Form 990

OMB No. 1545-0047

2016

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For the	2016 calen	dar year, or tax	year begi	nning		, 2016	i, and	ending	3			1	
В	Check if a	applicable:	C Name of organiz	ation FI	LTER OF	HOPE, IN	С.				D Emplo	yer iden	tification number	
	Addr	ress change	Doing business	as							37-	1751	688	
	Nam	ne change	Number and stre	et (or P.O. bo	x if mail is not del	ivered to street ad	dress)		Room/su	rile	E Teleph			
	Initia	al return	P. O. BOX	20145							(20	5) 3	310-4950	
	Final	return/terminated			, country, and ZIP	or foreign postal of	ode				(20	5 / 5	710 1900	
	Ame	ended return	TUSCALOOSA	4			AL	35.	402		G Gross	eceints	\$1,259,36	53
	Appli	ication pending	F Name and addre		l officer:			- 55		H(a) Is this a	group return			1
		0 7	BART SMELLE	4 8		TE THISCAL	a apon	L 35			subordinates attach a list. (10	
ī	Tax-ex	empt status	X 501(c)(3)	501(c) (nsert no.)	4947(a)(1) or		527	If 'No,' a	attach a list. (see instr	ructions)	
J			W.FILTEROF			risert no.)	1747 (d)(1) 01			I(a) Croup o	exemption nu	b		
K		f organization:	X Corporation	Trust	Association	Other >	Tr.	V	formation	••••		200-88-88-8		T
	art I	Summar		riust	Association	Other		rear or	tormauon	2014	i lat s	state of le	legal domicile: A	Ь
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Activities & Governance	SUSTAINABILITY)													
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∞∀	4 N		ependent voting									4		6
ties	5 To		of individuals em									5		4
ţi	6 To	otal number o	of volunteers (est	timate if ne	ecessary)							6		0
Ac			d business reven									7a		0.
	b No	et unrelated l	business taxable	income fro	om Form 990	-T, line 34						7b		0.
										Pr	ior Year	- We-We-19	Current \	/ear
ø			and grants (Part '								217,4	95.	840),151.
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eve			come (Part VIII, co	100 TOO								0.		
۳.			(Part VIII, colum	25 15			155					0.	M 11 200 50 200 000	
			 add lines 8 thr 								618,7	15.	1,259	3,363.
			nilar amounts pai			The second of the second of the second						0.		
	14 Be	enefits paid to	o or for members	(Part IX, o	column (A), lir	ne 4)						0.		
s	15 Sa	alaries, other	compensation, e	employee b	enefits (Part	IX, column (A), lines 5-10))			154,9	27.	234	,238.
Expenses	16a Pr	ofessional fu	ındraising fees (F	art IX, col	umn (A), line	11e)						0.		
be	b To	otal fundraisir	ng expenses (Pai	rt IX. colun	nn (D), line 2	5) ►	3	4.2	37					
М			s (Part IX, colum					-		- In the state of	350,6	07	013	2,613.
		• • • • • • • • • • • • • • • • • • • •	s. Add lines 13-17	, ,		a management					505,6	-		
		155	expenses. Subtra	- 18		2. 27	20							5,851.
- 0	13 116	sveriue less e	expenses. Subtra	ict line 10	nomine 12		· · · · · · ·	· · ·	• • •	n	113,1			,512.
ts o	20 To	stal accole /D	art X, line 16)							Beginning	of Current		End of Y	
Bal			(Part X, line 26)								7,7			,929.
Not Assets or Fund Balances												Ge083		,316.
			und balances. Su	ibtract line	21 from line	20				2000	113,10	01.	225	<u>,613.</u>
		Signature		P 7754 1				Gern St				0, 0		
Under	penalties of	of perjury, I decla ration of preparer	re that I have examine (other than officer) is t	d this return, i	including accompa	anying schedules a	and statements, knowledge,	and to t	the best o	f my knowled	dge and belie	f, it is tru	ue, correct, and	
								7,51 3		To s	72707 17 127 17	100		
٠.		Signature	of officer							Date	/15/17			
Sig	n													
Her	е		SMELLEY rint name and title							PRESI	DENT	200		
		Print/Type pre			Preparer's signa	luca		Date					DTIN	
		Secretary Company of the Company of	NO OWNERS ACCOUNTED		Preparer's signa	iture					Check]"	PTIN	
Paid			A. MILLER					108/	16/1	/ s	elf-employed	I	P01266616	
	parer	Firm's name	THE MIT											
JSe	Only	Firm's address	2903 7T	H STRE	ET					F	irm's EIN		1030242	
			TUSCALO	OSA		A.	L 35401	1		P	hone no.	(205) 345-606	50
Иау	the IRS	discuss this r	return with the pr	eparer sho	own above? (see instructior	ns)						X Yes	No

