

Form **990-T****Exempt Organization Business Income Tax Return**
(and proxy tax under section 6033(e))

OMB No 1545-0687

2016Department of the Treasury
Internal Revenue ServiceFor calendar year 2016 or other tax year beginning January 1, 2016 and ending March 31, 2017▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations OnlyA ☐ Check box if
address changed

B Exempt under section

☒ 501(c)(3)☐ 408(e) ☐ 220(e)☐ 408A ☐ 530(a)☐ 529(a)Print
or
TypeName of organization (☐ Check box if name changed and see instructions)

OneHope, Inc.

Number, street, and room or suite no. If a P.O. box, see instructions

600 SW 3rd Street, Suite 6200

City or town, state or province, country, and ZIP or foreign postal code

Pompano Beach, FL 33060

D Employer identification number
(Employees' trust, see instructions)

65-0246247

E Unrelated business activity codes
(See instructions)

721000

531120

C Book value of all assets
at end of year

11,926,718

F Group exemption number (See instructions.) ▶

G Check organization type ▶ ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust

H Describe the organization's primary unrelated business activity. ▶ See Statement 1

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ ☐ Yes ☒ No

If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ Mr. Jon Laria

Telephone number ▶

954-975-7777

Part I Unrelated Trade or Business Income

(A) Income

(B) Expenses

(C) Net

1a	Gross receipts or sales				
b	Less returns and allowances			c Balance ▶	
2	Cost of goods sold (Schedule A, line 7)			1c	
3	Gross profit. Subtract line 2 from line 1c			2	
4a	Capital gain net income (attach Schedule D)			3	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			4a	
c	Capital loss deduction for trusts			4b	
5	Income (loss) from partnerships and S corporations (attach statement)			4c	
6	Rent income (Schedule C)			5	
7	Unrelated debt-financed income (Schedule E)			6	
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F)			7	
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			8	
10	Exploited exempt activity income (Schedule I)			9	
11	Advertising income (Schedule J)			10	
12	Other income (See instructions; attach schedule) STATEMENT 2			11	
13	Total. Combine lines 3 through 12			12	203,787
				13	203,787

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)			14	
15	Salaries and wages			15	85,968
16	Repairs and maintenance			16	10,973
17	Bad debts			17	
18	Interest (attach schedule)			18	
19	Taxes and licenses			19	28,750
20	Charitable contributions (See instructions for limitation rules) SEE ATTACHMENT			20	
21	Depreciation (attach Form 4562)	21	259	21	
22	Less depreciation claimed on Schedule A and elsewhere on return	22a		22b	259
23	Depletion			23	
24	Contributions to deferred compensation plans			24	2,194
25	Employee benefit programs			25	11,650
26	Excess exempt expenses (Schedule I)			26	
27	Excess readership costs (Schedule J)			27	
28	Other deductions (attach schedule) STATEMENT 3			28	86,118
29	Total deductions. Add lines 14 through 28			29	225,912
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13			30	<22,125>
31	Net operating loss deduction (limited to the amount on line 30) STATEMENT 4			31	
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30			32	<22,125>
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)			33	1,000
34	Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32			34	<22,125>

For Paperwork Reduction Act Notice, see instructions.

Cat No 11291J

Form **990-T** (2016)

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Part III Tax Computation

35	Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and:				
a	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):				
(1)	\$	(2)	\$	(3)	\$
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)	\$			
	(2) Additional 3% tax (not more than \$100,000)	\$			
c	Income tax on the amount on line 34		35c	0	
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)		36		
37	Proxy tax. See instructions		37		
38	Alternative minimum tax		38		
39	Tax on Non-Compliant Facility Income. See instructions		39		
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies		40	0	

Part IV Tax and Payments

41a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	41a		
b	Other credits (see instructions)	41b		
c	General business credit. Attach Form 3800 (see instructions)	41c		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	41d		
e	Total credits. Add lines 41a through 41d		41e	
42	Subtract line 41e from line 40		42	0
43	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)		43	
44	Total tax. Add lines 42 and 43		44	0
45a	Payments: A 2015 overpayment credited to 2016	45a		
b	2016 estimated tax payments	45b		
c	Tax deposited with Form 8868	45c		
d	Foreign organizations: Tax paid or withheld at source (see instructions)	45d		
e	Backup withholding (see instructions)	45e		
f	Credit for small employer health insurance premiums (Attach Form 8941)	45f		
g	Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other	45g		
	Total			
46	Total payments. Add lines 45a through 45g		46	
47	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>		47	
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed		48	0
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid		49	0
50	Enter the amount of line 49 you want: Credited to 2017 estimated tax Refunded		50	0

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51	At any time during the 2017 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 FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here	Yes	No
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		✓
53	Enter the amount of tax-exempt interest received or accrued during the tax year	\$	

Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.		
	Signature of officer	Date 11/9/17	Title CFO

May the IRS discuss this return with the preparer shown below (see instructions)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name	Firm's EIN			
	Firm's address	Phone no			

