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# Form, 990-PF

Department of the Treasury

Internal Revenue Service

### Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

For calendar year 2016 or tax year beginning and ending Name of foundation A Employer identification number INCREASE HOPE FOUNDATION 47-4048499 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 248 S LAKE DR City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here LYNCHBURG, VA 24502 G Check all that apply Initial return initial return of a former public charity D 1. Foreign organizations, check here . . . . . Final return Amended return 2. Foreign organizations meeting the 85% test. Address change Name change check here and attach computation . . Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated under Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation section 507(b)(1)(A), check here Accounting method: X Cash Fair market value of all assets at If the foundation is in a 60-month termination under section 507(b)(1)(B), check here . . . end of year (from Part II, col. (c). Other (specify) Part I, column (d) must be on cash basis.) *line 16)* ▶ \$ 1,644. (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income ıncome purposes books the amounts in column (a) (see instructions) ) (cash basis only) 67,000 Contributions, gifts, grants, etc., received (attach schedule) Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments . . . . . Dividends and interest from securities . . . . 5 a Gross rents . . . **b** Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 . . . . . b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . . . . . . . . . Income modifications . . . . . . . . . . . . . . . 10 a Gross sales less returns and allowances 11 Other income (attach schedule) . . . . . . . . . . . . . 67,000 Total. Add lines 1 through 11. Compensation of officers, directors, trustees, etc. . . . . . Pension plans, employee benefits . . . . . . . **b** Accounting fees (attach schedule) . . . . . . . . . 17 Taxes (attach schedule) (see instructions) . . . . . . . . . . . . . 18 19 Depreciation (attach schedule) and depletion . . . 20 1,972 1,972 21 Travel, conferences, and meetings . . . . 22 728 728 Other expenses (attach schedule) . . . . . . 24 Total operating and administrative expenses. 2,700 2,700. 62,950 62,950. 65,650 26 Total expenses and disbursements. Add lines 24 and 25. 65,650 27 Subtract line 26 from line 12. 1,350 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) . . . . . . c Adjusted net income (if negative, enter -0-) For Paperwork Reduction Act Notice, see Instructions. Form 990-PF (2016)

1,350.

1,645

2

3

4

5

Form 990-PF (2016) INCREASE				47-4	1048499 Page 3
Part IV Capital Gains ar	nd Losses for Tax on Invest	ment Income			
* * * * * * * * * * * * * * * * * * * *	kind(s) of property sold (e.g., real estate, , or common stock, 200 shs. MLC Co )		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr.)
1a					
b					
С		·			
d		<del> </del>			
e	<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>				<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis nse of sale		n or (loss) f) minus (g)
a					
b	L		<del></del>		
С	<b></b>			<del> </del>	<del></del>
d					
0 14 15	in a selection (b) and see ad bridge for		·		
	gain in column (h) and owned by the for				ol (h) gain minus
(i) F M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over co	s of col. (i) i (j), if any	i	ot less than -0-) <b>or</b> (from col. (h))
а	<b></b>	ļ	<del></del>		
b	<b>_</b>		<del></del>	<u> </u>	
<u> </u>	<del>                                     </del>			<del></del>	
<u>d</u>		<del></del>	<del></del>	<del></del>	<del></del>
е				<del> </del>	<del></del>
2 Capital gain net income or (net		n, also enter in Part s), enter -0- in Part			
3 Net short-term capital gain or (	loss) as defined in sections 1222(5) an	•	, iii 7	-2	
	8, column (c) (see instructions). If (loss		`		
<u> </u>			}	_	
Part V Qualification Un	der Section 4940(e) for Red	uced Tax on I	Net Investmen	t Income	<del></del>
If section 4940(d)(2) applies, leave th	is part blank. ion 4942 tax on the distributable amour	nt of any year in the	base period?		Yes X No
<del></del>	fy under section 4940(e). Do not comp				<del></del>
	t in each column for each year, see the	instructions before		) <u>.                                    </u>	
(a)  Base period years  Calendar year (or tax year beginning in	Adjusted qualifying distribution	ns Net value of	(c) nonchantable-use as		(d) estribution ratio b) divided by col (c))
2015					
2014					
2013					
2012					<del></del>
2011			<del></del>	<del></del>	<del></del>
				1 1	
2 Total of line 1, column (d) .			· · · · · · · · · · · · · · · · · · ·	2	<del></del>
	the 5-year base period – divide the total n in existence if less than 5 years			3	
4 Enter the net value of noncha	aritable-use assets for 2016 from Part >	(, line 5	• • • • • • • • • • • • • • • • • • • •	4	
5 Multiply line 4 by line 3				5	
	ncome (1% of Part I, line 27b)			6	
					AP AP 5
If line 8 is equal to or greater	from Part XII, line 4				65,650.
See the Part VI instructions.					