	990 (2016) FILTER OF HOPE, INC.	37-1751688	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	CLEAN WATER, JOB CREATION, EDUCATION AND MINISTRY PROGRAMS FOR	PHOSE_LIVING	
	IN ABJECT POVERTY WORLDWIDE (SEE SCHEDULE O FOR VISIONS AND		
	SUSTAINABILITY)		
	Did the organization undertake any significant program services during the year which were not listed on the	neine	
_	Form 990 or 990-EZ?		V No
	If 'Yes,' describe these new services on Schedule O.	· · · · · · · · l	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	s? Yes	X No
	If 'Yes,' describe these changes on Schedule O.	5	A NO
4	Describe the organization's program service accomplishments for each of its three largest program services. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	, as measured by expense others, the total expenses	es.
	and revenue, if any, for each program service reported.	эт э	'
4 a	(Code:) (Expenses \$ 942,918. including grants of \$ 0.)	Revenue \$ 41	9,212.)
	DISTRIBUTING HOUSEHOLD WATER FILTERS, TRAINING AND EDUCATING FAM		,
	LIVING IN ABJECT POVERTY, ON THE IMPORTANCE OF SAFE CLEAN DRINK		
	WATER AND BASIC SANITATION AND HYGIENE TO PREVENT SICKNESS AND I		
4 b	And the state of t	Revenue \$	0.)
	TO FUND FULL AND PART-TIME MISSIONARIES AND STAFF SERVING IN 3RD		
	COUNTRIES HELPING DISTRIBUTE WATER FILTERS, OVERSEE THE INITIATI		
	FILTER OF HOPE AND TRAIN INDIGINOUS LEADERS TO OWVERSEE ALL PROG	RAMS	
	AND PROJECTS FOR MAXIMUM SUSTAINABILITY.		
10	(Code:) (Expenses \$ including grants of \$) (F	Revenue \$	
40	(Code) (Expenses φ) (including grains of φ) (including grains of φ)	tevende y	/
79			
10			
4 d (Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
	Total program service expenses ► 1,049,747.		

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11a		Х
	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
1	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
i	F Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		X
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		X
	o Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
k	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х

Form 990 (2016) FILTER OF HOPE, INC. Part IV Checklist of Required Schedules (continued)

				Yes	No
2	20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
	b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
2	!1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
2	2	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
2	3	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
2	4 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a.	24a		X
	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d	Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		
2	5 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
		Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		X
26		Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	26		X
27		Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	3	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
	b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
	C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29)	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Χ
30		Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	-	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32		Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33		Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	١ ٤	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35	a [Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Χ
	b l	f 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		Х
36	5	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37		Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is reated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	١	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
		mestament but because with the same and the same same same same same same same sam	100000000000000000000000000000000000000	20 /00	

			Ţ	Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0			
	b Enter the number of Forms W-2G included in line 1a, Enter -0- if not applicable	0	A S		
,	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	. 1	С		
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a	4			
i	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2	b	Х	100 2000
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	100			
3 :	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 :	а		X
1	b If 'Yes,' has it filed a Form 990-T for this year?	31	b		
4 8	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 :	а		X
ŀ	b If 'Yes,' enter the name of the foreign country: ►		T S	759	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5 a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 8	а		X
ŀ	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 l	b		Χ
•	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 (С		
6 a	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a	a		Х
lk	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	. 6 b	b		
7	Organizations that may receive deductible contributions under section 170(c).	12.5		356	11/2
(1 <u>44</u>	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and				
ä	services provided to the payor?	. 7 a	а		X
k	o If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		5		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 0	3		Х
c	d If 'Yes,' indicate the number of Forms 8282 filed during the year				
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	a		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		25075005	Χ
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	. 7 g	3		Х
	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	. 7h	1		Х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring				
	organization have excess business holdings at any time during the year?	8	_		
	Sponsoring organizations maintaining donor advised funds.		HE	200 8	
	Did the sponsoring organization make any taxable distributions under section 4966?	9 a	+	\dashv	
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b	<u>, </u>		
	Section 501(c)(7) organizations. Enter:				
	Initiation fees and capital contributions included on Part VIII, line 12				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b				
	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders	-			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a	100-1		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year				
	Section 501(c)(29) qualified nonprofit health insurance issuers.	15.50			
а	Is the organization licensed to issue qualified health plans in more than one state?	13 a	34.5	100	
	Note. See the instructions for additional information the organization must report on Schedule O.				
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans				
	Enter the amount of reserves on hand		1500		77
	Did the organization receive any payments for indoor tanning services during the tax year?	14 a	+	_	X
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b			

