

**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.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**2022**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**A** For the 2022 calendar year, or tax year beginning **07/01/22**, and ending **06/30/23**

**B** Check if applicable:

- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

**C** Name of organization:

**Hope Restorations, Inc.**

Doing business as

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

**P. O. Box 1656**

Room/suite

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

**Kinston NC 28503**

**D** Employer identification number

**47-4619038**

**E** Telephone number

**252-341-7042**

**G** Gross receipts \$ **714,429**

**F** Name and address of principal officer:

**Christopher Jenkins  
6046 J D Sutton Rd  
Grifton NC 28530**

**H(a)** Is this a group return for subordinates?  Yes  No

**H(b)** Are all subordinates included?  Yes  No

If "No," attach a list. See instructions

**I** Tax-exempt status:

501(c)(3)  501(c) ( ) (insert no.)  4947(a)(1) or  527

**J** Website:

**N/A**

**K** Form of organization:

Corporation  Trust  Association  Other

**H(c)** Group exemption number

**L** Year of formation: **2015** **M** State of legal domicile: **NC**

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>Acquiring houses to be renovated by employed adults recovering from addictions and then to be rented or sold to struggling families in our area.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>10</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>10</b>
	<b>5</b> Total number of individuals employed in calendar year 2022 (Part V, line 2a)	<b>5</b>	<b>14</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>0</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0</b>
<b>7b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>892,138</b>	<b>397,623</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>114,945</b>	<b>82,984</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>-20,694</b>	<b>49,078</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>1,145,424</b>	<b>699,433</b>
	<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>8,624</b>
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)			<b>0</b>
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		<b>524,652</b>	<b>540,471</b>
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)			<b>0</b>
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)		<b>0</b>	
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		<b>437,451</b>	<b>570,146</b>
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>970,727</b>	<b>1,110,617</b>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>174,697</b>	<b>-411,184</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	<b>1,382,063</b>	<b>1,001,051</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>32,195</b>	<b>62,367</b>
		<b>1,349,868</b>	<b>938,684</b>

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer

**Christopher Jenkins**

**Executive Director**

**9/24/23**  
Date

**Paid Preparer Use Only**

Print/Type preparer's name

**JEFF HALE**

Preparer's signature

**JEFF HALE**

Date

**09/21/23**

Check  if PTIN

self-employed

**P01405628**

Firm's name

**Jeff Hale, CPA, PA  
1100 Hardee Rd., Suite 102  
Kinston, NC 28504**

Firm's EIN

**56-1529965**

Firm's address

Phone no.

**252-523-9061**

May the IRS discuss this return with the preparer shown above? See instructions

Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.