COPY

Form **990**

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2010 calendar year, or tax year beginning 7/01 , 2010, and ending 6/30 , 2011

B Check if applicable:
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

SHARED HOPE INTERNATIONAL
P.O. BOX 65337
VANCOUVER, WA 98665

D Employer Identification Number: 91-1938635

E Telephone number: 360-693-8100

G Gross receipts $ 2,020,688.

F Name and address of principal officer: LINDA A. SMITH
P.O. BOX 65337 VANCOUVER, WA 98665

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) Are all affiliates included? [ ] Yes [ ] No
If 'No,' attach a list. (see instructions)

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) ◄ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ► WWW.SHAREDHOPE.ORG

H(c) Group exemption number ►

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ►

L Year of Formation: 1998

M State of legal domicile: WA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: SHARED HOPE INTERNATIONAL EXISTS TO RESCUE AND RESTORE WOMEN AND CHILDREN IN CRISIS. WE ARE LEADERS IN A WORLDWIDE EFFORT TO PREVENT AND ERADICATE SEX TRAFFICKING AND SLAVERY THROUGH EDUCATION AND PUBLIC AWARENESS.

2 Check this box ► [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	7
	4	Number of independent voting members of the governing body (Part VI, line 1b)	5
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	28
	6	Total number of volunteers (estimate if necessary)	125
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,877,771.	1,985,273.
	9	Program service revenue (Part VIII, line 2g)		4,179.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,087.	2,927.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,880,858.	1,992,379.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	310,105.	536,205.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	700,682.	839,570.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ► 182,816.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	761,826.	738,330.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,772,613.	2,114,105.
	19	Revenue less expenses. Subtract line 18 from line 12	108,245.	-121,726.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	813,473.	700,259.
	21	Total liabilities (Part X, line 26)	132,221.	140,733.
	22	Net assets or fund balances. Subtract line 21 from line 20	681,252.	559,526.

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

Linda A Smith — Signature of officer — Date: NOV. 14, 2011

LINDA A. SMITH — Type or print name and title. — PRES/EXEC. DIR

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [X] if self-employed	PTIN
TERRENCE L KUENZI				N/A

Firm's name ► KUENZI & COMPANY, LLC
Firm's address ► 650 HAWTHORNE AVENUE SE SUITE 110
SALEM, OR 97301
Firm's EIN ► N/A
Phone no. (503) 399-7306

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III. [X]

1 Briefly describe the organization's mission:

SHARED HOPE INTERNATIONAL EXISTS TO RESCUE AND RESTORE WOMEN AND CHILDREN IN CRISIS. WE ARE LEADERS IN A WORLDWIDE EFFORT TO PREVENT AND ERADICATE SEX TRAFFICKING AND SLAVERY THROUGH EDUCATION AND PUBLIC AWARENESS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

If 'Yes,' describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 944,199. including grants of $) (Revenue $)

SEE SCHEDULE O

4b (Code:) (Expenses $ 399,983. including grants of $ 373,306.) (Revenue $)

SEE SCHEDULE O

4c (Code:) (Expenses $ 198,642. including grants of $ 162,899.) (Revenue $)

DOMESTIC TRAFFICKING:

SHARED HOPE INTERNATIONAL (SHI) PARTNERED WITH ORGANIZATIONS ACROSS THE UNITED STATES TO FUND STREET OUTREACH FOR AT-RISK AND TRAFFICKED WOMEN AND CHILDREN. THESE PROGRAMS LITERALLY MEET THE GIRLS WHERE THEY ARE AND PROVIDE RESOURCE HOTLINES, CLOTHING, FOOD, SHELTER PLACEMENT AND MEDICAL CARE. PARTNERS WORK TO SUPPORT GIRLS IN ORDER FOR THEM TO ESCAPE A LIFE OF BRUTALITY, CONTROL AND SEXUAL VIOLENCE. RESCUE FALLS SHORT WITHOUT PROPER RESTORATION. THAT IS WHY SHI HAS COMMITTED TO PROVIDING HOLISTIC, LONG-TERM, SURVIVOR-INFORMED CARE FOR VICTIMS OF DOMESTIC MINOR SEX TRAFFICKING. FROM THERAPY TO HOMESCHOOLING AND BEYOND, GIRLS WERE GIVEN MUCH-NEEDED RESOURCES AS WELL AS LOVE, AFFECTION AND A SAFE HOME TO LIVE IN.

4d Other program services. (Describe in Schedule O.) SEE SCHEDULE O

(Expenses $ 160,396. including grants of $) (Revenue $)

4e Total program service expenses ► 1,703,220.

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	X	
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		X
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		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If 'Yes,' complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21; 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		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If 'Yes,' complete Schedule D, Part V*	10	X	
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	X	
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*	11b		X
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*	11c		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*	11d	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If 'Yes,' complete Schedule D, Part X*	11e	X	
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*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If 'Yes,' complete Schedule D, Parts XI, XII, and XIII*	12a		X
b	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, XII, and XIII is optional*	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If 'Yes,' complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *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 assistance to any organization or entity located outside the United States? *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 assistance to individuals located outside the United States? *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		X
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		X
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		X
20 a	Did the organization operate one or more hospitals? *If 'Yes,' complete Schedule H*	20		X
b	If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If 'Yes,' complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If 'Yes,' complete Schedule I, Parts I and III*	22		X
23	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		X
24a	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, and that was issued after December 31, 2002? *If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
25a	**Section 501(c)(3) and 501(c)(4) 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		X
b	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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *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 a grant selection committee member, or to a person related to such an individual? *If 'Yes,' complete Schedule L, Part III*	27		X
28	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):			
a	A current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV*	28a		X
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		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If 'Yes,' complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If 'Yes,' complete Schedule M*	30		X
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		X
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	X	
34	Was the organization related to any tax-exempt or taxable entity? *If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
a	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* [X] Yes [ ] No			
36	**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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If 'Yes,' complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V. ☐

