

City of Fort Lauderdale

*City Hall
100 North Andrews Avenue
Fort Lauderdale, FL 33301
www.fortlauderdale.gov*



Meeting Minutes

Tuesday, August 21, 2018

6:00 PM

City Commission Chambers

City Commission Regular Meeting

FORT LAUDERDALE CITY COMMISSION

*DEAN J. TRANTALIS Mayor - Commissioner
BEN SORENSEN Vice Mayor - Commissioner - District IV
HEATHER MORAITIS Commissioner - District I
STEVEN GLASSMAN Commissioner - District II
ROBERT L. McKINZIE Commissioner - District III*

*LEE R. FELDMAN, City Manager
JOHN HERBST, City Auditor
JEFFREY A. MODARELLI, City Clerk
ALAIN E. BOILEAU, Interim City Attorney*

CALL TO ORDER

Mayor Trantalis called the Commission Regular Meeting to order at 6:11 p.m.

Invocation

Chaplain Ron Perkins, Fort Lauderdale Public Safety - Police and Fire Rescue

Pledge of Allegiance

Chaplain Ron Perkins, Fort Lauderdale Public Safety - Police and Fire Rescue

ROLL CALL

Present: Commissioner Heather Moraitis, Commissioner Steven Glassman, Vice Mayor Ben Sorensen, Commissioner Robert L. McKinzie and Mayor Dean J. Trantalis

Present: 5 - Commissioner Heather Moraitis, Commissioner Steven Glassman, Commissioner Robert L. McKinzie, Vice Mayor Ben Sorensen and Mayor Dean J. Trantalis

QUORUM ESTABLISHED

Also Present: City Manager Lee R. Feldman, City Clerk Jeffrey A. Modarelli, Interim City Attorney Alain Boileau, City Auditor John Herbst and Sergeant at Arms Matthew Bucella

Approval of MINUTES and Agenda

[18-0874](#)

Minutes for June 19, 2018 Commission Regular Meeting, June 20, 2018 Joint Commission Workshop with Budget Advisory Board, July 10, 2018 Joint Commission Workshop with Affordable Housing Advisory Committee, July 10, 2018 Commission Conference Meeting and July 10, 2018 Commission Regular Meeting

Commissioner Glassman noted a scrivener's error which would be corrected. Commissioner Robert McKinzie made a motion to approve this item as amended and was seconded by Vice Mayor Sorensen.

APPROVED AS AMENDED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

AGENDA ANNOUNCEMENTS

Mayor Trantalis made the following Agenda Announcements:

Added to Agenda:

WALK-ON - Motion to Authorize Commissioner McKinzie and City Manager Feldman to negotiate a proposed contract of employment with Alain Boileau for the position of City Attorney.

Removed from Agenda

PUR-17 - Motion to Approve Contract Purchase of Disaster Debris Removal and Management Services

CR-11 - Resolution to Approve a Lease Agreement with the United States Customs and Border Protection to Lease Parcel 18 at Fort Lauderdale Executive Airport Commission Agenda

Revisions to Agenda

CM-1 - Exhibits 5, 5a and 5b - Event - One World Water Lantern Festival removed from the Memo

PUR-18 - Contract revised - pages 15, 21, 29, 45

PH-4 - Motion to Defer to September 25, 2018 will be made when item is heard

PRESENTATIONS

PRES- [18-0899](#)
1

Proclamation declaring August 21, 2018 as Frank Stranahan Day in the City of Fort Lauderdale

Commissioner Glassman requested April Kirk, Executive Director, Historic Stranahan House Museum (Museum) and Stranahan Board Members join him at the podium. He read the Proclamation declaring August 21, 2018 as Frank Stranahan Day in the City of Fort Lauderdale. Board Member Mary Fertig commented on the many contributions made by Mr. Stranahan. Commissioner Glassman presented the Proclamation to Ms. Kirk. Ms. Kirk accepted the Proclamation, thanking Mayor Trantalis, the Commission and all who contributed to the Museum's success.

PRESENTED

PRES- [18-0900](#)**2**

Proclamation declaring August 2018 as Fort Lauderdale Professional FireFighters, Inc., IAFF Local 765 Appreciation Month in the City of Fort Lauderdale

Commissioner Moraitis requested Jeaneece Washington, Muscular Dystrophy Association, Fire Rescue Chief Rhoda Mae Kerr and Fire Rescue Battalion Chief and International Association of Fire Fighters (IAFF) Local 765 Vice President Mike Salzano join her at the podium. Commissioner Moraitis read the Proclamation declaring August 2018 as Fort Lauderdale Professional Fire Fighters, Inc., International Association of Fire Fighters (IAFF) Local 765 Appreciation Month in the City of Fort Lauderdale, presenting the Proclamation to Ms. Washington. Ms. Washington thanked IAFF Local 765 and the community for their support and contributions to the Muscular Dystrophy Association. She thanked Mayor Trantalis and the Commission for the Proclamation.

PRESENTED

PRES- [18-0868](#)**3**

Proclamation declaring August 21, 2018 Downtown Development Authority, The Media Lab, Inc., and Riverwalk Fort Lauderdale, Inc. Telly Award Day in the City of Fort Lauderdale

Mayor Trantalis requested Jenni Morejon, Executive Director of the Downtown Development Authority (DDA), John Floyd, Vice President of The Media Lab, Inc., and Genia Ellis, Executive Director of Riverwalk Fort Lauderdale join him at the podium. Mayor Trantalis presented a Proclamation declaring August 21, 2018 Downtown Development Authority, The Media Lab, Inc., and Riverwalk Fort Lauderdale, Inc., as Telly Award Winners Day in the City of Fort Lauderdale. Mayor Trantalis expounded on the Telly Award, reading the Proclamation in its entirety. A three minute Telly Award video illustrating what the City has to offer was shown.

Ms. Morejon thanked Mayor Trantalis and the Commission for the Proclamation.

PRESENTED

PRES- [18-0902](#)**4**

Recognition of Finance Department Achievements -
Alicia Sheffield - Certified Government Finance Officer Designation
Laurie Platkin and Maureen Lewis - Certified Public Purchasing Buyer Designation

City Manager Feldman requested Kirk Buffington, Finance Director, join him at the podium. Mr. Buffington announced the recognition of Finance Department employee achievements. He announced Alicia Sheffield's

designation as a Certified Government Finance Officer. Mr. Buffington also announced Maureen Lewis and Laurie Platkin's designation as Certified Public Purchasing Buyers. City Manager Feldman acknowledged the importance of the contributions made by Finance Department Community Builders.

PRESENTED

CONSENT AGENDA PUBLIC COMMENT

Items PUR-11, PUR-15, CR-1, CR-8, CR-12 were pulled by the Commission for separate discussion.

Mayor Trantalis recognized Charles King, 105 N. Victoria Park Drive. Mr. King commented on item CM-4. He made recommendations for addressing homelessness, including opening the Broward County Stockade. Mr. King also discussed item PUR-2, commenting on road paving and micro resurfacing.

Mayor Trantalis recognized Sherman Whitmore, 401 E. Las Olas Boulevard. Mr. Whitmore commented on item PUR-18 and the Beach Redevelopment Master Plan's public promenade. He also made brief comments regarding homelessness.

Mayor Trantalis recognized Bill Kent, Chair, International Swimming Hall of Fame (ISHOF). Mr. Kent thanked Mayor Trantalis and the Commission for their efforts to move Aquatic Complex renovations forward.

Mayor Trantalis recognized Brent Rutemiller, CEO of the International Swimming Hall of Fame (ISHOF). Mr. Rutemiller presented Mayor Trantalis and the Commission with a peace pipe. It is a token of the ISHOF and City relationship moving forward with the Aquatic Complex renovations. Mr. Rutemiller expounded on fundraising work and efforts to make the ISHOF an international destination.

Mayor Trantalis recognized Shaka McFadden. Ms. McFadden commented on item PUR-10 and turf grass landscape maintenance in the Northwest. City Manager Feldman discussed the protest bid process. Further discussions ensued. Mayor Trantalis referred Ms. McFadden to the Office of City the Attorney for proper procedure to address her concerns.

CONSENT AGENDA

CONSENT MOTION

Approval of the Consent Agenda

Commissioner McKinzie discussed removing CM-12 from the Consent Agenda for separate discussion. City Manager Feldman discussed the background of item CM-12. Further comment and discussion ensued.

Commissioner McKinzie made a motion to approve the Consent Agenda and was seconded by Vice Mayor Ben Sorensen.

Approve the Consent Agenda

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CM-1 [18-0822](#)

Motion to Approve Event Agreements: Annual Pineapple Jam, Race with the Broward County Deltas, Sandz/Jamaica Diaspora Community Outreach Family Fun Day, YogaFest and One World Water Lantern Festival

Commissioner McKinzie made a motion to approve this item as amended and was seconded by Vice Mayor Sorensen.

APPROVED AS AMENDED - Removed Event One World Water Lantern Event from Item

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CM-2 [18-0823](#)

Motion to Approve Event Agreements and Related Road Closures for Fundraisers, General Awareness and Recreation Events: Champagne Fun Festival, 56th Annual Christmas on Las Olas, 2018 Broward Light the Night, Trick or Treat on 2nd Street and Duck Fest Derby

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CM-3 [18-0824](#)

Motion to Approve Event Agreements and Related Road Closures for Races, Walks and Triathlons: 7th Annual Merrill Lynch Bull Run, 5th Annual Fort Lauderdale Jingle Bell Jog, 13.1 Fort Lauderdale Half Marathon & 5K, Walk for the Animals, Making Strides Against Breast Cancer, and Las Olas International Triathlon

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CM-4 [18-0643](#)

Motion Approving Memorandums of Understanding with the Taskforce

Fore Ending Homelessness, the Salvation Army, United Way of Broward, and Approving a Participation Agreement with Broward Partnership for the Homelessness, Inc.

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CM-5 [18-0814](#)

Motion Accepting FY17 Assistance to Firefighters Grant from the United States Department of Homeland Security and the Federal Emergency Management Agency in the amount of \$639,756

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CM-6 [18-0419](#)

Motion Authorizing Settlement of General Liability Claim of 1492 East Broward Blvd, LLC - \$170,000

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CM-7 [18-0817](#)

Motion to Approve a Thirty (30) Year Lease Agreement with the International Swimming Hall of Fame, Inc.

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CM-8 [18-0774](#)

Motion to Accept FY2017 Florida Department of Transportation Grant - \$54,400

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CM-9 [18-0808](#)

Motion to Accept FY2018 Justice Assistance Grant - Emergency Fund - Overtime for February 14, 2018 Incident Response - \$9,420

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CM-10 [18-0877](#)

Motion to Approve an Amended One-Year Agreement with the School Board of Broward County, Florida for School Resource Officer Program

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CM-11 [18-0750](#)

Motion to Authorize the Execution of a Site Access Agreement with Broward County in Order to Demolish and Abandon Pump Station A-44

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

[18-0948](#)

Motion to Reconsider - CM-12

Commissioner McKinzie made a motion to reconsider this item and was seconded by Commissioner Glassman.

APPROVED

Aye: 3 - Commissioner Moraitis, Commissioner Glassman and Commissioner McKinzie

Nay: 2 - Vice Mayor Sorensen and Mayor Trantalis

CM-12 [18-0846](#)

Motion to Approve a Parking Permit and Enforcement Agreement with First Presbyterian Church located at 401 SE 15th Avenue

Mayor Trantalis recognized Robert Lochrie, Esq., Lochrie & Chakas and designated representative of Emmett McTigue. Mr. Lochrie discussed Mr. McTigue's request to adhere to landscaping Code requirements. In response to Mayor Trantalis' question, Mr. Lochrie confirmed the parking lot's use for commercial parking and church parking. Commissioner McKinzie confirmed his desire to reconsider item CM-12, commenting on Mr. McTigue's contributions to the City. City Manager Feldman confirmed the need for further discussion.

Discussions ensued on bringing the park lot up to Code and providing employee parking. City Manager Feldman expounded on Staff's position. He commented on the need for negotiations with those responsible for the cost of landscape improvements. Further comment and discussion ensued on the uses of the parking lot. Vice Mayor Sorensen confirmed his desire to work with all stakeholders to resolve concerns.

Mayor Trantalis recognized Linda Webb, 1414 SE 12 Street. Ms. Webb commented on the importance of involving surrounding neighbors in discussions. Mayor Trantalis acknowledged Vice Mayor Sorensen's willingness to work to address all stakeholder concerns.

Vice Mayor Sorensen made a motion to table this item and was seconded by Commissioner Glassman.

TABLED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CM-13 [18-0651](#)

Motion Authorizing Execution of a Revocable License with RRPIV WF FTL LLLP for Temporary Right-of-Way Closures on SE 16th Court, SE 17th Street, and SE 4th Avenue in Association with the "501 Seventeen" Development Located at 501 SE 17th Street

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CONSENT RESOLUTION

CR-1 [18-0772](#)

Resolution Approving the Re-Naming of Sistrunk Park to Carlton B. Moore Park

Commissioner Glassman explained his position on renaming Sistrunk Park (Park). Mayor Trantalis requested public comment prior to Commission input.

Mayor Trantalis recognized Pamela Beasley Pittman, 500 NW 19th Avenue. Ms. Beasley inquired if the Sistrunk family was contacted about renaming the Park. She recommended the possibility of a hyphenated name. Ms. Beasley commented on other ways to honor Commissioner Carlton B. Moore, including renaming Rock Island Elementary School. Further comment and discussion ensued.

Mayor Trantalis recognized Carla Roundtree, 722 NW 2nd Avenue. Ms. Roundtree concurred with Ms. Beasley Pittman's comments. She recommended maintaining the name Sistrunk Park's, commenting on the importance of maintaining its historic significance.

Mayor Trantalis recognized Charles King, 105 N. Victoria Park Road. Mr. King commented on previous renaming efforts, recommendations on the process and the importance of community involvement.

Mayor Trantalis recognized Delores McKinley, 1630 NW 26th Terrace. Ms. McKinley commented on the possibility of honoring more than one individual by having a hyphenated name. She also commented on naming a school after Commissioner Moore. Ms. McKinley urged the

Commission to support this item.

Mayor Trantalis recognized DeNese Moore, 2000 NW 29th Terrace. Ms. Moore commented on the contributions of Commissioner Moore and the importance of recognizing both Commissioner Moore and Dr. Sistrunk. She concurred with Ms. McKinley's comments.

Commissioner Moraitis commented on the goal to honor both individuals. She concurred with this item's recommendation to rename Sistrunk Park to Carlton B. Moore Park.

Commissioner Glassman discussed concerns about this item setting a precedent. He confirmed support to rename a school in honor of Commissioner Moore.

In response to Vice Mayor Sorensen, Mayor Trantalis expounded on the genesis of this item, discussing Commissioner Moore's contributions to the City. Commissioner Glassman confirmed the unanimous votes by the Parks, Recreation and Beaches Board and the Northwest Progresso-Flagler Heights Community Redevelopment Board (CRA) Board for this recommendation.

