

Return of Organization Exempt From Income Tax

2001

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2001 calendar year, or tax year beginning January 1, 2001, and ending December 31, 2001

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

C Name of organization
HOPE worldwide - New England
 Number and street (or PO box if mail is not delivered to street address) Room/suite
12 Essex Street
 City or town, state or country, and ZIP + 4
Andover, MA 01810

D Employer identification number
04-3148787

E Telephone number
978-470-2121

F Accounting method Cash Accrual
 Other (specify) _____

G Web site www.hopeww.org

J Organization type (check only one) 501(c) (3) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail it should file a return without financial data. **Some states require a complete return.**

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 2,668,079

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates N/A
H(c) Are all affiliates included? Yes No (if "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Enter 4-digit GEN N/A

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

Revenue					
1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a	2,316,973		
b	Indirect public support	1b	221,028		
c	Government contributions (grants)	1c	99,463		
d	Total (add lines 1a through 1c) (cash \$ <u>2,637,464</u> noncash \$ <u>8,588</u>)	1d		2,646,052	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		0	
3	Membership dues and assessments	3		0	
4	Interest on savings and temporary cash investments	4		14,565	
5	Dividends and interest from securities	5		0	
6a	Gross rents	6a	0		
b	Less rental expenses	6b	0		
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c		0	
7	Other investment income (describe _____)	7		0	
8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
b	Less cost or other basis and sales expenses	8a			
c	Gain or (loss) (attach schedule)	8b			
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			
9	Special events and activities (attach schedule)	8d			
a	Gross revenue (not including \$ <u>46,598</u> of contributions reported on line 1a)	9a	16,050		
b	Less direct expenses other than fundraising expenses	9b	18,630		
c	Net income or (loss) from special events (subtract line 9b from line 9a) Schedule 1	9c		(2,580)	
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		2,649,449	
13	Program services (from line 44, column (B))	13		2,377,947	
14	Management and general (from line 44, column (C))	14		222,891	
15	Fundraising (from line 44, column (D))	15		191,606	
16	Payments to affiliates (attach schedule)	16			
17	Total expenses (add lines 16 and 44, column (A))	17		2,792,444	
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		(142,995)	
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		447,123	
20	Other changes in net assets or fund balances (attach explanation)	20			
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		304,128	

For Paperwork Reduction Act Notice, see the separate instructions

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AUG 23 2002
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Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) Schedule 2 (cash \$ 16,000 noncash \$ 0 00)	968,726	968,726		
23	Specific assistance to individuals (attach schedule)	0	0		
24	Benefits paid to or for members (attach schedule)	0	0		
25	Compensation of officers, directors, etc	0	0	0	0
26	Other salaries and wages	0	0	0	0
27	Pension plan contributions	0	0	0	0
28	Other employee benefits	6,399	5,651	748	0
29	Payroll taxes	0	0	0	0
30	Professional fundraising fees	0	0	0	0
31	Accounting fees	2,680	2,680	0	0
32	Legal fees	9,680	7,018	2,663	0
33	Supplies	27,941	9,569	13,313	5,059
34	Telephone	25,920	18,903	3,581	3,436
35	Postage and shipping	13,812	8,455	3,268	2,089
36	Occupancy	125,266	98,697	15,012	11,557
37	Equipment rental and maintenance	39,715	23,707	14,172	1,836
38	Printing and publications	57,320	6,911	3,669	46,740
39	Travel	151,566	137,838	2,060	11,668
40	Conferences, conventions, and meetings	3,177	2,025	563	589
41	Interest	28	18	10	0
42	Depreciation, depletion, etc (attach schedule) Sched 3	37,123	0	37,123	0
43	Other expenses not covered above (itemize) a Schedule 4	1,323,091	1,087,749	126,709	108,633
b					
c					
d					
e					
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15.	2,792,444	2,377,947	222,891	191,606

Joint Costs Check if you are following SOP 98-2
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A, (ii) the amount allocated to Program services \$ N/A,
 (iii) the amount allocated to Management and general \$ N/A, and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24)

