

Check if Schedule O contains a response or note to any line in this Part III.....

See Schedule O

<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>

20,546,645

The Focus: HOPE Food Program is one of the nation's largest Commodity Supplemental Food Programs for low income senior citizens. Each month, it distributes food to approximately 41,000 senior citizens with a minimal number of women & children through its three distribution centers and one central warehouse. The program assists residents of Wayne, Oakland, Macomb and Washtenaw counties and is administered through the U.S. Department of Agriculture.

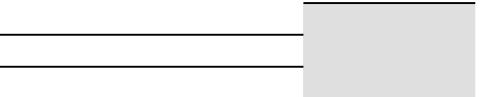
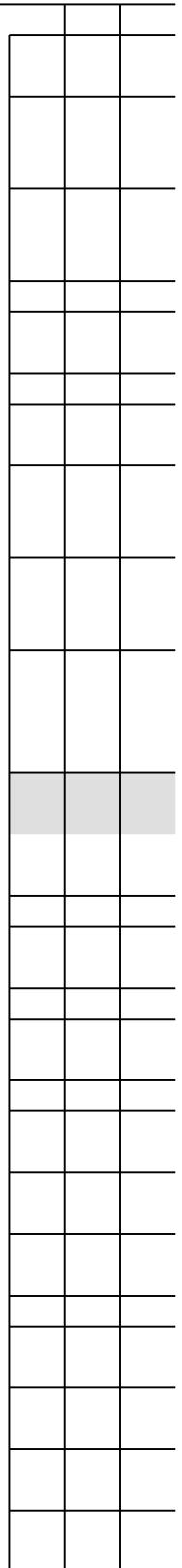
2,696,331

Since 1981, Workforce Development Education Job Training Focus: HOPE has graduated 15,000 students to date from our career programs. Our education and workforce development programs prepare individuals for success with a holistic approach to individuals looking to jump start their careers.

(Code) (Expenses \$ 5,150,778 including grants of \$) (Revenue \$)
Focus: HOPE's Early Learning Programs operating at the Center for Children and New Paradigm Glazer Academy, offers quality child care in an education environment for infants and children up to age five. Focus: HOPE offers Early Head Start/ Head Start (Birth to Five) a hours

Other program services (Describe on Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)
Total program service expenses

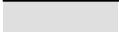


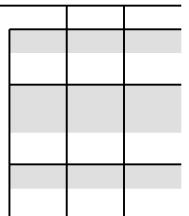
Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return

<input type="text"/>	<input type="text"/>
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If at least one is reported on line 2a, did the organization file all required federal employment tax returns?

Did the organization have unrelated business gross income of \$1,000 or more during the year?



