDA #14 235	14 233			560,153		683,091
City of Milwaukee	14 267					15,000
Continuum of Care Program Total U.S. Department of Housing and Urban Development	14 207				\$	985,552
					<u> </u>	
U.S. Department of Homeland Security						
Hunger Task Force - FEMA Emergency Food and Shelter National Board Program	97 024				\$	34,371
Total U.S. Department of Homeland Security	J. J.				\$	34,371
U.C. Donothers of New Hood Court Courts		— — -	_			 -
U.S. Department of Health and Social Services Community Outreach Health Center - Angel of Hope Clinic						
Consolidated Health Centers	93 224				\$	9,995
Milwaukee County Department of Health and Human Services - ESG						•
Foster Care Title IV-E	93 658					20,482
Total U.S. Department of Health and Social Services					\$	30,477
TOTAL FEDERAL EXPENDITURES					\$	1,073,859
Otale Occasion						
State Grantor/ Pass-Through Grantor/						State
Program or Cluster Title					Ex	penditures
STATE EXPENDITURES State of Wisconsin						
Community Outreach Health Center						
Bnghter Futures		2013 SSSG			\$	19,929
-					_	
TOTAL STATE EXPENDITURES					\$	19,929

HOPE HOUSE OF MILWAUKEE, INCORPORATED NOTE TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AND STATE AWARDS FOR THE YEAR ENDED DECEMBER 31, 2013

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 sheet as of December 31, 2013, and the related statement of activities and cash flows for the year then ended and the related notes to the financial statements, and have issued our report thereon dated April 24, 2014

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 entity'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 entity'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 entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose

RITZ HOLMAN LLP
Certified Public Accountants

Milwaukee, Wisconsin April 24, 2014



Report on Compliance for Each Major Federal Program and Report on Internal Control Over Compliance Required by OMB Circular A-133

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

Report on Compliance for Each Major Federal 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* that could have a direct and material effect on each of Hope House of Milwaukee, Incorporated's major federal programs for the year ended December 31, 2013 Hope House of Milwaukee, Incorporated's major federal 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 programs

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of Hope House of Milwaukee, Incorporated's major federal 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; and OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Those standards and OMB Circular A-133 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 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 program. However, our audit does not provide a legal determination of Hope House of Milwaukee, Incorporated's compliance.

Opinion on Each Major Federal 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 programs for the year ended December 31, 2013.

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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 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 program and to test and report on internal control over compliance in accordance with OMB Circular A-133, 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 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 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 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 Accordingly, this report is not suitable for any other purpose

RITZ HOLMAN LLP
Certified Public Accountants

Milwaukee, Wisconsin April 24, 2014

HOPE HOUSE OF MILWAUKEE, INCORPORATED SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED DECEMBER 31, 2013

SECTION I - SUMMARY OF AUDITOR'S RESULTS

Financia	Stat	teme	nts
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Type of auditor's report issued

Unmodified

Internal control over financial reporting

• Material weakness(es) identified?

No

• Significant deficiencies identified?

None Reported

Noncompliance material to financial statements noted?

No

Federal Awards

Internal control over major programs:

Material weakness(es) identified?

No

· Significant deficiencies identified?

None Reported

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

Unmodified

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

No

Identification of major programs:

CFDA-Numbers

Name of Federal Programs or Cluster

14 218

14 231

Community Development Block Grants/Entitlement Grants Emergency Solutions Grant Program

Dollar threshold used to distinguish between Type A and Type B programs:

\$300,000

Auditee qualified as low-risk auditee?

Yes

Was a management letter or other document conveying audit comments issued as a result of this audit?

No

HOPE HOUSE OF MILWAUKEE, INCORPORATED SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED DECEMBER 31, 2013

SECTION II - FINANCIAL STATEMENT FINDINGS

No matters were reported.

SECTION III - FEDERAL AWARD FINDINGS AND QUESTIONED COSTS

No matters were reported.