What is the organization's primary exempt purpose? Schedule 5		Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)		(Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others.)
a	HOPE worldwide Family Center - staffed and managed a home for 17 abandoned or orphaned children in Safuca, Romania. Children at the home receive basic education, training in computers, agriculture, home economics, English and social skills. Also hosted birthday and holiday parties for over 100 orphans (Grants and allocations \$ 332,645)	635,181
b	HOPE worldwide (Parent) - manages programs in concert with more than 100,000 volunteers in more than 80 nations feeding the hungry, treating the sick, housing the homeless, comforting the downcast, educating the disadvantaged, assisting the elderly, and finding caring homes for the abandoned (Grants and allocations \$ 367,800)	367,800
c	Global Outreach - The program's mission is to recruit, train and mobilize volunteer to provide volunteer service to their communities. Activities include an annual day of service in more than 70 New England communities as well as a holiday toy drive and holiday parties or disadvantaged children in MA, RI, CT and NH (Grants and allocations \$ 16,000)	579,405
d	HOPE worldwide New England Permanent Families Program - The mission of the program is to help children to find a permanent home, whether through reunification with birth parents, long-term foster care or adoption (Grants and allocations \$)	319,315
e	Other program services (attach schedule) (Grants and allocations \$ Schedule 6 252,281)	476,247
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	2,377,947

Part IV Balance Sheets (See Specific Instructions on page 24)

Note		(A)		(B)		
Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		Beginning of year		End of year		
Assets	45	Cash — non-interest-bearing	35,608	45	0	
	46	Savings and temporary cash investments	341,635	46	209,636	
	47a	Accounts receivable	1,897			
		b Less allowance for doubtful accounts		1,125	47c	1,898
	48a	Pledges receivable				
		b Less allowance for doubtful accounts			48c	
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a	Other notes and loans receivable (attach schedule)				
		b Less allowance for doubtful accounts			51c	
	52	Inventories for sale or use	0	52	240	
	53	Prepaid expenses and deferred charges	9,896	53	9,896	
	54	Investments — securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54		
	55a	Investments — land, buildings, and equipment basis				
		b Less accumulated depreciation (attach schedule)			55c	
56	Investments — other (attach schedule)			56		
57a	Land, buildings, and equipment basis	239,986				
	b Less accumulated depreciation (attach schedule) Schedule 3	133,977	114,310	57c	106,009	
58	Other assets (describe ► _____)			58		
59 Total assets (add lines 45 through 58) (must equal line 74)		502,574	59	327,679		
Liabilities	60	Accounts payable and accrued expenses	55,451	60	23,551	
	61	Grants payable		61		
	62	Deferred revenue		62		
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64a	Tax-exempt bond liabilities (attach schedule)		64a		
		b Mortgages and other notes payable (attach schedule)		64b		
	65	Other liabilities (describe ► _____)		65		
66 Total liabilities (add lines 60 through 65)		55,451	66	23,551		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted	447,123	67	304,128	
	68	Temporarily restricted		68		
	69	Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds		70		
	71	Paid-in or capital surplus, or land, building, and equipment fund		71		
	72	Retained earnings, endowment, accumulated income, or other funds		72		
	73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	447,123	73	304,128	
74 Total liabilities and net assets/fund balances (add lines 66 and 73)		502,574	74	327,679		

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 26)		Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return	
a Total revenue, gains, and other support per audited financial statements ▶	a	2,649,449	
b Amounts included on line a but not on line 12, Form 990			
(1) Net unrealized gains on investments \$ _____			
(2) Donated services and use of facilities \$ _____			
(3) Recoveries of prior year grants \$ _____			
(4) Other (specify) _____			
\$ _____			
Add amounts on lines (1) through (4) ▶	b		
c Line a minus line b ▶	c	2,649,449	
d Amounts included on line 12, Form 990 but not on line a:			
(1) Investment expenses not included on line 6b, Form 990 \$ _____			
(2) Other (specify) _____			
\$ _____			
Add amounts on lines (1) and (2) ▶	d		
e Total revenue per line 12, Form 990 (line c plus line d) ▶	e	2,649,449	
a Total expenses and losses per audited financial statements ▶	a	2,792,444	
b Amounts included on line a but not on line 17, Form 990			
(1) Donated services and use of facilities \$ _____			
(2) Prior year adjustments reported on line 20, Form 990 \$ _____			
(3) Losses reported on line 20, Form 990 \$ _____			
(4) Other (specify) _____			
\$ _____			
Add amounts on lines (1) through (4) ▶	b		
c Line a minus line b ▶	c	2,792,444	
d Amounts included on line 17, Form 990 but not on line a:			
(1) Investment expenses not included on line 6b, Form 990 \$ _____			
(2) Other (specify) _____			
\$ _____			
Add amounts on lines (1) and (2) ▶	d		
e Total expenses per line 17, Form 990 (line c plus line d) ▶	e	2,792,444	