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 6 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X Did the organization make any significant changes to its governing documents 4 X 5 X Did the organization become aware during the year of a significant diversion of the organization's assets? . . . X 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a X b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8 a 8 b X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No X 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12 a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 120 13 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a X 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16 a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal lax law, and take steps to safeguard the 16 b organization's exempt status with respect to such arrangements?................. Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Other (explain in Schedule O) X Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: 20 2923 NORMANDY PLACE TUSCALOOSA (205) 887-1184 BART SMELLEY

Form 990 (2016) F	LUTER	() h'	HOPE.	TNC
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37-1751688

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

employees; and former such persons.									
Check this box if neither the organization nor any	related organi	zalio	n co	mpe	ensa	ated any	current officer, dire	ector, or trustee.	
				(C))				
(A) Name and Title	(B) Average hours per	thar	one s both	box.	unles:	eck more s person and a ee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
		or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
_(1)_BART_SMELLEY	60.00				111				5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5
DIRECTOR	0.00	Х					68,219.	0.	0.
(2) VICKY PATTERSON	5.00								
BOARD MEMBER	0.00			Х			0.	0.	0.
(3) BONY BARRINEAU BOARD MEMBER	$\frac{5.00}{0.00}$			Х			0.	0.	0.
(4) STEVE HILLS	5.00								
BOARD MEMBER	0.00			Х			0.	0.	0.
(5) MICHAEL BOWNES BOARD MEMBER	<u>5.00</u>			Х			0.	0.	0.
(6) RON BUCK BOARD MEMBER	5.00			Х			0.	0.	0.
(7) ALAN CUNNINGHAM BOARD MEMBER	<u>5.00</u> 0.00			Х			0.	0.	0.
(8)									
(9)									
(10)									3555
(11)									
(12)									
(13)									
(14)									30.551070 a

Part VII Section A. Officers, Directors, 17	ustees,	Key	En	npı	oye	es,	an	d Highest Con	npensated Emp	loyees
(A) Name and title	Average hours per	box	k, unle	Pos check ess pe	erson	than is both	n an	(D) Reportable	(E) Reportable	(F) Estimated
	week (list any hours for related organiza - tions below dotted line)	or director		т		employee employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(15)										
(16)										
(17)									- Marin - Mari	
(18)										
(19)										336.
(20)										3777
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total							> -	68,219.	0.	0.
d Total (add lines 1b and 1c)		٠.				'		68,219.	0.	0.
2 Total number of individuals (including but not limited from the organization ▶ 0	to those li	sted	abov	ve) v	who	rece	ived	more than \$100,0	00 of reportable com	pensation
3 Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such inc					e, o	r hig	hest	compensated emp	oloyee 	Yes No
4 For any individual listed on line 1a, is the sum of reporthe organization and related organizations greater the such individual	an \$150,0	00? /	f 'Ye	s,'c	comp	olete	Sch	edule J for		4 X
5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co	mpensatio	n fro	m ar	าу น	nrela	ated	orga	anization or individu		
Section B. Independent Contractors										
1 Complete this table for your five highest compensate compensation from the organization. Report compen	d indepen- sation for	dent the c	cont alen	ract dar	ors t year	hat r end	ecei ing v	ived more than \$10 with or within the or	0,000 of ganization's tax yea	r.
(A) Name and business addres	SS							(B) Description of	services ((C) Compensation
				20011			+			
Total number of independent contractors (including b \$100,000 of compensation from the organization	ut not limit	led to	tho	se li	sted	abo	ve) v	who received more	than	
\$100,000 of compensation from the organization		FΔ010	00 14	1/16/1	16					Form 990 (2016)

