	<i>c</i>	l	_ (•	r.			_ (1	OMB Nổ 1545	i-0047
Form	Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))							2019						
		For cal	endar year 2019 o	-		iluei :		and ending	(G))	14	411	1	Z U 13	9
	rtment of the Treasury nal Revenue Service		▶Go to	www.irs	s.gov/Form990T for		ctions	and the la					en to Public Ins	
A	Check box if address changed Name of organization (Check box if name changed and see instructions) D Employer Identification number													
_	Exempt under section (Employees' trust, see instructions.)													
		501(C) 3) Print HOPE WITHIN MINISTRIES INC. 408(e) 220(e) or Number, street, and room or suite no If a PO box, see instructions 16-164								612	004			
-	408(e) 220(e) 408A 530(a)	or Type			ARRISBURG					F			s activity code	
F	529(a)	1,700			nnce, country, and ZIP o					\dashv	(See instruc		3 activity code	
	look value of all assets		ELIZAB		•			17022	2		5311	20		
	t end of year	F G	roup exemption	n numt	per (See instruction									<u></u>
-	905,854								01(c) trus		401(a) tru		Other tru	
HE	Enter the number of the	e organ	ization's unrela	ted trad	des or businesses	<u> </u>	<u> </u>	Describe t	the only (or first) unrelated t		or business I	
	Parts I–V If more than	one de	scribe the first	in the	hlank snace at the	end of	f the n	revious se	ntence (romple	te Parts I ar	_	only one, com	ipiete
	Schedule M for each a						i iiic p	1041000 30	interioe, t	Joinpic	ac i alto i al	iu ii, t	complete a	
1 [During the tax year, wa	s the co	orporation a su	bsidiar	y in an affiliated gr	oup or	a par	ent-subsid	iary conti	rolled	group?		▶ Yes	X No
	f "Yes," enter the name	e and id	lentifying numb	er of th	ne parent corporati	on								
<u>_</u>	he books are in care of	of D Z	NDERT.TN	E C	ELESTIN					elenh	ne number	▶ 7	17-367-	-9797
			le or Busin					(A)	Income	Licpin	(B) Expenses		(C) N	
Ta	Gross receipts or sale													
þ	Less returns and allo	wances			c Balance	•	1c							
2	Cost of goods sold (S	Schedule	A, line 7)				2				REC	ΞŅ	ED_	
3	Gross profit Subtract				•		3	<u> </u>		- -		7 =	8	
4a	Capital gain net incor	•		•	707)		4a 4b			뜅	ง่อง รู้			
b, C	Net gain (loss) (Form 479 Capital loss deduction		. ,	FOIII 4	(31)		40 4c						020 9	<u>:</u>
5	Income (loss) from pa			ration	(attach		70		·	╢'	000			
	statement)		, c co.p.		(5				OGDI	<u>LN</u>	UI	
6	Rent income (Schedu	ile C)					6							
7	Unrelated debt-finance	ed inco	me (Schedule	E)			7		10/33	33	4,	559		5,774
8	Interest, annuities, royalti			•	•	•	8	ļ <u>.</u>	/					
9	Investment income of a s			, •	nization (Schedule G)	,	9		<u>/- </u>					
10 11	Exploited exempt active Advertising income (\$	•	•	1)			10 11			-	-			
12	Other income (See in		•	edule)			12/			_				
13	Total. Gombine lines			coulcy			13		10,33	33	4,	559		5,774
Pa	rt 1 Deductio	ns No	t Taken El	sewh	ere (See ınstru	ctions	for	imitation			tions) (De	duct	tions must	be direc
	connected	d with	the unrelate	ed bu	<u>siness income.</u>	<u>Y_</u> _			-				г	
14	Compensation of office	cers, dir	ectors, and tru	stees (Schedule K)							14 15		
15 16	Salanes and wages Repairs and mainten	ance										16		
17	Bad debts	ance										17		
18	Interest (attach sched	iule) (se	ee instructions)									18	· · · · · · · · · · · · · · · · · · ·	
19	Taxes and licenses	, ,			1				_			19		
20	Depreciation (attach I								20		7,006			
21	Less depreciation cla	imed on	Schedule A a	nd else	where on return				21a		7,006			0
22	Depletion											22		
23 24	Contributions to defer		npensation pla	ns								23 24		
24 25	Employee benefit pro Excess exempt exper		chedule I\									25	-	
26	Excess readership co											26'	<u> </u>	
27	Other deductions (att	ach sch	iedule)									27		
28	Total deductions. A	dd lines	14 through 27									28		
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13								29	ļ	5,774			
30	Deduction for net ope	rating lo	oss ansing in ta	ax year	s beginning on or	after Ja	anuary	1, 2018 (see		•			
	instructions)			4 b	00 6 1 00		4	,	•			30 31	 	5 774
31_	Unrelated business ta For Paperwork Redi						,					31 V	Form 990	5,774 -T (2019)
DAA	TO Paperwork Redi	ucuon /	-ci nulice, se	e 1115(f	นะแบทร.								1000 000	. (2013)