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 26)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid enter -0-)	(D) Contributors to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Wyndham Shaw <u>Schedule 8</u> 12 Essex St., Andover, MA 01810	VP Europe/NE 40	88,955	23,742	0
Thomas Rushton 12 Essex St., Andover, MA 01810	COO Europe/NE 40	85,017	16,815	0
Daniel H. Bathon 12 Essex St., Andover, MA 01810	Board Member 2	0	0	0
Richard Bellmor 12 Essex St., Andover, MA 01810	Board Member 2	0	0	0
Gary Bubb 12 Essex St., Andover, MA 01810	Board Member 2	0	0	0
Ken Lowey, M.D. 12 Essex St., Andover, MA 01810	Board Member 2	0	0	0
Debra Miller 12 Essex St., Andover, MA 01810	Board Member 2	0	0	0
Christie Stolper 12 Essex St., Andover, MA 01810	Board Member 2	0	0	0
Elliot Suarez 12 Essex St., Andover, MA 01810	Board Member 2	0	0	0
Laura Webster 12 Essex St., Andover, MA 01810	Board Member 2	0	0	0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ▶ Yes No
 If "Yes," attach schedule — see Specific Instructions on page 27

Part VI Other Information (See Specific Instructions on page 27)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
78b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	X	
81a	Enter direct or indirect political expenditures See line 81 instructions <input checked="" type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81b	Did the organization file Form 1120-POL for this year?		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
82b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)		N/A
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85a	501(c)(4), (5), or (6) organizations Were substantially all dues nondeductible by members?	N/A	
85b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	N/A	
85c	Dues, assessments, and similar amounts from members	N/A	
85d	Section 162(e) lobbying and political expenditures	N/A	
85e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A	
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	0	
85g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	
85h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
86a	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	N/A	
86b	Gross receipts, included on line 12, for public use of club facilities	N/A	
87a	501(c)(12) orgs Enter a Gross income from members or shareholders	N/A	
87b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	N/A	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0</u> , section 4912 <u>0</u> , section 4955 <u>0</u>		
89b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
89c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
89d	Enter Amount of tax on line 89c, above, reimbursed by the organization		0
90a	List the states with which a copy of this return is filed <u>Massachusetts, Maine, Connecticut, New Hampshire</u>		
90b	Number of employees employed in the pay period that includes March 12, 2001 (See instructions)	Schedule 10	0
91	The books are in care of <u>HOPE worldwide Ltd.</u> Telephone no <u>610-254-8800</u> Located at <u>353 W Lancaster Ave, Wayne, PA</u> ZIP + 4 <u>19087</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year		N/A

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32)

	Unrelated business income		Excluded by section 512 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated					
93 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	14,565	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			01	(2,580)	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				11,985	
105 Total (add line 104, columns (B), (D), and (E))					11,985

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	None

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
None	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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

Date 8/15/02

Sec/Treasurer

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

2001

Department of the Treasury
Internal Revenue Service

Supplementary Information — (See separate instructions)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

