Schedule A (Form 990) 2021

Part II Support

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.)

Sec	ction A. Public Support	Tano to quanty c	inder the tests	noted below, pr	case complete	r art m.)	
_	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	548,469	725,958	763,289	720,702	735,432	3,493,850
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	548,469	725,958	763,289	720,702	735,432	3,493,850
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	skulletintilih) i	i de 2018 ourste de la			(東部)(第4)第5年(中)	3,493,850
	tion B. Total Support				4		
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	548,469	725,958	763,289	720,702	735,432	3,493,850
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,090	3,439	4,525	4,025	5,361	18,440
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.)						
11	Total support. Add lines 7 through 10			Acceptant file for			3,512,290
12	Gross receipts from related activities, etc. (The second secon	M			12	
13	First 5 years. If the Form 990 is for the org		cond, third, fourth,	or fifth tax year as	a section 501(c)(3	3)	
	organization, check this box and stop here			******			
	tion C. Computation of Public Su						
14	Public support percentage for 2021 (line 6,			(f))			99.47%
15	Public support percentage from 2020 Sche				4/00/		99.58%
16a	33 1/3% support test—2021. If the organization qualification and the second state of t						▶ X
h	box and stop here . The organization qualif 33 1/3% support test—2020. If the organization						× A
b	this box and stop here . The organization q						
17a	10%-facts-and-circumstances test—202						
114	10% or more, and if the organization meets	750 Sec. 1551					
	Part VI how the organization meets the fact	ts-and-circumstance	es test. The organi	zation qualifies as	a publicly support	ed	▶ □
b	10%-facts-and-circumstances test—2020						г Ш
1	15 is 10% or more, and if the organization is						
	in Part VI how the organization meets the fa organization	acts-and-circumstar	nces test. The orga	anization qualifies a	as a publicly supp	orted	▶ □
18	Private foundation. If the organization did						
10000	instructions						▶ □

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

(Complete only if you checked the box on line 10 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.)

			complete i ait	,	
(a) 2017	(b) 2018	(c) 2019	(d) 2020	(a) 2021	(D. Tatal
		(0) 2010	(4) 2020	(e) 2021	(f) Total
			ASSES.		
		<			
		0			
		CONTRACTOR OF THE PARTY OF THE			
(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
		P	(-/	(0) 2021	(i) Total
					-
anization's first, se	econd, third, fourth.	or fifth tax year as	a section 501(c)(3)	
				~!	b
pport Percent	age				
olumn (f), divided	by line 13, column	n (f))		15	%
ule A. Part III. line	9 15		*************	16	%
t income Per	centage				
10c, column (f),	divided by line 13,	column (f))		17	%
nedule A, Part III,	line 17			18	%
ation did not ched	ck the box on line 1	4, and line 15 is m	ore than 33 1/3%	, and line	
and stop here. T	he organization qu	alifies as a publicly	supported organi	zation	▶ 🗌
ation did not ched	ck a box on line 14	or line 19a, and lin	e 16 is more than	33 1/3% and	
box and stop her	e. The organization	n qualifies as a pub	olicly supported or	ganization	▶ ∐
ot check a box on	line 14, 19a, or 19	b, check this box a	and see instruction	ns	
	anization's first, se port Percent column (f), divided ule A, Part III, line t Income Percent column (f), hedule A, Part III, ation did not checand stop here. Thation did not checand stop here to the control of the c	(a) 2017 (b) 2018 (a) 2017 (b) 2018 Anization's first, second, third, fourth, poport Percentage column (f), divided by line 13, column ule A, Part III, line 15 t Income Percentage at 10c, column (f), divided by line 13, nedule A, Part III, line 17 cation did not check the box on line 14 and stop here. The organization quarted in did not check a box on line 14 box and stop here. The organization for the organization of the control of	(a) 2017 (b) 2018 (c) 2019 (a) 2017 (b) 2018 (c) 2019 (b) 2018 (c) 2019 (c) 2019 (d) 2017 (e) 2018 (c) 2019 (e) 2019 (f) 2018 (c) 2019 (g) 2019 (e) 2019 (e) 2019 (f) 2019 (e) 2019 (e) 2019 (f) 2019 (f) 2019 (e) 2019 (e)	(a) 2017 (b) 2018 (c) 2019 (d) 2020 (a) 2017 (b) 2018 (c) 2019 (d) 2020 (b) 2018 (c) 2019 (d) 2020 (c) 2019 (d) 2020 (d) 2020 (e) 2019 (e) 2020 (f) 2020 (e) 2019 (e) 2020 (f) 2020 (g) 2020 (h) 202	(a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2021 (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2021 anization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) port Percentage 3 (0c, column (f), divided by line 13, column (f)) 15 16 t Income Percentage 10c, column (f), divided by line 13, column (f)) 17