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	17		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	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	28		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file.* (see instructions)			
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a		X
b	If 'Yes' has it filed a Form 990-T for this year? *If 'No,' provide an explanation in Schedule O*	3b		
4a	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)?	4a		X
b	If 'Yes,' enter the name of the foreign country: ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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?	6a		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	**Organizations that may receive deductible contributions under section 170(c).**			
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	**Section 501(c)(7) organizations.** Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	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 13b			
c	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If 'Yes,' has it filed a Form 720 to report these payments? *If 'No,' provide an explanation in Schedule O*	14b		

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.*

Check if Schedule O contains a response to any question in this Part VI ... X

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year ...	1a 7		
b	Enter the number of voting members included in line 1a, above, who are independent ...	1b 5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? ... SEE SCHEDULE O ...	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? ...	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? ...	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets? ...	5		X
6	Does the organization have members or stockholders? ...	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? ...	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? ...	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body? ...	8a	X	
b	Each committee with authority to act on behalf of the governing body? ...	8b	X	
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If 'Yes,' provide the names and addresses in Schedule O* ...	9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates? ...	10a		X
b	If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? ...	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? ...	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O			
12a	Does the organization have a written conflict of interest policy? *If 'No,' go to line 13* ...	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? ...	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this is done* ...	12c		X
13	Does the organization have a written whistleblower policy? ...	13		X
14	Does the organization have a written document retention and destruction policy? ...	14	X	
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 . SEE SCHEDULE O ...	15a	X	
b	Other officers of key employees of the organization ... SEE SCHEDULE O ...	15b	X	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? ...	16a		X
b	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? ...	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► SEE SCHEDULE O

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

X Own website X Another's website X Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. SEE SCHEDULE O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

► SHEILA AVERY 2906 E EVERGREEN BLVD VANCOUVER WA 98665 360-693-8100

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

Check if Schedule O contains a response to any question in this Part VII ☐

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

1a 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.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SUE HOTELLING DIRECTOR	1							0.	0.	0.
(2) LINDA A. SMITH PRES/EXEC. DIR	46	X		X				82,903.	0.	0.
(3) LES PETTIT DIRECTOR	1	X						0.	0.	0.
(4) MARJIE AUSTEN DIRECTOR	1	X						0.	0.	0.
(5) PASTOR RONALD L. HART DIRECTOR	1	X						0.	0.	0.
(6) DAVID AUSTEN SEC/TREASURER	1	X		X				0.	0.	0.
(7) DR. FERNANDO D. PROANO DIRECTOR	1	X						0.	0.	0.
(8) VERNON SMITH DIRECTOR	1	X						0.	0.	0.
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(cont)*

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Sch O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
(26)										
(27)										
(28)										
(29)										
1b Sub-total ►								82,903.	0.	0.
c Total from continuation sheets to Part VII, Section A ►								0.	0.	0.
d Total (add lines 1b and 1c) ►								82,903.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ► 0

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual*	3		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If 'Yes' complete Schedule J for such individual*	4		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If 'Yes,' complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ► 0

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns 1a				
	b Membership dues 1b				
	c Fundraising events 1c				
	d Related organizations 1d				
	e Government grants (contributions) 1e				
	f All other contributions, gifts, grants, and similar amounts not included above 1f 1,985,273.				
	g Noncash contributions included in lns 1a-1f: $ 27,470.				
	h **Total.** Add lines 1a-1f ►	1,985,273.			
PROGRAM SERVICE REVENUE		Business Code			
	2a DOMESTIC PUBLIC EDUCATION	611710	4,179.	4,179.	
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g **Total.** Add lines 2a-2f ►		4,179.		
	3 Investment income (including dividends, interest and other similar amounts) ►		3,069.		3,069.
	4 Income from investment of tax-exempt bond proceeds ►				
	5 Royalties ►				
		(i) Real	(ii) Personal		
	6a Gross Rents				
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) ►				
		(i) Securities	(ii) Other		
	7a Gross amount from sales of assets other than inventory	28,146.	21.		
	b Less: cost or other basis and sales expenses	27,470.	839.		
	c Gain or (loss)	676.	-818.		
	d Net gain or (loss) ►	-142.			-142.
OTHER REVENUE	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 a				
	b Less: direct expenses b				
	c Net income or (loss) from fundraising events ►				
	9a Gross income from gaming activities. See Part IV, line 19 a				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities ►				
	10a 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	Business Code			
	11a				
	b				
	c				
	d All other revenue				
	e **Total.** Add lines 11a-11d ►				
	12 **Total revenue.** See instructions ►	1,992,379.	4,179.	0.	2,927.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 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 governments and organizations in the U.S. See Part IV, line 21	162,899.	162,899.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	373,306.	373,306.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	80,685.	69,995.	6,320.	4,370.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	632,810.	509,575.	87,661.	35,574.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	126,075.	102,266.	16,667.	7,142.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	13,865.	10,140.	3,725.	
13 Office expenses	106,626.	105,259.	880.	487.
14 Information technology	15,370.	12,366.	2,147.	857.
15 Royalties				
16 Occupancy	70,143.	56,141.	10,044.	3,958.
17 Travel	101,462.	91,369.	7,293.	2,800.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	4,598.	3,586.	1,012.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	22,577.	18,101.	3,218.	1,258.
23 Insurance	11,536.	9,300.	1,597.	639.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a PRINTING AND PUBLICATIONS	105,907.	40,595.	5,174.	60,138.
b PROFESSIONAL SERVICES	95,129.	18,695.	41,028.	35,406.
c CONTRACT LABOR	58,438.	44,612.	13,622.	204.
d POSTAGE AND SHIPPING	42,149.	14,465.	799.	26,885.
e TELEPHONE	18,771.	15,014.	2,723.	1,034.
f All other expenses	71,759.	45,536.	24,159.	2,064.
25 Total functional expenses. Add lines 1 through 24f	2,114,105.	1,703,220.	228,069.	182,816.
26 **Joint costs.** Check here ► [X] if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	213,270.	84,054.		129,216.

