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|---|--|--|
| <div>990-PF</div> <div>Form</div> <div>Department of the Treasury</div> <div>Internal Revenue Service</div> | <div>Return of Private Foundation</div> <div>or Section 4947(a)(1) Trust Treated as Private Foundation</div> <div>▶ Do not enter social security numbers on this form as it may be made public.</div> <div>▶ Go to www.irs.gov/Form990PF for instructions and the latest information.</div> | OMB No. 1545- |
| | | 0047 |
| | | <div>2023</div> <div>Open to Public Inspection</div> |

For calendar year 2023, or tax year beginning 07-01-2023 , and ending 06-30-2024

| | | |
|--|--|---|
| Name of foundation PERNA-ROSE FOUNDATION FOR HOPE INC | | A Employer identification number 35-2357099 |
| Number and street (or P.O. box number if mail is not delivered to street address) 6499 CAREMA LANE | Room/suite | B Telephone number (see instructions) (225) 389-0032 |
| City or town, state or province, country, and ZIP or foreign postal code NAPLES, FL 34113 | | C If exemption application is pending, check here <input type="checkbox"/> |
| G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change | | D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/> |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation | | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶\$ <u>3,224,955</u> | J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.) | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/> |

| Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</small> | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|---|---|---------------------------|-------------------------|---|
| Revenue | 1 Contributions, gifts, grants, etc., received (attach schedule) | 78,872 | | | |
| | 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B | | | | |
| | 3 Interest on savings and temporary cash investments | | | | |
| | 4 Dividends and interest from securities . . . | 101,460 | 61,669 | | |
| | 5a Gross rents | | | | |
| | b Net rental income or (loss) _____ | | | | |
| | 6a Net gain or (loss) from sale of assets not on line 10 | 34,030 | | | |
| | b Gross sales price for all assets on line 6a _____ | 745,492 | | | |
| | 7 Capital gain net income (from Part IV, line 2) . . . | | 34,030 | | |
| | 8 Net short-term capital gain | | | | |
| | 9 Income modifications | | | | |
| | 10a Gross sales less returns and allowances _____ | | | | |
| Operating and Administrative Expenses | b Less: Cost of goods sold | | | | |
| | c Gross profit or (loss) (attach schedule) | | | | |
| | 11 Other income (attach schedule) | | | | |
| | 12 Total. Add lines 1 through 11 | 214,362 | 95,699 | | |
| | 13 Compensation of officers, directors, trustees, etc. | | | | |
| | 14 Other employee salaries and wages | | | | |
| | 15 Pension plans, employee benefits | | | | |
| | 16a Legal fees (attach schedule) | | | | |
| | b Accounting fees (attach schedule) |  2,650 | | | 2,650 |
| | c Other professional fees (attach schedule) | | | | |
| | 17 Interest | | | | |
| | 18 Taxes (attach schedule) (see instructions) . . . |  721 | | | 721 |
| | 19 Depreciation (attach schedule) and depletion . . . | | | | |
| | 20 Occupancy | | | | |
| | 21 Travel, conferences, and meetings | | | | |
| | 22 Printing and publications | | | | |
| | 23 Other expenses (attach schedule) |  5,944 | 5,410 | | 534 |
| | 24 Total operating and administrative expenses. Add lines 13 through 23 | 9,315 | 5,410 | | 3,905 |
| | 25 Contributions, gifts, grants paid | 181,000 | | | 181,000 |
| | 26 Total expenses and disbursements. Add lines 24 and 25 | 190,315 | 5,410 | | 184,905 |
| | 27 Subtract line 26 from line 12: | | | | |
| | a Excess of revenue over expenses and disbursements | 24,047 | | | |
| | b Net investment income (if negative, enter -0-) | | 90,289 | | |
| | c Adjusted net income (if negative, enter -0-) | | | | |