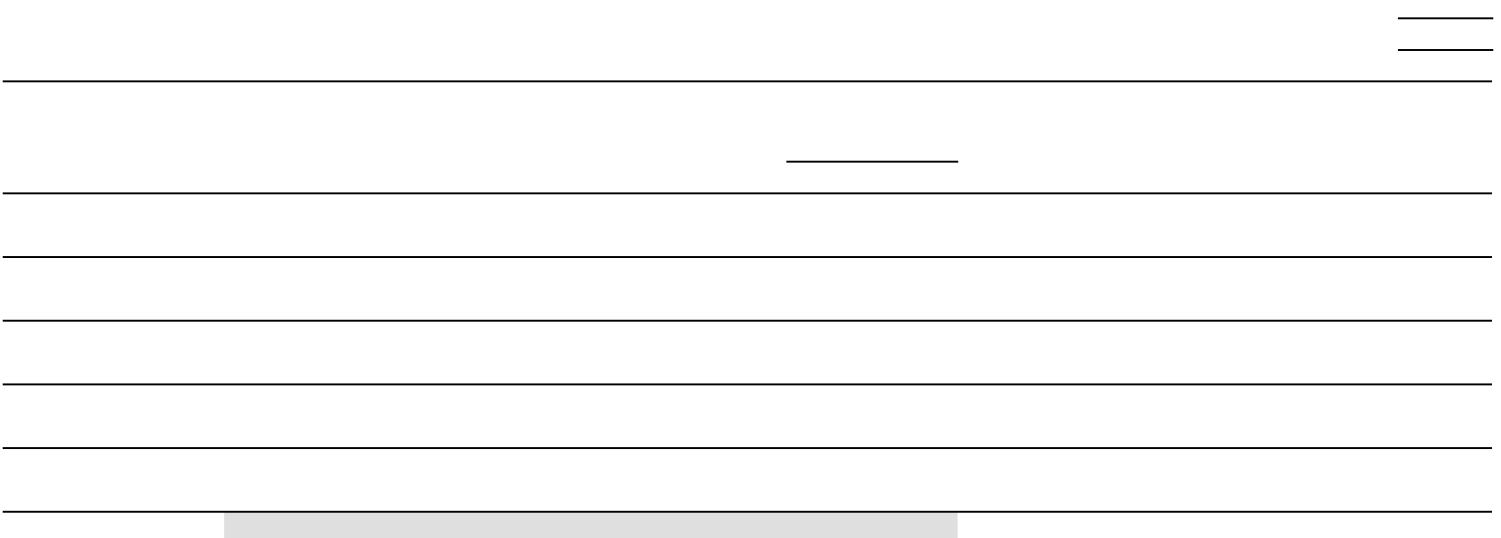
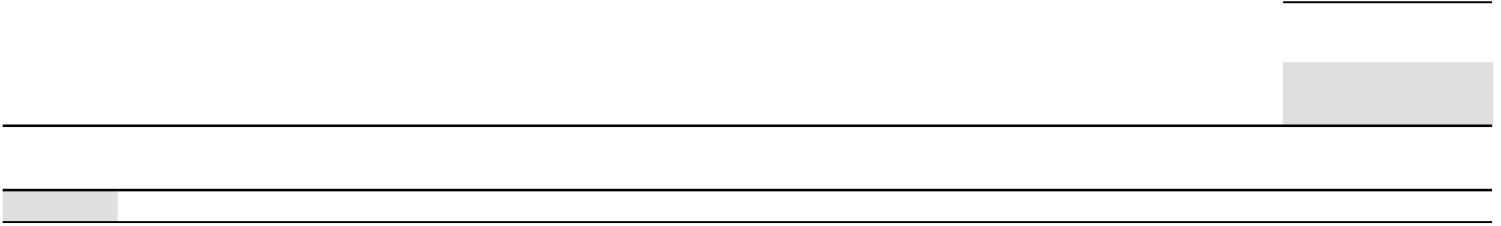




Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Did the organization list any officer, director, trustee, key employee, or highest compensated employee on line 1a?

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?

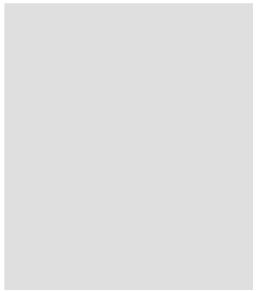
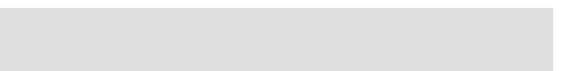


governmental unit or entity

(Explain in Part VI)

(Complete only if you checked a box on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and B and complete Part II.)

Section	Type of Document	Amount of digital patient identifiable information in the organization's ungregated records		Amount of digital patient identifiable information in the organization's aggregated records
		1	2	
A	Medical records			
B	Financial records			
C	Other records			
D	Medical records			
E	Financial records			