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
ASSETS	1	Cash – non-interest-bearing	200.	1	250.
	2	Savings and temporary cash investments	386,243.	2	453,299.
	3	Pledges and grants receivable, net	274,061.	3	122,055.
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	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)		6	
	7	Notes and loans receivable, net	2,035.	7	900.
	8	Inventories for sale or use	96,473.	8	41,176.
	9	Prepaid expenses and deferred charges	10,252.	9	11,115.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 157,315.			
	b	Less: accumulated depreciation — 10b: 121,296.	40,658.	10c	36,019.
	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		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,551.	15	35,445.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	813,473.	16	700,259.
LIABILITIES	17	Accounts payable and accrued expenses	67,740.	17	59,137.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	64,481.	25	81,596.
	26	**Total liabilities.** Add lines 17 through 25	132,221.	26	140,733.
NET ASSETS OR FUND BALANCES		**Organizations that follow SFAS 117, check here ► [X] and complete lines 27 through 29 and lines 33 and 34.**			
	27	Unrestricted net assets	355,867.	27	234,530.
	28	Temporarily restricted net assets	325,385.	28	324,996.
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ► [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	681,252.	33	559,526.
	34	Total liabilities and net assets/fund balances	813,473.	34	700,259.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,992,379.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,114,105.
3	Revenue less expenses. Subtract line 2 from line 1	3	-121,726.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	681,252.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	559,526.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII ☐

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► **Attach to Form 990 or Form 990-EZ.** ► **See separate instructions.**

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
SHARED HOPE INTERNATIONAL	91-1938635

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ 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 exempt 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).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I **b** ☐ Type II **c** ☐ Type III — Functionally integrated **d** ☐ Type III — Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? — 11g (i)		
(ii)	A family member of a person described in (i) above? — 11g (ii)		
(iii)	A 35% controlled entity of a person described in (i) or (ii) above? — 11g (iii)		

h Provide the following information about the supported organization(s).

	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in column (i) of your support? Yes	(v) No	(vi) Is the organization in column (i) organized in the U.S.? Yes	(vi) No	(vii) Amount of support
(A)										
(B)										
(C)										
(D)										
(E)										
Total										

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include 'unusual grants.')	2,167,221.	2,225,738.	2,104,124.	1,877,771.	1,985,272.	10,360,126.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 **Total.** Add lines 1 through 3	2,167,221.	2,225,738.	2,104,124.	1,877,771.	1,985,272.	10,360,126.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
6 **Public support.** Subtract line 5 from line 4						10,360,126.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	2,167,221.	2,225,738.	2,104,124.	1,877,771.	1,985,272.	10,360,126.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,988.	5,755.	6,424.	4,157.	3,069.	26,393.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PART IV	1,689.	7,392.		-251.	4,179.	13,009.
11 **Total support.** Add lines 7 through 10						10,399,528.

12 Gross receipts from related activities, etc (see instructions) ..... 12 0.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 14 99.6%

15 Public support percentage from 2009 Schedule A, Part II, line 14 ..... 15 99.7%

16a **33-1/3% support test – 2010.** If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☒

b **33-1/3% support test – 2009.** If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

17a **10%-facts-and-circumstances test – 2010.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ► ☐

b **10%-facts-and-circumstances test – 2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ► ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support.** (Add lns 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2009** Schedule A, Part III, line 17	18	%

19a **33-1/3% support tests – 2010.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

b **33-1/3% support tests – 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

ADDITIONAL EXPLANATION OF OTHER INCOME

REVENUE FROM EVENTS THAT COMBINE FUNDRAISING WITH AN EDUCATIONAL CAMPAIGN, SALE OF DONATED STOCK, OR GAIN/LOSS ON DISPOSAL OF PROPERTY.

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE	2010	2009	2008	2007	2006
EVENT INCOME	4,179.			7,192.	1,675.
INVENTORY SALES				200.	170.
NET GAIN LOSS		-251.			-156.
TOTAL	$ 4,179.	$ -251.	$ 0.	$ 7,392.	$ 1,689.

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► **Complete if the organization is described below.**

► **Attach to Form 990 or Form 990-EZ.** ► **See separate instructions.**

OMB No. 1545-0047

2010

Open to Public Inspection

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	Employer identification number
SHARED HOPE INTERNATIONAL	91-1938635

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. SEE PART IV

2 Political expenditures ► $

3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ► $ 0.

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► $ 0.

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If 'Yes,' describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c) , except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ► $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ► ☐ if the filing organization belongs to an affiliated group.

B Check ► ☐ if the filing organization checked box A and 'limited control' provisions apply.

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	1,558.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	41,816.	
c Total lobbying expenditures (add lines 1a and 1b)	43,374.	0.
d Other exempt purpose expenditures	2,265,208.	
e Total exempt purpose expenditures (add lines 1c and 1d)	2,308,582.	0.
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	265,429.	
g Grassroots nontaxable amount (enter 25% of line 1f)	66,357.	0.
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.	0.
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.	0.