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Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	inst	ucti	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here > X and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			
6	Credit/Payments·			
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			!
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11			0.
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or		Yes	No
	ıntervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
	definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.		l —	
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$		ı	
6	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. • \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.	1		,
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	48		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		_ <b>X</b>
_	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict			1
_	with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	<b></b> ,
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)   VA		,	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of			
	each state as required by General Instruction G? If "No," attach explanation	8ь	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for			
	calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year?			
	If "Yes," attach a schedule listing their names and addresses	10	X	
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Part	VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning			Yes	No
	of section 512(b)(13)? If "Yes," attach schedule (see instructions)	L	11	,	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person				
	had advisory privileges? If "Yes," attach statement (see instructions)	L	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	L	13	X	
	Website address ▶ increasehopefoundation.org				
14	The books are in care of ▶MARK A. SCOTT Telephone no.▶				
	Located at ▶248 S LAKE DR LYNCHBURG, VA 24502 ZIP+4▶24502	2			
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - Check here			)	<b>▶</b> □
	and enter the amount of tax-exempt interest received or accrued during the year		_		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority	_		Yes	No
	over a bank, securities, or other financial account in a foreign country?	· · [	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes."	<u> </u>			
	enter the name of the foreign country				
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	L	]	Yes	No
1a	During the year did the foundation (either directly or indirectly):				1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No	]		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a				
	disqualified person?	No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		ł		1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		j		
	the benefit or use of a disqualified person?	No	- 1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		1		
	foundation agreed to make a grant to or to employ the official for a period after	-	}		
	termination of government service, if terminating within 90 days.)	No	1		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	-			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	· · [_	16		
	Organizations relying on a current notice regarding disaster assistance check here		- 1		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that				
	were not corrected before the first day of the tax year beginning in 2016?	_1	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1	ł		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	- 1	- 1		
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and		- {	Į	
	6e, Part XIII) for tax year(s) beginning before 2016?	No	- 1	1	
_	If "yes," list the years	1			;
ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	- 1		1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	- <u> </u> -			
	all years listed, answer "No" and attach statement - see instructions.)	-	2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	- 1	1	į	1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1		
Ja	at any time during the year?	No.		1	1
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or		1	1	{
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		- 1	}	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			j	,
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		)	}	1
	foundation had excess business holdings in 2016.)	-	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?		la		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	·	-		
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	~	ıь		X
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		,,,,			,,,