| Part II | | Balance Sheets | Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) | Beginning of year | End of year | |
|-----------------------------|--|---|--|-------------------|----------------|-----------------------|
| | | | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Assets | 1 | Cash—non-interest-bearing | | 21,264 | 25,508 | 25,508 |
| | 2 | Savings and temporary cash investments | | 239,553 | 638,442 | 638,442 |
| | 3 | Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____ | | | | |
| | 4 | Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____ | | | | |
| | 5 | Grants receivable | | | | |
| | 6 | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) | | | | |
| | 7 | Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____ | | | | |
| | 8 | Inventories for sale or use | | | | |
| | 9 | Prepaid expenses and deferred charges | | | | |
| | 10a | Investments—U.S. and state government obligations (attach schedule) | | 1,580,285 | 1,575,137 | 1,313,209 |
| | b | Investments—corporate stock (attach schedule) | | 1,402,064 | 1,028,473 | 1,247,796 |
| | c | Investments—corporate bonds (attach schedule) | | | | |
| | 11 | Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____ | | | | |
| | 12 | Investments—mortgage loans | | | | |
| | 13 | Investments—other (attach schedule) | | | | |
| | 14 | Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____ | | | | |
| 15 | Other assets (describe ▶ _____) | | 347 | | | |
| 16 | Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I) | | 3,243,513 | 3,267,560 | 3,224,955 | |
| Liabilities | 17 | Accounts payable and accrued expenses | | | | |
| | 18 | Grants payable | | | | |
| | 19 | Deferred revenue. | | | | |
| | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | |
| | 21 | Mortgages and other notes payable (attach schedule) | | | | |
| | 22 | Other liabilities (describe ▶ _____) | | | | |
| | 23 | Total liabilities (add lines 17 through 22). | | | 0 | |
| Net Assets or Fund Balances | Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> | | | | | |
| | and complete lines 24, 25, 29 and 30. | | | | | |
| | 24 | Net assets without donor restrictions | | | | |
| | 25 | Net assets with donor restrictions | | | | |
| | Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> | | | | | |
| | and complete lines 26 through 30. | | | | | |
| | 26 | Capital stock, trust principal, or current funds | | | | |
| | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | | |
| | 28 | Retained earnings, accumulated income, endowment, or other funds | | 3,243,513 | 3,267,560 | |
| 29 | Total net assets or fund balances (see instructions) | | 3,243,513 | 3,267,560 | | |
| 30 | Total liabilities and net assets/fund balances (see instructions) . | | 3,243,513 | 3,267,560 | | |

| Part III Analysis of Changes in Net Assets or Fund Balances | | | |
|---|--|---|-----------|
| 1 | Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) | 1 | 3,243,513 |
| 2 | Enter amount from Part I, line 27a | 2 | 24,047 |
| 3 | Other increases not included in line 2 (itemize) ▶ _____ | 3 | |
| 4 | Add lines 1, 2, and 3 | 4 | 3,267,560 |
| 5 | Decreases not included in line 2 (itemize) ▶ _____ | 5 | |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29. | 6 | 3,267,560 |

