See a Social Security Number? Say Something!
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Or call the IRS Identity Theft Hotline at 1-800-908-4490

Form **990**

Return of Organization Exempt From Income Tax

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.*

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2014 calendar year, or tax year beginning January 1 , 2014, and ending December 31 , 20 14

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization **Hope House of Milwaukee, Inc.**
Doing business as
Number and street (or P O box if mail is not delivered to street address) Room/suite
P.O. BOX 04095
City or town, state or province, country, and ZIP or foreign postal code
Milwaukee, WI 53204

D Employer identification number **39-1592900**

E Telephone number **414-645-2122**

G Gross receipts $ **1,710,893**

F Name and address of principal officer **Wendy Weckler**
209 West Orchard Street, Milwaukee, WI 53204

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

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

J Website: ▶ **www.hopehousemke.org**

H(c) Group exemption number ▶ **N/A**

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation **1987**

M State of legal domicile **WI**

Part I Summary

Activities & Governance	1	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, 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	13
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	45
	6	Total number of volunteers (estimate if necessary)	6	5
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	N/A

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	2,040,825	1,706,648
	9	Program service revenue (Part VIII, line 2g)	0	0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	(250,634)	2,634
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,055	1,611
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,793,246	1,710,893
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	333,086	320,976
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,360,570	1,196,461
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	785,714	733,853
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,146,284	1,930,314
	19	Revenue less expenses. Subtract line 18 from line 12	(353,038)	(219,421)

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	1,455,421	1,101,302
	21	Total liabilities (Part X, line 26)	196,344	61,646
	22	Net assets or fund balances. Subtract line 21 from line 20	1,259,077	1,039,656

Part II Signature Block

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

Sign Here

Signature of officer — Date 5/14/15

Type or print name and title PRESIDENT

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			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** (2014)

SCANNED JUN 16 2015

MAY 19 2015

921-22-26

21

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☑

1 Briefly describe the organization's mission:

It is the mission of Hope House "to end homelessness & create healthy communities." To this end Hope House provides: emergency and transitional shelter for homeless men, women, and families, permanent housing for homeless individuals, a low-cost medical clinic, emergency food pantry, youth and adult education programs, and protective payee services.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

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

4a (Code:) (Expenses $ **871,564** including grants of $ **86,652**) (Revenue $)

Transitional Housing for homeless single adult women and families-Hope House provides transitional housing to 14 single women and 10 families. In 2014, 75% of residents obtained permanent housing upon discharge. In addition, 33% of residents had obtained employment upon leaving the program, and 100% had utilized 3 or more supportive services during their stay. Fusing best practice research, consumer input, and 27 years experience, Hope House has developed a method that includes the following: 1. Extended Shelter and Supportive Case Management, 2. Comprehensive Assessment and Service Planning, 3. Practical On Site Education, 4. Consistent Reinforcement and Role Modeling, and 5. Referral, linkage, and Engagement of Community Based Services. Using this method, Hope House has consistently achieved benchmarks that exceed those set by the Department of Housing and Urban Development for Transitional Housing Programs.

4b (Code:) (Expenses $ **205,005** including grants of $ **24,521**) (Revenue $)

Emergency Shelter for single adult men--The Threshold Emergency Shelter program is designed to provide short-term shelter and supportive services to 13 homeless single men at a time. Program Personnel work quickly with the men to develop gainful employment opportunities and to secure permanent housing. By providing practical, applicable information, education and services in a condensed time-frame, men are provided intensive, "life ready" skills in the shortest period possible. The efficient process moves men into stable housing as swifty as possible, Moreover, they have the necessary resources and tools to help ensure they can maintain their housing. In 2014, 145 single men were served by the Thresholds Programs, and 32% obtained stable housing upon discharge.

4c (Code:) (Expenses $ **203,063** including grants of $ **192,660**) (Revenue $)

USS Food Pantry-Food Services--The United Southside Food Pantry has developed a multifaceted continuum of services designed to provide emergency food distribution, reduce hunger, improve nutrition, and enhance the quality of life for households in the 53204 zip code. The three tiers--healthful food distribution, applicable education on nutrition, and relevant service and referral-- create a positive, proactive and integrative method for recipients to improve and maintain their quality of life. In 2014, total of 2,872 food packages to families and individuals in need. This emergency food fed an average of 338 adults and 197 children per month.

4d Other program services (Describe in Schedule O.)
(Expenses $ **390,922** including grants of $ **17,143**) (Revenue $)

4e Total program service expenses ▶ **$1,670,551**

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," 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		✓
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	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		✓
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		✓
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	✓	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	✓	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV.*	14b		✓
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		✓
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		✓
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17		✓
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		✓
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		✓
20 a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV 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 domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		✓
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	✓	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		✓
26	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 "Yes," complete Schedule L, Part II*	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		✓
c	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	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	✓	
30	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		✓
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		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		✓
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		✓
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? *If "Yes," complete Schedule R, Part VI*	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	✓	

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 . . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	7		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		✓	
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	45		
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)?	4a			✓
b	If "Yes," enter the name of the foreign country: ▶ ---------- See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			✓
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible 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).**				
a	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			✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f			✓
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.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			✓
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			✓
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .	9b			✓
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	N/A		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b	N/A		
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a	N/A		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	N/A		
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 . .	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* .	14b			

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI . . . . . ☑

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a 13		
b	Enter the number of voting members included in line 1a, above, who are independent .	1b 13		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Did the organization have members or stockholders?	6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		✓

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ **Wisconsin**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☑ Upon request ☐ Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

Xuyen Vo, 209 W. Orchard Street, Milwaukee, WI 53204 (414) 645-2122

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . . ☐

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

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

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

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Daniel Schley President	1	✓		✓						
(2) Rosemary Morby Vice President	1	✓		✓						
(3) Kathy Oman Secretary	1	✓		✓						
(4) Paula Smasal Treasurer	1	✓		✓						
(5) Michelle Kempen Board Member	1	✓								
(6) Peter LaBonte Board Member	1	✓								
(7) Tim Posanski Board Member	1	✓								
(8) Susan Scot Fry Board Member	1	✓								
(9) John Herreman Board Member	1	✓								
(10) Jeff Spence Board Member	1	✓								
(11) John Grisson Board Member	1	✓								
(12) Tim Heeley Board Member	1	✓								
(13) Glen Mattison Board Member	1	✓								
(14) Kenneth Schmidt Executive Director	40			✓				71,102	0	786