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Part	VII-B Statements Regarding Activities		1 4720 May Be	Required (cont	inued)	<del></del>	
5a	During the year did the foundation pay or incur any amou			_	C=-1	1 1	-
	(1) Carry on propaganda, or otherwise attempt to influen			Yes	X No	1 1	1
	(2) Influence the outcome of any specific public election			_	G=1	1 1	
	directly or indirectly, any voter registration drive?				X No		
	(3) Provide a grant to an individual for travel, study, or ot			· · · · · L Yes	X No		}
	(4) Provide a grant to an organization other than a charit			C7.,	(FE)		
	section 4945(d)(4)(A)? (see instructions)			· · · · · L Yes	X No	1 1	
	(5) Provide for any purpose other than religious, charitab			<b>—</b>	[출편]		1 1
	purposes, or for the prevention of cruelty to children				X No	1 1	1 1
Ь	If any answer is "Yes" to 5a(1)-(5), did any of the transaction	•					
	Regulations section 53.4945 or in a current notice regard	=				5b	<del></del> -
	Organizations relying on a current notice regarding disas				Ш	1	
C	If the answer is "Yes" to question 5a(4), does the foundar	-		гэ.,	г		
	because it maintained expenditure responsibility for the g		· · · · · · · · · ·	· · · · · L Yes	No		
•	If "Yes," attach the statement required by Regulations so	* *					
6a	Did the foundation, during the year, receive any funds, did				<b>₩</b>	1 1	
	on a personal benefit contract?				₩ NO		
ь	Did the foundation, during the year, pay premiums, direct	ly or indirectly, on a per	sonal denent contrac	(		6b	<u> </u>
~-	If "Yes" to 6b, file Form 8870.  At any time during the tax year, was the foundation a part	u to a probibited tour ch	then tonne action 2	[] <sub>V</sub>	₩.		
7a L	If "Yes," did the foundation receive any proceeds or have					70	
b Par	t VIII Information About Officers, Dire						
1 (1	and Contractors	otors, rrustees,	, oungation wit	inagers, riigini	y raid	Linploy	<b>663</b> ,
1	List all officers, directors, trustees, foundation mana	ngers and their compa	neation (see instru	ctions)	<del></del>	<del></del>	
<del></del>		(b) Title, and average	(c) Compensation	(d) Contributions t	0 1	(e) Expense	
	(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	employee benefit p and deferred compe	olans	other allo	
Mar	k A Scott	Director	01101-0-7	and deferred compe	ISAUOIT	<del></del>	
	S Lake Dr Lynchburg, VA 24502	05.00			ì		
	ary K Scott	Director		<del> </del>			
	S Lake Dr Lynchburg, VA 24502	05.00			ļ		
						<del></del>	
					}		
	<del></del>						
					- 1		
2	Compensation of five highest-paid employees (othe	r than those included	on line 1 - see instr	uctions). If none, e	nter		
	"NONE."						
(a) N	ame and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to	0	(e) Expense	
		hours per week devoted to position		employee benefit p and deferred compe		other allow	wances
NON	<u> </u>				- 1		
				<u> </u>		· · · · · · · · · · · · · · · · · · ·	
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NON	3				1		
		ļ	<b> </b>	ļ			
NON	<u> </u>				1		
	200	L	L	L			
	number of other employees paid over \$50,000	<del> </del>	<del></del>	<del></del>			
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Part		ign four	ndations,
	see instructions.)	<del>.,</del>	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
e	Reduction claimed for blockage or other factors reported on lines 1a and	1 1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets		
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 11/2 % of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	
6	Minimum investment return. Enter 5% of line 5.  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	6	
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operation	g found:	ations
	and certain foreign organizations check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)	1	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Part 2	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	<u>65,650.</u>
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Surtability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	65,650.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of		
	Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	65,650.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	ation qualif	
	section 4940(e) reduction of tax in those years.	•	
UYA		i	orm <b>990-PF</b> (2016)