Form	990-T (2019) HOPE WITHIN MINISTRIES INC. 16-1643004	Page 2
Pa	rt III Total Unrelated Business Taxable income	·
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	
	Instructions)	32 5,774
33	Amounts paid for disallowed fringes	33
34	Chantable contributions (see instructions for limitation rules)	34
		
35	Total unrelated business taxable income before pre-2018 NOLs and specific deductions. Subtract line	
	34 from the sum of lines 32 and 33	35 5,774
36	Deductions for net operating loss arising in tax years beginning before January 1, 2018 (see	
	instructions)	36
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	5,774
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38 1,000
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	W I
	enter the smaller of zero or line 37	39 <u>4,774</u>
Da	rt IV Tax Computation	1 3 1
	Organizations Taxable as Corporations. Multiply line 39 by 21% (0 21)	40 1,003
40 41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on	1,005
41	the amount on line 39 from Tax rate schedule or Schedule D (Form 1041)	41
40		
42	Proxy tax. See instructions	42
43	Alternative minimum tax (trusts only)	43
44	Tax on Noncompliant Facility Income. See instructions	44
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	1,003
Pa	nt X Tax and Payments	
46a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 11,16), 46a	
b	Other credits (see instructions) 46b	1
c	General business credit Attach Form 3800 (see instructions) 46c	1
	Credit for pnor year minimum tax (attach Form 8801 or 8827).	i
d		40.
e	Total credits. Add lines 46a through 46d	46e
47	Subtract line 46e from line 45 Other taxes	47 1,003
48	Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (att. scn.)	48
49	Total tax. Add lines 47 and 48 (see instructions)	49 1,003
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k) line 3	50
51a	Payments A 2018 overpayment credited to 2019 (60- \sqrt{51a/})	
b	2019 estimated tax payments 1,100	1 *
	Tax deposited with Form 8868 (CC 516 1,200	1
_		1 1
đ		1
e	Backup withholding (see instructions) 51e	- 1
f	Credit for small employer health insurance premiums (attach Form 8941) 51f	4 1
g	Other credits, adjustments, and payments Form 2439	
	Form 4136 Other Total ► 51g] .]
52	Total payments. Add lines 51a through 51g	52 2,337
53	Estimated tax penalty (see instructions) Check if Form 2220 is attached	53
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54 0
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55 1,334
	Enter the amount of line 55 you want: Credited to 2020 estimated tax 1,334 Refunded	56
<u>56</u>		1 20 1
	Int VI Statements Regarding Certain Activities and Other Information (see instructions)	
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "YES," the organization may have to file	Yes No
	Fincen Form 114, Report of Foreign Bank and Financial Accounts If "YES," enter the name of the foreign country	;
	here	' x
58	Dunng the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore	
30	If "YES," see instructions for other forms the organization may have to file	
59	Enter the amount of tax-exempt interest received or accrued during the tax year	
<u></u>	Under penalties of genury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge a	and belief, it s
Sig		May the IRS discuss this return with the preparer shown below (see instructions)?
Her	e The Acad Mussey (abs 10 Novs TREASURER	
	Signature of officer Date Title	Yes No
	Print/Type preparer's name / Preparer's signature Date	Check If PTIN
Paid	JOHN W BONAWITZ JOHN W BONAWITZ 11/06/20	self-employed P00033505
_		EIN 25-1644159
	Only 210 GRANDVIEW AVE	
U3C	1 000 UTTT DD 17011 1706	no 717-761-7171
	Firm's address CAMP HILL, PA 17011-1706 Phone	Form 990-1 (2019)
		rom 33U-1 (2019)