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Wendy Weckler	40									
Executive Director				✓				67,782	0	5,965
(16) Xuyen Vo	35									
Accounting Coordinator				✓				55,264	0	10,777
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total ▶								194,148		17,528
c Total from continuation sheets to Part VII, Section A ▶								0		0
d Total (add lines 1b and 1c) ▶								194,148		17,528

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶

		Yes	No
3	Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		✓
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		✓
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		✓

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a 12,226				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e 1,038,371				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 656,051				
	g	Noncash contributions included in lines 1a-1f $ 298,686					
	h	**Total.** Add lines 1a–1f ▶		1,706,648			
Program Service Revenue			Business Code				
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f ▶					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		2,634			2,634
	4	Income from investment of tax-exempt bond proceeds ▶					
	5	Royalties ▶					
			(i) Real / (ii) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) ▶					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less. cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss) ▶					
	8a	Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18 a					
	b	Less direct expenses b					
	c	Net income or (loss) from fundraising events ▶					
	9a	Gross income from gaming activities. See Part IV, line 19 a					
	b	Less direct expenses b					
	c	Net income or (loss) from gaming activities ▶					
	10a	Gross sales of inventory, less returns and allowances a					
	b	Less: cost of goods sold b					
	c	Net income or (loss) from sales of inventory ▶					
		Miscellaneous Revenue	Business Code				
	11a	**Returned/Refunded Assistance**	541900	30			30
	b	**Miscellaneous**	541900	1,581			1,581
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d ▶		1,611			
	12	**Total revenue.** See instructions. ▶		1,710,893			4,245

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 . . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	320,976	320,976		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	149,158		144,989	4,169
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	819,388	762,815	554	56,019
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9 Other employee benefits	116,833	112,385	0	4,448
10 Payroll taxes	111,082	93,041	11,705	6,336
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	10,500		10,500	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	15,490	13,500	1,860	130
12 Advertising and promotion				
13 Office expenses	87,312	77,140	6,581	3,591
14 Information technology	17,147	15,781	516	850
15 Royalties				
16 Occupancy	73,845	73,501	344	
17 Travel	4,415	3,910	505	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	885	670	215	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	112,487	112,487		
23 Insurance	19,540	19,540		
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a **Youth Education supplies & field trip**	5,100	5,100		
b **Membership, Dues & Fees**	4,370	119	3,501	750
c **Direct clients benefit**	7,679	7,679		
d **Food-Perishable & Non-Perishable**	48,654	47,996	658	
e All other expenses **Miscellaneous**	5,453	3,911	1,542	
25 **Total functional expenses.** Add lines 1 through 24e	1,930,314	1,670,551	183,470	76,293
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	426,287	1	480,398
	2	Savings and temporary cash investments	101,011	2	0
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	333,268	4	143,638
	5	Loans and other receivables from current and former officers, directors, 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 organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	22,540	8	0
	9	Prepaid expenses and deferred charges	5,883	9	17,166
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 2,443,330			
	b	Less: accumulated depreciation — 10b: 1,983,230	566,432	10c	460,100
	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)	1,455,421	16	1,101,302
Liabilities	17	Accounts payable and accrued expenses	99,749	17	31,304
	18	Grants payable		18	
	19	Deferred revenue	11,000	19	0
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 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	85,595	25	30,342
	26	**Total liabilities.** Add lines 17 through 25	196,344	26	61,646
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	1,214,689	27	976,156
	28	Temporarily restricted net assets	44,388	28	63,500
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	1,259,077	33	1,039,656
	34	Total liabilities and net assets/fund balances	1,455,421	34	1,101,302

Part 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	1,710,893
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,930,314
3	Revenue less expenses. Subtract line 2 from line 1	3	(219,421)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,259,077
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,039,656

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	✓	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	✓	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization	Employer identification number
Hope House of Milwaukee, Inc.	39-1592900

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is. (For lines 1 through 11, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . ☐

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . .	2,240,942	2,243,121	2,302,102	2,040,825	1,706,648	10,533,638
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	2,240,942	2,243,121	2,302,102	2,040,825	1,706,648	10,533,638
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0
6 **Public support.** Subtract line 5 from line 4.						10,533,638

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	2,240,942	2,243,121	2,302,102	2,040,825	1,706,648	10,533,638
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	280	109	616	3,085	2,634	6,724
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	867	282	2,109	3,055	1,611	7,924
11 **Total support.** Add lines 7 through 10						10,548,286
12 Gross receipts from related activities, etc. (see instructions)					12	0

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

Section C. Computation of Public Support Percentage

14	Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	99.86 %
15	Public support percentage from 2013 Schedule A, Part II, line 14	15	99.87 %

16a **33 1/3% support test—2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

b **33 1/3% support test—2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2014.** 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test—2013.** 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2014** (line 10c, column (f) divided by line 13, column (f)) . . .	17	%
18	Investment income percentage from **2013** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in* ***Part VI****, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer (b) below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s)*	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* ***(see instructions)***

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer (a) and (b) below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement*	2b		
3	Parent of Supported Organizations. ***Answer (a) and (b) below.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI*** *the role played by the organization in this regard.*	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions.	
7	**Total annual distributions.** Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 2014 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014			
a				
b				
c				
d				
e	From 2013			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7	**Excess distributions carryover to 2015.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b				
c				
d	Excess from 2013 . . .			
e	Excess from 2014 . . .			

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

Part II, Section B, Line 10:

Description	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014
Returned/Refund Assistance	195	99	135	130	30
Miscellaneous Income	672	183	1,974	2,925	1,581
Total Line 10	867	282	2,109	3,055	1,611