Pari	VIII Undistributed income (see instruction	15)			
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7	<del></del>			ļ
2	Undistributed income, if any, as of the end of 2016.				1
а	Enter amount for 2015 only	<del></del>		<del></del>	
Ь	Total for prior years:				
3	Excess distributions carryover, if any, to 2016.				
а	From 2011				
b	From 2012	"			
С	From 2013				Ì
ď	From 2014				
9	From 2015			1	ļ
f	Total of lines 3a through e	25,005.			
	Qualifying distributions for 2016 from Part XII,	25,005.	<del></del>		
4					
	line 4' ▶ \$ 65,650.	·			
a	Applied to 2015, but not more than line 2a				
Ь	Applied to undistributed income of prior years				
	(Election required - see instructions)	<del></del>		<del></del>	
C	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2016 distributable amount				
e	Remaining amount distributed out of corpus	<b>65,650</b> .			
5	Excess distributions carryover applied to 2016				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)	!			
6	Enter the net total of each column as			i	
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	90,655.			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
u	amount - see instructions				
	Undistributed income for 2015. Subtract line	<del></del>	} <del></del>	<del></del>	
•					
	4a from line 2a. Taxable amount - see				
	Instructions				
1	Undistributed income for 2016. Subtract lines				
	4d and 5 from line 1. This amount must be				
_	distributed in 2017				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				İ
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2011 not	:			
	applied on line 5 or line 7 (see instructions)	<del></del>		<del>,</del>	
9	Excess distributions carryover to 2017.	_	į		
	Subtract lines 7 and 8 from line 6a	90,655.			
10	Analysis of line 9.				_ <del></del>
а	Excess from 2012				
b	Excess from 2013		]		
C	Excess from 2014		1		
d	Excess from 2015				
е	Excess from 2016	<u></u>	<u> </u>	<u></u>	

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Part	XIV Private Operating Foundation				·	
1a	If the foundation has received a ruling or deter					
	the ruling is effective for 2016, enter the date of	_			Ĺ	
þ	Check box to indicate whether the foundation		ng foundation describe		4942(j)(3)	or 4942(j)(5) or
2a	Enter the lesser of the adjusted net income	Tax year		Pnor 3 years		(e) Total
	from Part I or the minimum investment	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	return from Part X for each year listed					
b	85% of line 2a					
C	Qualifying distributions from Part XII, line 4					
	for each year listed		<u> </u>			
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities		ļ			
е	Qualifying distributions made directly for					
	active conduct of exempt activities.					
	Subtract line 2d from line 2c		}			
3	Complete 3a, b, or c for the alternative		<u> </u>			
-	test relied upon:			[	į į	
	"Assets" alternative test- enter:				l	
а	(1) Value of all assets			i		
	``	<del></del>	<del> </del>	<del> </del>		
	(2) Value of assets qualifying under				}	
ь	section 4942(j)(3)(B)(i)		<del> </del>	<del> </del>		<del></del>
	minimum investment return shown in					
	Part X, line 6 for each year listed	<del></del>	<del> </del>	ļ		
С	"Support" alternative test - enter:		1			
	(1) Total support other than gross invest-		1	Į		
	ment income (interest, dividends, rents,					
	payments on securities loans (section		1			
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or		}	1		
	more exempt organizations as provided					
	ın section 4942(j)(3)(B)(ıiı)		<u> </u>			
	(3) Largest amount of support from an		}			
	exempt organization		<u></u>			
_	(4) Gross investment income		<u> </u>			
Part	XV Supplementary Information	(Complete thi	s part only if th	e foundation ha	d \$5,000 or mo	re in assets at
	any time during the year- se	e instructions	s.)			
1 1	Information Regarding Foundation Manager	<b>'s</b> :				
a i	List any managers of the foundation who have co	ontributed more tha	n 2% of the total cont	tributions received by t	the foundation before	the close of any
1	tax year (but only if they have contributed more t	han \$5,000). (See :	section 507(d)(2).)	•		•
(ar	k A Scott Hilary K Scot	:t	, , , , ,			
	List any managers of the foundation who own 10		tock of a corporation	or an equally large po	rtion of the ownership	of a partnership
	or other entity) of which the foundation has a 10					
	<b>3</b> , 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,					
2 1	Information Regarding Contribution, Grant,	Gift, Loan, Schola	ership etc. Progran	ns.	<del></del>	<del></del>
	Check here ▶ 🗓 if the foundation only makes				s not accept unsolicite	nd requests for
	funds. If the foundation makes gifts, grants, etc.					
	railes, if the foundation fractor gires, grantes, etc.	(coc mon dodono)	to markadas or organ	inzanorio ander oarer o	oridiaorio, compiete ne	sins za, b, c, and u
	The name, address, and telephone number or e-	mail address of the	e nerson to whom ann	dications should be ad	dressed:	
-	The harre, address, and telephone herriod of a	man address of the	porton to whom app	modiforio oribolo po do	d103300.	
b	The form in which applications should be submit	tted and information	n and materials they s	hould include		<del></del>
	A	····			<del></del>	
C	Any submission deadlines:					
	Any restrictions or limitations on awards, such a	s by geographical a	reas, charitable fields	kinds of institutions	or other factors:	<del></del>
~ /	,	, goograpinoa c	Jao, orientable lields	,,	S JUIG IGUIDIS	