Form	990-T (2019) HOPE	WITHIN MIN	ISTRI	ES IN	ic	16-1	643004			_ Pa	age 3
	edule A - Cost of G										
1	Inventory at beginning of	year 1		6	Inventory at end of	year		6	S		
2	Purchases	2		7	7 Cost of goods sold. Subtract						
3	Cost of labor	3			line 6 from line 5 Enter here and						
4a	Additional sec 263A costs				in Part I, line 2				·		
	(attach schedule)	4a		8	Do the rules of sect	ion 263	A (with respect to			Yes	No
b	Other costs (attach schedule)	4b			property produced of		l	<u>.</u> !			
5	Total. Add lines 1 through	h 4b 5	_		to the organization?						
Sch	edule C - Rent Inco	me (From Real	Property	and P	ersonal Property	/ Leas	ed With Real	Pro	perty)		•
_(se	ee instructions)	·									
1. Des	coption of property								<u></u>		
(1)	N/A						1				
(2)								_			
(3)											
(4)									. <u> </u>		
		2. Rent receive	d or accrued								
	(a) From personal property (if the	percentage of rent	(b)	From real an	d personal property (if the		3(a) Deductions	directly connected with the income			
	for personal property is more th	nan 10% but not	percen	tage of rent f	ent for personal property exceeds in columns 2(a) and 2(b) (att					ule)	
	more than 50%) 50% or if the				ent is based on profit or income)						
(1)											
(2)											
(3)											
(4)											
Total			Total		-		(b) Total deduction	ons.			
(c) T	otal income. Add totals of	f columns 2(a) and 2	(b) Enter				Enter here and on		1,		
here	and on page 1, Part I, line	e 6, column (A)			•		Part I, line 6, colum	n (B)	•		
Sch	edule E - Unrelated	Debt-Financed	Income	(see ins	tructions)						
				2 Cmc	s income from or		3 Deductions directly				_
	1 Description of debt-	financed property			to debt-financed	STMT 1 debt-finan			property ST	MT	2_
	•	, , ,			property	','			(b) Other ded		
						ļ	(attach schedule)		(attach sche		
(1)	WAREHOUSE &	OFFICE			43,200	00 7,006				12,	<u>055</u>
(2)								_			
(3)											
(4)						L		_			
	4 Amount of average	5 Average adjusted b	asis	1	6 Column	١.,			8 Allocable de		
acquisition debt on or of or allocable to allocable to debt-financed debt-financed property				4 divided		7 Gross income reportable (column 2 x column 6)		(column 6 x total of columns 3(a) and 3(b))			
	property (attach schedule)	(attach schedule)			y column 5	`	· · · · · · · · · · · · · · · · · · ·	_	3(a) and 3	(0))	
(1)	46,069	192,	557		23.92 %		10,33	13		4,	<u>559</u>
(2)					%			\perp			
(3)					%	<u> </u>		\perp			
(4)					%	<u> </u>		\perp			
SE	EE STATEMENT 3	SEE STATEMEN	T 4				here and on page		Enter here and		
						Part	I, line 7, column (A	′. I.	Part I, line 7, o		
Tota	ls				•		10,33	13		4,	<u>559</u>
Total	I dividends-received dec	ductions included in	column 8				1	▶			

Form **990-T** (2019)

Form 990-,T (2019) HOPE W							6430		_	Page 4	
<u> Schedule F – Interest, Ani</u>	nuities, Roy	<u>/alties, and</u>						ons (see in	structio	ons)	
1 Name of controlled organization		2 Employer entification number	3. Net un	3. Net unrelated income (loss) (see instructions)		4. Total of specified payments made		5 Part of column 4 that included in the control		6 Deductions directly connected with income in column 5	
								organization's gros	s income	in column 5	
(1) N/A											
(2)					 						
(3)					 			<u> </u>	-		
(4) Nonexempt Controlled Organiz	rations										
7 Taxable Income		8. Net unrelated income (loss) (see instructions)		9 Total of specified payments made		10 Part of column 9 that is included in the controlling organization's gross income			11 Deductions directly connected with income in column 10		
(1)											
(2)											
(3)											
(4)						<u> </u>					
Totals					•	Ent	ter here an	s 5 and 10 d on page 1, column (A)	Ente	d columns 6 and 11 ir here and on page 1, t I, line 8, column (B)	
Schedule G – Investment	Income of	Section	501(c)(7),	(9), or (17	') Org	aniza	tion (s	see instruction	ons)		
1 Description of income		2. Amoun	nt of income	3 Deductions directly contact (attach so		ected 4		4 Set-asides ittach schedule)		5 Total deductions and set-asides (col 3 plus col 4)	
(1) N/A											
(2)											
(3)											
(4)											
Totals		Part I, line 9	ind on page 1, 9, column (A)						Pa	er here and on page 1, art I, line 9, column (B)	
<u> Schedule I – Exploited Ex</u>	empt Activ	ity Income	<u>, Other Ti</u>	<u>han Adve</u>	rtising	Inco	ome (s	ee instructio	ns)		
2 G unrel 1 Description of exploited activity business from tr		me conn r proc	Expenses irrectly ected with duction of irrelated ess income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7		5 Gross income from activity that is not unrelated business income		attributi colur	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1) N/A											
(2)											
(3)											
(4) Enter here page 1, line 10, c		I, page	here and on e 1, Part I, i0, col (B)						Enter here and on page 1, Part II, line 25		
Totals ► Schedule J – Advertising	Income /se	e instruction	<u>e)</u>								
Part I Income From				solidated	Basis	 }					
1 Name of penodical	2 Gross advertising income	3.	. Direa lising costs	4 Advertisingain or (loss) 2 minus col 3 a gain, comp	ng (col 3) If ute	5 C	rculation ncome	6 Reac		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1) N/A											
(2)											
(3)										_	
(4)										<u> </u>	
Totals (carry to Part II, line (5))											
										Form 990-T (2019)	