Part IV

Schedule A (Form 990) 2021

Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- 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.
- 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.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **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.
- 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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**.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- B Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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**.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined on line 9a) 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.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
- **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.)

	Yes	No
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26		
3b		en la
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4b	905-00R2-50	
4c		
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5b		Park Phil
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Page 4

Part IV

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Schedule A (Form 990) 2021

Page 5

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 on lines 11b and 11c below, the governing body of a supported organization? 11a b A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations No Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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 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 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 No Yes Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 1 organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 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 By reason of the relationship described on line 2, above, did the organization's supported organizations have 3 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 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. a b The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) C Activities Test. Answer lines 2a and 2b below. 2 Yes No 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 Did the activities described on line 2a, above, 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 Parent of Supported Organizations. Answer lines 3a and 3b below. 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? If "Yes" or "No," provide details in Part VI. 3a 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

Chicago	dule A (Form 990) 2021 HAVEN OF HOPE INC		58-1612	531	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	aniza	ations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on No	v. 20,	1970 (explain in Part VI). S	ee	
	instructions. All other Type III non-functionally integrated supporting organizations mus	st com	plete Sections A through E.		
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2		2000	
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			
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current (optiona	
1	Aggregate fair market value of all non-exempt-use assets (see	1			emers restant
	instructions for short tax year or assets held for part of year):				
	Average monthly value of securities	1a			
	Average monthly cash balances	1b	A		
	Fair market value of other non-exempt-use assets	1c			
	Total (add lines 1a, 1b, and 1c)	1d			
(Discount claimed for blockage or other factors				THE STREET
	(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 0.015 of line 3 (for greater amount, see instructions).	4		W00000 0000000 W0 #60	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8		14,	
	ion C – Distributable Amount			Current Y	ear
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	A CHARLEST THE PARTY		
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 T		supporting organization		
	(see instructions).				

Schedule A (Form 990) 2021

Part V Type III Non-Functionally Integrated 509(a)(3	C	58-161	2531 Pag
Section D – Distributions	Supporting Organiz	ations (continued)	Current Year
1 Amounts paid to supported organizations to accomplish exempt purp	2000		Ourient real
2 Amounts paid to perform activity that directly furthers exempt purpos	os ef cumandad		
organizations, in excess of income from activity	es of supported		
Administrative expenses paid to accomplish exempt purposes of sup	mandad a ' t'		
4 Amounts paid to acquire exempt-use assets	ported organizations		
5 Qualified set-aside amounts (prior IRS approval required—provide de	delle in De data		
6 Other distributions (describe in Part VI). See instructions.	etails in Part VI)		
7 Total annual distributions. Add lines 1 through 6.			
Distributions to attentive supported organizations to which the organizations	ration is assessed		
(provide details in Part VI). See instructions.	zation is responsive		
9 Distributable amount for 2021 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-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			Amount for 2021
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required-explain in Part VI). See instructions.	Minimal Property of the Control of t		
3 Excess distributions carryover, if any, to 2021		→	
a From 2016			E per la dialogia de la la compania de la compania
h Francisco 2047			Elizabeth Robert Kr
c From 2017			
d From 2010			
e From 2020			
f Total of lines 3a through 3e		THE SECTION OF SECTION	the first arm of the property and
g Applied to underdistributions of prior years	Mark Mark Mark Mark Mark Mark Mark Mark		ativities #5.000 million
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)	ARREST SERVICES OF STATE		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	P	acitiza etraffe pridociale	
4 Distributions for 2021 from			
Continue D. H			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if			
any. Subtract lines 3g and 4a from line 2. For result			
greater than zero, explain in Part VI. See instructions.	THE BOOK OF THE PARTY AND THE		
6 Remaining underdistributions for 2021 Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j			
and 4c.		the second by the	Taurine history and the
8 Breakdown of line 7:		Paragraph of a paragraph	
5 Evenes from 2047			
b Excess from 2018			The Bolt (Table 1240) in the
C Expose from 2010		A. A. S. S. S. L.	
d Excess from 2020	The first of the second second		
e Excess from 2021	De Charlette de production de	the property and	
C EAGGS HUITI 2021	· 连续其代数中国 未来品量 6.3	the entrol beginning to	网表 的一个形式