HOPE worldwide - New England

Employer identification number

04-3148787

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000				

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services		

Part III Statements About Activities (See page 2 of the instructions)	Yes	No
<p>1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ <u>0.00</u> (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B)</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities</p>	1	X
<p>2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)</p> <p>a Sale, exchange, or leasing of property?</p>	2a	X
<p>b Lending of money or other extension of credit?</p>	2b	X
<p>c Furnishing of goods, services, or facilities?</p>	2c	X
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	2d	X
<p>e Transfer of any part of its income or assets?</p>	2e	X
<p>3 Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below)</p>	3	X
<p>4 Do you have a section 403(b) annuity plan for your employees?</p>	4	X
<p>Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments</p>		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)								
<p>The organization is not a private foundation because it is (Please check only ONE applicable box)</p> <p>5 <input type="checkbox"/> A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)</p> <p>6 <input type="checkbox"/> A school Section 170(b)(1)(A)(ii) (Also complete Part V)</p> <p>7 <input type="checkbox"/> A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)</p> <p>8 <input type="checkbox"/> A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)</p> <p>9 <input type="checkbox"/> A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ► _____</p> <p>10 <input type="checkbox"/> An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)</p> <p>11a <input checked="" type="checkbox"/> An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(v) (Also complete the Support Schedule in Part IV-A)</p> <p>11b <input type="checkbox"/> A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)</p> <p>12 <input type="checkbox"/> 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 charitable, etc , 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) (Also complete the Support Schedule in Part IV-A)</p> <p>13 <input type="checkbox"/> An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))</p>								
<p style="text-align:center;">Provide the following information about the supported organizations (See page 5 of the instructions)</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:75%;">(a) Name(s) of supported organization(s)</th> <th style="width:25%;">(b) Line number from above</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	(a) Name(s) of supported organization(s)	(b) Line number from above						
(a) Name(s) of supported organization(s)	(b) Line number from above							
<p>14 <input type="checkbox"/> An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)</p>								

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting**

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	2,515,953	1,236,382	1,162,171	1,077,127	5,991,633
16 Membership fees received	0	0	0	0	0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	34,083	38,896	(1,660)	93,941	165,260
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	6,121	640	1,555	2,929	11,245
19 Net income from unrelated business activities not included in line 18	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.	0	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	0	0	0	0	0
23 Total of lines 15 through 22	2,556,157	1,275,918	1,162,066	1,173,997	6,168,138
24 Line 23 minus line 17	2,522,074	1,237,022	1,163,726	1,080,056	6,002,878
25 Enter 1% of line 23	25,562	12,759	11,621	11,740	
26 Organizations described on lines 10 or 11 a Enter 2% of amount in column (e), line 24					26a 120,058
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 1,029,942
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 6,002,878
d Add: Amounts from column (e) for lines 18 <u>11,245</u> 19 <u>0</u> 22 <u>0</u> 26b <u>1,029,942</u>					26d 1,041,187
e Public support (line 26c minus line 26d total)					26e 4,961,691
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 82.66 %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2000) <u>N/A</u> (1999) <u>N/A</u> (1998) <u>N/A</u> (1997) <u>N/A</u>					
b For any amount included in line 17 that was received from each person (other than "disqualified person"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2000) <u>N/A</u> (1999) <u>N/A</u> (1998) <u>N/A</u> (1997) <u>N/A</u>					
c Add: Amounts from column (e) for lines 15 <u>5,991,633</u> 16 <u>0.00</u> 17 <u>165,260</u> 20 <u>0</u> 21 <u>0</u>					27c 6,156,893
d Add: Line 27a total <u>0</u> and line 27b total <u>0</u>					27d 0
e Public support (line 27c total minus line 27d total)					27e 6,156,893
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)					27f 6,168,138
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 99.82 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 0.18 %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 7 of the instructions)
 (To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)		
<hr/> <hr/> <hr/>		
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
<hr/> <hr/> <hr/>		
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
<hr/> <hr/> <hr/>		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)
 (To be completed **ONLY** by an eligible organization that filed Form 5768) N/A

Check **a** if the organization belongs to an affiliated group Check **b** if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36														
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37														
38 Total lobbying expenditures (add lines 36 and 37)	38														
39 Other exempt purpose expenditures	39														
40 Total exempt purpose expenditures (add lines 38 and 39)	40														
41 Lobbying nontaxable amount Enter the amount from the following table —															
<table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">If the amount on line 40 is —</td> <td style="width: 70%;">The lobbying nontaxable amount is —</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>	If the amount on line 40 is —	The lobbying nontaxable amount is —	Not over \$500,000	20% of the amount on line 40	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000	41		
If the amount on line 40 is —	The lobbying nontaxable amount is —														
Not over \$500,000	20% of the amount on line 40														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
42 Grassroots nontaxable amount (enter 25% of line 41)	42														
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43														
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44														