HOPE HOUSE OF MILWAUKEE, INCORPORATED

SCHEDULE OF UNRESTRICTED FUNCTIONAL REVENUE AND EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 2013

	Chrysalis-Transitional	HMIS	Threshold - Emergency	SRO	US Food Pantry Food Service	Angel of Hope Clinic	Shining Star	Path to Progress	Community Outreach	Protective Payee	Mercy Housing	Special Case Management	Management and General	Fund-Raising	Total
REVENUES															
	$ 559,879	$ —	$ —	$ —	$ —	$ —	$ 274	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ 560,153
	—	14,387	—	—	—	—	—	—	—	—	—	—	—	—	14,387
	—	—	—	32,852	—	—	—	—	—	—	—	—	—	—	32,852
	135,023	—	15 671	—	—	—	—	—	—	—	—	—	—	—	150,694
	—	—	—	—	—	—	—	—	44 501	—	—	—	—	—	44,501
	—	—	—	—	—	—	29,117	—	—	—	—	—	—	—	29,117
	3,960	—	23,721	—	—	—	—	—	—	—	—	—	—	—	27,681
	20,752	—	14,716												35,468
	—	—	19 929	—	—	—	—	—	—	—	—	—	—	—	19,929
	—	—	—	—	—	9,995	—	—	—	—	—	—	—	—	9,995
	23,459	—	—	—	—	—	—	—	—	—	—	—	—	—	23,459
	—	—	—	—	—	—	—	—	—	—	174,276	—	—	—	174 276
	—	—	20,482	—	—	—	—	—	—	—	—	—	—	—	20,482
	—	—	—	—	—	—	—	—	—	75,699	—	—	—	—	75,699
	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
	—	—	29,883	—	4,488	—	—	—	—	—	—	—	—	—	34,371
	—	15,000	—	—	—	—	—	—	—	—	—	—	—	—	15,000
	—	—	—	—	—	—	—	—	—	—	—	10,000	—	—	10,000
	—	—	—	—	—	—	—	—	—	—	—	—	—	12,386	12,386
	49,250	—	20,800	3,000	7,159	—	76,750	—	—	—	—	—	239 665	750	397,374
	—	—	—	—	—	—	—	—	—	—	—	—	3,085	—	3,085
Donated Goods and Services	78,244	—	23,714	10,146	168 672	203	22,832	2 325	26 779	3,433	4,413	—	326	—	341,087
Other Income	—	—	—	—	—	2,195	—	130	—	—	—	—	730	—	3,055
Net Assets Released From Restrictions	—	—	—	—	—	—	8,452	—	—	—	—	—	—	—	8,452
Total Revenue (Carried Forward)	$ 870 567	$ 29,387	$ 168 917	$ 45,998	$ 180 319	$ 12 393	$ 137 425	$ 2,455	$ 71,280	$ 79,132	$ 178 689	$ 10 000	$ 243 806	$ 13,136	$ 2,043,504

HOPE HOUSE OF MILWAUKEE, INC.
SCHEDULE OF PROGRAM REVENUE AND EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2014

Program Name : Emergency Shelter

	Actual	Approved Budget	Variance From Budget
REVENUE			
Contributions and Donations	$ 34,521	$ 108,691	$ (74,170)
Grants From Government Agencies	76,474	64,000	12,474
	33,186	33,186	---
Total Revenue	$ 144,181	$ 205,877	$ (61,696)
EXPENSES			
Salaries	$ 116,374	$ 111,086	$ 5,288
Employee Benefits	11,960	12,452	(492)
Payroll Taxes	13,836	12,220	1,616
Professional Fees	1,050	1,133	(83)
Supplies	380	150	230
Telephone	3,053	3,600	(547)
Postage and Shipping	15	20	(5)
Occupancy	22,366	23,545	(1,179)
Equipment Costs	3,968	4,776	(808)
Employee Travel	137	150	(13)
Conferences, Conventions and Meetings	81	11	70
Specific Assistance to Individuals	37,888	34,092	3,796
Client Transportation	980	1,000	(20)
Miscellaneous	1,644	1,642	2
Total Expenses	$ 213,732	$ 205,877	$ 7,855

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

Program Name · Emergency Shelter

	Actual	Approved Budget	Variance From Budget
REVENUE			
Contributions and Donations	$ 44,514	$ 89,917	$ (45,403)
Grants From Government Agencies	94,811	94,103	708
	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 UNRESTRICTED FUNCTIONAL REVENUE AND EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2014

	Chrysalis-Transitional	HMIS	Threshold - Emergency	SRO	US Food Pantry Food Service	Angel of Hope Clinic	Shining Star	Path to Progress	Community Outreach	Protective Payee	Mercy Housing	Special Case Management	Management and General	Fund-Raising	Total
REVENUES															
	$ 437,351	$ —	$ —	$ —	$ —	$ —	$ 124	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ 437,475
	—	—	—	20,573	—	—	—	—	—	—	—	—	—	—	20,573
	129,232	—	21,462	—	—	—	—	—	—	—	—	—	—	—	150,694
	—	—	—	—	—	—	29,696	—	—	—	—	—	—	—	29,696
	1,319	—	31,205	—	—	—	—	—	—	—	—	—	—	—	32,524
	12,220	—	11,214	—	—	—	—	—	—	—	—	—	—	—	23,434
	—	—	20,000	—	—	—	—	—	—	—	—	—	—	—	20,000
	20,512	—	—	—	—	—	—	—	—	—	—	—	—	—	20,512
	—	—	—	—	—	—	—	—	—	—	158,267	—	—	—	158,267
	—	—	33,186	—	—	—	—	—	—	—	—	—	—	—	33,186
	—	—	—	—	—	—	—	—	—	—	—	36,945	—	—	36,945
	—	—	—	—	—	—	—	—	—	24,153	—	—	—	—	24,153
	—	—	—	—	—	—	25,000	—	—	—	—	—	—	—	25,000
	—	—	—	—	745	—	—	—	—	—	—	—	—	—	745
	—	13,500	—	11,667	—	—	—	—	—	—	—	—	—	—	25,167
	—	—	—	—	—	—	—	—	—	—	—	10,000	—	—	10,000
	—	—	—	—	—	—	—	—	—	—	—	—	—	12,226	12,226
	22,850	—	10,000	105	32,020	—	25,794	—	—	—	5,000	—	188,096	—	283,865
	—	—	—	—	—	—	—	—	—	—	—	—	2,634	—	2,634
	86,652	—	24,521	3,598	170,120	—	11,248	460	—	690	1,547	—	—	250	299,086
	—	—	—	—	—	—	560	30	—	—	—	—	1,021	—	1,611
[illegible]	—	—	—	—	23,549	—	20,639	—	—	—	—	—	—	—	44,388
Total Revenue (Carried Forward)	$ 710,136	$ 13,500	$ 151,588	$ 35,943	$ 226,434	$ —	$ 113,261	$ 490	$ —	$ 24,843	$ 164,814	$ 46,945	$ 191,751	$ 12,476	$ 1,692,181

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

Hope House of Milwaukee, Inc.

Employer identification number

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
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

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

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

☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

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

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

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

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

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

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

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

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

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

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

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

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

(i) Revenue included in Form 990, Part VIII, line 1 ▶ $
(ii) Assets included in Form 990, Part X ▶ $

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

a Revenue included in Form 990, Part VIII, line 1 ▶ $
b Assets included in Form 990, Part X ▶ $

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds.