Form 990-PF(2016)

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Form 990-PF (2016) INCREASE HOPE FOUNDATION 47-4048499 Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or Amount contribution recipient Name and address (home or business) a Paid during the year Hope Ministries Tanzania No. 45220 54,815. Mbgala Kuu, Temeke, Dar Es Salaam, Tanzania Organizational Support - see attached Charles Koomson Outreach Ministy KN 2298 Kaneshie, Accra, Ghana 8,135. Organizational Support - see attached 62,950. b Approved for future payment

Total.

(a) (b) (c) (d) function income	tor and	VI-A Analysis of Income-Producing A	CHAINES		<del></del>		•
(a) (b) (c) (d) Related or exemptunction income is reported in column (e) of Part XVI-B Related or exemptunction income is reported in column (e) of Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	iter gre	ss amounts unless otherwise indicated.	Unrelated bus	ness income	Excluded by section	n 512, 513, or 514	(e)
a b c d e f g Fees and contracts from government agencies  Membership dues and assessments Interest on savings and temporary cash investments Interest on savin	4 Da		1 '' 1		1 '' 1		Related or exemp
b c d d d d d d d d d d d d d d d d d d							(
d d g Fees and contracts from government agencies  Membership dues and assessments Interest on savings and temporary cash investments Interest on savings and t							
f Fees and contracts from government agencies  Membership dues and assessments  Interest on savings and temporary cash investments  Dividends and interest from securities  Net rental income or (loss) from real estate:  a Debt-financed property  b Not debt-financed property  Net rental income or (loss) from personal property  Other investment income  Gain or (loss) from sales of assets other than inventory  Net income or (loss) from sales of inventory  Other revenue a  b  c  d  e  Subtotal. Add columns (b), (d), and (e)  Subtotal. Add columns (b), (d), and (e)  Subtotal. Add line 12, columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations.)  Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment	c						
g Fees and contracts from government agencies  Membership dues and assessments  Interest on savings and temporary cash investments  Dividends and interest from securities  Not rental income or (loss) from real estate  a Debt-financed property  b Not debt-financed property  Cother investment income  Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events  Gross profit or (loss) from special events  Cother revenue a  b  Cother revenue a  b  Cother revenue a  B Subtotal. Add columns (b), (d), and (e)  S Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations.)  art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment	ď		<b></b>	<del> </del>		······	
g Fees and contracts from government agencies  Membership dues and assessments  Interest on savings and temporary cash investments  Dividends and interest from securities  Net rental income or (loss) from real estate  a Debt-financed property  b Not debt-financed property  Other investment income or (loss) from personal property  Net income or (loss) from sales of assets other than inventory  Net income or (loss) from special events  Gross profit or (loss) from sales of inventory.  Other revenue a  b  c  d  e  2 Subtotal. Add columns (b), (d), and (e)  see worksheet in line 13 instructions to verify calculations.)  art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment			ļ				