Commissioner McKinzie discussed previous efforts to honor Commissioner Moore, commenting on the process. He confirmed the intent of naming public places as a permanent memory of individuals. Commissioner McKinzie expounded on ways to honor Commissioner Moore. Further discussion and comment ensued on the process moving forward.

Commissioner Glassman made a motion to deny the approval of this item and was seconded by Commissioner McKinzie.

APPROVED a Motion to Deny

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CR-2 [18-0826](#)

Resolution Approving the Notice of Award and Sale of City Owned Property Located at 1146 NW 6 Avenue, Fort Lauderdale, FL to 2968 INVESTMENT, LLC, a Florida limited liability company

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CR-3 [18-0898](#)

Resolution Amending Resolution No. 18-130 to Announce the Revised Date for Scheduled Lease Approval for the Vacant Parcels

at the Fort Lauderdale Executive Airport with Premier Parks, LLC

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CR-4 [18-0854](#)

Resolution Establishing a Sustainability Investment Fund

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CR-5 [18-0566](#)

Resolution to Accept a Grant in the amount of \$7,500 from Broward County to Assist in the Financing of a 9/11 Memorial Statue at Riverwalk

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CR-6 [18-0773](#)

A Resolution Authorizing the City Manager to Apply to the Broward Boating Improvement Program for Grant Funding of \$50,000 for Future Derelict Vessel Removal

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CR-7 [18-0617](#)

Resolution to Approve an Amendment to the Interlocal Agreement with Broward County for Community Bus Services to Extend the Term of the Agreement for One Year

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CR-8 [18-0830](#)

Resolution Requesting the Broward Metropolitan Planning Organization Use Downtown Fort Lauderdale Mobility Streetscape Project Funds for a Pedestrian Bridge over the FEC Railway

Commissioner Glassman confirmed this item was raised at the District II Pre-Agenda Meeting (Meeting). During the Meeting, it was suggested that Brightline would bear the cost of this item. City Manager Feldman had no recollection of this commitment from Brightline. Brightline sought a federal grant which was not received. He commented on a conversation with Brightline about a possible financial contribution should the Broward Metropolitan Planning Organization (MPO) not provide

adequate funding. Exact financial costs have not been determined. City Manager Feldman explained the background of this item and the next steps to determine costs. He explained his recommendation to the MPO, the need to build this bridge using MPO funding and details involving the scope of project.

Vice Mayor Sorensen introduced this Resolution which was read by title only.

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CR-9 [18-0832](#)

Resolution Authorizing the Acceptance of Grant Funds and Execution of a Joint Participation Agreement with Florida Department of Transportation for Airfield Signage Replacement

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CR-10 [18-0834](#)

Resolution to Approve a 1) An Eleventh (11th) Amendment to the Memorandum of Agreement with the Florida Department of Transportation for Installation and Maintenance of Landscape and Hardscape Improvements within the Right-of-Way on the East Side of A-1-A between NE 22 Street and NE 23 Street and, 2) Assumption of Liability and Hold Harmless Agreement with PRH Fairwinds, LLC

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

CR-12 [18-0844](#)

Resolution Approving the Consolidated Budget Amendment to Fiscal Year 2018 - Appropriation

Commissioner Glassman asked for the identification of funds in item "C". City Manager Feldman confirmed the amount budgeted for the Aquatic Complex, explaining that this item addresses a cash flow concern. He expounded on related details.

Commissioner Glassman also asked about the language in item "L" relating to seawalls. City Manager Feldman explained the term "abandoning" as noted in the Charter and the budget process involved with the funding of Community Investment Projects. This item corrects the allocation of funds for critical seawall projects, Cordova Road and Isles of Palm. He expounded on the status of addressing additional

seawall projects. City Manager Feldman confirmed the cost of the Cordova Road and Isles of Palm seawalls as \$8,300,000. Mayor Trantalis noted these costs include reconstruction of the adjacent seawall roads.

Mayor Trantalis recognized Paul Chettle, 200 S. Birch Road. Mr. Chettle pointed out concerns relating to several items and the funding of seawall projects.

Mayor Trantalis recognized Charles King, 105 N. Victoria Park Road. Mr. King commented on concerns relating to Las Olas Boulevard flooding and the importance of addressing seawalls on this roadway.

Vice Mayor McKinzie introduced this Resolution which was read by title only.

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PURCHASING AGENDA

PUR-1 [18-0677](#) Motion to Approve Increase in Funds to the Structural Engineering Consulting Services Contract with Lakdas/Yohalem Engineering, Inc. - \$220,000

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-2 [18-0688](#) Motion to Approve Annual Contract for Asphalt Milling and Resurfacing Services - Weekley Asphalt Paving, Inc. - \$950,000 (two-year total)

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-3 [18-0698](#) Motion to Approve Contracts for Annual Bridge Repair, Maintenance and Painting Services - Engineer Control Systems, Corporation and Lambert Bros., Inc. - \$750,000 (two-year total)

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-4 [18-0728](#) Motion to Approve Increase in Expenditures to Contract for Purchase of Group Dental Plan Benefits - Cigna Health and Life Insurance Company - \$1,656,889

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-5 [18-0738](#) Motion to Approve Increase in Expenditures to Contract for Janitorial Services - Image Janitorial Services, Inc. - \$66,000

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-6 [18-0751](#) Motion to Approve Increase in Funds to Construction Engineering Inspection Services Continuing Contract - Various Consultants - \$1,405,000

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-7 [18-0752](#) Motion to Approve Increase in Funds to Annual Utilities Restoration Contract - Various Contractors - \$804,575

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-8 [18-0758](#) Motion to Approve Contracts for Annual Marine Facilities and Waterway Signage Repair and Maintenance Services - B & M Marine Construction, Inc. and Shoreline Foundation, Inc. - \$750,000 (two-year total)

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-9 [18-0765](#) Motion to Approve Change Order No. 3 for the Central Beach Alliance Pump Station D-41 Project - Intercounty Engineering Inc. - \$90,709.34

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-1 [18-0775](#)

0

Motion to Approve Cancellation and Re-Award of Contract for Purchase of Turf Grass Maintenance for Southwest Quadrant - VisualScape, Inc. - \$240,325

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-1 [18-0776](#)

1

Motion to Approve Contract for Fort Lauderdale Executive Airport Western Perimeter Loop Road - Stanford & Sons Trucking Corporation d/b/a Stanford Construction - \$864,216

Commissioner Glassman requested a financial revenue report on net profits from Fort Lauderdale Executive Airport (Airport). City Manager Feldman said this information is available in the annual budget and in the adoption of the consolidated review of financial reports. Any additional information can be provided. Commissioner Glassman reconfirmed his request for additional detailed financial information on the Airport's net profits. Further comment ensued on the affordability of Airport operations.

Commissioner Glassman made a motion to approve this item and was seconded by Commissioner McKinzie.

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-1 [18-0777](#)

2

Motion to Approve Contract for Fort Lauderdale Executive Airport Airfield Electrical Vault Improvements - American Infrastructure Services, Inc. - \$1,063,648

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-1 [18-0792](#)

3

Motion to Approve Contract for Purchase of Hydraulic Vehicle Gate Operators and Intelligent Controller Modules - Florida Door Control of Orlando, Inc. - \$271,511

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-1 [18-0813](#)

4

Motion to Approve Contract for Purchase of Bridge Tending Services - ISS Facility Services, Inc. - \$159,743

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-1 [18-0815](#)
5

Motion to Approve Contract for Construction of Fire Station No. 8 -
Burke Construction Group, Inc. - \$4,165,130

Mayor Trantalis explained this item addresses the location of Fire Station 8 at 1717 SW 1st Avenue. He noted Commissioner Glassman's desire to discuss relocating Fire Station 8.

Mayor Trantalis recognized Dr. Warren Sturman, 520 SE 5th Avenue. Dr. Sturman confirmed he was speaking on behalf of the Fire Bond Committee, the Rio Vista Neighborhood and the Downtown Civic Association. He expounded on the history of meetings, negotiations and reasoning for locating Fire Station 8 in the area of 8th Street and Federal Highway, noting this would be the optimal area. Dr. Sturman commented on available sites in this area and corresponding improvements to response times in the downtown area.

In response to Commissioner McKinzie, Dr. Sturman discussed area site options and ways to fund land acquisition. City Manager Feldman commented on the effect and timelines of relocating Fire Station 8 from 1717 SE 1st Avenue to another area.

Mayor Trantalis commented on previous efforts to relocate the site and lack of real estate in the area suggested by Dr. Sturman. Dr. Sturman discussed the current availability of sites in the area, noting the need to address the necessary funding for land acquisition. Further comment and discussion ensued.

In response to Commissioner Glassman, Dr. Sturman noted his understanding of the Fire Bond's position on this item.

Mayor Trantalis recognized Ken Joseph, 520 SE 5th Avenue. Mr. Joseph commented on concerns about downtown area response times.

Mayor Trantalis recognized Mike Salzano, Fire Rescue Battalion Chief and Vice President of International Association of Fire Fighters (IAFF) Local 765. Mr. Salzano confirmed the neutral position of the IAFF Local 765.

Mayor Trantalis recognized Paul Chettle, 200 S. Birch Road. Mr. Chettle urged the Commission to support this item, commenting on the current timeline of the Fire Bond and improved response times. Further

comment and discussion ensued on the importance of having an Emergency Medical Services (EMS) facility and moving forward on this item.

Mayor Trantalis recognized Stan Eichelbaum, 411 N. New River Drive East. Mr. Eichelbaum discussed the timeline, encouraging a deferral to address the need for a service solution to downtown population density needs. Further comment and discussion ensued on availability and cost of land acquisition in the noted area.

In response to Commissioner Glassman, City Manager Feldman discussed the Fire Bond's timelines, commenting on the fiduciary responsibility for bond proceeds and the need to resolve solutions for Fire Station 13. City Manager Feldman recommended this item not be deferred.

Commissioner Glassman asked if there have been discussions about using Riverwalk's first floor garage for an EMS facility. City Manager Feldman said there have been no discussions. He expounded on the EMS coverage versus fire suppression services. In response to Commissioner Glassman, City Manager Feldman confirmed this option would be discussed.

Vice Mayor Sorensen commented on the property in the area owned by Leo Hansen. City Manager Feldman confirmed discussions on this property, the need to acquire adjacent property, costs for redesign, zoning and neighborhood impact. He reiterated timeline concerns. Further comment ensued. City Manager expounded on costs to date.

Mayor Trantalis recognized Fire Rescue Chief Rhoda Mae Kerr. In response to Vice Mayor Sorensen, Fire Rescue Chief Kerr discussed the new Fire Station's Hazmat function, the proximity to the Fort Lauderdale-Hollywood International Airport (Airport) and Port Everglades (Port), and response times. She said the current site is a good location. It is on the correct side of the railroad tracks and the New River. The location improves the standard of coverage to the Rio Vista neighborhood. Fire Chief Kerr submitted heat maps indicating current and proposed deployment, giving a detailed explanation. Fire Chief Kerr recommended approval of this item.

A copy of this documentation is attached to these minutes.

Commissioner McKinzie made a motion to approve this item and was seconded Commissioner Glassman.

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-1 [18-0816](#)
6

Motion to Approve Purchase of Additional Licenses for the Deployment of the Enterprise Content Management System (Laserfiche) - MCCI, LLC - \$32,832

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUR-1 [18-0858](#)
8

Motion to Approve a Guaranteed Maximum Price Contract for Fort Lauderdale Aquatic Center Renovation Design-Build Project - Hensel Phelps Construction - \$26,995,368

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

MOTIONS

M-1 [18-0821](#)

Motion to Approve an Event Agreement with Related Road Closures and Music Exemption with the Museum of Discovery and Science, Inc. for An Evening in the South Pacific

Commissioner McKinzie made a motion to approve this item and was seconded by Commissioner Glassman.

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

M-2 [18-0904](#)

Motion to Approve an Event Agreement with HOPE South Florida, Inc. for a Mobile Showers Program

Mayor Trantalis recognized Alex Johnson, 729 NE 20th Avenue and representative of the American Civil Liberties Union (ACLU). Mr. Johnson commented on the ACLU's interest on the topic of homelessness. He thanked Vice Mayor Sorensen for requesting this item be put on the Agenda.

Mayor Trantalis recognized Ted Greer, representative of HOPE South Florida (HOPE) located at 1100 N. Andrews Avenue. Mr. Greer encouraged the Commission to support this item. In response to Mayor Trantalis, Mr. Greer confirmed the primary use of the HOPE ministry site is for religious purposes, expounding on its founding, history and collaboration with other churches to address homelessness. He

explained details involving efforts to have a permanent church home at 1100 N. Andrews Avenue, stating church services are held there on Tuesday and Thursday evenings. Further comment ensued.

In response to Vice Mayor Sorensen, Mr. Greer expounded on HOPE 's work to provide food services and showers to the homeless. Mobile showers are held on Mondays at Saint Christopher's Episcopal Church. He confirmed the proposal for periodic showers at HOPE's facility on Tuesdays, commenting on details listed in the application. Mr. Greer confirmed efforts to have worship services at HOPE's facility on Sundays in addition to other services. He expounded on this topic.

Mayor Trantalis recognized Edward Catalano, 1245 NW 2nd Avenue and Treasurer of the South Middle River Civic Association (Association). Mr. Catalano spoke in opposition to this item, noting HOPE is not a church and expounding on the Association's position. He provided copies of HOPE's federal 501(c)3 tax returns for the record. Further comment ensued on HOPE having church services on Sundays.

A copy of this information is attached to these minutes.

City Auditor Herbst confirmed that the term "church" is not defined in the Internal Revenue Code, expounding on this point.

Mayor Trantalis recognized William Cody, 1245 NW 2nd Avenue and member of the South Middle River Civic Association. Mr. Cody spoke in opposition to this item, explaining his history with addressing the needs of the homeless and conversations with representatives of HOPE regarding homelessness services. He encouraged efforts to find housing for the homeless in lieu of mobile showers at 1100 N. Andrews Avenue.

Mayor Trantalis recognized Ray Thrower, 1239 NW 1st Avenue. Mr. Thrower commented on neighborhood community efforts in South Middle River and the neighborhood's affiliation with Central City Community Redevelopment Agency (CRA) in 2012. Mr. Thrower commented on the increase in attendance at homeless feedings since March of 2018 and the impact of additional homeless services. He recommended a different location for homeless showers and improved security.

Mayor Trantalis recognized Charles King, 105 N. Victoria Park Road. Mr. King inquired about the genesis of HOPE, commenting on services provided by churches for the homeless needs. He also commented on relocating mobile shower services to other areas.

Mayor Trantalis recognized Michael Albetta, representative of St. Anthony's Homeless Ministry. Mr. Albetta commented on work with the Sanctuary Church located on Federal Highway and its November 17, 2018 food distribution. He expounded on the work of St. Anthony's to provide mobile showers and housing for housing single mothers and their children. Mr. Albetta commended the Commission for their work to address homelessness. He confirmed his support of this item and HOPE, commenting on the relocation of mobile showers.

Commissioner Moraitis commented on her position regarding HOPE, noting the importance of their work to address homelessness. She expounded on details regarding the need for wraparound services.