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
 See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h)		X	
c Media advertisements		X	0
d Mailings to members, legislators, or the public		X	0
e Publications, or published or broadcast statements		X	0
f Grants to other organizations for lobbying purposes		X	0
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	0
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	0
i Total lobbying expenditures (Add lines c through h.)			0

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No 1545-0047

2001

Name of organization

HOPE worldwide - New England

Employer identification number

04-3148787

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General rule** or a **Special rule** (Note: Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the General rule and a Special rule — see instructions)

General Rule —

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

Special Rules —

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 $\frac{1}{3}$ % support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the General rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year) ▶ \$ _____

Caution Organizations that are not covered by the General rule and/or the Special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization **HOPE worldwide - New England** Employer identification number **04-3148787**

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ <u>1,500,000</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$ <u>214,320</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
	----- ----- -----	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
	----- ----- -----	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
	----- ----- -----	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
	----- ----- -----	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization **HOPE worldwide - New England** Employer identification number

Part II Noncash Property (See Specific Instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization

Employer identification number

HOPE worldwide - New England

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year (Complete columns (a) through (e) and the following line entry)
 For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once — see instructions) ▶ \$

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

HOPE worldwide - New England
 EIN 04-3148787
 IRS form 990 Supporting Schedules
 Year Ending December 31, 2001
 Schedule 1

Form 990, Part I, Lines 9a,b,c
Report of Fundraising Events

The following information is furnished regarding the organization's fundraising events during the year

Total number of events 1

Summary of the revenue and expenses of the three events generating the most gross receipts

Fundraising Event	(A)	(B)	(C)	All Other	Total
		<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	
Gross Receipts	62,648.00	0.00	0.00	\$0	\$62,648
Less Contributions	(46,598.00)	0.00	0.00	\$0	(\$46,598)
Gross Revenue	16,050.00	0.00	0.00	\$0	\$16,050
Less Direct Expenses	(18,630.00)	0.00	0.00	\$0	(\$18,630)
Net Income/(loss)	<u>(2,580.00)</u>	<u>0.00</u>	<u>0.00</u>	<u>\$0</u>	<u>(\$2,580)</u>

Description of Each Event

(A) Fourth Annual HOPE worldwide Golf Classic Benefiting Children's Hospital AIDS program (CHAP) and the programs of HOPE worldwide New England

(B)

(C)

(All other events)

HOPE worldwide - New England
EIN 04-3148787
IRS form 990 Supporting Schedules
Year Ending December 31, 2001
Schedule 2

Form 990, Part II, Line 22
Grants and Allocations

<u>Class of Activities</u>	<u>ORGANIZATION</u>	<u>ALLOCATIONS/ GRANTS</u>
Provide love, family, training, homes to abandoned children	HOPE worldwide Romania Sos Bucuresti-Ploiesti No 135 Sat Saftica, Com Balotesti Jud Ilfov, Romania	\$332,645
International charity dedicated to developing and funding programs to help the poor and needy	HOPE worldwide (Parent) 353 W Lancaster Avenue Wayne, PA 19087	\$367,800
Bringing hope back into the lives of the elderly	HOPE worldwide France Tour Orion 10-18 rue de Vincennes 93100 Montreuil France	\$141,568
Bringing hope back into the lives of the elderly	HOPE worldwide Deutschland Hbrechtstr 23 12047 Berlin, Germany	\$110,713
Helps children with AIDS	Children's Hospital AIDS Program (CHAP) 300 Longwood Ave, Boston, MA 02115	\$10,000
State's Child Protection agency	Department of Social Services 24 Farnsworth Street, Boston, MA	\$5,000
Soup Kitchen	New Horizons 199 Manchester Street Manchester, NH 03103	\$500
Mentor Program	NH Foster & Adoptive Parent Association 9 Webster Street Nashua, NH 03060	\$500
	Total	<u>\$968,726</u>

HOPE worldwide - New England
 EIN 04-3148787
 IRS form 990 Supporting Schedules
 Year Ending December 31, 2001
 Schedule 3