Membership dues and assessments  Interest on savings and temporary cash investments  Interest on savings and temporary cash investments  Dividends and interest from securities  Net rental income or (loss) from real estate:  a Debt-financed property  b Not debt-financed property  Other investment income or (loss) from personal property  Net income or (loss) from sales of assets other than inventory  Net income or (loss) from special events  Gross profit or (loss) from sales of inventory.  Other revenue a  b  c  d  s  Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations.)  art XVI-B  Relationship of Activities to the Accomplishment of Exempt Purposes  Line No.  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment	-	Face and contracts from government agencies	<del></del>	<del></del>	+		<del>                                     </del>
Interest on savings and temporary cash investments	_				<del></del>		
Dividends and interest from securities  Net rental income or (loss) from real estate:  a Debt-financed property  b Not debt-financed property  Other investment income or (loss) from personal property  Net income or (loss) from sales of assets other than inventory  Net income or (loss) from sales of inventory  Other revenue a  b  c  d  e  Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.)  Tetal No.  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment				<del></del>			
Net rental income or (loss) from real estate:  a Debt-financed property				· · · · · · · · · · · · · · · · · · ·			
b Not debt-financed property							
Net rental income or (loss) from personal property	а	Debt-financed property					
Other investment income  Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events  Gross profit or (loss) from sales of inventory.  Other revenue a  b  c  Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  se worksheet in line 13 instructions to verify calculations.)  Total Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment	b	Not debt-financed property					
Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events	Ne	t rental income or (loss) from personal property					
Net income or (loss) from special events			<u> </u>				
Gross profit or (loss) from sales of inventory.  Other revenue a  b  c  d  e  Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.)  TXVI-B  Relationship of Activities to the Accomplishment of Exempt Purposes  E No.  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment		•	ļ				ļ
Other revenue a  b c d e Subtotal. Add columns (b), (d), and (e)					<del>                                     </del>		
b			<del></del>	<del></del>	<del></del>		<del></del>
d e Subtotal. Add columns (b), (d), and (e)					<del></del>	<del></del>	
e Subtotal. Add columns (b), (d), and (e)			<del></del>		<del></del>		<del> </del>
Subtotal. Add columns (b), (d), and (e)			1		<del></del>		<del></del>
Subtotal. Add columns (b), (d), and (e)				<del></del>	<del> </del>		<u> </u>
Total. Add line 12, columns (b), (d), and (e)		btotal, Add columns (b), (d), and (e)			<u> </u>	<del> </del>	<del> </del>
Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment						13	
Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment	e w						
	irt )						
of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)							omplishment
		of the foundation's exempt purposes (other than by	y providing funds fo	r such purpose	s). (See instructions	.)	<del></del>
				<del></del>	<del></del>		<del> </del>
			<del></del>				
	_		····	<del> </del>	<del></del>	<del></del>	
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· · · · · · · · · · · · · · · · · · ·							
						F	orm <b>990-PF</b> (2016

Form **990-PF** (2016)

