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.

Form 990

Department of the Treasury
Internal Revenue Service

B Name of organization

HUNTER'S HOPE FOUNDATION, INC.

D Employer identification number

16-1552315

E Telephone number

716-667-1200

F Name and address of principal officer

JACQUE WAGGONER

G Gross receipts

822,712.

H(a) Is this a group return

No

for affiliates?

H(b) Are all affiliates included?

No

I Tax-exempt status: 501(c)(3) or 501(c)(4) (insert no.) 4947(a)(1) or 527

J Website: WWW.HUNTERSHOPE.ORG

K Form of organization: Corporation Trust Association Other


Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO INCREASE PUBLIC AWARENESS, TO SUPPORT & FUND RESEARCH EFFORTS TO FIND A CURE FOR KRABBE DISEASE

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

3 Number of voting members of the governing body (Part VI, line 1a) 9

4 Number of independent voting members of the governing body (Part VI, line 1b) 9

5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 11

6 Total number of volunteers (estimate if necessary) 100

7a Total unrelated business revenue from Part VIII, column (C), line 12 7a

7b Net unrelated business taxable income from Form 990-T, line 34 0

8 Contributions and grants (Part VIII, line 1h) Prior Year 897,123

Current Year 757,039.

9 Program service revenue (Part VIII, line 2g) Prior Year 314,641

Current Year 15,499.

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 23,352.

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 133,795.

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12 1,368,911.

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) Prior Year 533,847

Current Year 218,537.

14 Benefits paid to or for members (Part IX, column (A), line 4) 0.

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Prior Year 394,178.

Current Year 416,234.

16a Professional fundraising fees (Part IX, column (A), line 11e) 0.

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f) Prior Year 405,488.

Current Year 354,863.

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 26) Prior Year 1,332,523.

Current Year 989,634.

19 Revenue less expenses. Subtract line 18 from line 12 Prior Year 35,388.

<168,672.

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.

Signature of officer

JACQUE WAGGONER, CEO

Type or print name and title

Paid

Thomas P. Dobiesz

Preparer's name

Preparer's signature

Date

Check if self-employed

PTIN

00601313

Preparer

CHAMPION TRAVIS BEAS & KERSHNER LLP

Firm's EIN

16-1468002

Use Only

45 BRYANT WOODS NORTH

AMHERST, NY 14228

Phone no. 716-630-2400

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

Schedule O for Organization Mission Statement Continuation
Part III Statement of Program Service Accomplishments

1 Briefly describe the organization’s mission:
Hunter’s Hope Foundation was established to address the acute need for information and research with respect to Krabbe Disease and related Leukodystrophies. In addition, we strive to support and encourage those afflicted and their families as they struggle to endure, adjust

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 ☒ 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 ☒ No

If “Yes,” describe these changes on Schedule O.

4 Describe the organization’s program service accomplishments for each of its three largest program services, as measured 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 $232,015, including grants of $) (Revenue $)
Education and Awareness - The Foundation strives to broaden public awareness of Krabbe Disease and other Leukodystrophies thus increasing the probability of early detection and treatment.

4b (Code _____) (Expenses $308,182, including grants of $) (Revenue $)
Family Assistance - The Foundation undertakes to gather and provide current, functional information and service linkages to families of children with Leukodystrophies. The Foundation strives to establish an alliance of hope that will nourish, affirm, and confront the urgent need for medical, financial and emotional support of family members and those afflicted with Leukodystrophies

4c (Code _____) (Expenses $229,701, including grants of $) (Revenue $)
Research - The Foundation’s goal is to fund research efforts that will identify new treatments, therapies and ultimately, a cure for Krabbe Disease and other Leukodystrophies.

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

4e Total program service expenses $769,898.