Part IV

Capital Gains and Losses for Tax on Investment Income

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|---|---|---|-------------------------------------|
| 1 a VNGRD INFO TECH ETF | P | 2020-07-07 | 2023-10-12 |
| b ENERGY SEL SECT SPDR ETF | P | 2021-07-22 | 2024-04-12 |
| c VNGRD HEALTH CARE ETF | P | 2015-10-13 | 2023-10-12 |
| d VNGRD HEALTH CARE ETF | P | 2020-07-07 | 2023-10-12 |
| e VNGRD CNSMR STAPLES ETF | P | 2019-10-09 | 2023-10-12 |
| VNGRD CNSMR STAPLES ETF | P | 2019-10-09 | 2024-04-12 |
| SPDR SP DIVIDEND ETF | P | 2021-01-22 | 2023-10-12 |
| SPDR SP DIVIDEND ETF | P | 2021-01-19 | 2023-10-12 |
| SPDR SP DIVIDEND ETF | P | 2020-11-30 | 2023-07-11 |
| SPDR SP DIVIDEND ETF | P | 2020-12-04 | 2023-07-11 |
| SPDR SP DIVIDEND ETF | P | 2020-12-24 | 2023-10-12 |
| SPDR SP DIVIDEND ETF | P | 2020-12-18 | 2023-10-12 |
| SPDR SP DIVIDEND ETF | P | 2020-12-11 | 2023-10-12 |
| SPDR SP DIVIDEND ETF | P | 2020-12-04 | 2023-08-24 |
| SPDR SP DIVIDEND ETF | P | 2020-12-11 | 2023-08-24 |
| ISHS US TELECOM ETF | P | 2023-04-13 | 2023-07-11 |
| ISHS US TELECOM ETF | P | 2023-04-13 | 2024-04-12 |
| SPDR SP PHARMA ETF | P | 2020-10-15 | 2024-04-12 |
| SPDR SP PHARMA ETF | P | 2020-10-15 | 2023-07-11 |
| SPDR SP DIVIDEND ETF | P | 2022-04-12 | 2023-10-12 |
| ISHS 10 YR INVEST ETF | P | 2021-02-19 | 2023-10-12 |
| ISHS 10 YR INVEST ETF | P | 2023-04-13 | 2023-10-12 |
| ISHS SEL DIV ETF | P | 2022-04-12 | 2023-10-12 |
| VNGRD CNSMR STAPLES ETF | P | 2022-01-12 | 2023-10-12 |

| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) (e) plus (f) minus (g) |
|--------------------------|---|--|---|
| a 75,475 | | 49,866 | 25,609 |
| b 29,900 | | 15,215 | 14,685 |
| c 28,969 | | 15,340 | 13,629 |
| d 71,234 | | 58,941 | 12,293 |
| e 40,045 | | 34,768 | 5,277 |
| 19,941 | | 15,762 | 4,179 |
| 37,792 | | 35,521 | 2,271 |
| 35,603 | | 33,965 | 1,638 |
| 11,303 | | 9,794 | 1,509 |
| 8,751 | | 7,597 | 1,154 |
| 10,946 | | 9,940 | 1,006 |
| 10,831 | | 9,988 | 843 |
| 10,370 | | 9,572 | 798 |
| 2,541 | | 2,216 | 325 |
| 484 | | 425 | 59 |
| 20,985 | | 21,676 | -691 |
| 12,135 | | 13,348 | -1,213 |
| 15,525 | | 17,917 | -2,392 |
| 20,548 | | 23,319 | -2,771 |
| 44,359 | | 49,811 | -5,452 |
| 19,292 | | 28,531 | -9,239 |
| 78,624 | | 88,046 | -9,422 |
| 50,849 | | 60,428 | -9,579 |
| 88,990 | | 99,476 | -10,486 |

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | | (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h)) |
|---|---|--|---|
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | |
| a | | | 25,609 |
| b | | | 14,685 |
| c | | | 13,629 |
| d | | | 12,293 |
| e | | | 5,277 |
| | | | 4,179 |
| | | | 2,271 |
| | | | 1,638 |
| | | | 1,509 |
| | | | 1,154 |
| | | | 1,006 |
| | | | 843 |
| | | | 798 |
| | | | 325 |
| | | | 59 |
| | | | -691 |
| | | | -1,213 |
| | | | -2,392 |
| | | | -2,771 |
| | | | -5,452 |
| | | | -9,239 |
| | | | -9,422 |
| | | | -9,579 |
| | | | -10,486 |

| | | | |
|---|--|---|---------|
| 2 | Capital gain net income or (net capital loss) | 2 | 34,030 |
| 3 | Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 | 3 | -10,113 |

Part V

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1 a

Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1.
Date of ruling or determination letter: **(attach copy of letter if necessary—see instructions)**

1

1,255

b

All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations enter 4% (0.04) of Part I, line 12, col. (b)