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		Exempt C	Organizations		·····	<u> </u>						
1	Did ti			age in any of the following wi	th any oth	er organizati	on described	in section 50	1(c)		Yes	No
	of the	e Code (other than se	ection 501(c)(3) org	janizations) or in section 527	, relating t	o political or	ganizations?					-
•	Tron	ofore from the report	ing foundation to a	noncharitable exempt organi	zation of:							
а				· · · · · · · · · · · · · · · · · · ·					ì	1a(1)		X
										1a(1)		X
		r transactions:				• • •				14(2)	-	_
D			oncharitable even	pt organization						1b(1)		X
			•	le exempt organization						1b(2)		X
				ssets						_		X
												X
			-									X
		_		or fundraising solicitations.								X
			-	, other assets, or paid employ						-		X
d		-	_	emplete the following schedul							ode	
u		-		ng foundation. If the foundation			-			_		
		•	• •	of the goods, other assets, or			all Irlainet va	ide iii aliy ii a	iisacuoii c	A 361011	ng.	
(a) Lii		(b) Amount involved		noncharitable exempt organizati			otion of transfe	rs transaction	e and sha	ring arr	angem	ente
(a) UI	10 110	(b) Allount involved	(c) Hartie of t	ionenamable exempt organizati	-	(d) Doson	Duon or transic	is, nansacuon	3, and 3nd	ing an	angen	CITO
	- 1							· · · · · · · · · · · · · · · · · · ·				
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			1				<del> </del>					
2 a			•	ed with, or related to, one or r					` <u>-</u>	-	_	
				27?					· · L	Yes	<u>X</u> 1	МО
<u>b</u>	11 T	es," complete the follows:		(b) Type of o	raanizatio	n 1	(c)	Description o	f relations	hin		
		(a) Name of org	jan neation	(b) 13pc or c	A Garrizatio	<del>''</del>	(6)	Description 0	1 TOTALIONS	шр	<del></del>	
							<del></del>	<del> </del>				
			· <u></u>				<del></del>					
		<del></del>					· · · · · · · · · · · · · · · · · · ·					
		Under penalties of perjury	, I declare that I have exa	amined this return, including accomp	anying sche	dules and stater	nents, and to the	best of my know	ledge and b	eti <b>ef</b> , it is	true,	
Sign		correct, and composite. De	claration of preparer (oth	ner than taxpayer) is based on all info	ormation of w	hich preparer ha	as any knowledge		May the IRS			um with
Here		1/h	<i>&amp;</i> 7	[[][]	n T	RECTOR			the preparer instructions)		elow (s	<b>ee</b>
11016		Signature of officer or	trustee	Date			·	<u> </u>		_	es [	No
De:::		Print/Type preparer		Preparer's signature		<del></del>	Date		P	TIN		1.40
Paid		76-6-6						Check self-en	if   nployed	•		
Prep		Firm's name					<u>'</u>	Firm's EIN				
Use	Only	Firm's address	<del></del>					Phone no.				
		. IIII o dadioss					-	ono no.				

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

Department of the Treasury Internal Revenue Service Name of the organization

## **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.ira.gov/form990.

OMB No. 1545-0047

**Employer identification number** 

2016

INCREASE HOPE FO	UNDATION	<u>  47-4048499</u>
Organization type (check of	one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private	foundation
	☐ 527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foun	dation
	501(c)(3) taxable private foundation	
Note: Only a section 501(c) instructions.	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Ru	ile and a Special Rule. See
General Rule		
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, co or property) from any one contributor. Complete Parts I and II. See in contributions.	
Special Rules		
regulations under s 13, 16a, or 16b, an	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form that the theorem of the transfer of the transfer of the transfer of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, li	m 990 or 990-EZ), Part II, line putions of the greater of (1)
contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-E2 the year, total contributions of more than \$1,000 exclusively for religional purposes, or for the prevention of cruelty to children or animals.	ous, charitable, scientific,
contributor, during contributions totale during the year for <b>General Rule</b> app	the year, contributions exclusively for religious, chantable, etc., purposed more than \$1,000. If this box is checked, enter here the total contributions exclusively for religious, chantable, etc., purposed more than \$1,000. If this box is checked, enter here the total contribution an exclusively religious, charitable, etc., purpose. Don't complete any lies to this organization because it received nonexclusively religious, comore during the year.	ses, but no such butions that were received of the parts unless the haritable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZor on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

INCREASE HOPE FOUNDATION

Employer identification number

47-4048499

Part I	Contributors (See instructions). Use duplicate co	pies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Mark A Scott  248 S Lake Dr  Lynchburg, VA 24502	\$ 23,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Hilary K Scott  248 S Lake Dr  Lynchburg, VA 24502	\$23,500.	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	TPX Inc.  PO Box 515  Canton, TX 75103	\$20,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>s</b>	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