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
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.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

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 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount				265,429.	265,429.
b Lobbying ceiling amount (150% of line 2a, column (e))					398,144.
c Total lobbying expenditures				43,374.	43,374.
d Grassroots nontaxable amount				66,357.	66,357.
e Grassroots ceiling amount (150% of line 2d, column (e))					99,536.
f Grassroots lobbying expenditures				1,558.	1,558.

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If 'Yes,' describe in Part IV.			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		
2 Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

PART I-A, LINE 1 - DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES

SHARED HOPE IS WORKING IN A NUMBER OF STATES TO SUPPORT THE DEVELOPMENT OF TARGETED LAWS. THE PROTECTED INNOCENCE LEGISLATIVE FRAMEWORK ASSURES THAT A SAFE ENVIRONMENT IS CREATED FOR CHILDREN BY PROSECUTING DEMAND AND THE TRAFFICKERS, IDENTIFYING THE CHILD AS THE VICTIM, AND DIRECTING THAT SERVICES AND SAFE SHELTER BE PROVIDED FOR THE VICTIM.

Part IV Supplemental Information *(continued)*

PART I-A, LINE 1 - DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES (CONTINUED)

IN ADDITION TO STATE LAW ADVOCACY, SHARED HOPE PURSUES FEDERAL LEGISLATION THAT WILL ALLOCATE RESOURCES TO VICTIMS OF SEX TRAFFICKING, CONTINUE TO STRENGTHEN THE FEDERAL RESPONSES TO SEX TRAFFICKING, AND SUPPORT THE CLOSING OF ANY GAPS IN PREVENTION OF TRAFFICKING, PROTECTION OF THE VICTIMS, AND PROSECUTION OF THE OFFENDERS.

Part IV **Supplemental Information** *(continued)*

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

SHARED HOPE INTERNATIONAL

Employer identification number

91-1938635

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

		Held at the End of the Tax Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► $ _____

(ii) Assets included in Form 990, Part X ► $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► $ _____

b Assets included in Form 990, Part X ► $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	86,068.	80,693.	0.		
b Contributions					
c Net investment earnings, gains, and losses	15,527.	7,223.			
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	1,886.	1,848.			
g End of year balance	99,709.	86,068.	0.		

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ► _____ %
b Permanent endowment ► 100.00 %
c Term endowment ► _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		X
(ii) related organizations	3a(ii)	X	
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?	3b	X	

4 Describe in Part XIV the intended uses of the organization's endowment funds. SEE PART XIV

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		45,682.	45,682.	0.
d Equipment		8,435.	8,435.	0.
e Other		103,198.	67,179.	36,019.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ►				36,019.

Part VII Investments—Other Securities. See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. *(Column (b) must equal Form 990 Part X, column (B) line 12.)* ►		

Part VIII Investments—Program Related. (See Form 990, Part X, line 13) N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, column (B) line 13.)* ►		

Part IX Other Assets. (See Form 990, Part X, line 15)

(a) Description	(b) Book value
(1)	
(2) DEPOSITS	2,838.
(3) OTHER ASSETS HELD FOR RESALE	500.
(4) OTHER RECEIVABLES	
(5) VISA CLEARING ACCOUNT	924.
(6) WEBSITE DEVELOPMENT	31,183.
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, column(B), line 15).* ►	35,445.

Part X Other Liabilities. (See Form 990, Part X, line 25)

(a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) ACCRUED PAYROLL TAXES	28,629.
(3) ACCRUED PTO	52,967.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, column (B) line 25).* ►	81,596.

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). SEE PART XIV

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII,column (A), line 12)	1,992,379.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2,114,105.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	-121,726.
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net). Add lines 4 through 8	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	-121,726.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	2,184,970.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b	192,591.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	192,591.
3	Subtract line 2e from line 1			3	1,992,379.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	1,992,379.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	2,306,696.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	192,591.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines 2a through 2d			2e	192,591.
3	Subtract line 2e from line 1			3	2,114,105.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	2,114,105.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART IV, LINE 1B - CONTRIBUTIONS OR OTHER ASSETS NOT INCLUDED ON B/S

SHARED HOPE FOUNDATION IS AN ASSOCIATED ORGANIZATION MANAGING THE ENDOWMENT FUND FOR SHARED HOPE INTERNATIONAL.

PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND

TO PROVIDE FOR THE HOUSING, EDUCATION, AND MEDICAL NEEDS OF YOUNG WOMEN RESCUED FROM HUMAN TRAFFICKING.

PART X - FIN 48 FOOTNOTE

THE ORGANIZATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. IN ADDITION, THE ORGANIZATION QUALIFIES FOR THE CHARITABLE CONTRIBUTION DEDUCTION UNDER SECTION 170(B)(1)(A)(VI) AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A)(2).

THE ORGANIZATION ADOPTED THE PROVISIONS OF FASB ACCOUNTING STANDARDS CODIFICATION (ASC) 740-10, INCOME TAXES, RELATING TO ACCOUNTING FOR UNCERTAIN TAX POSITIONS ON JANUARY 1, 2009, WHICH HAD NO FINANCIAL IMPACT TO THE ORGANIZATION. THE ORGANIZATION RECOGNIZES THE TAX BENEFIT FROM UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITIONS WILL BE SUSTAINED ON EXAMINATION BY THE TAX AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFIT IS MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN FIFTY PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT.

EFFECTIVE WITH THE YEAR ENDED JUNE 30, 2011, THE ORGANIZATION ELECTED THE EXPENDITURE TEST UNDER SECTION 501(H) AS AN ALTERNATIVE METHOD FOR MEASURING LOBBYING ACTIVITY. THE ELECTION PROVIDES A SPECIFIC DOLLAR AMOUNT THE ORGANIZATION CAN SPEND ON LOBBYING DURING THE YEAR WITHOUT THE BURDEN OF PROVING THE AMOUNT IS NOT SUBSTANTIAL. MANAGEMENT BELIEVES THE ORGANIZATION'S LOBBYING ACTIVITIES ARE WITHIN LIMITS ALLOWED BY RELEVANT TAX LAW.