Schedule A—Cost of Goods Sold. Enter method of inventory valuation ►

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a Additional section 263A costs (attach schedule)	4a				
b Other costs (attach schedule)	4b				
5 Total. Add lines 1 through 4b	5				

Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0 Total	0

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ►**(b) Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ► **0****Schedule E—Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 × column 6)	8. Allocable deductions (column 6 × total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B).
Totals			0	0
Total dividends-received deductions included in column 8				0

Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

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)				

Add columns 5 and 10
Enter here and on page 1,
Part I, line 8, column (A)

Add columns 6 and 11
Enter here and on page 1,
Part I, line 8, column (B)

Totals

0 0

Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
Enter here and on page 1, Part I, line 9, column (A)				Enter here and on page 1, Part I, line 9, column (B)

Totals

0 0

Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business 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	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Enter here and on page 1, Part I, line 10, col (A)		Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26	

Totals

0 0 0

Schedule J—Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0	0	0		0

Part II **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.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0	0				0
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col (A) 0	Enter here and on page 1, Part I, line 11, col (B) 0				Enter here and on page 1, Part II, line 27 0

Schedule K—Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0

Form 990-T	Description of Organization's Primary Unrelated Business Activity	Statement	1
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The Organization offers meeting and lodging space to unrelated organizations and individuals.

To Form 990-T, Page 1

Form 990-T	Other Income	Statement	2
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Description	Amount
Lodging revenue	183,758
Conference facilities rent	20,029
To Form 990-T, Page 1, Line 12	203,787

Form 990-T	Other Deductions	Statement	3
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Description	
Professional Fees	25,752
Advertising	2,797
Office Expense	27,456
Information Technology	1,881
Occupancy	22,985
Travel	63
Insurance	5,184
To Form 990-T, Page 1, Line 28	86,118

Form 990-T	Net Operating Loss Deduction	Statement	4
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Tax Year	Loss Sustained	Loss Previously Applied	Loss Remaining	Available This Year
12/31/2009	219,713	107,971	111,742	111,742
12/31/2010	74,585	0	74,585	74,585
12/31/2011	0	0	0	0
12/31/2012	0	0	0	0
12/31/2013	41,584	0	41,584	41,584
12/31/2014	24,020	0	24,020	24,020
12/31/2015	291,833	0	291,833	291,833
12/31/2016	339,603	0	339,603	339,603
NOL Carryover Available This Year			883,367	883,367

OneHope, Inc.
EIN 65-0246247
2017 Form 990-T
Charitable Contributions Carryover Schedule

Year	Excess Contributions	Excess Utilized	Excess Contributions Carryover
2011	507,186	-	507,186
2012	1,043,256	-	1,550,442
2013	985,866	-	2,536,308
2014	-	-	2,536,308
2015	-	-	2,536,308
2016	1,758	-	2,538,066
Jan - Mar 2017 Contributions	-	-	2,538,066

ATTACHMENT – OneHope, Inc. 2017 Form 990-T

Section 1.263(a)-1(f) de minimis safe harbor election

OneHope, Inc.
600 SW 3rd Street
Pompano Beach, FL 33060

EIN: 65-0246247

For the tax year ended March 31, 2017.

The Organization is making the de minimis safe harbor election under Section 1.263(a)-1(f).

ATTACHMENT – OneHope, Inc. 2017 Form 990-T

OneHope, Inc.

EIN: 65-0246247

2017 Form 990-T

Statement Pursuant to Reg. §1.381(b)-1(b)(2)

ELECTION OF DATE OF DISTRIBUTION OR TRANSFER PURSUANT TO §1.381(b)-1(b)(2)

OneHope, Inc. (EIN 65-0246247) and OneHope, Inc. (EIN 27-1398241) elect to determine the date of distribution or transfer under §1.381(b)-1(b)(2). Such date is April 1, 2017.

ATTACHMENT -- OneHope, Inc. 2017 990-T

OneHope, Inc.

EIN: 65-0246247

2017 Form 990-T

Statement Pursuant to Reg. §1.368-3(a)

**STATEMENT PURSUANT TO REG. §1.368-3(a)
BY ONEHOPE, INC. (EIN: 65-0246247)
A CORPORATION PARTY TO A REORGANIZATION**

Pursuant to Regulation §1.368-3(a), the following information is provided.

1. The name and EIN of all parties to the reorganization:

Name: OneHope, Inc.

EIN: 65-0246247

Name: OneHope, Inc.

(f/k/a OneHope Coalition of
Transformational Churches, Inc.)

EIN: 27-1398241

2. Date of the reorganization: April 1, 2017

3. The aggregate fair value and basis of the assets, stock, or securities of the target corporation transferred in the transaction:

Fair market value: \$12,274,027

Basis: \$11,926,718

None of the assets, stock, or securities of the target corporation transferred in the transaction are of the types described in Reg. §1.368-3(a)(3)(i), (ii), or (iii).

4. The date and control number of any private letter ruling(s) issued by the IRS in connection with this reorganization:

None - not applicable.