Amounts paid to supported organizations to accomplish exempt purposes

Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity

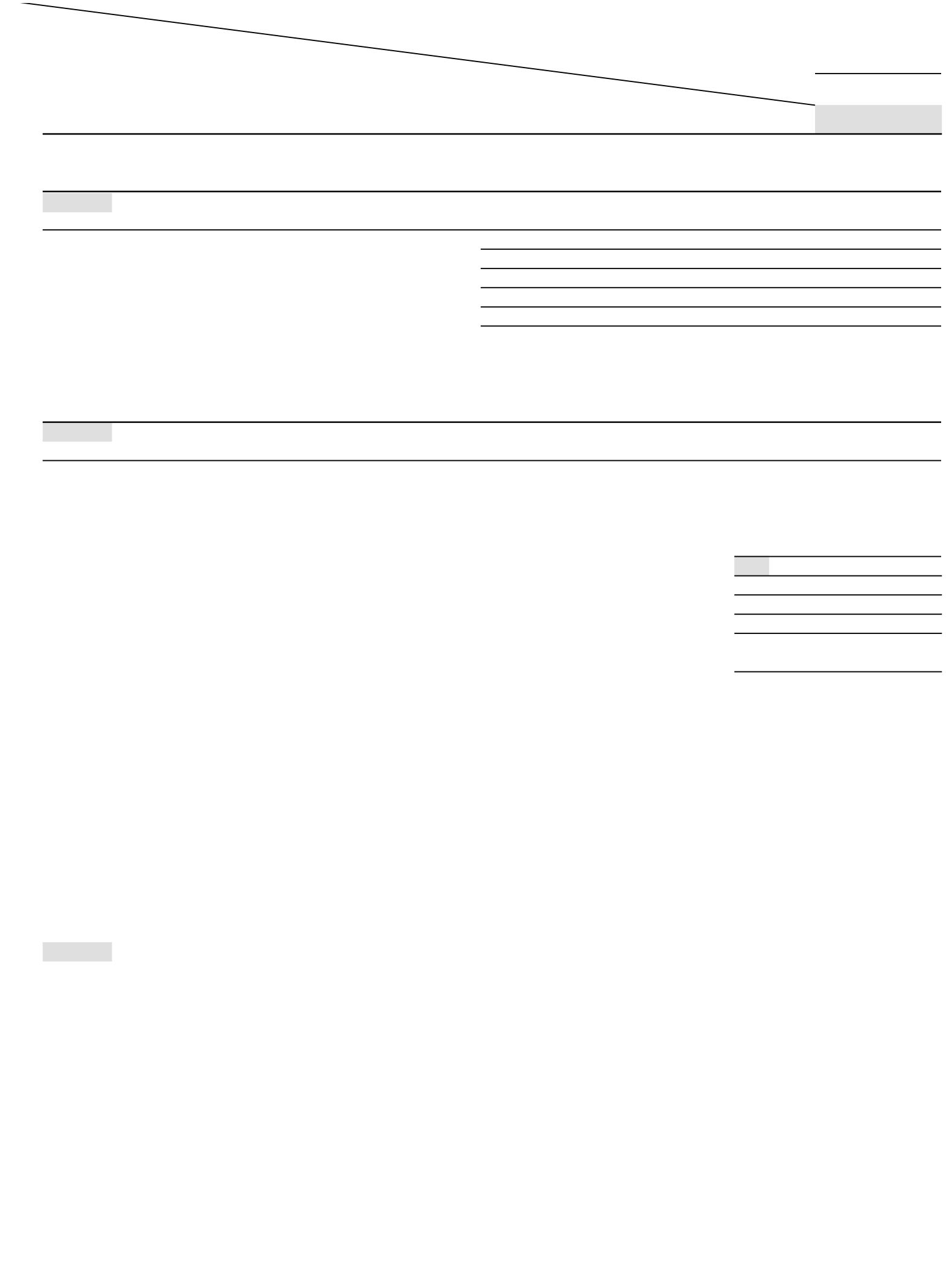
Administrative expenses paid to accomplish exempt purposes of supported organizations

Amounts paid to acquire exempt-use assets

Qualified set aside amounts (prior IRS approval required—*Part VI*)

Other distributions (—*Part VI*)

Provide the explanations required by Part I, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section



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

- | | |
|--------------------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Public exhibition | <input type="checkbox"/> Loan or exchange program |
| <input type="checkbox"/> Scholarly research | <input type="checkbox"/> Other..... |
| <input type="checkbox"/> Preservation for future generations | |

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

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? ...!..inf. i.....:....3 .. a

Complete if the organization answered "Yes" on Form 990 Part IV, Line 9 or reported an amount on Form

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990 Part X?

If "Yes," explain the arrangement in Part XIII and complete the following table:

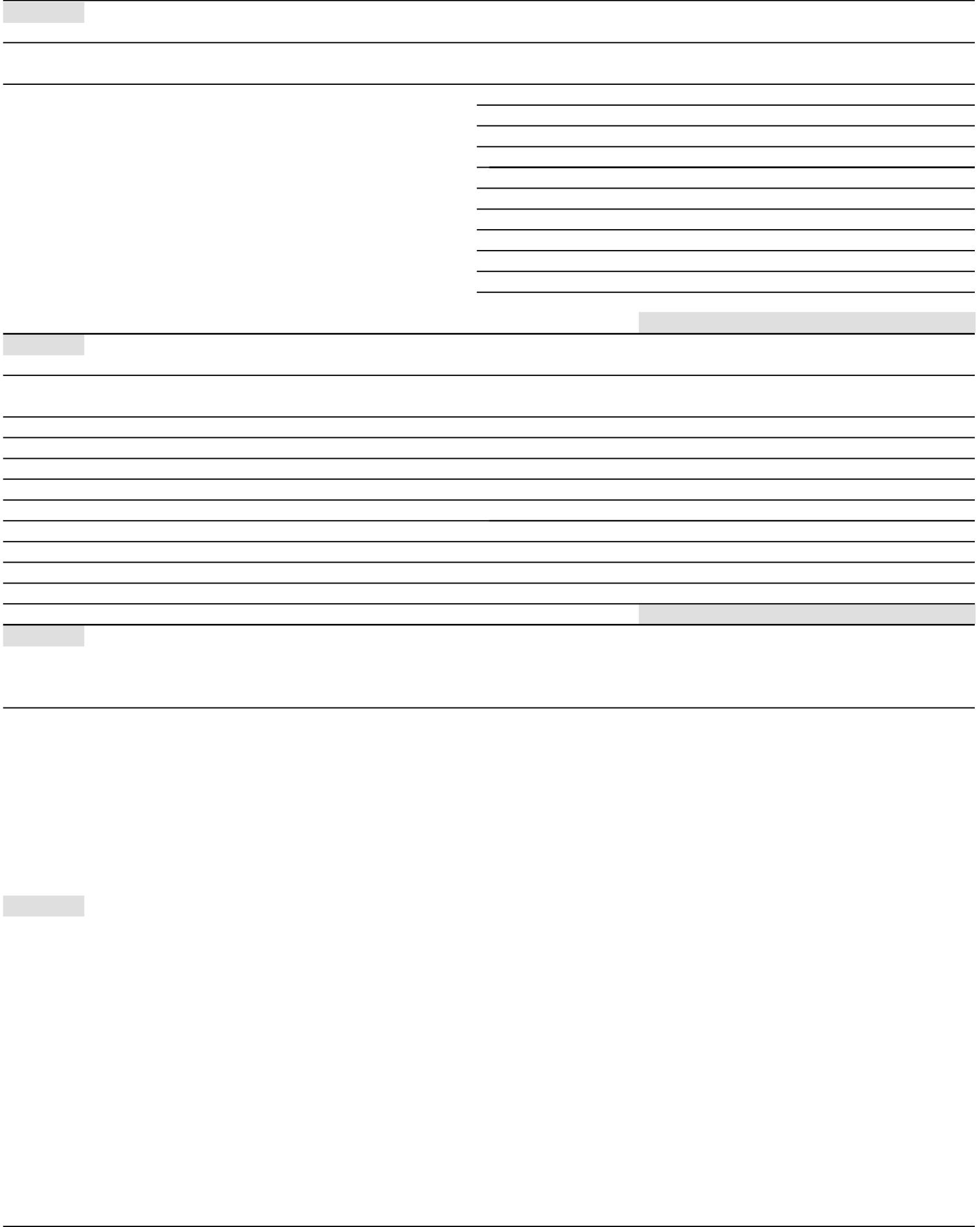
Beginning balance a..... minf i..... p.....

Beginning balance	Amount

Current year				

Provide the estimated percentage of the current year end balance (line 1g column (a)) held as:

Are these endowment funds not in the possession of the organization that are held and administered for the