	Check if Schedule O contains a response or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1 a Federated campaigns 1 a				
Gra	b Membership dues 1 b				
ts,	c Fundraising events 1c				
is is	d Related organizations 1 d e Government grants (contributions) 1 e				
Sin	e Government grants (contributions) 1 e	-			
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, gifts, grants, and similar amounts not included above . 1f 840,151.				
ontr	g Noncash contributions included in lines 1a-1f: \$				
<u>2</u> <u>2</u>		840,151.			
Program Service Revenue	Business Code	410.010	0		410.010
}eve	b WATER FILTERS PROJECT 423620	419,212.	0.	0.	419,212.
ce		 			
eΝ	d	 			
SE	e				
gra	f All other program service revenue				
Pro	g Total. Add lines 2a-2f	419,212.			
	3 Investment income (including dividends, interest and				
	other similar amounts)				
	4 Income from investment of tax-exempt bond proceeds >				
	5 Royalties				
	6 a Gross rents				
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)	(SCASE ACTIVE OF REMARKS			
	7 a Gross amount from sales of (i) Securities (ii) Other		Now you want to be a second or the second of the second or		
	assets other than inventory				
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				***************************************
evenue	8 a Gross income from fundraising events (not including \$				
Kel	of contributions reported on line 1c).				
	See Part IV, line 18 a				
Other R	b Less: direct expenses b				
ō	c Net income or (loss) from fundraising events ▶				
	9 a Gross income from gaming activities. See Part IV, line 19 a				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities ▶				
	10 a Gross sales of inventory, less returns				
	and allowances a				
	b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory Miscellaneous Revenue				
	Miscellaneous Revenue Business Code		Av.		
	b		-		
	~				
	d All other revenue				
	e Total. Add lines 11a-11d		STREET, STREET, ST		
.	12 Total revenue. See instructions	1,259,363.	0.	0.	419.212.

Part IX | Statement of Functional Expenses

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	76 000	F2 000	15 400	7 700
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	76,999.	53,899.	15,400.	7,700.
7	Other salaries and wages	120,013.	87,639.	16,187.	16,187.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	40.00			
9	Other employee benefits	8,406.	5,884.	1,681.	841.
10	Payroll taxes	28,820.	17,292.	11,528.	0.
11	Fees for services (non-employees):				
a	Management				
ŀ	Legal	1,011.	0.	1,011.	0.
C	Accounting	4,575.	0.	4,575.	0.
2.5	Lobbying				
	Professional fundraising services. See Part IV, line 17 .				
17	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	10,027.	8,086.	1,941.	0.
12	Advertising and promotion	19,303.	15,442.	0.	3,861.
13	Office expenses	7,246.	1,253.	4,740.	1,253.
14	Information technology				- management of the state of th
15	Royalties				
16	Occupancy				W. 750
17	Travel	507,713.	501,125.	3,294.	3,294.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	375.	375.	0.	0.
	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization				
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	FILTER EXPENSE	213,698.	213,698.	0.	0.
	SHIPPING FILTERS	7,348.	7,348.	0.	0.
	SCHOLARSHIP - LA GUERRE	27,575.	27,575.	0.	0.
d	DUES & SUBSCRIPTIONS	1,061.	0.	1,061.	0.
е	All other expenses	112,681.	110,131.	1,449.	1,101.
25	Total functional expenses. Add lines 1 through 24e	1,146,851.	1,049,747.	62,867.	34,237.
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	47,409.	1	210,430.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	13,080.	4	5,529.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
2	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	60,331.	8	95,970.
As	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
- 1	b	Less: accumulated depreciation 10 b		10 c	
	11	Investments – publicly traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11	7/	13	
	14	Intangible assets	200 W	14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	120,820.	16	311,929.
\neg	17	Accounts payable and accrued expenses	7,635.	17	86,316.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
귀	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	-	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	84.	25	
	26	Total liabilities. Add lines 17 through 25	7,719.	26	86,316.
ces		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	113,101.	27	225,613.
Bal	28	Temporarily restricted net assets		28	
힏		Permanently restricted net assets		29	
Net Assets or Fund Balan		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
S	30	Capital stock or trust principal, or current funds		30	
8	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
et		Total net assets or fund balances	113,101.	33	225,613.
_	34	Total liabilities and net assets/fund balances	120,820.	34	311,929.

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Form 990 (2016)

	m 990 (2016) FILTER OF HOPE, INC.	37-1751688			Page 12	
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				[
1	the second of th		1	1,2	59,363.	
2	(3), 110 20)		2		46,851.	
3	Revenue less expenses. Subtract line 2 from line 1		3	7870 00 100	12,512.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4		13,101.	
5	Net unrealized gains (losses) on investments		5			
6	Donated services and use of facilities		6			
7	Investment expenses		7			
8	Prior period adjustments	.	8			
9	Other changes in net assets or fund balances (explain in Schedule O)		9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
Da	rt XII Financial Statements and Reporting	ب ـ	10	2.	25,613.	
Га						
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.					
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed o	n a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
k	Were the organization's financial statements audited by an independent accountant?			2 b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate					
	basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis					
c	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a	udit		ALCO DE LA		
	review, or compilation of its financial statements and selection of an independent accountant?			2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?	gle 		3 a	х	
b	of Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required	d audi	t			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b		
BAA				Form 9	990 (2016)	