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Temporarily restricted endowment ▶ _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		40,000		40,000
b Buildings		1,999,040	1,631,910	367,130
c Leasehold improvements				
d Equipment		367,579	318,943	48,636
e Other		36,711	32,377	4,334
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				460,100

Part VII Investments—Other Securities.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments—Program Related.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) **Protective Payee**	**11,392**
(3) **Capital Lease**	**18,950**
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	**30,342**

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	1,711,293
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	400		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	400
3	Subtract line **2e** from line **1**			3	1,710,893
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.				
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	1,710,893

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	1,930,714
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.				
a	Donated services and use of facilities	2a	400		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	400
3	Subtract line **2e** from line **1**			3	1,930,314
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
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 expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	1,930,314

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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, 2014 and 2013, 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 year 2010 and beyond remain subject to examination by the Internal Revenue Service.

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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.*

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

Hope House of Milwaukee, Inc.

Employer identification number

39-1592900

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1. In Kind Donation	315		$ 1,623	Donor Stated Value	Books and Publications
2. In Kind Donation	108		$ 30,138	Donor Stated Value	Clothing and Household Goods
3. In Kind Donation	6,420		$ 225,827	Donor Stated Value	Food
4. In Kind Donation	450		$ 5,602	Donor Stated Value	Hygiene
5. In Kind Donation	228		$ 9,024	Donor Stated Value	Linen
6. In Kind Donation	105		$ 10,641	Donor Stated Value	Toys
7. In Kind Donation	123		$ 2,132	Donor Stated Value	Holiday Gift Bags
8. In Kind Donation	550		$ 3,420	Donor Stated Value	Office/School Supplies
9. In Kind Donation	323		$ 2,509	Donor Stated Value	Infant Items
10. In Kind Donation	315		$ 7,770	Donor Stated Value	Other

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), 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 files record food distributions and meals served. In addition food pantry inventory is audited annually. Other donated items including School Supplies (distributed at an annual Street Fair/Shinning Stars Programs), Household Goods (graduates of Residential Programs), Holiday Gift Bags (Community Outreach , Residential Programs), Hygiene Items (Food pantry, Residential Programs). All donations are stored in secure locations prior to distribution.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ 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.*

OMB No 1545-0047

2014

Open To Public Inspection

Name of the organization

Hope House of Milwaukee, Inc.

Employer identification number

39-1592900

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications	✓		1,623	Donor stated values
5	Clothing and household goods	✓		30,138	Donor stated values
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded				
10	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory	✓	710	225,827	Donor stated values
20	Drugs and medical supplies	✓	2	100	Donor stated values
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (Hygiene)	✓	40	5,602	Donor stated values
26	Other ▶ (Linen)	✓	10	9,024	Donor stated values
27	Other ▶ (Toys)	✓	40	10,641	Donor stated values
28	Other ▶ (Miscellaneous)	✓	35	15,731	Donor stated values

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29

		Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a		✓
b	If "Yes," describe the arrangement in Part II.		
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31		✓
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a		✓
b	If "Yes," describe in Part II.		
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Part 1, Line 28 - Furniture $25 + Holiday Gift Bags $2,135 + Office/School supplies $3,420 + Infant items $2,509 + Others $7,642 = $15,731.

"Others" includes craft materials, bus tickets, bicycle, Plans, ticket (event), etc.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

Hope House of Milwaukee, Inc.

Employer identification number

39-1592900

Part III Line 4d Description of Other Program Services Expenses

Protective Payee Services for disabled adults and families (Expenses $36,810 including Grant of $ 290) (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 inancial oversight for individuals with limited disability income, so that the individual stays in housing and has the resources to provide for basic needs.

Homeless Management Information Systems (Expenses $13,700 including Grant of $) (Revenue $)

Single Room Occupancy-Surgeon's Quarters (Expenses $50,170 including Grant of $ 3,598) (Revenue $)

Angel of Hope Clinic-Medical Services (Expenses $11,849 including Grant of $) (Revenue $)

Shining Star-Youth Education Program (Expenses $77,043 including Grant of $ 11,248) (Revenue $)

Mercy Housing-Johnston & Catherine Center Resident Services (Expenses $153,769 including Grant of $ 1,547) (Revenue $)

Path to Progress (Expenses $6,023 including Grant of $ 460) (Revenue $)

Community Outreach (Expenses $396 including Grant of $) (Revenue $)

Special Case Management (Expenses $41,162 including Grant of $) (Revenue $)

Total Other Program Services Part III Line 4d (Expenses $390,922 including Grant of $ 17,143) (Revenue $)

Part VI Section B. Policies

Line 11b - At the time of annual financial audit approval process the 990 form is presented to the executive Director, Finance-Personnel Committee and Board of Directors.

Line 12c - Board member sign acknowledgement of receipt of policy, Board signs off on purchases more than $5,000 including monitoring of vendor.

Line 15a and Line 15b - The organization monitors local wage studies issued by the NonProfit Center of Milwaukee and the salary range for officers of similar sized non-profits operating in Southeastern Wisconsin.

Part VI Section C. Disclosure

Line 19 - Governing conflict of interest and financial statement documents are available upon written request.

HOPE HOUSE OF MILWAUKEE, INCORPORATED

FINANCIAL STATEMENTS

FOR THE YEARS ENDED DECEMBER 31, 2014 AND 2013

RitzHolman CPAs

HOPE HOUSE OF MILWAUKEE, INCORPORATED

TABLE OF CONTENTS

RitzHolman CPAs

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, 2014 and 2013, 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, 2014 and 2013, 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.

Ritz Holman LLP
Serving businesses, nonprofits, individuals and trusts

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Board of Directors
Hope House of Milwaukee, Incorporated

Supplementary and Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole The schedules of unrestricted functional revenue and expenses and program revenue and expenses are presented for purposes of additional analysis and are not a required part of the basic financial statements. The accompanying schedule of expenditures of federal and state awards is presented for purposes of additional analysis as required by U.S. Office of Management and Budget Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, and 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 15, 2015, on our consideration of Hope House of Milwaukee, Incorporated's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Hope House of Milwaukee, Incorporated's internal control over financial reporting and compliance.