2

3

2

3

1,255

4

3

4

5

5

1,255

6

Credits/Payments:

a

2023 estimated tax payments and 2022 overpayment credited to 2023

6a

1,906

b

Exempt foreign organizations—tax withheld at source

6b

c

Tax paid with application for extension of time to file (Form 8868)

6c

d

Backup withholding erroneously withheld

6d

7

7

1,906

8

8

9

9

10

10

651

11

11





Part VI-A

Statements Regarding Activities

| | | | | |
|----|--|----|-----|----|
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | | Yes | No |
| 1a | | | | No |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. | | | No |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. | | | |
| c | Did the foundation file Form 1120-POL for this year? | | | No |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ (2) On foundation managers. \$ | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. | 2 | | No |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | | No |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | No |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. | 5 | | No |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | 6 | Yes | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV. | 7 | Yes | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) CT | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation | 8b | Yes | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2023 or the taxable year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII | 9 | | No |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. | 10 | | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. | 11 | | No |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions | 12 | | No |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.PERNAFOUNDATIONFORHOPE.ORG | 13 | Yes | |
| 14 | The books are in care of THE PERNA-ROSE FOUNDATION FOR HOPE INC Telephone no. (914) 441-9887 Located at 6499 CAREMA LANE NAPLES FL ZIP+4 34113 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here and enter the amount of tax-exempt interest received or accrued during the year | 15 | | |
| 16 | At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country | 16 | Yes | No |
| | | | | |

Part VI-B **Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

| | | | |
|------------|---|--------------|-----------|
| | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly): | | |
| (1) | Engage in the sale or exchange, or leasing of property with a disqualified person? | 1a(1) | No |
| (2) | Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | 1a(2) | No |
| (3) | Furnish goods, services, or facilities to (or accept them from) a disqualified person? | 1a(3) | No |
| (4) | Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | 1a(4) | No |
| (5) | Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | 1a(5) | No |
| (6) | Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) | 1a(6) | No |
| b | If any answer is "Yes" to 1a(1)–(6); did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 1b | |
| c | Organizations relying on a current notice regarding disaster assistance check here.   | | |
| d | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2023? | 1d | No |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | |
| a | At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2023? If "Yes," list the years  20____, 20____, 20____, 20____ | 2a | No |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.) | 2b | |
| c | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  20____, 20____, 20____, 20____ | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | 3a | No |
| b | If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2023.) | 3b | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | No |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2023? | 4b | No |

Part VI-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to:

(1)

Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

5a(1)

No

(2)

Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

5a(2)

No

(3)

Provide a grant to an individual for travel, study, or other similar purposes?

5a(3)

No

(4)

Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions

5a(4)

No

(5)

Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

5a(5)

No

b

If any answer is "Yes" to 5a(1)–(5); did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions

5b

c

Organizations relying on a current notice regarding disaster assistance check

d

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?
If "Yes," attach the statement required by Regulations section 53.4945–5(d).

5d

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

6a

No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?
If "Yes" to 6b, file Form 8870.

6b

No

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

7a

No

b

If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

8

Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?

8

No

Part VII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation. See instructions

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|---|---|---------------------------------------|
| MELANIE ROSE 6499 CAREMA LANE NAPLES, FL 34113 | PRESIDENT 010.00 | 0 | | |
| JANET PERNA 6499 CAREMA LANE NAPLES, FL 34113 | TREASURER 010.00 | 0 | | |
| TINA WOODWARD 751 E CHARLESTON RD PALO ALTO, CA 94303 | VICE-PRESIDENT 010.00 | 0 | | |
| GINGER PARRISH 401 LANE DR ELIZABETH CITY, NC 27909 | SECRETARY 010.00 | 0 | | |
| JOAN CORLEY 176 OLD BRANCHVILLE RD RIDGEFIELD, CT 06877 | DIRECTOR 010.00 | 0 | | |
| MERCY LAGMAY ABRAMS 6503 ROMA WAY NAPLES, FL 34113 | DIRECTOR 010.00 | 0 | | |

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|------------------|---|---------------------------------------|
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |


Total number of other employees paid over \$50,000.