Total. Enter here and on page 1, Part II, line 14

Form, 990-T (2019) HOPE WITHIN MINISTRIES JINC. 16-1643004 Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis) 7 Excess readership 4 Advertising gain or (loss) (col 2 Gross costs (column 6 5 Circulation 6 Readership 3 Direct advertising minus column 5, but 2 minus col 3) If 1 Name of penodical advertising costs ıncome costs ıncome a gain, compute not more than cols 5 through 7 column 4) (1) N/A (2) (3) (4) Totals from Part I Enter here and on Enter here and on Enter here and on page 1, Part II, line 26 page 1, Part I, line 11, col (A) page 1, Part I, line 11, col (B) Totals, Part II (lines 1-5) Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of time devoted to 4 Compensation attributable to unrelated business business (1) N/A % (2) (3) (4)

ightharpoons

4562 ······

Department of the Treasury Internal Revenue Service (9

Depreciation and Amortization

(Including Information on Listed Property)

▶ Attach to your tax return.

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

achment quence No 17

Name(s) shown on return Identifying number HOPE WITHIN MINISTRIES INC. 16-1643004 Business or activity to which this form relates INDIRECT DEPRECIATION **Election To Expense Certain Property Under Section 179** | Part | Note: If you have any listed property, complete Part V before you complete Part I 1,020,000 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,550,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If mamed filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 11 12 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11 12 Carryover of disallowed deduction to 2020 Add lines 9 and 10, less line 12 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Don't include listed property See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service 1,590 dunng the tax year See instructions Property subject to section 168(f)(1) election 15 32,083 16 16 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property See instructions) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2019 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2019 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (g) Depreciation deduction (e) Convention (f) Method (a) Classification of property placed in (business/investment_use only-see instructions) 3-year property 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25 yrs 25-year property g ММ S/L 27 5 yrs Residential rental MM S/L property 27 5 yrs MM 39 yrs S/L Nonresidential real MM S/L property Section C-Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L b 12-year 12 yrs 30 yrs S/L MM 30-year MM S/L d 40-year 40 yrs Part IV Summary (See instructions) 21 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 22 <u>33,673</u> 22 here and on the appropriate lines of your return. Partnerships and S corporations--see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

28852 Hope Within Ministries Inc.

16-1643004

Federal Statements

FYE: 12/31/2019

Statement 1 - Form 990-T, Schedule E, Column 3a - Straight Line Depreciation

Description	Deduction
WAREHOUSE & OFFICE DEPRECIATION	7,006
TOTAL	7,006

Statement 2 - Form 990-T, Schedule E, Column 3b - Other Deductions

Description	
WAREHOUSE & OFFICE MANAGEMENT FEES INTEREST INSURANCE TAXES UTILITIES	3,660 1,803 1,662 1,430 3,500
TOTAL	12,055

Statement 3 - Form 990-T, Schedule E, Column 4 - Average Acquisition Debt

<u>Description</u>	_ Deduction
WAREHOUSE & OFFICE SUM OF DEBT OUTSTANDING AT FIRST OF EACH MONTH DIVIDED BY TOTAL NUMBER OF MONTHS PROPERTY HELD	552,825 12
AVERAGE ACQUISITION DEBT	46,069

Statement 4 - Form 990-T, Schedule E, Column 5 - Average Adjusted Basis

Description	Deduction
WAREHOUSE & OFFICE ADJUSTED BASIS ON FIRST DAY PROPERTY WAS HELD ADJUSTED BASIS ON LAST DAY PROPERTY WAS HELD	196,013 189,101
DIVIDED BY 2	385,114
AVERAGE ADJUSTED BASIS	192,557