Commissioner Glassman concurred with Commissioner Moraitis, expounding on the neighborhoods' perspective and the need to respect all sides. He asked City Manager Feldman about providing security for mobile showers to ensure order. City Manager Feldman confirmed discretion providing reasonable security services deemed appropriate by the Commission, commenting on the process and his position.

Mayor Trantalis commented on previous conversations with representatives of HOPE, his position on assisting the homeless, the need for all stakeholders to work together and consider expanding these services beyond 90 days. City Manager Feldman expounded on the 90 day requirement, confirming it is arbitrary. He also commented on the possibility of amending the Unified Land Development Regulations (ULDR) and the Special Events Ordinance for these types of activities.

Commissioner Glassman commented on his support of this item, expounding on his earlier comments to address all stakeholder concerns, including neighborhood input. This item will provide an opportunity to monitor the operation of mobile showers, ensuring all details are being appropriately managed and addressed.

In response to Vice Mayor Sorensen, Dr. Greer explained efforts and details to improve, remediate and address neighbor concerns at 1100 N. Andrews Avenue, commenting on the need for fundraising. Dr. Greer confirmed HOPE's desire to be good neighbors.

Mayor Trantalis discussed the need for neighbor involvement and transparency. Dr. Greer concurred.

Commissioner McKinzie commented on mobile shower sites and proper management to ensure the best interests of the public. He emphasized the need to have mobile shower sites properly maintained, citing Saint

Anthony's as a model.

In response to Vice Mayor Sorensen, Police Department Major Dana Swisher responded "no" to the inquiry about criminal activity in the vicinity of homeless services.

Vice Mayor Sorensen concurred with Commissioner Glassman's input on the 90 day approval, confirming there is a need for these services.

Commissioner Glassman discussed the need to address neighbor requests for additional security at mobile showers. City Manager Feldman commented on the cost. Further comment and discussion ensued. There was a consensus to monitor these events and address concerns should they arise.

Vice Mayor Sorensen made a motion to approve this item and was seconded by Commissioner Moraitis.

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

Mayor Trantalis recessed the meeting at 9:20 p.m.

Mayor Trantalis reconvened the meeting at 9:35 p.m.

RESOLUTIONS

R-1 [18-0872](#)

Appointment of Board and Committee Members

Mayor Trantalis confirmed the consensus appointment of Charles Ladd to the Downtown Development Authority. City Clerk Modarelli confirmed this appointment would be on the September 4, 2018 R-1 Resolution.

City Clerk Jeffrey Modarelli confirmed additional appointments to be made at the September 4, 2018 Commission Regular Meeting:

- Laudertrail Committee - two appointments, one from Commissioner McKinzie and one from Commissioner Glassman;
- One appointment to the Parks, Recreation and Beaches Board. The Parks, Recreation and Beaches Board has nominated Marie Huntley and Karen Povlika.

- Planning and Zoning Board. The Planning and Zoning Board has nominated Jay Shechtman.

City Clerk Modarelli read the Board and Committee appointments for tonight's R-1 Agenda item into the record.

A copy of Board and Committee appointments and respective terms are attached to these minutes.

Commissioner McKinzie introduced this Resolution which was read by title only.

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

R-2 [18-0891](#)

Resolution to Approve an Agreement between the City of Fort Lauderdale and the Fort Lauderdale Community Redevelopment Agency (CRA) to Provide a Line of Credit to the CRA in the Amount of \$ 1,921,684

Commissioner Glassman introduced this Resolution which was read by title only.

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

R-3 [18-0799](#)

Resolution Approving an Interlocal Agreement (ILA) between Broward County and the City of Fort Lauderdale for the Development of the 100-Year Flood Elevation Map and Associated Modeling - \$ 98,571.43

Vice Mayor Sorensen introduced this Resolution which was read by title only.

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

R-4 [18-0580](#)

Quasi-Judicial Resolution to Approve a Utility Easement Vacation - Reserve at Edgewood - 2807 SW 15th Avenue - Case No. E18004

Anyone wishing to speak must be sworn in. Commission will announce any site visits, communications or expert opinions received and make them part of the record.

Each City Commission member disclosed verbal and written

communications, site visits and expert opinions.

Mayor Trantalis opened the public hearing.

There being no one wishing to speak on this item, Vice Mayor Sorensen made a motion to close the public hearing, which was seconded by Commissioner Glassman. Roll call showed: AYES: Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis. NAYS: None.

Commissioner McKinzie introduced this Resolution which was read by title only.

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

R-5 [18-0690](#)

Quasi-Judicial Resolution to Approve a Partial Utility Easement Vacation - Located at 215 SW 14 Way - Kim Nothard - Case No. E18005

Anyone wishing to speak must be sworn in. Commission will announce any site visits, communications or expert opinions received and make them part of the record.

Each City Commission member disclosed verbal and written communications, site visits and expert opinions.

Mayor Trantalis opened the public hearing.

There being no one wishing to speak on this item, Commissioner McKinzie made a motion to close the public hearing, which was seconded by Commissioner Glassman. Roll call showed: AYES: Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis. NAYS: None.

Vice Mayor Sorensen introduced this Resolution which was read by title only.

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

R-6 [18-0700](#)

Quasi-Judicial Resolution to Approve a Utility Easement Vacation - Broward College Foundation, Inc. located at 201 E Las Olas Boulevard - 201 East Las Olas - Case No. E18010

Anyone wishing to speak must be sworn in. Commission will announce any site visits, communications or expert opinions received and make them part of the record.

Each City Commission member disclosed verbal and written communications, site visits and expert opinions.

Mayor Trantalis opened the public hearing.

There being no one wishing to speak on this item, Commissioner McKinzie made a motion to close the public hearing, which was seconded by Commissioner Moraitis. Roll call showed: AYES: Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis. NAYS: None.

Commissioner Glassman introduced this Resolution which was read by title only.

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

R-7 [18-0701](#)

Quasi-Judicial Resolution to Approve a Utility Easement Vacation - 212 Partners, LLC. Located at 220 SE 2nd Street - Case No. E18009

Anyone wishing to speak must be sworn in. Commission will announce any site visits, communications or expert opinions received and make them part of the record.

Each City Commission member disclosed verbal and written communications, site visits and expert opinions.

Mayor Trantalis opened the public hearing.

There being no one wishing to speak on this item, Commissioner Glassman made a motion to close the public hearing, which was seconded by Commissioner McKinzie. Roll call showed: AYES: Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis. NAYS: None.

Commissioner Glassman introduced this Resolution which was read by title only.

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

[18-0949](#)

WALK-ON - Motion to Extend Meeting one hour to 11 p.m.

Commissioner McKinzie made a motion to approve this item and was seconded by Vice Mayor Sorensen.

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

R-8

[18-0706](#)

Quasi-Judicial - De Novo Hearing - Site Plan Level II Development Permit- Alexan-Tarpon River - Case No. R17055

Anyone wishing to speak must be sworn in. Commission will announce any site visits, communications or expert opinions received and make them part of the record.

In response to Mayor Trantalis, City Manager Feldman clarified Staff's original recommendation has not changed, noting procedural aspects of this Call-Up item which was continued from a previous Commission meeting. The alternative design proffered at the previous Commission Meeting (Meeting) has not been submitted for Staff review. Further comment, explanation and discussion ensued. Interim City Attorney Alain Boileau expounded on procedural issues, confirming there are three options: granting the project; deny the project; or approving the project with conditions. Further comments and discussion ensued.

Each City Commission member disclosed verbal and written communications, site visits and expert opinions.

Commissioner Glassman read from the minutes of June 19, 2018 Commission Regular Meeting regarding the agreement reached on this item. Commissioner McKinzie commented on his position.

Mayor Trantalis recognized Bill Spencer, Esq., 350 E. Las Olas Boulevard on behalf of the applicant. Mr. Spencer discussed his understanding of what occurred during previous Commission Meetings. The applicant did not submit a revised site plan due to the lack of economic feasibility for a 14 story, 120-unit building. The applicant subsequently submitted a revised 14 story, 180-unit building site plan that Staff found unacceptable. Mr. Spencer confirmed the applicant's position that the initial proposal is the best project for this site, expounding on the original project's economic benefits. Mr. Spencer requested the Commission go forward and approve the original application. He reiterated objection to the Call-Ups.

Mayor Trantalis confirmed the status of this item as originally submitted. In response to Mayor Trantalis, Interim City Attorney Boileau confirmed there is no additional basis to reopen and continue the De Novo Hearing's public comment.

Commissioner Moraitis confirmed her support of the original plan.

After review of the June 19, 2018 Meeting video tape, Vice Mayor Sorensen confirmed the applicant's agreement to provide Staff and the Commission with the requested revised site plan renderings and drawings at the July 10, 2018 Meeting. He confirmed there was no caveat in the applicant's statements before the Commission. Vice Mayor Sorensen acknowledged the applicant's request for an extension from the July 10, 2018 Meeting to the August 21, 2018 Meeting to allow for community outreach and neighbor input.

Commissioner Glassman confirmed the unexpected nature of the applicant's response to Commission requests confirmed by the applicant at the June 19, 2018 Meeting. He concurred with Vice Mayor Sorensen's comments. Commissioner Glassman confirmed his objection to the applicant's project due to its nonconformance with the Downtown Master Plan and the New River Master Plan, expounding on additional concerns.

In response to Mayor Trantalis, Commissioner Glassman confirmed the project does not meet published criteria, the applicant failed to provide competent and substantial evidence and the site plan does not comport with the essential requirements of law for approval. Based upon input from Interim City Attorney Boileau, Commissioner Glassman also objected to Staff's conclusions on the project.

Commissioner McKinzie commented on the need for clarity. Interim City Attorney Boileau explained that the outcome of a "no" vote denotes a finding that the applicant did not meeting all published criteria. He stated that the Commission decision needs to be made on competent and substantial evidence received through the evidentiary process in compliance with Code requirements. Interim City Attorney Boileau expounded on these points. Further comment and discussion ensued.

Vice Mayor Sorensen introduced this Resolution to deny the Site Plan Level II which was read by title only.

ADOPTED Resolution Denying Development Permit and Dwelling Unit Allocation

Aye: 3 - Commissioner Glassman, Vice Mayor Sorensen and Mayor Trantalis

Nay: 2 - Commissioner Moraitis and Commissioner McKinzie

R-9 [18-0707](#)

Resolution Expressing No Objection to the Amendment to a Site Plan Level II Development Permit - Villa Medici Association, Inc. - 1033 NE 17th Way - Case No. A17011

Mayor Trantalis confirmed there have been significant negotiations between the parties, noting City Manager Feldman has no objection to the amended site plan.

Mayor Trantalis recognized Alan Gabriel, 200 East Broward Boulevard and representative of Villa Medici Association (Villa Medici). Mr. Gabriel gave a brief review of negotiations, confirming the Association's request and the agreement reached with Lake Ridge Civic Association for the amended site plan as discussed in Commission Agenda Memo 18-0707. He discussed the opening of two gates, at 17th Terrace and 17th Way at 11th Street, and an additional third gate on 17th Terrace on the south side of Villa Medici at Sunrise Boulevard.

Mayor Trantalis recognized Courtney Crush, Esq., 333 N. New River Drive and representative of Lake Ridge Civic Association (Lake Ridge). Ms. Crush responded, commenting that Lakeridge Civic Association has no objection to the possibility of an interior street layout. The site plan was discussed in detail.

In response to Mayor Trantalis, Ms. Crush explained how these changes would result in optimal traffic flow.

Further discussion ensued on Lakeridge's additional requests that include "no parking" signs in certain areas on 11th Street near 17th Terrace and 17th Way, and a residential parking permit program. Mr. Gabriel commented on efforts to build community and harmony between the two parties, stating costs relating to the amended site plan would be paid by Villa Medici.

Mr. Gabriel commented on the utility pedestrian and non-motorized vehicle access easement (Easement) through Villa Medici which is not part of the site plan. Mayor Trantalis noted the need to address all components of this matter. Commissioner Glassman recommended acting on the item before the Commission. Further discussion ensued. Assistant City Attorney D'Wayne Spence expounded on the Ordinance language regarding the Easement.

Commissioner Glassman introduced this Resolution.

Ms. Crush commented on Staff's input on the Easement, confirming that Lakeridge is comfortable working directly with the City on this issue. Ms.

Crush expounded on other details, including Code requirements relating to gate locations and functions.

In response to Mayor Trantalis' question about the Easement, Ms. Crush commented on possible options. Mr. Gabriel confirmed conversations with the Office of the City Attorney on this topic, stating that Villa Medici would address this issue.

In response to Mayor Trantalis, Mr. Gabriel confirmed his acceptance of the current resolution with the amendment for the requested extra gate. Mr. Gabriel confirmed having both ingress and egress at the gates need to be explored. Further discussion and comment ensued. City Manager Feldman commented on language in the Resolution and the possible need for modifications due to costs.

Mayor Trantalis recognized Michael Rigg, 1033 NE 17th Way. Mr. Rigg confirmed his support for opening the requested Villa Medici gates.

Mayor Trantalis recognized Rob Nelms, 1101 NE 17th Way. Mr. Nelms commented that concerns could be addressed through the permitting process. He inquired about safety concerns. It was confirmed that should safety concerns arise, the amendment modifications would not go forward. Mr. Nelms commented that the southern exit on 17th Terrace is critical.

Mayor Trantalis recognized Michael Albetta, member of the Lakeridge Civic Association. Mr. Albetta confirmed support of opening the Villa Medici gates. He also discussed the need for access to the Easement, expounding on this point.

Commissioner Glassman introduced this Resolution which was read by title only.

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

18-0950

Motion to Extend the Regular Meeting until completion of Agenda

Vice Mayor Sorensen introduced this item and was seconded by Commissioner Moraitis.

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

R-10 [18-0843](#)**City Auditor Annual Performance Review and Merit Adjustment**

Each Commission member concurred with giving City Auditor John Herbst a 3 percent merit adjustment.

Mayor Trantalis recognized Charles King, 105 N. Victoria Park Road. Mr. King gave his input on Mr. Herbst's performance, commenting on Return on Investment (ROI) and other items.

Commissioner Moraitis introduced this Resolution which was read by title only.

ADOPTED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

R-11 [18-0876](#)**City Clerk Annual Performance Review and Merit Adjustment**

Vice Mayor Sorensen recommended giving City Clerk Jeffrey Modarelli a 3 percent merit adjustment.

Commissioner McKinzie introduced this item as amended giving a 3% merit adjustment to City Clerk Jeffrey Modarelli which was read by title only.

ADOPTED AS AMENDED - 3% increase

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PUBLIC HEARINGS**PH-1** [18-0579](#)

Quasi-Judicial - Ordinance Vacating a Right-of-Way (Alley) Located Adjacent to and South of West Sunrise Boulevard between North Andrews Avenue and NW 1st Avenue - Andrews Project Development, LLC. - Case No. V18005

Anyone wishing to speak must be sworn in. Commission will announce any site visits, communications or expert opinions received and make them part of the record.