RITZ HOLMAN LLP
Certified Public Accountants

Milwaukee, Wisconsin
April 15, 2015

HOPE HOUSE OF MILWAUKEE, INCORPORATED
BALANCE SHEETS
DECEMBER 31, 2014 AND 2013

ASSETS

	2014	2013
CURRENT ASSETS		
Cash and Cash Equivalents	$ 469,006	$ 368,241
Accounts Receivable	44,457	44,054
Grants Receivable	99,181	289,214
Investments	---	101,011
Inventory	---	22,540
Prepaid Expenses	17,166	5,883
Total Current Assets	$ 629,810	$ 830,943
FIXED ASSETS		
Land	$ 40,000	$ 40,000
Building and Improvements	1,999,040	1,997,321
Furniture and Equipment	404,290	399,854
Less: Accumulated Depreciation	(1,983,230)	(1,870,743)
Total Fixed Assets	$ 460,100	$ 566,432
OTHER ASSETS		
Cash - Protective Payee Accounts	$ 11,392	$ 58,046
Total Other Assets	$ 11,392	$ 58,046
TOTAL ASSETS	$ 1,101,302	$ 1,455,421

LIABILITIES AND NET ASSETS

CURRENT LIABILITIES		
Accounts Payable	$ 12,314	$ 38,505
Accrued Payroll	10,740	50,011
Accrued Vacation	8,250	11,233
Deferred Revenue	---	11,000
Current Portion of Long-Term Liabilities	9,797	9,549
Total Current Liabilities	$ 41,101	$ 120,298
LONG-TERM LIABILITIES		
Capital Leases	$ 18,950	$ 27,549
Less: Current Portion of Capital Leases	(9,797)	(9,549)
Total Long-Term Liabilities	$ 9,153	$ 18,000
OTHER LIABILITIES		
Protective Payee Liability	$ 11,392	$ 58,046
Total Other Liabilities	$ 11,392	$ 58,046
Total Liabilities	$ 61,646	$ 196,344
NET ASSETS		
Unrestricted	$ 976,156	$ 1,214,689
Temporarily Restricted	63,500	44,388
Total Net Assets	$ 1,039,656	$ 1,259,077
TOTAL LIABILITIES AND NET ASSETS	$ 1,101,302	$ 1,455,421

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, 2014 AND 2013

	2014			2013		
	Unrestricted	Temporarily Restricted	Total	Unrestricted	Temporarily Restricted	Total
REVENUE						
Department of Housing and Urban Development						
Supportive Housing Program	$ 437,475	$ ---	$ 437,475	$ 560,153	$ ---	$ 560,153
Homeless Management Information System	---	---	---	14,387	---	14,387
Supportive Services - Single Room Occupancy Program	20,573	---	20,573	32,852	---	32,852
City of Milwaukee						
Shelter Grant	150,694	---	150,694	150,694	---	150,694
Community Organizer	---	---	---	44,501	---	44,501
Youth Program	29,696	---	29,696	29,117	---	29,117
Emergency Shelter Grant	32,524	---	32,524	27,681	---	27,681
Emergency Transitional Housing	23,434	---	23,434	35,468	---	35,468
Outreach Community Health Center						
State Shelter	20,000	---	20,000	19,929	---	19,929
Angel of Hope Clinic	---	---	---	9,995	---	9,995
Department of Public Instruction	20,512	---	20,512	23,459	---	23,459
Mercy Housing	158,267	---	158,267	174,276	---	174,276
Milwaukee County - Department of Health and Human Services						
Adult Service	33,186	---	33,186	20,482	---	20,482
Supportive Housing Services	36,945	---	36,945	---	---	---
Community Advocates						
Protective Payee	24,153	---	24,153	75,699	---	75,699
Stay Strong	25,000	---	25,000	---	---	---
Emergency Food and Shelter	---	---	---	1	---	1
Hunger Task Force	745	---	745	34,371	---	34,371
Other Governmental Grants	25,167	---	25,167	15,000	---	15,000
Other Service Grant - Cardinal	10,000	---	10,000	10,000	---	10,000
Community Shares	12,226	---	12,226	12,386	---	12,386
Contributions	283,865	63,500	347,365	397,374	18,691	416,065
Interest Income	2,634	---	2,634	3,085	---	3,085
Donated Goods and Services	299,086	---	299,086	341,087	---	341,087
Other Income	1,611	---	1,611	3,055	---	3,055
Net Assets Released From Restrictions	44,388	(44,388)	---	8,452	(8,452)	---
Total Revenue	$ 1,692,181	$ 19,112	$ 1,711,293	$ 2,043,504	$ 10,239	$ 2,053,743
EXPENSES						
Program Services	$ 1,670,951	$ ---	$ 1,670,951	$ 1,876,489	$ ---	$ 1,876,489
Management and General	183,470	---	183,470	199,091	---	199,091
Fund-Raising	76,293	---	76,293	77,482	---	77,482
Total Expenses	$ 1,930,714	$ ---	$ 1,930,714	$ 2,153,062	$ ---	$ 2,153,062
Loss on Impairment of Building	---	---	---	253,719	---	253,719
Total Expenses and Losses	$ 1,930,714	$ ---	$ 1,930,714	$ 2,406,781	$ ---	$ 2,406,781
CHANGE IN NET ASSETS	$ (238,533)	$ 19,112	$ (219,421)	$ (363,277)	$ 10,239	$ (353,038)
Net Assets, Beginning of Year	1,214,689	44,388	1,259,077	1,577,966	34,149	1,612,115
NET ASSETS, END OF YEAR	$ 976,156	$ 63,500	$ 1,039,656	$ 1,214,689	$ 44,388	$ 1,259,077

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, 2014 AND 2013

	2014	2013
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in Net Assets	$ (219,421)	$ (353,038)
Adjustments to Reconcile Change in Net Assets to Net Cash Provided by Operating Activities		
Depreciation	112,487	108,178
Impairment Loss	---	253,719
(Increase) Decrease in Accounts Receivable	(403)	21,101
(Increase) Decrease in Grants Receivable	190,033	(20,411)
(Increase) Decrease in Inventory	22,540	(898)
(Increase) Decrease in Prepaid Expenses	(11,283)	3,176
Increase (Decrease) in Accounts Payable	(26,191)	5,867
Decrease in Accrued Payroll	(39,271)	(1,911)
Increase (Decrease) in Accrued Vacation	(2,983)	508
Increase (Decrease) in Deferred Revenue	(11,000)	11,000
Net Cash Provided by Operating Activities	$ 14,508	$ 27,291
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of Fixed Assets	$ (6,155)	$ (35,248)
Purchase of CD Investment	---	(467)
Proceeds from Sale of CD Investment	101,011	---
Net Cash Provided (Used) by Investing Activities	$ 94,856	$ (35,715)
CASH FLOWS FROM FINANCING ACTIVITIES		
Proceeds from Capital Lease	$ ---	$ 13,164
Payments on Capital Lease	(8,599)	(5,942)
Net Cash (Used) Provided by Financing Activities	$ (8,599)	$ 7,222
Net Increase (Decrease) in Cash and Cash Equivalents	$ 100,765	$ (1,202)
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR	368,241	369,443
CASH AND CASH EQUIVALENTS AT END OF YEAR	$ 469,006	$ 368,241
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION		
Interest Paid	$ 2,384	$ 1,488