47-4048499

#### INCREASE HOPE FOUNDATION

Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed. (c) (a) No. (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I (c) (a) No. (b) (d) from FMV (or estimate) Description of noncash property given Date received (See instructions) Part I (c) FMV (or estimate) (a) No. (b) (d) from Date received Description of noncash property given Part I (See instructions) (c) FMV (or estimate) (a) No. (d) from Date received Description of noncash property given (See instructions) Part I (a) No. (c) (d) (b) from FMV (or estimate) Date received Description of noncash property given (See instructions) Part I (a) No. (c) (d) FMV (or estimate) from **Date received** Description of noncash property given (See instructions) Part I

	ganization ASE HOPE FOUNDATION			Employer Identification number 47-4048499			
Part III	Exclusively religious, charitable, etc (10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the Use duplicate copies of Part III if additional statements.	he year from any one colons completing Part III, en e year. (Enter this informati	ntributor. Com ter the total of exc	ed in section 501(c)(7), (8), or uplete columns (a) through (e) and clusively religious, charitable, etc.,			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gif	t	(d) Description of how gift is held			
	Transferee's name, address,	(e) Transfer of		ip of transferor to transferee			
	Trunsieres 5 name, address,						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gif	t	(d) Description of how gift is held			
	Transferee's name, address,	(e) Transfer of		ip of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address,	and ZIP + 4	Relationsh	ip of transferor to transferee			
(a) No. from Part i	(b) Purpose of gift	(c) Use of gi	ft	(d) Description of how gift is held			
	Transferee's name, address,	(e) Transfer o		ip of transferor to transferee			
Ī	Hansieree S Hame, address,	GIIU ZIF T 4	KeiatiOii\$I	ip or transicion to transferee			

# Form 990-PF Other Expenses

Supporting Details for Form 990-PF. Part I, Line 23

(a) Description	(b) Revenue and expenses per books			(e) Disbursement for charitable purpose
Office Expenses	128.	0.	0.	128.
Bank Service Charges	600.	0.	0.	600.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
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	0.	0.	0.	0.
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	0.	0.	0.	0.
	0.	0.	0.	0.

## Form 990-PF Amortization

Supporting Details for Form 990-PF. Part I, Line 23

(a) Description	(b) Date	(c) Amount	(d) Deduction	(e)	(f) Current	(g) Net	(h) Adjusted	(i) Total
	Acquired,	Amortized	for Prior	Amortization	Year	investment	Net Income	Amount of
	Completed, or		Years	Period	Amortization	Income		Amortization
	Expended							

•	0.	0.0.00000	0.	0.	0.	0.
	0.	0.0.00000	0.	0.	0.	0.
	0.	0.0.00000	0.	0.	0.	0.
	0.	0.0.00000	0.	0.	0.	0.
	0.	0.0.00000	0.	0.	0.	0.
	0.	0.0.000000	0.	0.	0.	0.
	0.	0.0.00000	0.	0.	0.	0.
	0.	0.0.00000	0.	0.	0.	0.
	0.	0.0.00000	0.	0.	0.	0.
	0.	0.0.00000	0.	0.	0.	0.

# Form 990-PF Substantial Contributors

Supporting Details for Form 990-PF. Part VII-A, Line 10

a) Name (enter either the person's n business's name	ame or the	(b) Address	
Person	Street address	<del></del>	Room or suite no.
	248 S LAKE DR		
Business	City, town or post office	State	ZIP Code
MARK A SCOTT	LYNCHBURG	VA	24502
	Foreign country	Foreign province/county	Foreign postal code
Person	24		
HILARY K SCOTT	Street address  248 S LAKE DR		Room or suite no.
Business	City, town or post office	State	ZIP Code
	LYNCHBURG	VA	24502
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
	РО Вож 515		
Business	City, town or post office	State	ZIP Code
TPX Inc.	Canton, TX 75103	TX	75103
	Foreign country	Foreign province/county	Foreign postal code
Person			
	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code

	Street address		Room or suite no
	Street address		Noom or suite n
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal c
Person	Street address		Room or suite n
Business	City, town or post office	State	ZIP Code
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Person	Street address		Room or suite n
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Person	Street address		Room or suite no
Person Business	Street address  City, town or post office	State	Room or suite no

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