THE ORGANIZATION FILES INCOME TAX RETURNS IN THE U.S. FEDERAL JURISDICTION. THE STATE OF WASHINGTON DOES NOT REQUIRE INCOME TAX FILINGS. GENERALLY, INCOME TAX FILINGS ARE SUBJECT TO FEDERAL EXAMINATION FOR THREE YEARS AFTER THE RETURNS ARE FILED. TAX RETURNS FILED FOR THE PERIODS ENDED JUNE 30, 2007 AND PRIOR ARE CONSIDERED CLOSED. NO PENALTIES AND INTEREST WERE ASSESSED ON TAX FILINGS FOR THE YEARS ENDED JUNE 30, 2011 AND 2010.

Part XIV Supplemental Information *(continued)*

Schedule F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

SHARED HOPE INTERNATIONAL

Employer identification number

91-1938635

Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . [X] Yes [ ] No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)				RESCUE AND RESTORATION	
(2) EAST ASIA AND				OF HUMAN TRAFFICKING	
THE PACIFIC (3)			PROGRAM SERVICES	VICTIMS RESCUE AND	64,304.
(4)				RESTORATION OF HUMAN	
(5) SOUTH ASIA			PROGRAM SERVICES	TRAFFICKING VICTIMS	217,002.
(6)				RESCUE AND RESTORATION	
CENTRAL AMERICA (7) AND THE				OF HUMAN TRAFFICKING	
CARIBBEAN (8)			PROGRAM SERVICES	VICTIMS	92,000.
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					373,306.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b) . . .	0	0			373,306.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2010

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 .... ▶☐

Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		CENTRAL AMERICA	RESCUE AND	37,000.	CASH WIRE PAYMENT			
(2)			RESTORATION OF					
(3)			HUMAN TRAFFICKING					
(4)			VICTIMS					
(5)		CENTRAL AMERICA	RESCUE AND	55,000.	CASH WIRE PAYMENT			
(6)			RESTORATION OF					
(7)			HUMAN TRAFFICKING					
(8)			VICTIMS					
(9)		EAST ASIA	RESCUE AND	64,304.	CASH WIRE PAYMENT			
(10)			RESTORATION OF					
(11)			HUMAN TRAFFICKING					
(12)			VICTIMS					
(13)		SOUTH PACIFIC	RESCUE AND R	4,200.	CASH WIRE			
(14)		SOUTH PACIFIC	RESCUE AND	148,120.	CASH WIRE PAYMENT			
(15)			RESTORATION OF					
(16)			HUMAN TRAFFICKING					

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. ▶ 7

3 Enter total number of other organizations or entities ▶ 0

BAA

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see instructions for Form 926)*	☐ Yes	☒ No
2	Did the organization have an interest in a foreign trust during the tax year? *If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see instructions for Forms 3520 and 3520-A)*	☐ Yes	☒ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*	☐ Yes	☒ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If 'Yes,' the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*	☐ Yes	☒ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*	☐ Yes	☒ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713)*	☐ Yes	☒ No

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete t his part to provide any additional information (see instructions).

PART I, LINE 2 - GRANTMAKERS EXPLANATION FOR GRANTS OUTSIDE US

THE ORGANIZATION REQUIRES ALL PARTNERS TO SUBMIT QUARTERLY REPORTS IN ACCORDANCE WITH SHARED HOPE INTERNATIONAL'S PRESCRIBED FORMAT. QUARTERLY REPORTS ARE REQUIRED FOR EACH PROGRAM ALONG WITH A BUDGET. THE PARTNERS' QUARTERLY REPORTS ALIGN TO THE SPECIFIC GRANT PROGRAM/PROJECT REQUIREMENTS OF SHARED HOPE INTERNATIONAL. IN ADDITION, SITE VISITS ARE MADE TO MONITOR THE GRANTEES' PROJECTS.

ADDITIONAL SUPPLEMENTAL INFORMATION

SCHEDULE F

PART I

LINE 3(F)

TOTAL EXPENDITURES ARE ACCOUNTED FOR ON AN ACCRUAL BASIS, ACCORDING TO HOW THE ORGANIZATION RECORDS AND ACCOUNTS FOR EXPENDITURES IN ITS FINANCIAL STATEMENTS.

TOTAL EXPENDITURES INCLUDE PRIMARILY GRANTS TO FOREIGN ORGANIZATIONS, AND ALLOCATIONS OF SALARIES, TRAVEL, COMMUNICATION, AND OTHER RELATED COSTS.

ALLOCATIONS OF COST ARE MADE ON THE BASIS OF WHERE THE ORGANIZATION'S EMPLOYEES SPEND THEIR TIME.