The accompanying notes are an integral part of these financial statements

HOPE HOUSE OF MILWAUKEE, INCORPORATED

NOTES TO THE FINANCIAL STATEMENTS

DECEMBER 31, 2014 AND 2013

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, 2014 and 2013 was $11,392 and $58,046, respectively

The Organization maintains its cash balances at several financial institutions Accounts at each institution are insured by the Federal Deposit Insurance Corporation up to $250,000. As of December 31, 2014 and 2013, the Organization's uninsured cash balances totaled $221,491 and $217,260, 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.

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 $299,086 and $341,087 for the years ended December 31, 2014 and 2013, respectively. Included in this amount is $-0- and $22,540, which is reflected as inventory on the financial statements as of December 31, 2014 and 2013, respectively. All donations, including those classified as general and administrative, are passed through to clients.

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	2014	2013
U.S. Department of Housing and Urban Development	$ ---	$129,849
City of Milwaukee	44,802	52,318
Milwaukee County	13,103	---
Outreach Community Health Center	---	853
Department of Administration	10,212	---
Department of Public Instruction	2,243	4,689
Mercy Housing	22,462	59,902
Community Advocates	---	11,678
Department of Health and Human Services	5,531	3,414
Hunger Task Force	---	25,678
Other Government	828	833
Total	$99,181	$289,214

NOTE C - Temporarily Restricted Net Assets

At December 31, 2014 and 2013, the Organization had temporarily restricted net assets that were available for the following purposes.

	2014	2013
Shining Star	$63,500	$20,839
Food Pantry	---	23,549
Total	$63,500	$44,388

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, 2014 and 2013, approximately 61% and 62%, 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 $1,879 and $2,895 for the years ended December 31, 2014 and 2013, respectively.

The following is a schedule, by years, of the future minimum payments required under the leases as of December 31, 2014

Year	Amount
2015	$1,371
2016	686
Total	$2,057

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 $25,972 and $16,837 for the years ended December 31, 2014 and 2013, respectively. Amortization of the capital lease is included in depreciation expense for the years ended December 31, 2014 and 2013

Future minimum lease payments are as follows:

Year	Amount
2015	$11,063
2016	5,719
2017	4,226
Less amount representing interest	(2,058)
Total	$18,950

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, 2014 and 2013, were $-0- and $16,223, respectively.

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, 2014 and 2013, 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. In 2013, 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, 2014 and 2013, 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 2010 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, 2014 through April 15, 2015, 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, 2014

	Chrysalis-Transitional	HMIS	Threshold - Emergency	SRO	US Food Pantry Food Service	Angel of Hope Clinic	Shining Star	Path to Progress	Community Outreach	Protective Payee	Mercy Housing	Special Case Management	Management and General	Fund-Raising	Total
Total Revenue (Brought Forward)	$ 710,136	$ 13,500	$ 151,588	$ 35,943	$ 226,434	$ —	$ 113,261	$ 490	$ —	$ 24,843	$ 164,814	$ 46,945	$ 191,751	$ 12,476	$ 1,692,181
EXPENSES															
Employee Expenses															
Salaries and Wages	$ 483,450	$ —	$ 122,192	$ 33,528	$ 3,723	$ 3,274	$ 54 897	$ 2,102	$ 265	$ 23,309	$ 121,904	$ 41,130	$ 5,930	$ 60,105	$ 955 809
Payroll Taxes	35,589	—	9,051	2,425	280	249	4,303	160	25	1,692	8,940	3,062	951	4,519	71,246
Unemployment insurance	8,942	—	2,475	488	104	66	1,597	27	98	565	2,570	402	96	1,678	19,108
Worker Compensation	10,002	—	2,955	1,077	56	105	1,458	69	8	505	3,370	963	21	139	20,728
Health, Dental and Disability Insurance	63,652	—	14,353	7,155	—	28	1,332	—	—	5,369	27,227	5,180	743	4,531	129,570
Training	340	—	80	25	—	—	150	—	—	—	50	25	215	—	885
Travel	939	—	137	824	25	23	214	8	—	754	964	22	505	—	4,415
Total Employee Expenses	602,914	—	151,243	45,522	4,188	3,745	63,951	2,366	396	32,194	165,025	50,784	8,461	70,972	1,201,761
Outside Services															
Professional Fees	—	13,500	—	—	—	—	—	—	—	—	—	—	1,860	130	15,490
Audit Fees	7,665	—	1,050	—	—	—	210	105	—	—	—	525	945	—	10,500
Insurance	16,023	—	1,694	—	195	586	391	195	—	456	—	—	—	—	19,540
Advertising	150	—	—	—	—	—	150	—	—	—	—	—	195	—	495
Recruitment	150	—	—	—	—	—	75	—	—	—	75	—	—	445	745
Membership, Dues and Fees	56	—	—	—	—	—	—	63	—	—	—	—	3,501	750	4,370
Subscriptions	—	—	—	—	—	—	106	—	—	—	—	—	471	233	810
Bank Fees and Interest	1,696	—	101	—	38	31	39	19	—	100	—	—	2,805	—	4,829
Total Outside Services	25,740	13,500	2,845	—	233	617	971	382	—	556	75	525	9,777	1,558	56,779
Operating Expenses															
Food - Perishable and Non-perishable	33,109	—	12,723	315	—	—	680	—	—	—	1,169	—	658	—	48,654
General Program Expenses	—	—	—	—	—	—	400	—	—	—	40	—	927	—	1,367
Office Supplies	473	—	85	78	7	—	142	133	—	335	25	80	1,554	1,519	4,431
Computer Software	2,230	200	306	—	84	84	55	28	—	—	—	—	446	850	4,283
Postage	45	—	15	15	—	—	15	45	—	480	—	—	270	1,144	2,029
Printing/Publication	—	—	—	—	—	—	—	—	—	234	—	—	—	—	234
Total Operating Expenses	35,857	200	13,129	408	91	84	1,292	206	—	1,049	1,234	80	3,855	3,513	60,998
Client Expenses															
Adult Education Fees	—	—	—	—	—	—	—	84	—	—	—	—	—	—	84
Youth Education Field Trip/Workshop	—	—	—	—	—	—	5,100	—	—	—	—	—	—	—	5,100
Beneficiary Supplies	440	—	114	—	—	—	73	—	—	—	1,048	—	—	—	1,675
Transportation Assistance	1,312	—	980	—	—	—	3,124	—	—	—	350	—	—	—	5,766
Clothing Assistance	23	—	130	—	—	—	—	—	—	—	—	—	—	—	153
Donated Services and Supplies	86,652	—	24,921	3,598	192,660	—	11,248	460	—	290	1,547	—	—	250	321,626
Total Client Expenses	88,427	—	26,145	3,598	192,660	—	19,545	544	—	290	2,945	—	—	250	334,404
Building Operating Expenses															
Building Supplies	26,649	—	3,168	—	493	959	640	320	—	388	—	—	—	—	32,615
Building Maintenance Services	19,782	—	2,247	—	226	677	451	226	—	235	—	—	344	—	24,188
Kitchen Supplies	407	—	—	—	—	—	—	—	—	—	—	—	—	—	407
Equipment	230	—	275	95	—	—	—	—	—	—	—	902	82	—	1,584
Equipment Maintenance	5,534	—	744	—	900	—	128	64	—	44	—	—	191	—	7,605
Equipment Rental	5,653	—	702	—	83	(79)	548	72	—	91	—	—	400	—	7,470
Furnishings	—	—	1,483	—	—	—	—	—	—	—	—	78	535	—	2,096
Telephone	17,028	—	1,936	546	199	596	1,185	199	—	1,112	1,138	1,165	695	—	25,799
Internet Services	10,491	—	1,150	—	128	384	256	128	—	257	—	—	70	—	12,864
Utilities	40,719	—	4,880	—	497	1,490	993	496	—	582	—	—	—	—	49,657
Depreciation	89,999	—	12,359	—	3,365	3,375	2,250	1,125	—	14	—	—	—	—	112,487
Total Building Operating Expenses	216,492	—	28,944	641	5,891	7,402	6,451	2,630	—	2,721	1,138	2,145	2,317	—	276,772
Total Expenses	$ 969,430	$ 13,700	$ 222,306	$ 50,169	$ 203,063	$ 11,848	$ 92,210	$ 6,128	$ 396	$ 36,810	$ 170,417	$ 53,534	$ 24,410	$ 76,293	$ 1,930,714
CHANGE IN NET ASSETS	$ (259,294)	$ (200)	$ (70,718)	$ (14,226)	$ 23,371	$ (11,848)	$ 21,051	$ (5,638)	$ (396)	$ (11,967)	$ (5,603)	$ (6,589)	$ 167,341	$ (63,817)	$ (238,533)
CAPITAL EXPENSES	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ 6,155	$ —	$ 6,155