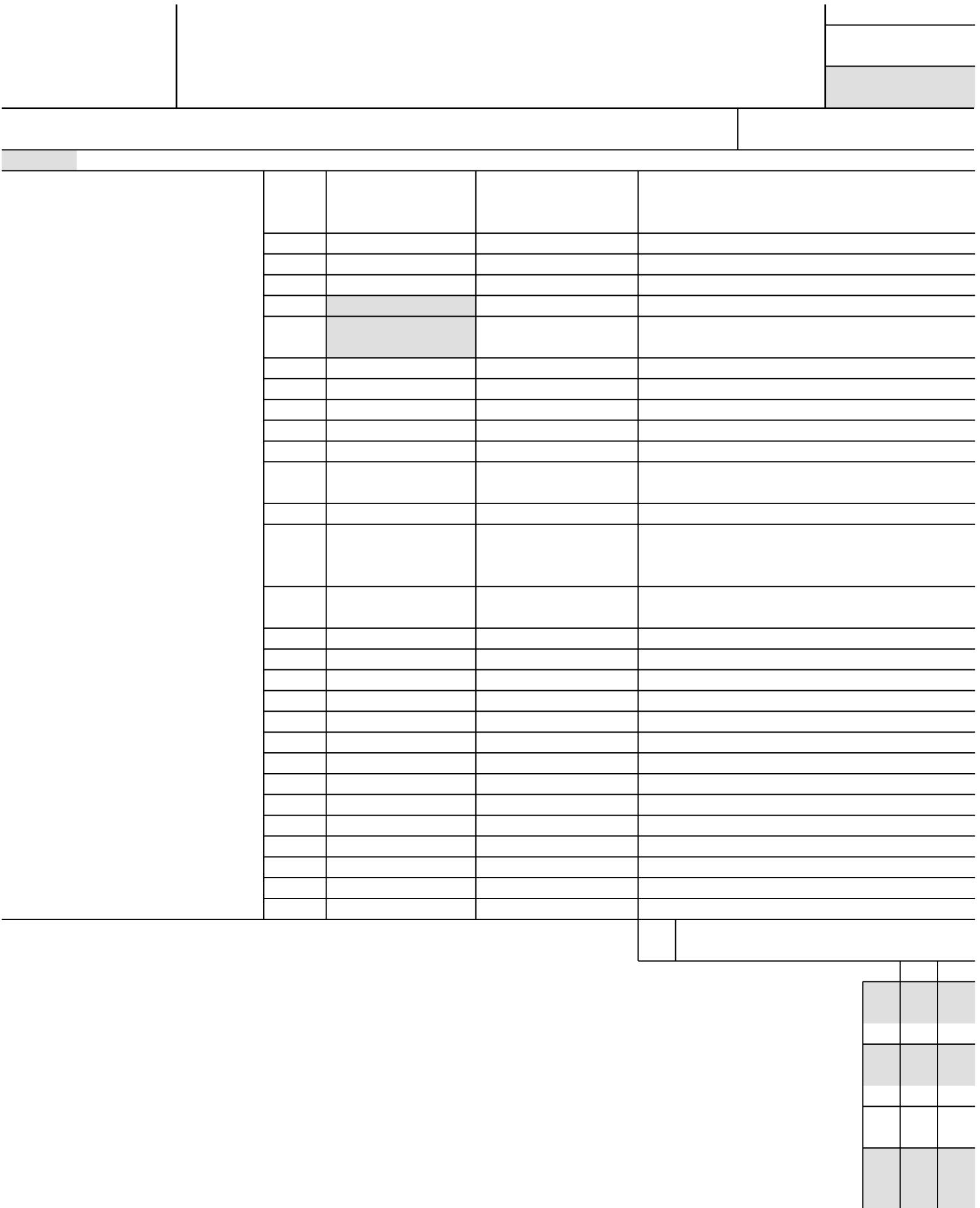


Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form

Use duplicate copies if faded or smudged **d d d d C**

Name and Title		Birthplace and HOMC and HNC confusion									

Provide the information explanation or descriptions required for Part I Lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7 and 8 and for Part II. Also complete this part for any additional information.



Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received or a combination of both. Also complete this part for any additional information.

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Department of the Treasury
Internal Revenue Service

Name of the organization

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38194825
FYE: 9302023**

582024 1207 PM

72350 FocusHope
381948285
FYE 9/30/2023

5/8/2024 12:07 PM

Description	Amount
Federal Funds	\$ 9,741,841
USDA Commodity	\$ 16,912,452
State and Local Funds	\$ 1,711,356
Foundation Trust and Others	\$ 2,921,162
Other Contributions	\$ 908,127
Contributed Goods- InKind	\$ 86,718
Total	\$ <u><u>32,371,656</u></u>

Description	Amount
Interest and Dividend Income	\$ <u><u>0</u></u>
Total	\$ <u><u>0</u></u>

Description	Amount
SPACE RENTAL	\$ <u><u>0</u></u>
Total	\$ <u><u>0</u></u>

72350 FocusHope
381948235
FYE 9'

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