Each City Commission member disclosed verbal and written communications, site visits and expert opinions.

Mayor Trantalis opened the public hearing.

There being no one wishing to speak on this item, Commissioner

McKinzie made a motion to close the public hearing, which was seconded by Vice Mayor Sorensen. Roll call showed: AYES: Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis. NAYS: None.

Commissioner Glassman confirmed he would introduce this item subject to the following three conditions noted in the Commission Agenda Memo:

1. Any City infrastructure known or unknown and found to be within the vacated area shall be relocated at the expense of the applicant, and the relocated facilities shall be required to be inspected and accepted by the City's Public Works Department;
2. Any other utility infrastructure known or unknown and found to be within the vacated area shall be relocated at the expense of the applicant, and the relocated facilities shall be required to be inspected and accepted by the applicable utility agency or service provider; and,
3. The vacating ordinance shall be in full force and effect on the date a certificate, executed by the City Engineer, is recorded in the public records of Broward County, Florida. The certificate shall state that all conditions of the vacation have been met. A copy of the recorded certificate must be provided by the applicant to the City.

In response to Mayor Trantalis, Debbie Orshefsky, Esq., Holland and Knight and on behalf of the applicant, confirmed all conditions were acceptable.

Commissioner Glassman introduced this Ordinance for the First Reading which was read by title only.

PASSED FIRST READING

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PH-2 [18-0586](#)

Quasi-Judicial - Ordinance Vacating a Right-of-Way (Public Street) Identified as NW 1st Avenue Adjacent to and South of West Sunrise Boulevard - Andrews Project Development, LLC. - Case No. V17004

Anyone wishing to speak must be sworn in. Commission will announce any site visits, communications or expert opinions received and make them part of the record.

Each City Commission member disclosed verbal and written communications, site visits and expert opinions.

Mayor Trantalis opened the public hearing.

There being no one wishing to speak on this item, Commissioner McKinzie made a motion to close the public hearing, which was seconded by Commissioner Glassman. Roll call showed: AYES: Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis. NAYS: None.

In response to Commissioner Glassman, it was confirmed the three conditions noted in item PH-1 also apply to items PH-2 and PH-3.

Commissioner McKinzie introduced this Ordinance for the First Reading which was read by title only.

PASSED FIRST READING

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

PH-3 [18-0587](#)

Quasi-Judicial - Ordinance Vacating a Right-of-Way (Alley) Located Adjacent to and South of West Sunrise Boulevard between NW 1st Avenue and NW 2nd Avenue - Andrews Project Development, LLC. - Case No. V18004

Anyone wishing to speak must be sworn in. Commission will announce any site visits, communications or expert opinions received and make them part of the record.

Each City Commission member disclosed verbal and written communications, site visits and expert opinions.

Mayor Trantalis opened the public hearing.

There being no one wishing to speak on this item, Commissioner McKinzie made a motion to close the public hearing, which was seconded by Commissioner Glassman. Roll call showed: AYES: Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis. NAYS: None.

Commissioner Glassman introduced this Ordinance for the First Reading which was read by title only.

PASSED FIRST READING

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

- PH-4** [18-0672](#) Public Hearing Approving Modifications to the Northwest Community Link and Neighborhood Link Routes
- Mayor Trantalis said this item would be deferred to September 25, 2018 Commission Regular Meeting.
- Commissioner Glassman made a motion to defer this item to the September 25, 2018 Commission Regular Meeting and was seconded by Commissioner McKinzie.
- DEFERRED to the September 25, 2018 Regular Meeting**
- Aye:** 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

ORDINANCE FIRST READING

- OFR-1** [18-0497](#) Ordinance to Establish and Revise Procedures for Redressing Continuing, Repetitive, or Chronic Violations of the Code of Ordinances and Revising Civil Penalties
- Commissioner McKinzie introduced this Ordinance on the First Reading which was read by title only.
- PASSED FIRST READING**
- Aye:** 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis
- OFR-2** [18-0584](#) Quasi-Judicial - Ordinance Vacating a Right-of-Way Identified as NE 2nd Street Located West of North Federal Highway - 195 Federal LLC. - Case No. V18001
- Anyone wishing to speak must be sworn in. Commission will announce any site visits, communications or expert opinions received and make them part of the record.
- Each City Commission member disclosed verbal and written communications, site visits and expert opinions.
- Mayor Trantalis opened the public hearing.
- There being no one wishing to speak on this item, Commissioner Glassman made a motion to close the public hearing, which was seconded by Commissioner McKinzie. Roll call showed: AYES: Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis. NAYS: None.
- Commissioner McKinzie introduced this Ordinance for the First Reading

which was read by title only.

PASSED FIRST READING

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

OFR-3 [18-0745](#)

Quasi-Judicial - Ordinance - Rezoning from General Business (B-2) to North West Regional Activity Center- Mixed Use East (NWRAC-MUe) District - Broward Partnership for the Homeless, Inc. - 920 NW 7th Avenue - Case No. Z18003

Anyone wishing to speak must be sworn in. Commission will announce any site visits, communications or expert opinions received and make them part of the record.

Each City Commission member disclosed verbal and written communications, site visits and expert opinions.

Mayor Trantalis opened the public hearing.

There being no one wishing to speak on this item, Commissioner McKinzie made a motion to close the public hearing, which was seconded by Commissioner Glassman. Roll call showed: AYES: Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis. NAYS: None.

Vice Mayor Sorensen introduced this Ordinance for the First Reading which was read by title only.

PASSED FIRST READING

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

OFR-4 [18-0768](#)

Ordinance Amending Ordinance Number C-97-21 to Modify the Boundary of Property Approved for Use as a Homeless Assistance Center - Broward Partnership for the Homeless, Inc - Case No. T18003

Mayor Trantalis recognized Debbie Orshefsky, Esq., Holland and Knight and on behalf of the applicant. Ms. Orshefsky introduced Ms. Dodie Keith-Lazowick, Chair of the Broward Partnership for the Homeless, Inc. (BPHI) also in attendance.

Ms. Orshefsky explained the history of this item's zoning, discussing Section 47-18.26 of the Code addressing public use of land owned by a public entity and the Commission's ability to approve a desired use. Ms. Orshefsky confirmed OFR-3 and OFR-4 are companion items to address

the efforts of BPHI to develop up to 100 housing units for the homeless and affordable housing.

In response to Mayor Trantalis' question about obtaining a developer, Ms. Orshefsky confirmed a Joint Venture was executed last week with Green Mills Development, expounding on efforts to achieve this goal and additional plans moving forward.

Mayor Trantalis and Vice Mayor Sorensen thanked Ms. Orshefsky and Ms. Keith-Lazowick for their work in support of addressing homelessness.

Commissioner McKinzie introduced this Ordinance for the First Reading which was read by title only.

PASSED FIRST READING

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

OFR-5 [18-0811](#)

Ordinance Revising Building, Fire and Other Fees for Services Related to Land Development and Permitting - Request Deferment to September 4, 2018

Commissioner Glassman made a motion to defer this item to the September 4, 2018 Commission Regular Meeting and was seconded by Commissioner McKinzie.

DEFERRED to September 4, 2018

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

ORDINANCE SECOND READING

OSR-1 [18-0807](#)

Ordinance Amending the Noise Ordinance Relating to the Construction of Large Projects Providing for an Exemption for Time to Comply and to Allow Certain Construction Activity to Occur outside of the Established Parameters

In response to Mayor Trantalis, City Manager Feldman confirmed that it is in the best interest of the City to allow construction activities outside of normal construction hours for things such as continuous pours of concrete. City Manager Feldman confirmed that contractors provide noise mitigation, citing examples. This item ensures proper notification to neighbors occurs. Further comment and discussion ensued on the purpose of this item to alleviate traffic concerns during peak business hours and shortening the duration of construction. The Building Official has the authority to issue these permits on a case-by-case basis.

Further comment and discussion ensued.

Vice Mayor Sorensen introduced this Ordinance for the Second Reading which was read by title only.

ADOPTED ON SECOND READING

Aye: 4 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie and Vice Mayor Sorensen

Nay: 1 - Mayor Trantalis

OSR-2 [18-0206](#)

Ordinance Amending the City of Fort Lauderdale General Employees' Retirement System

Vice Mayor Sorensen introduced this Ordinance for the Second Reading which was read by title only.

ADOPTED ON SECOND READING

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

OSR-3 [18-0727](#)

Ordinance Amending Chapter 20, Personnel, Article IV., Pensions, Division 3, Police and Firefighters' Retirement System, of the Code of Ordinances of the City of Fort Lauderdale, Relating to the City of Fort Lauderdale Police and Firefighters' Retirement System to Implement Collective Bargaining Agreements

Mayor Trantalis recognized Charles King, 105 N. Victoria Park Road. Mr. King commented on the expense involved with this item.

Commissioner McKinzie introduced this Ordinance for the Second Reading which was read by title only.

ADOPTED ON SECOND READING

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

OSR-4 [18-0778](#)

Ordinance Amending Schedule I of the Pay Plan of the City of Fort Lauderdale, Florida, by Creating Two (2) New Job Classifications and Amending Section 20-83 of the Code of Ordinances of the City of Fort Lauderdale, Florida, by Designating One (1) Class as an Administrative Assistant to the City Manager

Commissioner McKinzie introduced this Ordinance for the Second Reading which was read by title only.

ADOPTED ON SECOND READING

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

OSR-5 [18-0770](#)

Ordinance Amending Unified Land Development Regulations (ULDR) to Implement Off-Street Compact Parking and Off-Street and On-Street Motorcycle/Scooter Parking

Commissioner McKinzie introduced this Ordinance for the Second Reading which was read by title only.

ADOPTED ON SECOND READING

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis

[18-0947](#)

WALK-ON - Motion to Appoint Commissioner Robert McKinzie and City Manager Lee Feldman to negotiate City Attorney Contract with Alain E. Boileau

Mayor Trantalis explained this item appoints Commissioner McKinzie and City Manager Feldman to negotiate a salary and benefits compensation contract with Interim City Attorney Alain Boileau for the position of City Attorney.

Commissioner McKinzie made a motion to approve this item and was seconded by Vice Mayor Sorensen.

APPROVED

Aye: 5 - Commissioner Moraitis, Commissioner Glassman, Commissioner McKinzie, Vice Mayor Sorensen and Mayor Trantalis


REQUEST FOR EXECUTIVE CLOSED DOOR SESSION

Interim City Attorney Alain Boileau announced that on September 4, 2018 commencing at approximately 4:30 P.M., or as soon thereafter as it may be heard, the City Commission shall meet privately to discuss pending litigation, pursuant to Section 286.011(8), Florida Statutes, for the following case(s):

- Hinton, Walter, et al. v. City of Fort Lauderdale
Case No.: 07-030358 (26)
- Adderly, Ray, et al. v. City of Fort Lauderdale
Case No.: 11-008499 (26)


ADJOURNMENT

Mayor Trantalis adjourned the Commission Regular Meeting of August 21, 2018 at 11:37 p.m.



Dean J. Trantalis
Mayor

ATTEST:



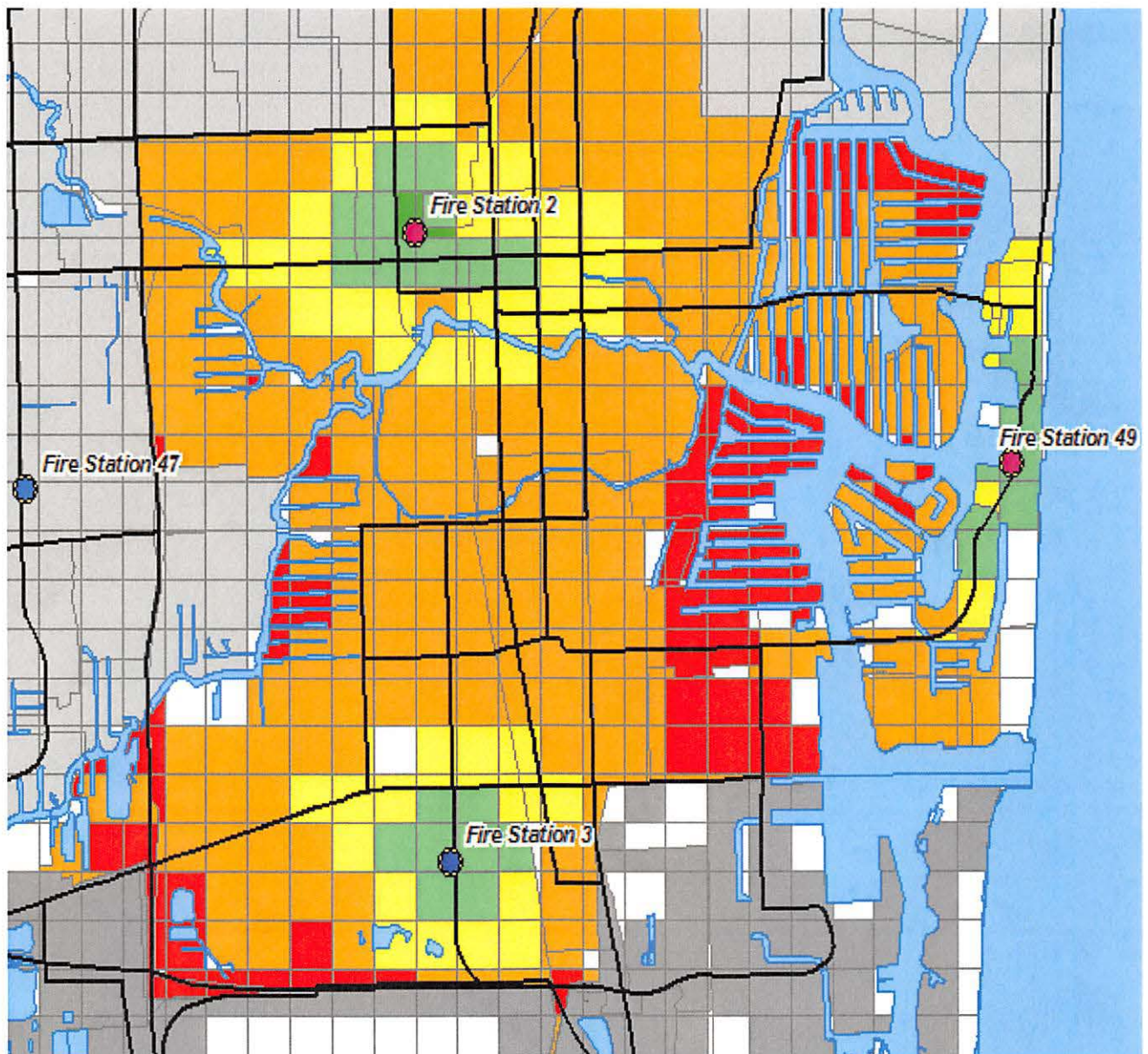
Jeffrey A. Modarelli
City Clerk

8/21/2018 Provided by Chief
Kerr
Pur-15

Current Deployment

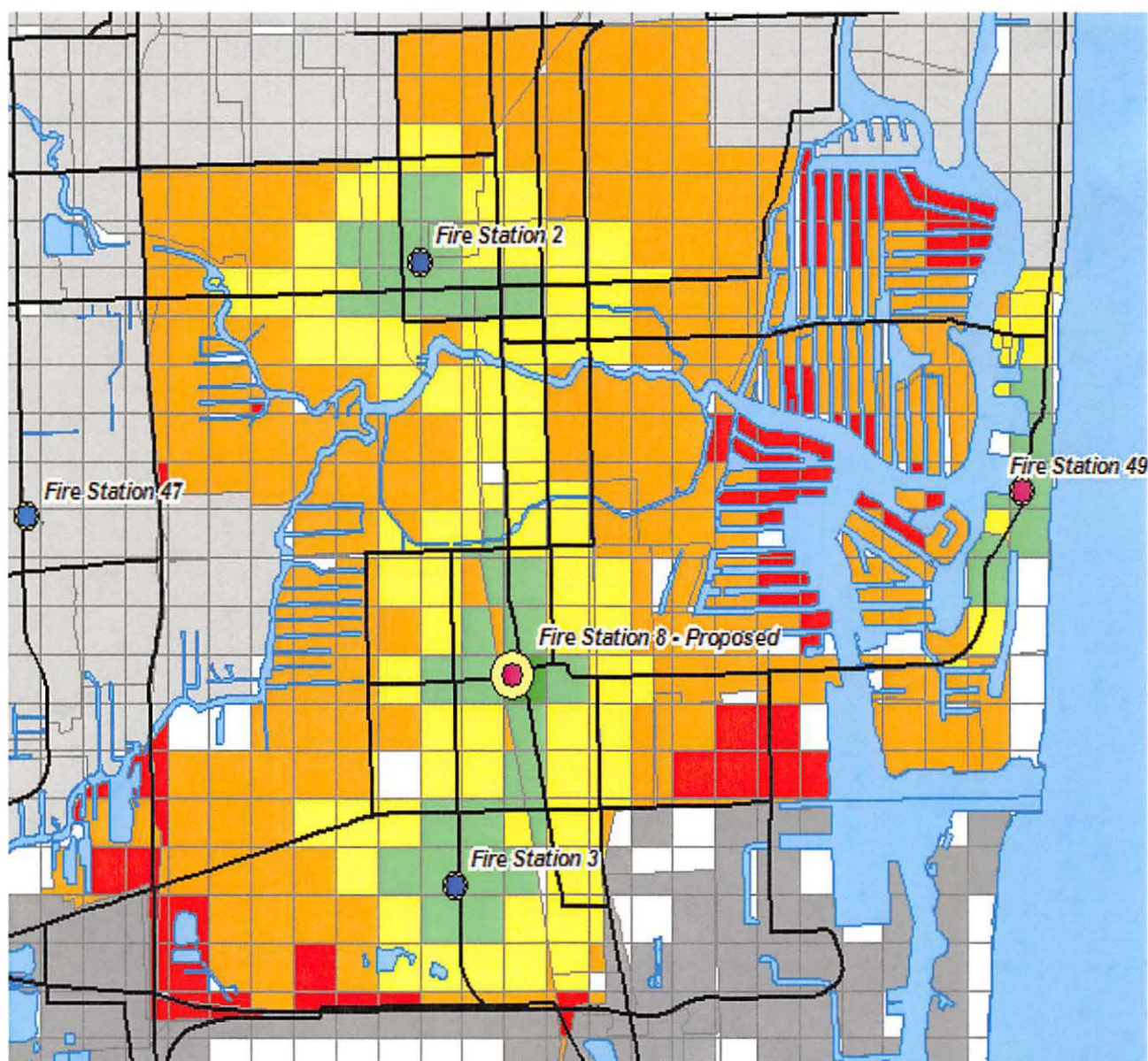
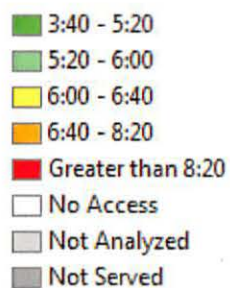
Service Area 2, 3, 8, 49

- 3:40 - 5:20
- 5:20 - 6:00
- 6:00 - 6:40
- 6:40 - 8:20
- Greater than 8:20
- No Access
- Not Analyzed
- Not Served



Proposed Fire Station 8

Service Area 2, 3, 8, 49



M-2 Provided by Ed Catziano

Form **990**

Department of the Treasury
Internal Revenue Service

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

A For the 2014 calendar year, or tax year beginning , and ending	
B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Hope South Florida, Inc. Doing business as See Schedule O Number and street (or P O box if mail is not delivered to street address) Room/suite 5110 N Federal Highway #102 City or town, state or province, country, and ZIP or foreign postal code Fort Lauderdale FL 33308 D Employer identification number 65-0670031 E Telephone number 954-566-2311 G Gross receipts \$ 2,241,287
F Name and address of principal officer Christopher R. Lloyd 5110 N Federal Highway #102 Fort Lauderdale FL 33308 H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
J Website www.hopesouthflorida.org H(c) Group exemption number	
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other L Year of formation 1996 M State of legal domicile FL	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities Providing hope for homeless and hurting families through services and partnerships with the Christian community.		
	2 Check this box <input type="checkbox"/> 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	14
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	14
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	28
Revenue	6 Total number of volunteers (estimate if necessary)	6	1520
	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	0
	8 Contributions and grants (Part VII, line 1h)	Prior Year 1,589,720	Current Year 1,767,584
	9 Program service revenue (Part VII, line 2g)	46,292	94,530
	10 Investment income (Part VII, column (A), lines 3, 4, and 7d)	5,501	6,990
	11 Other revenue (Part VII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	256,181	291,330
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,897,694	2,160,434
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		950,113	1,062,835
16a Professional fundraising fees (Part IX, column (A), line 11e)			0
b Total fundraising expenses (Part IX, column (D), line 25) 137,738			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,179,446	1,275,837
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,129,559	2,338,672
19 Revenue less expenses Subtract line 18 from line 12		-231,865	-178,238
20 Total assets (Part X, line 16)		Beginning of Current Year 1,370,403	End of Year 1,249,635
21 Total liabilities (Part X, line 26)		244,672	302,142
22 Net assets or fund balances Subtract line 21 from line 20		1,125,731	947,493

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 Christopher R. Lloyd
	Type or print name and title
Paid Preparer Use Only	Print/Type preparer's name Michael J Robbins
	Preparer's signature
	Firm's name ROBBINS & LANDINO, PA
	Firm's address 222 S.E. 10th Street Fort Lauderdale, FL 33

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.
DAA

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

Providing hope for homeless and hurting families through services and partnerships with the Christian community.

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 \$ 1,529,142 including grants of \$) (Revenue \$ 94,530)

HOPE South Florida is a Christian-based 501(c)(3) non-profit organization, operating since 1995, that has provided emergency shelter, housing assistance, and support services to thousands of homeless families and individuals.

Our goal is to bring about transformation in the lives of homeless and hurting families through the provision of housing solutions and family services; and to serve as a guiding partner in transforming, educating, and bringing the Christian community into relationship with those served.

-2,875+ homeless clients were served by the various housing, child development and shared meals programs offered

-23,000+ shared meals were provided to homeless individuals in our

4b (Code) (Expenses \$ 360,256 including grants of \$) (Revenue \$)

Thrift Store- Operation of thrift store to raise funds and merchandise for the needs of the homeless-300 people served.

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **1,889,398**

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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
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		X
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		X
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		X
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		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
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		X
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	X	
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		X
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		X
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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
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		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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		X
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		X
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		X
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)		X
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	X	
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		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

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		X
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		X
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		X
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		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		X
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		X
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		X
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		X
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		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
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		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
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		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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		
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		X
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		X
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	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
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)?		X
4b	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?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?	X	
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	X	
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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	14
b Enter the number of voting members included in line 1a, above, who are independent.	1b	14
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
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	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6 Did the organization have members or stockholders?	6	X
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	X
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	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
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	X

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	X
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	X
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	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
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	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
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	X
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	X
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	X
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 ► FL
- 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 ►

Donna English

5110 N Federal Highway #102

Fort Lauderdale

FL 33308

954-566-2311

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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) Dr. Fred Scarbrough	1.00									
Founder and Chairman	0.00	X		X				0	0	0
(2) Matt Lomenick	1.00									
Vice Chair	0.00	X		X				0	0	0
(3) Andy Mitchell	1.00									
Vice Chair	0.00	X		X				0	0	0
(4) Dave Smith	1.00									
Treasurer	0.00	X		X				0	0	0
(5) Gail Auguston-Koppen	1.00									
Board Member	0.00	X						0	0	0
(6) William (Bill) Cranshaw CPA	1.00									
Board Member	0.00	X						0	0	0
(7) Tim Dobbins	1.00									
Board Member	0.00	X						0	0	0
(8) Mat Gulley	1.00									
Board Member	0.00	X						0	0	0
(9) Fawn Mikel	1.00									
Board Member	0.00	X						0	0	0
(10) Mike Moran	1.00									
Board Member	0.00	X						0	0	0
(11) Brett Opalinski	1.00									
Board Member	0.00	X						0	0	0

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			
(12) Kim Saiswick, Ed.D., RN Board Member	1.00 0.00	X						0	0	0
(13) Jason Smith Board Member	1.00 0.00	X						0	0	0
(14) Jen Stepelton Board Member	1.00 0.00	X						0	0	0
(15) Robin Martin Exec. Dir.	40.00 0.00			X				64,840	0	12,159
(16)										
(17)										
(18)										
(19)										
1b Sub-total								64,840		12,159
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								64,840		12,159

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 **0**

- 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

	Yes	No
3		X
4		X
5		X

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

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 **0**

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				
	b Membership dues	1b				
	c Fundraising events	1c	120,795			
	d Related organizations	1d				
	e Government grants (contributions)	1e	820,206			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	826,583			
	g Noncash contributions included in lines 1a-1f	\$	111,645			
	h Total. Add lines 1a-1f		1,767,584			
Program Service Revenue	2a Residence Fees	Busn Code 624200	94,530	94,530		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		94,530			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1		
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
6a Gross rents		(i) Real 30,214 (ii) Personal				
b Less rental exps						
c Rental inc or (loss)		30,214				
d Net rental income or (loss)			30,214			30,214
7a Gross amount from sales of assets other than inventory		(i) Securities (ii) Other 54,000				
b Less cost or other basis & sales exps		47,011				
c Gain or (loss)		6,989				
d Net gain or (loss)			6,989	6,989		
8a Gross income from fundraising events (not including \$ 120,795 of contributions reported on line 1c) See Part IV, line 18		a 31,557				
b Less direct expenses	b 33,842					
c Net income or (loss) from fundraising events		-2,285			-2,285	
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 252,706					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory		252,706	252,706			
Miscellaneous Revenue			Busn Code			
11a Other Revenue	900099	10,695	10,695			
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		10,695				
12 Total revenue. See instructions		2,160,434	364,920	0	27,930	

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	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.				
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.	76,999	30,799	23,100	23,100
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.	790,027	563,219	158,448	68,360
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9 Other employee benefits.	116,704	91,309	15,749	9,646
10 Payroll taxes.	79,105	55,110	15,865	8,130
11 Fees for services (non-employees):				
a Management.				
b Legal.	325	325		
c Accounting.	11,632		11,632	
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.)	33,923	33,923		
12 Advertising and promotion.	3,663	1,959	395	1,309
13 Office expenses.	63,446	23,587	24,665	15,194
14 Information technology.				
15 Royalties.				
16 Occupancy.	137,348	129,106	5,585	2,657
17 Travel.	6,688	5,460	775	453
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	5,679	3,574	816	1,289
20 Interest.	3,494		3,494	
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	47,549	45,728	164	1,657
23 Insurance.	63,953	47,482	12,086	4,385
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 Client Assistance.	556,064	556,064		
b Utilities.	115,866	115,866		
c Clothing & Household Good.	47,746	47,746		
d Contributed Supplies.	41,732	41,732		
e All other expenses.	136,729	96,409	38,762	1,558
25 Total functional expenses. Add lines 1 through 24e.	2,338,672	1,889,398	311,536	137,738
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck 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	173,814	1	130,662
	2 Savings and temporary cash investments	10	2	3,536
	3 Pledges and grants receivable, net	172,679	3	176,938
	4 Accounts receivable, net		4	
	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	42,076	8	35,713
	9 Prepaid expenses and deferred charges	24,658	9	22,322
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 1,228,208		
	b Less accumulated depreciation	10b 359,678	952,832	10c 868,530
	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	4,334	15	11,934
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,370,403	16	1,249,635	
Liabilities	17 Accounts payable and accrued expenses	112,373	17	133,577
	18 Grants payable		18	
	19 Deferred revenue	583	19	583
	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	81,522	23	76,967
	24 Unsecured notes and loans payable to unrelated third parties	50,194	24	91,015
	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		25	
	26 Total liabilities. Add lines 17 through 25	244,672	26	302,142
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	850,184	27	650,039
	28 Temporarily restricted net assets	275,547	28	297,454
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	1,125,731	33	947,493
34 Total liabilities and net assets/fund balances	1,370,403	34	1,249,635	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,160,434
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,338,672
3	Revenue less expenses Subtract line 2 from line 1	3	-178,238
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,125,731
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	947,493

Part XII Financial Statements and ReportingCheck 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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? 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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
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?		X
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		

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

Hope South Florida, Inc.

Employer identification number

65-0670031

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?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

DAA

Schedule A (Form 990 or 990-EZ) 2014

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.")	1,445,853	1,672,607	1,521,047	1,589,720	1,767,584	7,996,811
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	1,445,853	1,672,607	1,521,047	1,589,720	1,767,584	7,996,811
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						7,996,811

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	1,445,853	1,672,607	1,521,047	1,589,720	1,767,584	7,996,811
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	88,152	70,920	73,189	31,650	30,215	294,126
9 Net income from unrelated business activities, whether or not the business is regularly carried on				3,638		3,638
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						8,294,575
12 Gross receipts from related activities, etc. (see instructions)						357,931

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	96.41%
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	95.91%
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	<input checked="" type="checkbox"/>	
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	<input type="checkbox"/>	
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	<input type="checkbox"/>	
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	<input type="checkbox"/>	
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	<input type="checkbox"/>	

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 ► <input type="checkbox"/>						

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.		
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 (b) and (c) 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 11a or 11b in Part I, answer (b) and (c) 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 (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).		
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 (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.		
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).		
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).		
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 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.		
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.		
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.		
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.)		

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).

2 Activities Test. Answer (a) and (b) below.

		Yes	No
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.)

**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

Employer identification number

Hope South Florida, Inc.