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Schedule A (For	m 990) 2021	HAVEN OF HOPE I	NC	58-1612531	Page 8
Part VI	Supplementa III, line 12; Pa B, lines 1 and 3a, and 3b; Pa	Il Information. Provide the explart IV, Section A, lines 1, 2, 3b, 3c 2; Part IV, Section C, line 1; Part art V, line 1; Part V, Section B, lin 6. Also complete this part for an	, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11 IV, Section D, lines 2 and 3 e 1e; Part V, Section D, lines	ne 10; Part II, line 17a or a, 11b, and 11c; Part IV, ; Part IV, Section E, lines s 5, 6, and 8; and Part V,	17b; Part Section 1c, 2a, 2b,

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HAVEN OF HOPE INC

58-1612531

Schedule A (Form 990) 2021

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization

Supplemental Financial Statements

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

HAVEN OF HOPE INC 58-1612531 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements Held at the End of the Tax Year 2a Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB 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 FASB 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 on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

Schedule [D (Form 990) 2021 HAVEN O	F HOPE INC			58-1612	531	Pag
Part III	Organizations Maintain	ing Collections of	Art, Historical	Treasures, c	or Other Sir	nilar Asset	s (continued)
	g the organization's acquisition, accection items (check all that apply):	ession, and other records	, check any of the	following that mal	ke significant u	ise of its	
a F	Public exhibition	d 🗌 L	oan or exchange p	rogram			
b 3	Scholarly research		Other				
c F	Preservation for future generations						
4 Prov	ide a description of the organization's	s collections and explain	how they further th	e organization's e	exempt purpos	e in Part	
5 Durir	ng the year, did the organization solic	it or receive donations of	art, historical treas	sures, or other sir	milar		
	ts to be sold to raise funds rather tha						Yes
Part IV							
	Complete if the organizat	ion answered "Yes"	on Form 990, F	Part IV, line 9,	or reported	an amount	on Form
1a Is the	990, Part X, line 21. e organization an agent, trustee, cust	odian or other intermedia	ary for contributions	s or other assets	not		
	ded on Form 990, Part X?						Yes
	es," explain the arrangement in Part >						
			3		1		Amount
c Begin	nning balance			Allen		1c	
_	tions during the year					1d	
	butions during the year					1e	
	ng balance					1f	
2a Did tl	ne organization include an amount or	Form 990 Part X line 2	21 for escrow or cu	istodial account li	iahility?		Yes
	es," explain the arrangement in Part			103. 809			
Part V		tin. Officer fiere if the exp	Manadon nas been	provided on tare	XIII		
Land No.	Complete if the organizati	on answered "Yes"	on Form 990 F	art IV line 10			
	Complete it the organizati	(a) Current year	(b) Prior year	(c) Two years		hree years back	(e) Four years bac
4a Danis	uing of ware balance	(a) Current year	(b) Filol year	(c) Two years	back (d) I	lifee years back	(e) Four years back
	nning of year balance			-			
	ributions		-				
	nvestment earnings, gains, and		CONTRACTOR OF THE PARTY OF THE		İ		
	s		A				
	ts or scholarships						
	expenditures for facilities and				l l		
progra	ams	-	<u> </u>				
	nistrative expenses						
	of year balance						
	de the estimated percentage of the c	· 6 6	(line 1g, column (a)) held as:			
	d designated or quasi-endowment						
b Perm	anent endowment ▶%	6					
	endowment ▶ %						
The p	ercentages on lines 2a, 2b, and 2c s	hould equal 100%.					
3a Are th	nere endowment funds not in the pos	session of the organization	on that are held an	d administered fo	or the		
organ	ization by:						Yes N
	nrelated organizations						3a(i)
	-1-41						0 - (11)
	s" on line 3a(ii), are the related organ	izations listed as require	d on Schedule R?				
	ribe in Part XIII the intended uses of t						52
Part VI			TOTAL TOTAL	******			
M. C. SHISK LANDS	Complete if the organization	15	n Form 990 P	art IV line 11s	See Form	990 Part X	(line 10
	Description of property	(a) Cost or other bas		other basis	(c) Accumulate		(d) Book value
	Description of property	(investment)		her)	depreciation	1	(d) Book value
			(0,		depreciation	AND SUCCESSION	27.00
a Land		.		27,000	125	012	27,00
	ngs			248,776	133	,013	113,76
	hold improvements			40 450	40	450	
	ment			42,459		,459	10.00
				48,497	29	,610	18,88
tal. Add I	ines 1a through 1e. (Column (d) mus	t equal Form 990, Part X	, column (B), line 1	Oc.)		▶	159,65