HOPE HOUSE OF MILWAUKEE, INCORPORATED

SCHEDULE OF UNRESTRICTED FUNCTIONAL REVENUE AND EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 2013

	Chrysalis-Transitional	HMIS	Threshold - Emergency	SRO	US Food Pantry Food Service	Angel of Hope Clinic	Shining Star	Path to Progress	Community Outreach	Protective Payee	Mercy Housing	Special Case Management	Management and General	Fund-Raising	Total
Total Revenue (Brought Forward)	$ 870 567	$ 29 387	$ 168,917	$ 45 998	$ 180 319	$ 12,393	$ 137 425	$ 2 455	$ 71 280	$ 79 132	$ 178,689	$ 10,000	$ 243 806	$ 13 136	$ 2,043 504
EXPENSES															
Employee Expenses															
Salaries and Wages	$ 501,339	$ 6,336	$ 112,084	$ 34,570	$ 5,576	$ 7,616	$ 78,175	$ —	$ 42,309	$ 69,707	$ 128,985	$ 5,143	$ 9,436	$ 63,634	$ 1,064,910
Retirement	6,963	—	1,453	1 274	125	16	1,416	—	125	594	3,775	—	267	215	16,223
Payroll Taxes	37,455	466	8,305	2,515	411	746	5,936	—	3,116	5,093	9,323	355	564	4,804	79,089
Unemployment Insurance	8,029	259	1,802	481	52	198	1,611	11	566	795	1,778	57	49	1,144	16,832
Worker Compensation	9,498	187	2,072	863	53	189	1 683	—	1,008	1,630	2,821	149	18	661	20,832
Health, Dental and Disability Insurance	78,972	1,357	11,950	6,861	449	75	2,245	—	6,404	18 933	28,622	2 286	800	3,731	162,685
Training	190	10	160	160	—	—	199	—	—	815	579	—	140	—	2,253
Travel	885	27	101	695	14	21	253	7	20	3,015	1,110	25	350	21	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	8,015	11,624	74,210	1,369,368
Outside Services															
Professional Fees	481	23,220	—	—	—	—	—	—	—	—	7	—	—	—	23,708
Audit Fees	8,085	—	840	—	—	—	630	105	—	—	—	—	640	—	10,300
Insurance	12,561	365	1,675	—	335	503	640	167	—	503	—	—	—	—	16,749
Advertising	100	—	—	—	—	—	100	—	—	—	50	—	205	—	455
Recruitment	—	—	—	—	—	—	—	—	—	—	40	—	275	—	315
Membership, Dues and Fees	—	—	—	—	—	—	165	—	92	—	—	—	5,019	54	5,330
Subscriptions	48	—	6	—	1	2	2	1	—	—	—	—	327	60	447
Bank Fees and Interest	1 037	7	149	—	30	—	82	15	—	245	—	—	2,863	—	4,428
Total Outside Services	22 312	23,592	2,670	—	366	505	1,619	288	92	748	97	—	9 329	114	61,732
Operating Expenses															
Food - Perishable and Non-perishable	37,701	25	13,367	266	—	—	235	—	—	56	1,469	—	572	—	53,691
General Program Expenses	—	—	—	—	—	—	—	—	—	—	—	—	1,488	—	1,488
Office Supplies	847	75	1,045	269	104	—	334	12	70	848	159	—	1,692	728	6,183
Computer Software	—	—	—	—	—	—	—	—	—	—	—	—	2 654	850	3,504
Postage	20	—	—	—	—	—	20	—	60	800	—	—	360	1,571	2,831
Printing/Publication	—	—	—	—	—	—	—	—	—	263	—	—	—	9	272
Total Operating Expenses	38,568	100	14,412	535	104	—	589	12	130	1,967	1,628	—	6,766	3,158	67,969
Client Expenses															
Adult Education Fees	—	—	—	—	—	—	—	211	—	—	—	—	—	—	211
Youth Education Field Trip/Workshop	—	—	—	—	—	—	5,315	—	—	—	—	—	—	—	5,315
Beneficiary Supplies	314	—	237	—	—	—	—	—	—	75	569	—	—	—	1,195
Transportation Assistance	4,691	—	2 558	—	—	—	3,456	—	—	—	2,132	—	—	—	12,837
Clothing Assistance	310	—	196	—	—	—	—	—	—	—	—	—	—	—	506
Donated Services and Supplies	73,160	—	23 036	10,146	167,639	—	21,926	2,257	27 279	3,230	4,413	—	325	—	333,411
Total Client Expenses	78,475	—	26,027	10,146	167,639	—	30,697	2,468	27,279	3,305	7,114	—	325	—	353,475
Building Operating Expenses															
Building Supplies	29,703	57	3,940	—	788	1,182	2,307	393	—	1,182	—	—	62	—	39,614
Building Maintenance Services	21,647	119	3,775	—	550	825	1,530	275	—	825	—	—	389	—	29,935
Kitchen Supplies	411	—	—	—	—	—	—	—	—	—	33	—	—	—	444
Equipment	7,118	—	147	—	—	1 775	—	—	—	—	—	—	1,566	—	10,606
Equipment Maintenance	5,660	18	796	—	149	800	288	75	—	224	—	—	365	—	8,375
Equipment Rental	9,301	54	1 230	—	245	17	562	122	887	353	—	—	490	—	13,261
Furnishings	486	—	1,350	—	—	—	—	—	—	—	—	—	—	—	1,836
Telephone	15,413	145	1 987	483	396	594	1,616	198	483	1,960	1,006	—	1,105	—	25,386
Internet Services	9 656	54	1,287	—	257	386	718	129	—	386	—	—	70	—	12 943
Utilities	37,455	236	4 994	—	999	1,498	2,761	499	—	1,498	—	—	—	—	49,940
Depreciation	81,112	—	10,844	—	2,163	3,220	3,269	1 081	—	25	—	—	6 464	—	108,178
Total Building Operating Expenses	217,962	683	30,350	483	5,547	10,297	13,051	2,772	1,370	6 453	1,039	—	10,511	—	300,518
Total Expenses	$ 1 000 648	$ 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
Loss on Impairment of Building	—	—	—	—	—	—	—	—	—	—	—	—	253,719	—	253,719
Total Expenses and Losses	$ 1,000 648	$ 33 017	$ 211,386	$ 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)	$ (383,277)
CAPITAL EXPENSES	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ 35 248	$ —	$ 35 248