65-0670031

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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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)	
<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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	
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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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)?	<input type="checkbox"/> Yes <input type="checkbox"/> 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) Revenues 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	▶ \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2014

DAA

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

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

	Amount
1c	
1d	
1e	
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

- (i) unrelated organizations
 (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
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		323,870		323,870
b Buildings		748,278	248,221	500,057
c Leasehold improvements				
d Equipment		156,060	111,457	44,603
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				868,530

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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	

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	2,210,436
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	41,092	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	8,910	
e	Add lines 2a through 2d		2e	50,002
3	Subtract line 2e from line 1		3	2,160,434
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	2,160,434

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	2,388,674
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a	41,092	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d	8,910	
e	Add lines 2a through 2d		2e	50,002
3	Subtract line 2e from line 1		3	2,338,672
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	2,338,672

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

Part XI, Line 2d - Revenue Amounts Included in Financials - Other

Donated Materials Special Events \$ 8,910

Part XII, Line 2d - Expense Amounts Included in Financials - Other

Donated Materials Special Events \$ 8,910

Form **990**Department of the Treasury
Internal Revenue Service**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

2015
Open to Public
Inspection**A For the 2015 calendar year, or tax year beginning , and ending****B Check if applicable**☐ Address change☐ Name change☐ Initial return☐ Final return/
terminated☐ Amended return☐ Application pending**C Name of organization**

Hope South Florida, Inc.

Doing business as

See Schedule O

Number and street (or P O box if mail is not delivered to street address)

5110 N Federal Highway #102

Room/suite**City or town, state or province, country, and ZIP or foreign postal code**

Fort Lauderdale FL 33308

F Name and address of principal officerDr. Fred Scarbrough
5110 N Federal Highway #102
Fort Lauderdale FL 33308**D Employer identification number**

65-0670031

E Telephone number

954-566-2311

G Gross receipts \$ 3,260,528**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.hopesouthflorida.org**H(c) Group exemption number** ▶**K Form of organization** ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L Year of formation** 1996**M State of legal domicile** FL**Part I Summary**

Activities & Governance		Revenue		Expenses		Net Assets or Fund Balances	
1 Briefly describe the organization's mission or most significant activities HSF has moved further in the direction of the Rapid rehousing model and away from the transitional housing model. Not only is rapid rehousing more cost effective, it is an intervention designed to help individuals and families to quickly exit homelessness and return to permanent housing.							
2 Check this box <input type="checkbox"/> 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	12				
4 Number of independent voting members of the governing body (Part VI, line 1b)		4	12				
5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)		5	33				
6 Total number of volunteers (estimate if necessary)		6	180				
7a Total unrelated business revenue from Part VIII, column (C), line 12		7a	0				
7b Net unrelated business taxable income from Form 990-T, line 34		7b	0				
		Prior Year	Current Year				
8 Contributions and grants (Part VIII, line 1h)		1,767,584	1,856,776				
9 Program service revenue (Part VIII, line 2g)		94,530	90,657				
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		6,990	633,825				
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		291,330	123,359				
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,160,434	2,704,617				
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0				
14 Benefits paid to or for members (Part IX, column (A), line 4)			0				
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,062,835	1,022,329				
16a Professional fundraising fees (Part IX, column (A), line 11e)			0				
b Total fundraising expenses (Part IX, column (D), line 25) ▶							
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,275,837	1,313,105				
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,338,672	2,335,434				
19 Revenue less expenses Subtract line 18 from line 12		-178,238	369,183				
		Beginning of Current Year	End of Year				
20 Total assets (Part X, line 16)		1,249,635	1,475,481				
21 Total liabilities (Part X, line 26)		302,142	158,805				
22 Net assets or fund balances Subtract line 21 from line 20		947,493	1,316,676				

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

Dr. Fred Scarbrough

Type or print name and title

Paid**Preparer****Use Only**

Print/Type preparer's name

Michael J. Robbins

Preparer's signature

Firm's name ▶ ROBBINS & LANDINO, PA

222 S.E. 10th Street

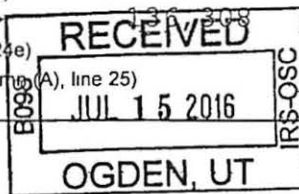
Firm's address ▶ Fort Lauderdale, FL 33308

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions

DAA

SCANNED AUG 08 2016



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

Providing hope for homeless and hurting families through services and partnerships with the Christian community.

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 \$ 1,697,571 including grants of \$) (Revenue \$ 90,657)
See Schedule O

4b (Code) (Expenses \$ 179,233 including grants of \$) (Revenue \$)
Thrift Store- Operation of thrift store to raise funds and merchandise for the needs of the homeless-338 people served.

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► 1,876,804

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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
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		X
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		X
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		X
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		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
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		X
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	X	
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		X
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		X
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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
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		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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		X
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		X
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		X
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)		X
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	X	
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		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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		X
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		X
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		X
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		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		X
25b 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		X
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		X
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		X
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)		
28a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28c 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		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
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		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b 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		
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		X
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		X
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	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
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)?		X
5a	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).		
5b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5c	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6b	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?	X	
7a	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	X	
7b	Organizations that may receive deductible contributions under section 170(c).		
7c	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?	X	
7d	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7e	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7f	If "Yes," indicate the number of Forms 8282 filed during the year.		
7g	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7h	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
8	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
9	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
10	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?		
11	Sponsoring organizations maintaining donor advised funds.		
12a	Did the sponsoring organization make any taxable distributions under section 4966?		
12b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
13	Section 501(c)(7) organizations. Enter		
14a	Initiation fees and capital contributions included on Part VIII, line 12.		
14b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
15	Section 501(c)(12) organizations. Enter		
16a	Gross income from members or shareholders.		
16b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
17a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
17b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
18	Section 501(c)(29) qualified nonprofit health insurance issuers.		
19a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.		
19b	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.		
19c	Enter the amount of reserves on hand.		
20a	Did the organization receive any payments for indoor tanning services during the tax year?		X
20b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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.	12	
b	Enter the number of voting members included in line 1a, above, who are independent.	12	
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?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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.		X

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?		X
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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
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.	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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.	X	
b	Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		X
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?		X
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?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► FL
- 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 ►

Donna English
Fort Lauderdale

5110 N Federal Highway #102

FL 33308

954-566-2311

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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) Dr. Fred Scarbrough	1.00									
Chair and Founder	0.00	X		X				0	0	0
(2) Matt Lomenick	1.00									
Vice Chair	0.00	X		X				0	0	0
(3) Andy Mitchell	1.00									
Vice Chair	0.00	X		X				0	0	0
(4) Dave Smith	1.00									
Treasurer	0.00	X		X				0	0	0
(5) Gail Auguston-Koppen	1.00									
Board Member	0.00	X						0	0	0
(6) Tim Dobbins	1.00									
Board Member	0.00	X						0	0	0
(7) Mat Gulley	1.00									
Board Member	0.00	X						0	0	0
(8) Fawn Mikel	1.00									
Board Member	0.00	X						0	0	0
(9) Brett Opalinski	1.00									
Board Member	0.00	X						0	0	0
(10) Kim Saiswick, Ed.D., RN, LMHC	1.00									
Board Member	0.00	X						0	0	0
(11) Jason Smith	1.00									
Board Member	0.00	X						0	0	0

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			
(12) Jennifer Stepelton Board Member	1.00 0.00	X						0	0	0
(13) Christopher R. Lloyd CEO	40.00 0.00			X				76,965	0	5,117
(14) Robin Martin Executive Director	40.00 0.00			X				71,503	0	14,638
1b Sub-total								148,468		19,755
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								148,468		19,755

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 **0**

	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		X
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		X
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		X

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

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 **0**

Part VIII Statement of RevenueCheck 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				
	b Membership dues	1b				
	c Fundraising events	1c	111,356			
	d Related organizations	1d				
	e Government grants (contributions)	1e	820,129			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	925,291			
	g Noncash contributions included in lines 1a-1f	\$	158,907			
	h Total. Add lines 1a-1f		1,856,776			
Program Service Revenue	2a Residence Fees	Busn Code 624200	90,657	90,657		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		90,657			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		730			730
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real 45,852				
	b Less rental exps					
	c Rental inc or (loss)	45,852				
	d Net rental income or (loss)		45,852			45,852
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other 1,100,500				
	b Less cost or other basis & sales exps		467,405			
	c Gain or (loss)		633,095			
	d Net gain or (loss)		633,095			633,095
	8a Gross income from fundraising events (not including \$ 111,356 of contributions reported on line 1c) See Part IV, line 18	a 87,942				
	b Less direct expenses	b 88,506				
	c Net income or (loss) from fundraising events		-564			-564
	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 78,007				
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory		78,007	78,007			
Miscellaneous Revenue		Busn Code				
11a Other Revenue	900099	64	64			
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		64				
12 Total revenue. See instructions		2,704,617	168,728	0	679,113	

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.				
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.	148,468	34,530	44,541	69,397
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.	703,397	574,492	102,924	25,981
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9 Other employee benefits.	99,203	44,347	43,917	10,939
10 Payroll taxes.	71,261	50,452	12,756	8,053
11 Fees for services (non-employees):				
a Management.				
b Legal.	1,000			1,000
c Accounting.	12,500		12,500	
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.)	35,824	35,211	613	
12 Advertising and promotion.	5,115	4,095	385	635
13 Office expenses.	63,525	22,373	26,791	14,361
14 Information technology.				
15 Royalties.				
16 Occupancy.	63,490	58,178	4,427	885
17 Travel.	5,491	4,809	644	38
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	2,214	1,129	599	486
20 Interest.	5,336	3,458	1,878	
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	38,578	37,363		1,215
23 Insurance.	47,498	31,627	14,934	937
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 Client Assistance.	635,639	635,639		
b Contributed Food.	119,535	119,535		
c Utilities.	105,211	105,076	135	
d Repairs and Maintenance.	38,499	28,093	10,406	
e All other expenses.	133,650	86,397	44,872	2,381
25 Total functional expenses. Add lines 1 through 24e.	2,335,434	1,876,804	322,322	136,308
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck 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	130,662	1	56,654
	2 Savings and temporary cash investments	3,536	2	800,207
	3 Pledges and grants receivable, net	176,938	3	165,781
	4 Accounts receivable, net		4	
	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	35,713	8	
	9 Prepaid expenses and deferred charges	22,322	9	9,971
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D.	10a 700,718		
	b Less accumulated depreciation	10b 262,671	868,530	10c 438,047
	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.	11,934	15	4,821
16 Total assets. Add lines 1 through 15 (must equal line 34).	1,249,635	16	1,475,481	
Liabilities	17 Accounts payable and accrued expenses	133,577	17	86,339
	18 Grants payable		18	
	19 Deferred revenue	583	19	
	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	76,967	23	72,466
	24 Unsecured notes and loans payable to unrelated third parties	91,015	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.		25	
	26 Total liabilities. Add lines 17 through 25.	302,142	26	158,805
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	650,039	27	1,051,527
	28 Temporarily restricted net assets	297,454	28	265,149
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	947,493	33	1,316,676
34 Total liabilities and net assets/fund balances	1,249,635	34	1,475,481	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,704,617
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,335,434
3	Revenue less expenses Subtract line 2 from line 1	3	369,183
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	947,493
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	1,316,676

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

- 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?
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?
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?
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?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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

2015

Open to Public
Inspection

Employer identification number
65-0670031

Hope South Florida, Inc.

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 (Form 990 or 990-EZ))
- 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 (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	1,672,607	1,521,047	1,589,720	1,767,584	1,856,776	8,407,734
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	1,672,607	1,521,047	1,589,720	1,767,584	1,856,776	8,407,734
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						8,407,734

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	1,672,607	1,521,047	1,589,720	1,767,584	1,856,776	8,407,734
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	70,920	73,189	31,650	30,215	46,582	252,556
9 Net income from unrelated business activities, whether or not the business is regularly carried on			3,638			3,638
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						8,663,928

12 Gross receipts from related activities, etc. (see instructions) **12** 168,728**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 2015 (line 6, column (f) divided by line 11, column (f))	14	97.04%
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	96.41%

16a 33 1/3% support test—2015. 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—2014. 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—2015. 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—2014. 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2015. 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—2014. 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 in line 11 on 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.		
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 (b) and (c) 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 11a or 11b in Part I, answer (b) and (c) 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 (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).		
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.		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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 or 990-EZ).		
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 or 990-EZ).		
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 in 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 in 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.		
10a 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 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.)		

Part IV Supporting Organizations (continued)**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?**b** A family member of a person described in (a) above?**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.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 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.
- 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.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 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).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 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, (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?
- 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).
- 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.

	Yes	No
1		
2		
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).

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.
- 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.
- 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.
- 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.

	Yes	No
2a		
2b		
3a		
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	<input type="checkbox"/> 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 2015 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-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b, Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**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.▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015Open to Public
Inspection

Name of the organization

Employer identification number

Hope South Florida, Inc.

65-0670031

Part I 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
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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements.

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on 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 on 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 on 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" on 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
1c	
1d	
1e	
1f	

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

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 on Part XIII ☐

Part V Endowment Funds.

Complete if the organization answered "Yes" on 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 on 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

- (i) unrelated organizations
 (ii) related organizations

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

	Yes	No
3a(i)		
3a(ii)		
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" on 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		123,870		123,870
b Buildings		436,681	146,793	289,888
c Leasehold improvements				
d Equipment		140,167	115,878	24,289
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c)				438,047

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on 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" on 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" on 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" on 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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	

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" on Form 990, Part IV, line 12a

1	Total revenue, gains, and other support per audited financial statements		1	2,729,382
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	18,000	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	6,765	
e	Add lines 2a through 2d		2e	24,765
3	Subtract line 2e from line 1		3	2,704,617
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	2,704,617

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

1	Total expenses and losses per audited financial statements		1	2,360,199
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a	18,000	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d	6,765	
e	Add lines 2a through 2d		2e	24,765
3	Subtract line 2e from line 1		3	2,335,434
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	2,335,434

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.

Part XI, Line 2d - Revenue Amounts Included in Financials - Other

Donated Materials Special Events	\$ 6,765
----------------------------------	----------

Part XII, Line 2d - Expense Amounts Included in Financials - Other

Donated Materials Special Events	\$ 6,765
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Part XIII Supplemental Information (continued)

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2015

Open to Public
Inspection

Employer identification number

65-0670031

Hope South Florida, Inc.

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>Golf Tournament</u>	<u>G.I.G.O.</u>	<u>1</u>	(add col (a) through col (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	133,068	33,150	33,080	199,298
	2 Less Contributions	93,148	6,630	11,578	111,356
	3 Gross income (line 1 minus line 2)	39,920	26,520	21,502	87,942
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	42,552	24,550	21,404	88,506
	10 Direct expense summary Add lines 4 through 9 in column (d)				88,506
11 Net income summary Subtract line 10 from line 3, column (d)				-564	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d)					
8 Net gaming income summary Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities

a Is the organization licensed to conduct gaming activities in each of these states?

☐ Yes ☐ No

b If "No," explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

☐ Yes ☐ No

b If "Yes," explain

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in

a The organization's facility

13a %

b An outside facility

13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service
Name of the organization

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

2015

**Open To Public
Inspection**

Hope South Florida, Inc.

Employer identification number

65-0670031

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				
5 Clothing and household goods	X		4,407	Fair Market Value
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	X	4781	119,535	Fair Market Value
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (Supplies)	X	28	34,965	Fair Market Value
26 Other ▶ (
27 Other ▶ (
28 Other ▶ (

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

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?