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NG VICTIMS					
			RESCUE AND					
			RESTORAT ION OF					
			HUMAN TRAFFICK		CASH			
		SOUTH PACIFIC	ING VICTIMS	58,182.	WIRE PAYMENT			
			RESCUE AND					
			RESTORAT ION OF					
			HUMAN TRAFFICK		CASH			
		SOUTH PACIFIC	ING VICTIMS	6,500.	WIRE PAYMENT			

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.
► Attatch to Form 990.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

SHARED HOPE INTERNATIONAL

Employer identification number

91-1938635

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. SEE PART IV

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed ..... ► [ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ON EAGLES' WINGS MINIST PO BOX 9737 ASHEVILLE, NC 28815	59-3628171		87,594.	0.			
(2) VERONICA'S VOICE PO BOX 172472 KANSAS CITY, MO 66117	20-3902846		50,930.	0.			
(3) YOUTH FOR TOMORROW 11835 HAZEL CIRCLE DRIV BRISTOW, VA 21036	52-1342268		20,000.	0.			
(4)							
(5)							
(6)							
(7)							
(8)							

2 Enter total number of section 501(c)(3) and government organizations ..... ► 3

3 Enter total number of other organizations ..... ► 0

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

THE ORGANIZATION REQUIRES ALL PARTNERS TO SUBMIT QUARTERLY REPORTS IN ACCORDANCE WITH SHARED HOPE INTERNATIONAL'S PRESCRIBED FORMAT. QUARTERLY REPORTS ARE REQUIRED FOR EACH PROGRAM ALONG WITH A BUDGET. THE PARTNERS' QUARTERLY REPORTS ALIGN TO THE SPECIFIC GRANT PROGRAM/PROJECT REQUIREMENTS OF SHARED HOPE INTERNATIONAL. IN ADDITION, SITE VISITS ARE MADE TO MONITOR THE GRANTEES' PROJECTS.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No. 1545-0047

2010

Open To Public Inspection

Name of the organization
SHARED HOPE INTERNATIONAL

Employer identification number
91-1938635

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded	X	2	27,470.	SALE AT FMV
10	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► (_____)				
26	Other ► (_____)				
27	Other ► (_____)				
28	Other ► ( )				

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29		
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		X
b	If 'Yes,' describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	X	
b	If 'Yes,' describe in Part II. SEE PART II			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

PART I, LINE 32 - HIRE AND USE OF THIRD PARTIES

A MORGAN STANLEY BROKER IS USED TO FACILITATE THE SALE OF DONATED SECURITIES.

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37.
► Attach to Form 990. ► See separate instructions.

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Open to Public Inspection

Name of the organization

SHARED HOPE INTERNATIONAL

Employer identification number

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Part I Identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) TRAFFICKING MARKETS, LLC PO BOX 65337					
(2) VANCOUVER, WA 98665 20-3248901	HUMAN RIGHTS	WA	0.	0.	SHARED HOPE INTERNATIONAL
(3)					
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	
						Yes	No
(1) SHARED HOPE FOUNDATION PO BOX 65337							
(2) VANCOUVER, WA 98665 41-2084596	FOUNDATION	WA	501(C)(3)	11A - TYPE I	N/A		X
(3)							
(4)							
(5)							
(6)							
(7)							

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) Disproportionate allocations? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) General or managing partner? No	(k) Percentage ownership
(1)												
(2)												
(3)												

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1)							
(2)							
(3)							

Part V Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1	During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to other organization(s)	1b		X
c	Gift, grant, or capital contribution from other organization(s)	1c		X
d	Loans or loan guarantees to or for other organization(s)	1d		X
e	Loans or loan guarantees by other organization(s)	1e		X
f	Sale of assets to other organization(s)	1f		X
g	Purchase of assets from other organization(s)	1g		X
h	Exchange of assets	1h		X
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		X
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		X
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		X
l	Performance of services or membership or fundraising solicitations by other organization(s)	1l		X
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		X
n	Sharing of paid employees	1n		X
o	Reimbursement paid to other organization for expenses	1o		X
p	Reimbursement paid by other organization for expenses	1p	X	
q	Other transfer of cash or property to other organization(s)	1q		X
r	Other transfer of cash or property from other organization(s)	1r		X

2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)	SHARED HOPE FOUNDATION	P	900.	
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
► Attach to Form 990 or 990-EZ.

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Open to Public Inspection

Name of the organization
SHARED HOPE INTERNATIONAL

Employer identification number
91-1938635

FORM 990 PART XI - FINANCIAL STATEMENT

SHARED HOPE INTERNATIONAL'S FINANCIAL STATEMENTS ARE PART OF THE CONSOLIDATED AUDITED FINANCIAL STATEMENTS OF SHARED HOPE INTERNATIONAL AND SHARED HOPE FOUNDATION. FORM 990 INSTRUCTIONS INDICATE THAT UNDER THESE CIRCUMSTANCES PART XI ANSWERS REGARDING THE AUDIT SHOULD BE "NO" AND NO RECONCILIATION IS REQUIRED ON SCHEDULE D. THE BOARD'S FINANCE COMMITTEE IS RESPONSIBLE FOR THE AUDIT PROCESS AND SELECTING THE AUDITING FIRM.

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

DOMESTIC PUBLIC EDUCATION:

FEW AMERICANS REALIZE THAT HUMAN TRAFFICKING IS SO PREVALENT IN THE UNITED STATES. SHARED HOPE INTERNATIONAL (SHI) UNDERSTANDS THAT VICTIMS ARE NOT INVISIBLE, JUST MISIDENTIFIED. BY EDUCATING COMMUNITIES, RAISING AWARENESS, ENGAGING KEY PLAYERS, AND FOCUSING ON DEMAND DETERRENCE, SHI IS GENERATING THE CHANGE NEEDED TO PUT A STOP TO CHILD SEX TRAFFICKING. SHI'S NATIONAL AWARENESS INITIATIVE WAS CARRIED ACROSS THE UNITED STATES INCORPORATING VISUAL, EDUCATIONAL, GRASSROOTS, POLICY AND MEDIA-CENTERED EVENTS TO MAXIMIZE IMPACT IN EACH LOCATION. SHI STAFF COLLABORATED WITH LOCAL ORGANIZATIONS AND CITY LEADERS TO SPREAD THE WORD THAT "KIDS ARE NOT FOR SALE" IN THEIR COMMUNITY. LAST FISCAL YEAR, SHI HOSTED THE CAMPAIGN IN WASHINGTON D.C. SHOWERING THE CITY WITH ADS TO RAISE PUBLIC AWARENESS ABOUT DOMESTIC MINOR SEX TRAFFICKING IN OUR NATION'S CAPITAL. SHI ALSO WENT TO CHICAGO AND HOSTED A WEEK FULL OF EVENTS, INCLUDING A PRESS CONFERENCE, CHICAGO-LAND TRUCK STOP OUTREACH, AND VOICES FOR FREEDOM, A YOUTH EVENT WHERE DOMESTIC MINOR SEX TRAFFICKING SURVIVORS SHARED THEIR STORIES WITH THE CITY. SHI HAS CONTINUED TO DEVELOP A WIDE VARIETY OF MATERIALS TO SPREAD AWARENESS AND PROVIDE EDUCATION ON DOMESTIC MINOR SEX TRAFFICKING, THE ISSUE OF DEMAND AND SEX SLAVERY AROUND THE WORLD. IN ADDITION TO HOSTING AND PARTICIPATING IN AWARENESS EVENTS, SHI PROVIDED MATERIALS TO SUPPORTERS AND FRIENDS