Part VII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Total number of others receiving over \$50,000 for professional services. 

Part VIII-- Summary of Direct Charitable Activities

| | |
|--|----------|
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 N/A | 0 |
| 2 | |
| | |
| | |
| 3 | |
| | |
| | |
| | |
| 4 | |
| | |
| | |

Part VIII-- Summary of Program-Related Investments (see instructions)

| | |
|---|--------|
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| 1 N/A | |
| 2 | |
| | |
| | |
| All other program-related investments. See instructions. | |
| 3 | |
| | |
| | |
| Total. Add lines 1 through 3 | |


Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

| | | | |
|----------|--|-----------|-----------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| a | Average monthly fair market value of securities. | 1a | 2,518,504 |
| b | Average of monthly cash balances. | 1b | 0 |
| c | Fair market value of all other assets (see instructions). | 1c | 0 |
| d | Total (add lines 1a, b, and c). | 1d | 2,518,504 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). | 1e | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d. | 3 | 2,518,504 |
| 4 | Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions). | 4 | 37,778 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3.. . . . | 5 | 2,480,726 |
| 6 | Minimum investment return. Enter 5% (0.05) of line 5. | 6 | 124,036 |

Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

| | | | |
|-----------|---|-----------|---------|
| 1 | Minimum investment return from Part IX, line 6. | 1 | 124,036 |
| 2a | Tax on investment income for 2022 from Part V, line 5. | 2a | 1,255 |
| b | Income tax for 2022. (This does not include the tax from Part V.). | 2b | |
| c | Add lines 2a and 2b. | 2c | 1,255 |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1. | 3 | 122,781 |
| 4 | Recoveries of amounts treated as qualifying distributions. | 4 | |
| 5 | Add lines 3 and 4. | 5 | 122,781 |
| 6 | Deduction from distributable amount (see instructions). | 6 | |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1. | 7 | 122,781 |

Part XI Qualifying Distributions (see instructions)

| | | | |
|----------|---|-----------|---------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26  | 1a | 184,905 |
| b | Program-related investments—total from Part VIII-B | 1b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required). | 3a | |
| b | Cash distribution test (attach the required schedule). | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4.. . . . | 4 | 184,905 |

Part XII

Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2022 | (c) 2022 | (d) 2023 |
|---|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2023 from Part X, line 7 | | | | 122,781 |
| 2 Undistributed income, if any, as of the end of 2022: | | | | |
| a Enter amount for 2022 only. | | | | |
| b Total for prior years: 20____, 20____, 20____ | | | | |
| 3 Excess distributions carryover, if any, to 2022: | | | | |
| a From 2018. | | | | |
| b From 2019. | 6,395 | | | |
| c From 2020. | 25,890 | | | |
| d From 2021. | 28,135 | | | |
| e From 2022. | 25,966 | | | |
| f Total of lines 3a through e. | 86,386 | | | |
| 4 Qualifying distributions for 2023 from Part XI, line 4: ▶ \$ 184,905 | | | | |
| a Applied to 2022, but not more than line 2a | | | | |
| b Applied to undistributed income of prior years (Election required—see instructions). | | | | |
| c Treated as distributions out of corpus (Election required—see instructions). | | | | |
| d Applied to 2023 distributable amount | | | | 122,781 |
| e Remaining amount distributed out of corpus | 62,124 | | | |
| 5 Excess distributions carryover applied to 2023. (If an amount appears in column (d), the same amount must be shown in column (a).) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 148,510 | | | |
| b Prior years' undistributed income. Subtract line 4b from line 2b. | | | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | | | |
| d Subtract line 6c from line 6b. Taxable amount—see instructions. | | | | |
| e Undistributed income for 2022. Subtract line 4a from line 2a. Taxable amount—see instructions. | | | | |
| f Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024 | | | | 0 |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). | | | | |
| 8 Excess distributions carryover from 2018 not applied on line 5 or line 7 (see instructions) | | | | |
| 9 Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a | 148,510 | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2019 | 6,395 | | | |
| b Excess from 2020 | 25,890 | | | |
| c Excess from 2021. | 28,135 | | | |
| d Excess from 2022 | 25,966 | | | |
| e Excess from 2023 | 62,124 | | | |