HOPE HOUSE OF MILWAUKEE, INCORPORATED
SCHEDULE OF EXPENDITURES OF FEDERAL AND STATE AWARDS
FOR THE YEAR ENDED DECEMBER 31, 2014

Federal Grantor/ Pass-Through Grantor/ Program or Cluster Title	Federal CFDA Number	Pass-Through Entity Identifying Number/ State ID	Federal Expenditures	Total
FEDERAL EXPENDITURES				
U.S Department of Agriculture				
State of Wisconsin - Department of Public Instruction				
Child and Adult Care Food Program	10 558			$ 20,512
Total U.S Department of Agriculture				$ 20,512
U S Department of Housing and Urban Development				
City of Milwaukee - Shelter Grant				
Community Development Block Grants/Entitlement Grants	14 218		$ 150,694	
City of Milwaukee - Youth Programs				
Community Development Block Grants/Entitlement Grants	14 218		29,696	
Milwaukee County- Supportive Housing Services				
Community Development Block Grants/Entitlement Grants	14 218		36,945	
Total CFDA #14 218				217,335
City of Milwaukee - Emergency Shelter Grant				
Emergency Solutions Grant Program	14 231		$ 11,214	
City of Milwaukee - Federal McKinney				
Emergency Solutions Grant Program	14 231		32,524	
City of Milwaukee - Transitional Housing Program				
Emergency Solutions Grant Program	14.231		12,220	
Total CFDA #14 231				55,958
Community Advocates - Protective Payee				
Supportive Housing Program	14 235		$ 24,153	
City of Milwaukee - Consultant				
Supportive Housing Program	14 235		13,500	
Total CFDA #14 235				37,653
Direct Award - SRO Housing				
Continuum of Care Program	14 267		$ 20,573	
Direct Award - Transitional Housing Program				
Continuum of Care Program	14 267		437,475	
Total CFDA #14 267				458,048
Total U S. Department of Housing and Urban Development				$ 768,994
U S Department of Health and Social Services				
Milwaukee County Department of Health and Human Services - ESG				
Foster Care Title IV-E	93 658			$ 33,186
Milwaukee County Department of Health and Human Services				
Community Advocates - Stay Strong				
Block Grants for Prevention and Treatment of Substance Abuse	93 959			25,000
Total U S Department of Health and Social Services				$ 58,186
TOTAL FEDERAL EXPENDITURES				$ 847,692

State Grantor/ Pass-Through Grantor/ Program or Cluster Title			State Expenditures
STATE EXPENDITURES			
State of Wisconsin			
Community Outreach Health Center			
State Shelter Subsidy Grant		2014 SSSG	$ 20,000
TOTAL STATE EXPENDITURES			$ 20,000

The accompanying note is an integral part of this schedule..

HOPE HOUSE OF MILWAUKEE, INCORPORATED
NOTE TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AND STATE AWARDS
FOR THE YEAR ENDED DECEMBER 31, 2014

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*. Therefore, some amounts presented in this schedule may differ from amounts presented in or used in the preparation of the basic financial statements.

RitzHolman CPAs

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*

Independent Auditor's Report

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, 2014, and the related statements 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 15, 2015.

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.

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 15, 2015

RitzHolman CPAs

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

Independent Auditor's Report

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, 2014. 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, 2014.

Ritz Holman LLP
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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 15, 2015

HOPE HOUSE OF MILWAUKEE, INCORPORATED
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
FOR THE YEAR ENDED DECEMBER 31, 2014

SECTION I – SUMMARY OF AUDITOR'S RESULTS

Financial Statements

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	Community Development Block Grants/Entitlement Grants
14.231	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, 2014

SECTION II - FINANCIAL STATEMENT FINDINGS

No matters were reported.

SECTION III - FEDERAL AWARD FINDINGS AND QUESTIONED COSTS

No matters were reported.