Name of the organization
SHARED HOPE INTERNATIONAL
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FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

TO RAISE AWARENESS IN THEIR OWN COMMUNITIES. SHI OFFERED A VARIETY OF TRAININGS APPLICABLE TO MANY DIFFERENT AGENCIES AND ORGANIZATIONS THAT MAY COME IN CONTACT WITH VICTIMS OF DOMESTIC MINOR SEX TRAFFICKING. TRAININGS ARE CUSTOMIZED TO FOCUS ON SPECIFIC ISSUES OR FOR SPECIFIC AUDIENCES (LAW ENFORCEMENT, JUVENILE JUSTICE, SOCIAL SERVICES AND NON-GOVERNMENTAL ORGANIZATIONS).

FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS

INTERNATIONAL RESCUE AND RESTORATION:

SHARED HOPE INTERNATIONAL (SHI) HAS WORKED AROUND THE WORLD SINCE 1998 TO RESCUE AND RESTORE VICTIMS OF SEXUAL SLAVERY. RECOGNIZING THE INTENSE TRAUMA EXPERIENCED BY VICTIMS THROUGH THE COMMERCIAL SEX INDUSTRY, SHI HAS FORMED LASTING PARTNERSHIPS WITH LOCAL ORGANIZATIONS IN FOUR COUNTRIES TO FUND PROGRAMS THAT OFFER HOLISTIC, LONG-TERM CARE TO WOMEN AND CHILDREN. EACH OF THESE PROGRAMS OFFERS A SURVIVOR-INFORMED MODEL OF CARE THAT FOCUSES ON COUNSELING, EMPOWERMENT AND HEALING. VILLAGES OF HOPE-SHI'S RESTORATION PROGRAMS ARE DEVELOPED AND OPERATED BY LOCAL PARTNERS, ADDRESSING BOTH IMMEDIATE AND LONG-TERM NEEDS OF EACH VICTIM OF TRAUMA, EXPLOITATION OR TRAFFICKING. RESTORATION SERVICES INCLUDE A HOLISTIC APPROACH WITH RESIDENTIAL FACILITIES, MEDICAL AND MENTAL HEALTH CARE, EDUCATION, JOB TRAINING AND ECONOMIC DEVELOPMENT PROGRAMS. VILLAGES OF HOPE ARE SAFE COMMUNITIES THAT OFFER REFUGE AND RESTORATION TO RESCUED VICTIMS OF SEXUAL SLAVERY AND THEIR CHILDREN. SHI CURRENTLY FUNDS VILLAGES OR HOMES OF HOPE IN FIJI, NEPAL, INDIA, AND JAMAICA.

HIV CLINICS- SHARED HOPE INTERNATIONAL PARTNERS WITH AN ORGANIZATION IN INDIA TO RUN BOTH A STATIONARY AND MOBILE HIV/AIDS CLINIC IN THE HEART OF MUMBAI'S RED LIGHT DISTRICT. BOTH CLINICS PROVIDE CONTACT TO HUNDREDS OF WOMEN AND CHILDREN IN THE INFAMOUS DISTRICT EVERY MONTH, OFFERING COMPASSION, COUNSELING AND LIFE-SAVING MEDICATIONS TO THOSE WHO NEED HELP OR WHO WISH TO FLEE THE SEX INDUSTRY. THE STATIONARY CLINIC PROVIDES A HAVEN FOR THOSE WOMEN INFECTED WITH HIV TO RECEIVE

Name of the organization: SHARED HOPE INTERNATIONAL

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FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS

PROPER TESTING, MEDICINE AND NUTRITION. IT IS THE ONLY AREA CLINIC OFFERING FREE TREATMENT. THE MOBILE CLINIC BRINGS SUPPLIES AND FOOD INTO REMOTE PARTS OF THE CITY, REACHING THOSE WHO MAY NOT BE BOLD ENOUGH TO VISIT THE STATIONARY CLINIC.

THE WIN INTERNATIONAL PROGRAM:

THE WOMEN'S INVESTMENT NETWORK (WIN) PROGRAM FOCUSES ON DEVELOPING SMALL BUSINESSES AROUND THE WORLD THAT PROVIDE TRAINING AND EMPLOYMENT FOR THE WOMEN IN SHI'S VILLAGES OF HOPE. STUDIES SHOW THAT PROVIDING VICTIMS WITH THE SKILLS AND MEANS OF CREATING THEIR OWN ECONOMIC SUSTAINABILITY HELPS REMOVE THE RISK OF RE-VICTIMIZATION FOUND IN AREAS OF EXTREME POVERTY AND EXPLOITATION. OUR RESIDENTS RECEIVE LEADERSHIP DEVELOPMENT AND FINANCIAL INDEPENDENCE. TODAY, SHI'S SUCCESSFUL WIN PROGRAM IS ACTIVE IN INDIA, JAMAICA, FIJI AND NEPAL. TRAINING PROGRAMS INCLUDE COSMETOLOGY, JEWELRY-MAKING, BAKERIES, PRINT SERVICES, TAILORING AND LEATHER-MAKING.