	(a) Description of security or category	(b) Book value	(c) Metho	, Part X, line 12
	(including name of security)	50 40		f-year market value
	al derivatives			
2) Closely	held equity interests			
3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	···· <u>////</u>			
otal. (Colur	mn (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII				
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11c, See Form 990.	Part X. line 13
	(a) Description of investment	(b) Book value		of valuation:
		A STATE OF THE STA		year market value
1)			C	
2)				
3)				
4)				·
5)				
6)				
7)		A		
3)				
3)				
tal. (Colum	Other Assets. Complete if the organization answered "Yea".	Party OOO Part IV I'	4410 -	
9) otal. (Colum Part IX	Other Assets. Complete if the organization answered "Yes" (a) Description		11d. See Form 990,	
tal. (Colum	Other Assets. Complete if the organization answered "Yes" of		11d. See Form 990,	
Part IX	Other Assets. Complete if the organization answered "Yes" of		11d. See Form 990,	
Part IX	Other Assets. Complete if the organization answered "Yes" of		11d. See Form 990,	
Part IX	Other Assets. Complete if the organization answered "Yes" of		11d. See Form 990,	
rtal. (Column Part IX	Other Assets. Complete if the organization answered "Yes" of		11d. See Form 990,	
tal. (Colum Part IX	Other Assets. Complete if the organization answered "Yes" of		11d. See Form 990,	
tal. (Colum Part IX	Other Assets. Complete if the organization answered "Yes" of		11d. See Form 990,	
tal. (Colum Part IX	Other Assets. Complete if the organization answered "Yes" of		11d. See Form 990,	
Part IX)))))))	Other Assets. Complete if the organization answered "Yes" of		11d. See Form 990,	
tal. (Column Part IX	Other Assets. Complete if the organization answered "Yes" (a) Description		11d. See Form 990,	
Part IX Part IX (c) (c) (d) (d) (d) (d) (e) (e) (f) (f) (f) (f) (f) (f	Other Assets. Complete if the organization answered "Yes" (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.)		11d. See Form 990,	
Part IX Part IX () () () () () () () () () () () () (Other Assets. Complete if the organization answered "Yes" (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.	on Form 990, Part IV, line		(b) Book value
tal. (Column	Other Assets. Complete if the organization answered "Yes" (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" or	on Form 990, Part IV, line		(b) Book value
tal. (Column	Other Assets. Complete if the organization answered "Yes" (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" of line 25.	on Form 990, Part IV, line		(b) Book value
Part IX))))))) al. (Column art X	Other Assets. Complete if the organization answered "Yes" (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" of line 25. (a) Description of liability	on Form 990, Part IV, line		(b) Book value
Part IX))))) al. (Column art X	Other Assets. Complete if the organization answered "Yes" (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" of line 25.	on Form 990, Part IV, line		(b) Book value
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Part IX Part IX))))) al. (Columnart X	Other Assets. Complete if the organization answered "Yes" (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" of line 25. (a) Description of liability	on Form 990, Part IV, line		(b) Book value
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Part IX Part IX))))) al. (Columnart X	Other Assets. Complete if the organization answered "Yes" (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" of line 25. (a) Description of liability	on Form 990, Part IV, line		(b) Book value
tal. (Columnia)))))))) al. (Columnia) art X	Other Assets. Complete if the organization answered "Yes" (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" of line 25. (a) Description of liability	on Form 990, Part IV, line		(b) Book value
tal. (Columnia)))))) al. (Columniart X	Other Assets. Complete if the organization answered "Yes" (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" of line 25. (a) Description of liability income taxes	on Form 990, Part IV, line		(b) Book value
tal. (Column Part IX)))) al. (Column art X Federal i	Other Assets. Complete if the organization answered "Yes" (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" of line 25. (a) Description of liability	on Form 990, Part IV, line	11e or 11f. See Form	990, Part X,