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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

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

	Yes	No
30a		X
31		X
32a		X
33		

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.

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

2015

**Open to Public
Inspection**

Name of the organization

Hope South Florida, Inc.

Employer identification number

65-0670031

Doing Business As - Additional Names

Faith in Action Community Housing;

Hope Central; God's Little Lambs;

The Shepherd's Way

Form 990, Part III, Line 4a - First Accomplishment

HOPE South Florida is a Christian-based 501(c)(3) non-profit organization, operating since 1995, that has provided emergency shelter, housing assistance, and support services to thousands of homeless families and individuals.

Our goal is to bring about transformation in the lives of homeless and hurting families through the provision of housing solutions and family services; and to serve as a guiding partner in transforming, educating, and bringing the Christian community into relationship with those served.

Housing:

- With a strong emphasis on families and veterans, LiveHOPE provides creative housing solutions through crisis and Rapid re-Housing for those facing homelessness in our community. 102 units of housing: 338 homeless families annually;
- 142 crisis housing, 110 rapid re-housing/vouchers. 96% transition to more stable housing/graduated.

Name of the organization

Employer identification number

Hope South Florida, Inc.

65-0670031

Shared Meals:

- Working together with a network of churches and volunteers, TasteHOPE provides shared meals for the homeless every week. 3.5 shared meals weekly: 31,850 + meals annually;
- 312 Shared Meals (150-200 people each night) = 54,600 shared meals were provided to homeless individuals in our community.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
All board members review Form 990 at board meeting and an electronic version is also sent for review before we file.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Policy is reviewed and discussed by Board members and employees at meetings and any possible conflicts that arise are required to be disclosed.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
Compensation is thoroughly review by the board on an annual basis.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
Made available upon request.

Form **990**

8

Department of the Treasury
Internal Revenue Service**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

2016**Open to Public Inspection****A For the 2016 calendar year, or tax year beginning 01-01-2016, and ending 12-31-2016**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final <input type="checkbox"/> Return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization HOPE SOUTH FLORIDA INC		D Employer identification number 65-0670031
	Doing business as SEE SCHEDULE O		E Telephone number (954) 566-2311
	Number and street (or P.O. box if mail is not delivered to street address) 5110 N FEDERAL HIGHWAY 102	Room/suite	
	City or town, state or province, country, and ZIP or foreign postal code FORT LAUDERDALE, FL 33308		
F Name and address of principal officer DR TED GREER JR 5110 N FEDERAL HIGHWAY 102 FORT LAUDERDALE, FL 33308		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.HOPESOUTHFLORIDA.ORG			
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1996	M State of legal domicile FL

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities PROVIDING HOPE FOR HOMELESS AND HURTING FAMILIES THROUGH SERVICES AND PARTNERSHIPS WITH THE CHRISTIAN COMMUNITY		
	2 Check this box <input type="checkbox"/> 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	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	25
	6 Total number of volunteers (estimate if necessary)	6	300
Revenue	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	
Expenses	8 Contributions and grants (Part VIII, line 1h)	Prior Year	1,856,776
	9 Program service revenue (Part VIII, line 2g)	Current Year	2,319,558
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		90,657
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		633,825
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		123,359
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		34,753
	14 Benefits paid to or for members (Part IX, column (A), line 4)		2,704,617
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		2,439,712
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 194,063		0
Net Assets or Fund Balances	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		1,313,105
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		1,604,278
	19 Revenue less expenses Subtract line 18 from line 12		2,335,434
	20 Total assets (Part X, line 16)	Beginning of Current Year	1,475,481
	21 Total liabilities (Part X, line 26)	End of Year	1,085,591
	22 Net assets or fund balances Subtract line 21 from line 20		158,805
			1,316,676
			943,560

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including attachments and all schedules, 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

DR TED GREER JR CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name
MICHAEL J ROBBINSPreparer's signature
MICHAEL J ROBBINS

Firm's name ▶ ROBBINS & LANDINO PA

Firm's address ▶ 222 SE 10TH STREET

FORT LAUDERDALE, FL 33316

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

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

PROVIDING HOPE FOR HOMELESS AND HURTING FAMILIES THROUGH SERVICES AND PARTNERSHIPS WITH THE CHRISTIAN COMMUNITY

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

4a	(Code) (Expenses \$	2,299,343	including grants of \$) (Revenue \$	62,361)
	SEE SCHEDULE O	HOPE SOUTH FLORIDA IS A CHRISTIAN-BASED 501(C)(3) NON-PROFIT ORGANIZATION, OPERATING SINCE 1995, THAT HAS PROVIDED EMERGENCY SHELTER, HOUSING ASSISTANCE, AND SUPPORT SERVICES TO THOUSANDS OF HOMELESS FAMILIES AND INDIVIDUALS OUR GOAL IS TO BRING ABOUT TRANSFORMATION IN THE LIVES OF HOMELESS AND HURTING FAMILIES THROUGH THE PROVISION OF HOUSING SOLUTIONS AND FAMILY SERVICES, AND TO SERVE AS A GUIDING PARTNER IN TRANSFORMING, EDUCATING, AND BRINGING THE CHRISTIAN COMMUNITY INTO RELATIONSHIP WITH THOSE SERVED				
	HOUSING -IN 2016, HSF PROVIDED ACCESS TO RAPID REHOUSING ALONG WITH CASE MANAGEMENT SERVICES TO 150 HOMELESS FAMILIES AND VETERANS IN BROWARD COUNTY HSF IS NOW RECOGNIZED AS THE PREMIER ORGANIZATION FOR HOUSING HOMELESS FAMILIES AND VETERANS IN BROWARD COUNTY CHURCH PARTNERSHIPS -HSF HAS INCREASED ITS CHURCH PARTNERSHIPS TO 72 CHURCHES IN BROWARD COUNTY CHURCH PARTNERS PARTICIPATE IN THE PROVISION AND SERVING OF SHARED MEALS, PROVIDE CRISIS HOUSING FOR HOMELESS FAMILIES AT THEIR CHURCH FACILITIES, SERVE AS FAMILY SUPPORT TEAMS FOR HOMELESS FAMILIES AND VETERANS AND AS BENEVOLENT LANDLORDS INCREASING OPPORTUNITIES FOR RAPID REHOUSING FOR HOMELESS FAMILIES AND VETERANS IN BROWARD COUNTY					

[illegible][illegible]

4d	Other program services (Describe in Schedule O)				
	(Expenses \$	including grants of \$) (Revenue \$)	

4e	Total program service expenses ▶	2,299,343
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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 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 Yes	
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	No
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	No
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	No
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	No
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	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
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	No
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	No
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 Yes	
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	No
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	No
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	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	No
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	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a Yes	
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	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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	No
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	No
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	No
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	No
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 Yes	
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	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
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? <i>If "Yes," complete Schedule J</i>		No
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		No
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? <i>If "Yes," complete Schedule L, Part I</i>		No
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? <i>If "Yes," complete Schedule L, Part II</i>		No
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? <i>If "Yes," complete Schedule L, Part III</i>		No
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? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
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? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	Yes	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
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? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		No
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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 3		
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 25		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
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		No
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		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
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	Yes	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
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	Yes	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
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		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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		
9a 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		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
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? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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		No
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 lines 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	12	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b Enter the number of voting members included in line 1a, above, who are independent	12	
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	No
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	No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6 Did the organization have members or stockholders?	6	No
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	No
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	No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	Yes
b Each committee with authority to act on behalf of the governing body?	8b	Yes
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	No

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	No
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	Yes
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	Yes
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
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	Yes
13 Did the organization have a written whistleblower policy?	13	Yes
14 Did the organization have a written document retention and destruction policy?	14	Yes
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	Yes
b Other officers or key employees of the organization	15b	No
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
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: FL

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (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:
 DONNA ENGLISH 5110 N FEDERAL HIGHWAY 102 FORT LAUDERDALE, FL 33308 (954) 566-2311

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, or 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) DR FRED SCARBROUGH CHAIR AND FO	1 00	X		X				0	0	0
(2) MATT LOMENICK VICE CHAIR	1 00	X		X				0	0	0
(3) ANDY MITCHELL VICE CHAIR	1 00	X		X				0	0	0
(4) DAVE SMITH TREASURER	1 00	X		X				0	0	0
(5) KIM SAISWICK EDD RN LMHC SECRETARY	1 00	X		X				0	0	0
(6) TIM DOBBINS BOARD MEMBER	1 00	X						0	0	0
(7) MAT GULLEY BOARD MEMBER	1 00	X						0	0	0
(8) FAWN MIKEL BOARD MEMBER	1 00	X						0	0	0
(9) BRETT OPALINSKI BOARD MEMBER	1 00	X						0	0	0
(10) JASON SMITH BOARD MEMBER	1 00	X						0	0	0
(11) JENNIFER STEPELTON BOARD MEMBER	1 00	X						0	0	0
(12) GAIL AUGUSTON-KOPPEN BOARD MEMBER	1 00	X						0	0	0
(13) DR TED GREER JR CEO	40 00			X				82,412	0	2,914
(14) CHRISTOPHER R LLOYD CEO	40 00			X				66,257	0	7,881
(15) ROBIN MARTIN EXECUTIVE DI	40 00			X				28,531	0	8,332

[illegible]

1b Sub-Total	▶			
c Total from continuation sheets to Part VII, Section A	▶			
d Total (add lines 1b and 1c)	▶		177,200	19,127

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? <i>If "Yes," complete Schedule J for such individual</i>	3	No
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? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

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)	(B)	(C)
Name and business address	Description of services	Compensation

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 RevenueCheck 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			
	b Membership dues	1b			
	c Fundraising events	1c	61,638		
	d Related organizations	1d			
	e Government grants (contributions)	1e	1,291,099		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	966,821		
	g Noncash contributions included in lines 1a-1f \$		184,985		
	h Total. Add lines 1a-1f		2,319,558		
Program Service Revenue	2a RESIDENCE FEES	Business Code			
	b	624200	62,361	62,361	
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f		62,361		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,040		1,040
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6a Gross rents	(i) Real (ii) Personal			
	b Less rental expenses	34,716			
	c Rental income or (loss)	34,716			
	d Net rental income or (loss)		34,716		34,716
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other			
	b Less cost or other basis and sales expenses				
	c Gain or (loss)		22,000		
	d Net gain or (loss)		22,000	22,000	
	8a Gross income from fundraising events (not including \$ 61,638 of contributions reported on line 1c) See Part IV, line 18	a	64,810		
	b Less direct expenses	b	64,773		
	c Net income or (loss) from fundraising events		37		37
	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					
11a Miscellaneous Revenue	Business Code				
b					
c					
d All other revenue					
e Total. Add lines 11a-11d					
12 Total revenue. See Instructions		2,439,712	84,361	35,793	

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.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	177,200	9,510	74,385	93,305
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.	825,287	650,987	122,743	51,557
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).				
9 Other employee benefits.	121,053	83,140	26,946	10,967
10 Payroll taxes.	85,010	55,625	16,938	12,447
11 Fees for services (non-employees):				
a Management.				
b Legal.				
c Accounting.	11,000		11,000	
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).	28,790	21,617	5,760	1,413
12 Advertising and promotion.	2,358	1,021	1,252	85
13 Office expenses.	59,503	19,985	22,793	16,725
14 Information technology.				
15 Royalties.				
16 Occupancy.	21,520	19,520		2,000
17 Travel.	11,225	10,531	411	283
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	1,221	145	500	576
20 Interest.	1,960		1,960	
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	26,483	26,381	77	25
23 Insurance.	46,900	38,665	5,165	3,070
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 CLIENT ASSISTANCE	1,040,295	1,040,295		
b CONTRIBUTED FOOD	150,785	150,785		
c UTILITIES	68,848	65,885	2,963	
d REPAIRS AND MAINTENANCE	42,833	42,694	139	
e All other expenses	90,557	62,557	26,390	1,610
25 Total functional expenses. Add lines 1 through 24e.	2,812,828	2,299,343	319,422	194,063
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	56,654	1	1,595
	2 Savings and temporary cash investments	800,207	2	168,894
	3 Pledges and grants receivable, net	165,781	3	417,520
	4 Accounts receivable, net		4	9,744
	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		8	
	9 Prepaid expenses and deferred charges	9,971	9	10,884
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 712,992		
	b Less: accumulated depreciation	10b 240,859	438,047	10c 472,133
	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	4,821	15	4,821
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,475,481	16	1,085,591	
Liabilities	17 Accounts payable and accrued expenses	86,339	17	71,563
	18 Grants payable		18	
	19 Deferred revenue		19	
	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	72,466	23	70,468
	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		25	
	26 Total liabilities. Add lines 17 through 25	158,805	26	142,031
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,051,527	27	640,547
	28 Temporarily restricted net assets	265,149	28	303,013
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	1,316,676	33	943,560	
34 Total liabilities and net assets/fund balances	1,475,481	34	1,085,591	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,439,712
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,812,828
3	Revenue less expenses Subtract line 2 from line 1	3	-373,116
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,316,676
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	943,560

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

- 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?
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?
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?
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?
- 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

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 65-0670031

Name: HOPE SOUTH FLORIDA INC

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue ServiceName of the organization
HOPE SOUTH FLORIDA INC**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

2016**Open to Public Inspection**

Employer identification number

65-0670031

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 12, 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 (Form 990 or 990-EZ))
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university _____
- 10 ☐ 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)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 ☐ 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- 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 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
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, 8, or 9 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)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	1,521,047	1,589,720	1,767,584	1,856,776	2,319,558	9,054,685
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	1,521,047	1,589,720	1,767,584	1,856,776	2,319,558	9,054,685
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)						586,472
6 Public support. Subtract line 5 from line 4						8,468,213

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
7 Amounts from line 4	1,521,047	1,589,720	1,767,584	1,856,776	2,319,558	9,054,685
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	73,189	31,650	30,215	46,582	35,756	217,392
9 Net income from unrelated business activities, whether or not the business is regularly carried on		3,638				3,638
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						9,275,715
12 Gross receipts from related activities, etc. (see instructions)					12	306,723

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 2016 (line 6, column (f) divided by line 11, column (f))	14	91.290 %
15 Public support percentage for 2015 Schedule A, Part II, line 14	15	97.040 %

16a 33 1/3% support test—2016. 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—2015. 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—2016. 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—2015. 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 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(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)2012	(b)2013	(c)2014	(d)2015	(e)2016	(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 2016 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2016. 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—2015. 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 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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.		
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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (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).		
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 .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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 or 990-EZ).		
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 or 990-EZ).		
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 in 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 in 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 .		
10a 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).		

Part IV Supporting Organizations (continued)**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?
- b** A family member of a person described in (a) above?
- 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*

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 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.*
- 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.*

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 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).*

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 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, (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?
- 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).*
- 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.*

	Yes	No
1		
2		
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).