Form 990, Part IV, Lines 57a & b
Detail of Land, Buildings, Equipment and Depreciation

Description	Fixed Assets				Accumulated Depreciation				
	Balance		Deletions	Balance		Balance		Balance	
	01/01/2001	Additions		12/31/2001	01/01/2001	Additions	Deletions	12/31/2001	
Medical Van	\$29,699	\$0	\$0	\$29,699	\$29,699	\$0	\$0	\$29,699	
Leasehold Improvements	\$58,543	\$0	\$0	\$58,543	\$14,496	\$9,136	\$0	\$23,632	
Furniture & Equipment	\$93,976	\$11,554	\$0	\$105,530	\$34,235	\$20,733	\$0	\$54,968	
Computers/Software	\$28,945	\$17,269	\$0	\$46,214	\$18,423	\$7,255	\$0	\$25,678	
Total	\$211,163	\$28,823	\$0	\$239,986	\$96,853	\$37,124	\$0	\$133,977	

HOPE worldwide - New England
 EIN 04-3148787
 IRS form 990 Supporting Schedules
 Year Ending December 31, 2001
 Schedule 4

Form 990, Part II, Line 43a

Other Expenses

	<u>Total</u>	<u>Program</u>	<u>Mngmnt & General</u>	<u>Fundraising</u>
Management Fees (to Parent)	\$1,073,170	\$886,577	\$112,417	\$74,176
Program Expenses	\$158,478	\$145,950	\$86	\$12,442
Meals/Entertainment	\$24,950	\$15,326	\$5,656	\$3,968
Promotional Expenses	\$9,404	\$4,346	\$496	\$4,562
Insurance	\$7,282	\$4,899	\$2,383	\$0
Licenses/fees	\$6,650	\$2,309	\$2,582	\$1,759
Bank Charges	\$5,921	\$4,451	\$1,470	\$0
Miscellaneous	\$1,140	\$650	\$475	\$15
Gifts	\$8,986	\$6,401	\$1,144	\$1,441
Special Event	\$10,084	\$434	\$0	\$9,650
Other Professional Services	\$17,026	\$16,406	\$0	\$620
Total Other Expenses	\$1,323,091	\$1,087,749	\$126,709	\$108,633

· HOPE worldwide - New England
EIN 04-3148787
IRS form 990 Supporting Schedules
Year Ending December 31, 2001
Schedule 5

Form 990, Part III
Organization's Primary Exempt Purpose

The mission of HOPE worldwide New England is to improve the lives of children, families and the elderly in New England and Eastern Europe by providing foster care and adoptive services, emergency food assistance and community based volunteer outreach

HOPE worldwide - New England
EIN 04-3148787
IRS form 990 Supporting Schedules
Year Ending December 31, 2001
Schedule 6

Form 990, Part III e
Other Program Services

HOPE worldwide European Programs - programs in western and central Europe focus on bringing hope back into the lives of the elderly Programs provided a wide variety of activities including aerobics, musical performances, dances, games, outings and English classes to over 3,000 elderly

Program Service Expenses		
(Grants and allocations \$	252,281)	369,000

HOPE Youth Corps/Story Tree Gang - A leadership training program in which high school and college students participate in service to local communities One such program trains the youths to perform skits for children and parents to educate them about pertinent health and life issues

Program Service Expenses		
(Grants and allocations \$	0)	107,246

476,246

· **HOPE worldwide - New England**
EIN 04-3148787
IRS form 990 Supporting Schedules
Year Ending December 31, 2001
Schedule 7
Form 990, Part IV-B
Financial Statement Reconciliation

HOPE worldwide (New England) does not have a separate financial statement. The organization's revenue/expenditure balance sheet information are included with HOPE Worldwide, Ltd.'s consolidated audited Financial Statements for the year ended December 31, 2001.