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

DOMESTIC (WIN) PROGRAMS:

THE DOMESTIC WIN PROGRAM IS DESIGNED TO HELP WOMEN DEVELOP SKILLS AND GAIN PRACTICAL JOB EXPERIENCE. TYPICALLY THESE WOMEN HAVE HAD DIFFICULT LIFE EXPERIENCES SUCH AS DOMESTIC ABUSE, CHILDHOOD ABUSE FROM THE COMMERCIAL SEX INDUSTRY, DRUG ADDICTION AND/OR TIME IN A CORRECTIONAL FACILITY. THESE EXPERIENCES HAVE LEFT THE WOMEN WITH LOW SELF-ESTEEM AND A LACK OF EMPLOYABLE SKILLS. MANY OF THE WOMEN WHO ENTER THE PROGRAM HAVE FACED HOMELESSNESS AND LOST CUSTODY OF THEIR CHILDREN DUE TO THEIR LIFE CIRCUMSTANCES. DURING THE YEAR ENDED JUNE 30, 2011, THE NINE-MONTH WIN TRAINING PROGRAM PROVIDED AN OPPORTUNITY FOR SIX WOMEN TO LEARN JOB SKILLS SO THEY CAN ENTER/REENTER THE WORK FORCE AND SUPPORT THEMSELVES AND THEIR FAMILIES. IN ADDITION TO JOB SKILLS, THESE WOMEN LEARNED HOW TO WORK IN A PROFESSIONAL ENVIRONMENT AND DEVELOPED PERSONAL LIFE SKILLS SO THEY CAN BUILD CONFIDENCE AND SELF-ESTEEM.

Name of the organization: SHARED HOPE INTERNATIONAL

Employer identification number: 91-1938635

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

DEFENDERS / INTERVENTION / PREVENTION:

THE DEFENDERS USA IS A NATIONAL INITIATIVE OF SHARED HOPE INTERNATIONAL TO MOBILIZE MEN IN THE FIGHT TO END DEMAND FOR PROSTITUTED CHILDREN. THESE MEN ARE TAKING A STAND TO IMPACT THE ISSUE BY HOSTING AWARENESS EVENTS AND ACTIVITIES ACROSS THE U.S. THAT SPECIFICALLY ENGAGE OTHER MEN - THESE INCLUDE MOTORCYCLE RALLIES, TAILGATING PARTIES AND TRUCK STOP OUTREACHES. DEFENDERS TAKE A PLEDGE THAT COMMITS THEM TO SAYING "NO" TO PORNOGRAPHY OR ANY SEXUAL ABUSE OF WOMEN AND CHILDREN AND TO PROTECTING COMMUNITIES FROM PREDATORS. TO DATE, OVER 2,000 MEN HAVE TAKEN THE PLEDGE.

INTERNATIONAL PUBLIC EDUCATION:

THE ORGANIZATION PROVIDED INFORMATION TO EDUCATE THE PUBLIC AND TO MOTIVATE AND PROVIDE OPPORTUNITIES FOR TAKING ACTION CONCERNING THE GLOBAL PROBLEM OF THE TRAFFICKING OF WOMEN AND CHILDREN FOR SEXUAL EXPLOITATION.

DOMESTIC MINOR SEX TRAFFICKING:

SHARED HOPE INTERNATIONAL(SHI) PARTNERS WITH DOMESTIC OUTREACH AND SHELTER PROVIDERS IN EFFORTS TO CARE FOR THE VICTIMS OF SEXUAL TRAFFICKING. SHI PROVIDES INFRASTRUCTURE SUPPORT AND NETWORKING OPPORTUNITIES TO SURVIVOR-LED NGOS TO ENHANCE THEIR OWN OUTREACHES AND HAS ORGANIZED AND FACILITATED THE RESTORATIVE SHELTER WORKING GROUP TO SHARE BEST PRACTICES AND TRAINING OPPORTUNITIES.

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

LINDA SMITH HAS A FAMILY RELATIONSHIP.

DAVID AND MARJIE AUSTIN HAVE A FAMILY RELATIONSHIP.

VERN SMITH HAS A FAMILY RELATIONSHIP BUT IS A NON-VOTING MEMBER.

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SHARED HOPE INTERNATIONAL

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FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

FORM 990 IS REVIEWED AND APPROVED BY THE BOARD'S FINANCE COMMITTEE PRIOR TO FILING.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS FOR CEO, EXEC. DIR., OR TOP MGT

THE BOARD OF DIRECTORS REVIEWS PREPARED COMPENSATION REPORTS AND APPROVES WAGE INCREASES FOR THE EXECUTIVE DIRECTOR.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEES

THE BOARD OF DIRECTORS REVIEWS PREPARED COMPENSATION REPORTS AND APPROVES WAGE INCREASES FOR KEY EMPLOYEES AND OFFICERS.

FORM 990 , PART VI, LINE 17 - LIST OF STATES WHICH THIS RETURN IS FILED

WI TN PA OR NJ MO MI MA IL AZ CA GA FL

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

FINANCIAL INFORMATION IS AVAILABLE AT SHARED HOPE'S WEBSITE AND THE FINANCIAL STATEMENTS AND OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON WRITTEN REQUEST.