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.*
- 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.*

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.*
- 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.*

	Yes	No
2a		
2b		
3a		
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)	1	
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 <input type="checkbox"/> 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 2016 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-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2016			
a			
b			
c From 2013.			
d From 2014.			
e From 2015.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2016 from Section D, line 7			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b Excess from 2013.			
c Excess from 2014.			
d Excess from 2015.			
e Excess from 2016.			

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE D
(Form 990)**Supplemental Financial Statements**

OMB No 1545-0047

2016**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

► 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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.Name of the organization
HOPE SOUTH FLORIDA INCEmployer identification number
65-0670031**Part I 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
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" on 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 an 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 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, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on 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 on 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 on 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 **d** ☐ Loan or exchange programs
- b** ☐ Scholarly research **e** ☐ Other
- c** ☐ Preservation for future generations
- 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" on 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 |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 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" on 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 on 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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

- b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

- 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' on 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		123,870		123,870
b Buildings		436,681	165,837	270,844
c Leasehold improvements				
d Equipment		152,441	75,022	77,419
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				472,133

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on 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' on 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' on 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' on 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) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	

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' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	2,518,139
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	72,427
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	6,000
e	Add lines 2a through 2d	2e	78,427
3	Subtract line 2e from line 1	3	2,439,712
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	2,439,712

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	2,891,255
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	72,427
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	6,000
e	Add lines 2a through 2d	2e	78,427
3	Subtract line 2e from line 1	3	2,812,828
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	2,812,828

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.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information <i>(continued)</i>	
Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 65-0670031
Name: HOPE SOUTH FLORIDA INC

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 4, PART XI, LINE 2D	DONATED MATERIALS SPECIAL EVENTS 6,000

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 4, PART XII, LINE 2D	DONATED MATERIALS SPECIAL EVENTS 6,000

SCHEDULE G
(Form 990 or 990-EZ)**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No 1545-0047

2016**Open to Public
Inspection**Department of the Treasury
Internal Revenue ServiceComplete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the
organization entered more than \$15,000 on Form 990-EZ, line 6a

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.Name of the organization
HOPE SOUTH FLORIDA INC

Employer identification number

65-0670031

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** ☐ Mail solicitations
- b** ☐ Internet and email solicitations
- c** ☐ Phone solicitations
- d** ☐ In-person solicitations
- e** ☐ Solicitation of non-government grants
- f** ☐ Solicitation of government grants
- g** ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				▶		

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d)
		GOLF TOURNAMENT (event type)	TASTE HOPE (event type)	1 (total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	74,915	51,355	178	126,448
	2 Less Contributions	31,240	30,220	178	61,638
	3 Gross income (line 1 minus line 2)	43,675	21,135		64,810
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	42,029	22,744		64,773
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				64,773
11 Net income summary Subtract line 10 from line 3, column (d) ▶				37	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records
- Name ►
- Address ►
- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$
- c** If "Yes," enter name and address of the third party
- Name ►
- Address ►
- 16** Gaming manager information
- Name ►
- Gaming manager compensation ► \$
- Description of services provided ►
- ☐ Director/officer ☐ Employee ☐ Independent contractor
- 17** Mandatory distributions
- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
------------------	-------------

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2016

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

▶ Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990Name of the organization
HOPE SOUTH FLORIDA INC

Employer identification number

65-0670031

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				
5 Clothing and household goods				
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	X	6,031	150,785	FAIR MARKET VALUE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>SUPPLIES</u>)	X	28	34,200	FAIR MARKET VALUE
26 Other ▶ (<u> </u>)				
27 Other ▶ (<u> </u>)				
28 Other ▶ (<u> </u>)				

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

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?

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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

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

Yes No

30a		No
31		No
32a		No

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.

Return Reference	Explanation
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As Filed Data -

DLN: 93493174001477

OMB No 1545-0047

2016

**Open to Public
Inspection**

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ 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.

Department of the Treasury

~~Internal Revenue Service~~

Name of the organization
HOPE SOUTH FLORIDA INC

Employer identification number

65-0670031

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 1, ITEM C	FAITH IN ACTION CRISIS HOUSING, HOPE CENTRAL

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	HOPE SOUTH FLORIDA IS A CHRISTIAN-BASED 501(C)(3) NON-PROFIT ORGANIZATION, OPERATING SINCE 1995, THAT HAS PROVIDED EMERGENCY SHELTER, HOUSING ASSISTANCE, AND SUPPORT SERVICES TO THOUSANDS OF HOMELESS FAMILIES AND INDIVIDUALS. OUR GOAL IS TO BRING ABOUT TRANSFORMATION IN THE LIVES OF HOMELESS AND HURTING FAMILIES THROUGH THE PROVISION OF HOUSING SOLUTIONS AND FAMILY SERVICES, AND TO SERVE AS A GUIDING PARTNER IN TRANSFORMING, EDUCATING, AND BRINGING THE CHRISTIAN COMMUNITY INTO RELATIONSHIP WITH THOSE SERVED. HOUSING -IN 2016, HSF PROVIDED ACCESS TO RAPID REHOUSING ALONG WITH CASE MANAGEMENT SERVICES TO 150 HOMELESS FAMILIES AND VETERANS IN BROWARD COUNTY. HSF IS NOW RECOGNIZED AS THE PREMIER ORGANIZATION FOR HOUSING HOMELESS FAMILIES AND VETERANS IN BROWARD COUNTY. CHURCH PARTNERSHIPS -HSF HAS INCREASED ITS CHURCH PARTNERSHIPS TO 72 CHURCHES IN BROWARD COUNTY. CHURCH PARTNERS PARTICIPATE IN THE PROVISION AND SERVING OF SHARED MEALS, PROVIDE CRISIS HOUSING FOR HOMELESS FAMILIES AT THEIR CHURCH FACILITIES, SERVE AS FAMILY SUPPORT TEAMS FOR HOMELESS FAMILIES AND VETERANS AND AS BENEVOLENT LANDLORDS INCREASING OPPORTUNITIES FOR RAPID REHOUSING FOR HOMELESS FAMILIES AND VETERANS IN BROWARD COUNTY.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	ALL BOARD MEMBERS REVIEW FORM 990 AT BOARD MEETING AND AN ELECTRONIC VERSION IS ALSO SENT FOR REVIEW BEFORE WE FILE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	POLICY IS REVIEWED AND DISCUSSED BY BOARD MEMBERS AND EMPLOYEES AT MEETINGS AND ANY POSSIBLE CONFLICTS THAT ARISE ARE REQUIRED TO BE DISCLOSED

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15A	COMPENSATION IS THOROUGHLY REVIEW BY THE BOARD ON AN ANNUAL BASIS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	MADE AVAILABLE UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	DONATED MATERIALS SPECIAL EVENTS 6,000 DONATED MATERIALS SPECIAL EVENTS -6,000

8/21/2018

R-9

Provided by Courtney Crush

STACKING -

SITE PLAN

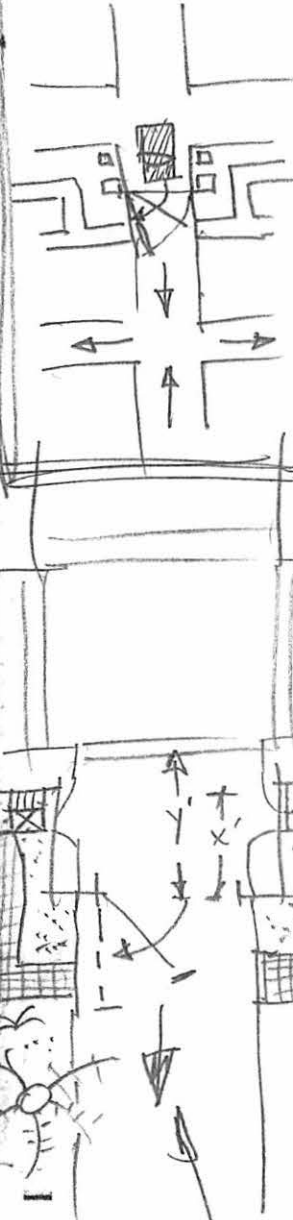
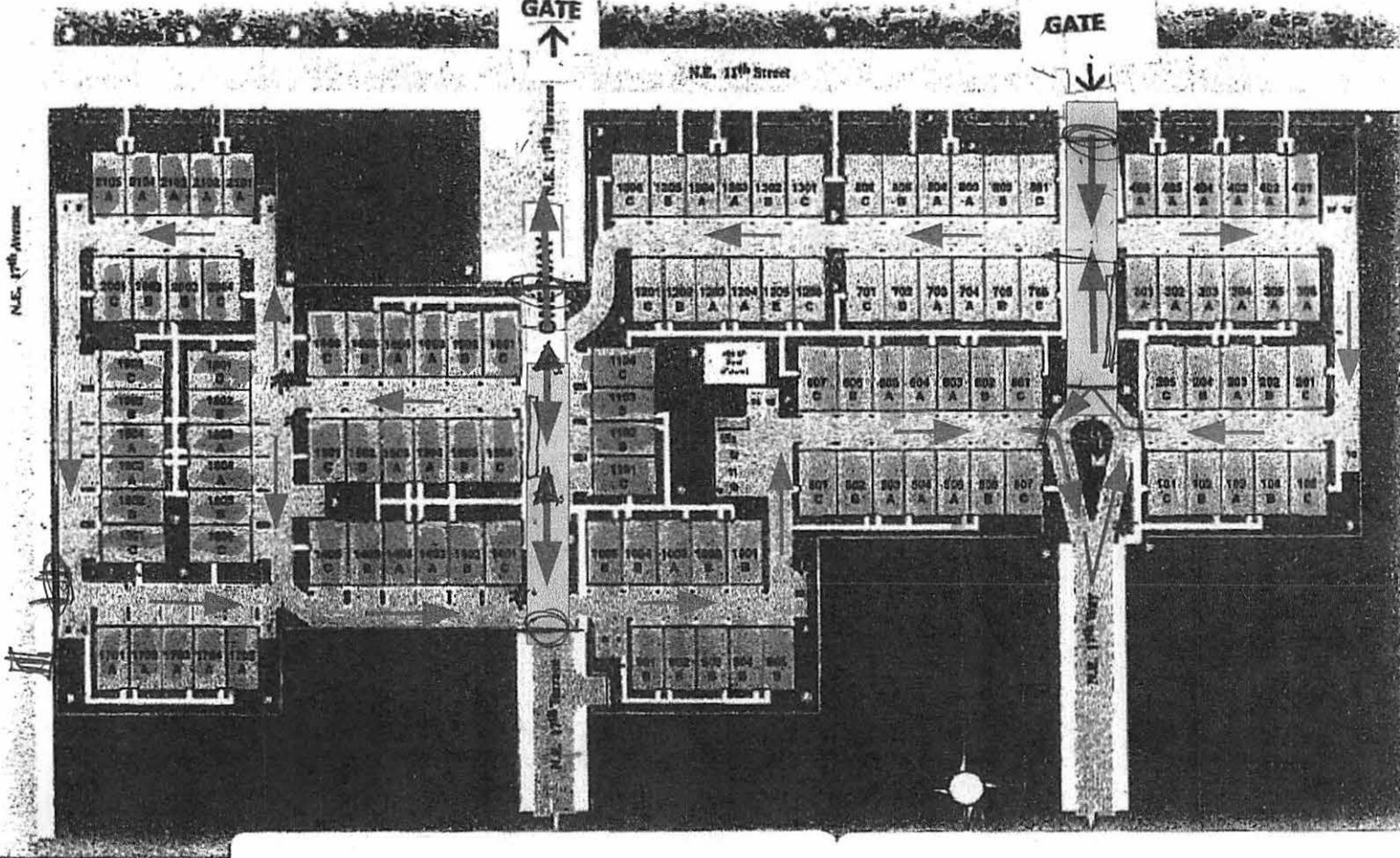


NE 17th Terrace

NE 17th Way

EXIT
GATE

ENTRANCE
GATE



Red Arrows: are clearly understood by city, no need to change, correct?

Blue Arrows: redefine appropriately so city can analyze traffic effect outside of VM gates

ALSO: VM SHOULD BLOW UP 2 NEW RATES SHOWING OPENING LOCATION/EXACT SWING W/ RESPECT TO 11TH ST, SIDEWALKS, ETC

40-44 units: potential to exit (if changing driveway to 200W @ 17th) 46 units: will not have access to exit gate unless they open main gate

EXHIBIT TO RESOLUTION 18-

AVIATION ADVISORY BOARD

John Dool (*Commissioner Moraitis*) is appointed to the Aviation Advisory Board for a one year term beginning August 21, 2018 and ending August 20, 2019 or until his successor has been appointed.

BUDGET ADVISORY BOARD

Jeff Lowe (*Mayor Trantalis*) is appointed to the Budget Advisory Board for a one year term beginning October 1, 2017 and ending September 30, 2018 or until his successor has been appointed.

Jeff Lowe (*Mayor Trantalis*) and Johnnie Smith (*Commissioner McKinzie*) are appointed to the Budget Advisory Board for one year terms beginning October 1, 2018 and ending September 30, 2019 or until their successor have been appointed.

Wes Parker (*Vice-Mayor Sorensen*) and David Orshefsky (*Commissioner Glassman*) are appointed to the Budget Advisory Board for a one year term beginning October 1, 2018 and ending September 30, 2019 or until his successor has been appointed.

CEMETERY SYSTEM BOARD OF TRUSTEES

Alan Garber (*Vice-Mayor Sorensen*) is appointed to the Cemetery System Board of Trustees for a one year term beginning August 21, 2018 and ending August 20, 2019 or until his successor has been appointed.

CENTRAL CITY REDEVELOPMENT ADVISORY BOARD

Alex Karamanoglou (*Consensus*), Peter Kosinski (*Consensus*), and Danella Williams(*Consensus*) are appointed to the Central City Redevelopment Advisory Board for one year terms beginning August 31, 2018 and ending August 30, 2019 or until their successors have been appointed.

COMMUNITY SERVICES BOARD

Wanda Francis (*Commissioner Moraitis*) is appointed to the Community Services Board for a one year term beginning 10/1/2018 and ending 9/30/2019 or until her successor has been appointed.

EDUCATION ADVISORY BOARD

Terry Large (*Vice-Mayor Sorensen*) is appointed to the Education Advisory Board for a one year term beginning September 5, 2018 and ending September 4, 2019 or until his successor has been appointed.

ECONOMIC DEVELOPMENT ADVISORY BOARD

Bernice Lee (*Mayor Trantalis*) is appointed to the Economic Development Advisory Board for a two year term beginning January 6, 2018 and ending January 5, 2020 or until her successor has been appointed.

LAUDERTRAIL WORKING GROUP COMMITTEE

Shea Smith (*Mayor Trantalis*) Caleb Gunter (*Commissioner Moraitis*) and Eric Barton (*Vice-Mayor Sorensen*) are appointed to the LauderTrail Working Group Committee for two year terms beginning August 1, 2018 and ending July 31, 2020 or until their successors have been appointed.

PARKS, RECREATION AND BEACHES BOARD

Brucie Cummings (*Vice-Mayor Sorensen*) is appointed to the Parks, Recreation and Beaches Board for a one year term beginning October 20, 2017 and ending October 19, 2018 or until her successor has been appointed.