HOPE worldwide - New England
EIN 04-3148787
IRS form 990 Supporting Schedules
Year Ending December 31, 2001
Schedule 8

Form 990, Part V
Officers, Directors, Key Employees

While HOPE *worldwide* - New England does not have any employees (and therefore does not have any compensation expenses) the amounts reported for Wyndham Shaw and Thomas Rushton are part of the Management Fee paid to HOPE *worldwide* (Parent) that is reported on line 43a of Part II

HOPE worldwide - New England
 EIN 04-3148787
 IRS form 990 Supporting Schedules
 Year Ending December 31, 2001
 Schedule 9

Form 990, Part VI, Line 80b
Names of related organizations

<u>Name of Organization</u>	<u>Federal EIN#</u>	<u>Status</u>
1 HOPE worldwide (Parent - Delaware)	04-3129839	Exempt
2 HOPE worldwide - Alabama Inc	58-2525402	Exempt
3 HOPE worldwide - Arizona, Inc	88-0773890	Exempt
4 HOPE for the City (Colorado) Ltd	84-1282288	Exempt
5 HOPE worldwide Florida Inc	59-3284298	Exempt
6 HOPE worldwide Georgia Ltd	58-2134994	Exempt
7 HOPE worldwide - Hawaii Ltd	99-0330448	Exempt
8 HOPE worldwide Heartland Inc	74-2854741	Exempt
9 HOPE worldwide - Illinois Ltd	38-3979839	Exempt
10 HOPE worldwide Indiana Ltd	35-1961075	Exempt
11 HOPE worldwide Iowa Inc	42-1517770	Exempt
12 HOPE worldwide Kentucky Inc	93-1228338	Exempt
13 HOPE worldwide Los Angeles Ltd	95-4509887	Exempt
14 HOPE worldwide Michigan, Ltd	38-3215262	Exempt
15 HOPE worldwide - Midatlantic Ltd	52-1899914	Exempt
16 HOPE worldwide - Minnesota Ltd	41-1792240	Exempt
17 HOPE worldwide - Montana Ltd	81-0524640	Exempt
18 HOPE worldwide - Nevada Inc	88-0338760	Exempt
19 HOPE worldwide New Jersey Inc	22-3328943	Exempt
20 HOPE worldwide New Mexico Ltd	85-0432487	Exempt
21 HOPE worldwide - New York, Ltd	13-3789154	Exempt
22 HOPE worldwide North Carolina Ltd	56-1891849	Exempt
23 HOPE worldwide Northern California Ltd	94-3215631	Exempt
24 HOPE worldwide - Ohio, Inc	31-1445373	Exempt
25 HOPE worldwide Oregon Inc	93-1228335	Exempt
26 HOPE worldwide - Pennsylvania, Inc	91-1938839	Exempt
27 HOPE worldwide - Philadelphia	23-2711991	Exempt
28 HOPE worldwide Philadelphia Nursing Center	91-1989544	Exempt
29 HOPE worldwide - San Diego Ltd	33-0633407	Exempt
30 HOPE worldwide - South Carolina Ltd	57-1009959	Exempt
31 HOPE worldwide Tennessee Inc	62-1580048	Exempt
32 HOPE worldwide Texas, Inc	75-2561144	Exempt
33 HOPE worldwide - Utah Inc	87-0617910	Exempt
34 HOPE worldwide - Virginia Inc	91-1938825	Exempt
35 HOPE worldwide - Washington	91-1739010	Exempt
36 HOPE worldwide - Wisconsin Ltd	39-1817823	Exempt
37 HOPE for Children - International Inc	54-1818162	Exempt
38 HOPE for Children	58-1937583	Exempt

Formerly HOPE worldwide San Francisco

HOPE worldwide - New England
EIN 04-3148787
IRS form 990 Supporting Schedules
Year Ending December 31, 2001
Schedule 10

Form 990, Part IV-B
Financial Statement Reconciliation

HOPE *worldwide* - New England entered into a contractual agreement with HOPE *worldwide*, Ltd (Parent) on January 1, 1999. Per the agreement, HOPE *worldwide*, Ltd (Parent) agrees to provide an array of program and management services, including personnel services, to HOPE *worldwide* - New England. All such personnel who are not otherwise employed directly by HOPE *worldwide* - New England are employees of HOPE *worldwide*, Ltd (Parent). For 2001 HOPE *worldwide*, Ltd (Parent) retained 21 employees that were providing personnel services to HOPE *worldwide* - New England.