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
, , , , , , , , , , , , , , , , , , , ,	1 741,743
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities 2b	4
c Recoveries of prior year grants 2c	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	
	741,743
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	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	turn.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	600 000
1 Total expenses and losses per audited financial statements	693,297
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	16
a Donated services and use of facilities 2a	
b Prior year adjustments	
c Other losses 2c	
d Other (Describe in Part XIII.)	d August
e Add lines 2a through 2d	
3 Subtract line 2e from line 1	693,297
A Amounto included on Form 000 Port IV line 05 historia on line 4:	
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	
a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) 4b	
a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) 4b	
a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5	
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Part XIII Supplemental Information (continued)	58-1612531	Page \$
Supplemental information (continued)		
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SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 2021

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection Employer identification number

HAVEN	OF	HOPE	INC

58-1612531

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 REVIEWED BY THE BOARD

Form 990, Part VI, Line 15a - Compensation Process for Top Official EVERY 3-5 YEARS THE BOARD OF DIRECTORS WILL DEVELOP A STRATEGIC PLAN; DEVELOPING GOALS WHICH COVER SEVERAL KEY AREAS, ONE OF WHICH IS PERSONNEL ISSUES/CONCERNS: MAINTAINING COMPETITIVE PAY, WHICH USUALLY INCLUDES A REVIEW OF NATIONAL AND STATE-WIDE COMPETITIVE SALARY CHARTS. THE LAST STRATEGIC PLAN WAS DEVELOPED IN MARCH OF 2011.

ADDITIONAL QUICK REVIEW OF COMPETITIVE PAY IS CARRIED OUT EACH YEAR WITH THE BUDGET APPROVAL PROCESS.

Form 990, Part VI, Line 15b - Compensation Process for Officers EVERY 3-5 YEARS THE BOARD OF DIRECTORS WILL DEVELOP A STRATEGIC PLAN; DEVELOPING GOALS WHICH COVER SEVERAL KEY AREAS, ONE OF WHICH IS PERSONNEL ISSUES/CONCERNS: MAINTAINING COMPETITIVE PAY, WHICH USUALLY INCLUDES A REVIEW OF NATIONAL AND STATE-WIDE COMPETITIVE SALARY CHARTS. THE LAST STRATEGIC PLAN WAS DEVELOPED IN MARCH OF 2011.

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Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation AVAILABLE UPON REQUEST.