Part XIII

a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2023, enter the date of the ruling

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

| Tax year | Prior 3 years | | | (e) Total |
|----------|---------------|----------|----------|-----------|
| (a) 2023 | (b) 2022 | (c) 2021 | (d) 2020 | |
| | | | | |

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Part

1 Information Regarding Foundation Managers:

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

JANET PERNA

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|---|--------------------------------|--------------------------------------|--------|
| Name and address (home or business) | | | | |
| a Paid during the year | | | | |
| A CHILD FOR ALL CMR 450 BOX 1073 APO,AE 09705 | | | ORPHANAGE SUPPORT | 10,000 |
| ALBEMARLE HOPELINE PO BOX 2064 ELIZABETH CITY,NC 27906 | | | DOMESTIC VIOLENCE SUPPORT | 10,000 |
| CHAMPIONS FOR LEARNING 3606 ENTERPRISE AVE STE 150 NAPLES,FL 34104 | | | CLASSROOM GRANTS COLLEGE/CAREER PREP | 10,000 |
| A CHILDS PATH 15275 COLLIER BLVD 201 359 NAPLES,FL 34119 | | | TEACHER SUPPORT | 10,000 |
| DOMESTIC VIOLENCE CENTER 1111 SUMMER ST STE 203 STAMFORD,CT 06905 | | | DOMESTIC VIOLENCE SUPPORT | 15,000 |
| EVERGLADES ANGELS DOG RESCUE 2637 E ATLANTIC BLVD STE 269 POMPANO BEACH,FL 33062 | | | ANIMAL RESCUE | 20,500 |
| FOSTERING SUCCESS 3050 HORSESHOE DR STE 260 NAPLES,FL 34104 | | | TUTOR SUPPORT | 5,000 |
| GUADALUPE CENTER 506 HOPE CIRCLE IMMOKALEE,FL 34142 | | | EARLY CHILDHOOD EDUCATION | 10,000 |
| MASSAI GIRLS EDUCATION FUND 5800 MACARTHUR BLVD NW WASHINGTON,DC 200162512 | | | SPONSOR GIRLS | 10,000 |
| MAUI FOOD BANK 760 KOLU ST WAILUKU,HI 96793 | | | WILDFIRE EMERGENCY RELIEF | 2,500 |
| MAUI HUMANE SOCIETY 1350 MEHAMEHA LOOP PUUNENE,HI 96784 | | | WILDFIRE EMERGENCY RELIEF | 2,500 |
| MUTTVILLE PO BOX 410207 SAN FRANCISCO,CA 94141 | | | ELDER DOG CARE | 5,000 |
| NAPILI KAI FOUNDATION 5900 LOWER HONOAPIILANI RD LAHAINA,HI 96761 | | | SCHOLARSHIPS | 5,000 |
| OUR COMPANION PO BOX 673 BLOOMFIELD,CT 06002 | | | ANIMAL SANCTUARY | 12,500 |
| PANGEA NETWORK PO BOX 9823 THE WOODLANDS,TX 77387 | | | SEXUAL REPRODUCTIVE HEALTH | 10,000 |
| SPCA OF NORTHEASTERN NORTH CAROLINA | | | EMERGENCY ANIMAL MEDICAL | 5,000 |

| | | | | |
|---|--|--|---------------------|---------|
| PO BOX 1772 ELIZABETH CITY,NC 27906 | | | | |
| SUNY ONEONTA FOUNDATION 208 NETZER ADMINISTRATION BLDG ONEONTA,NY 13820 | | | SCHOLARSHIPS | 25,000 |
| WOMENS BEAN PROJECT 3201 CURTIS ST DENVER,C O 80205 | | | WOMEN SUPPORT | 10,000 |
| ALBEMARLE COA FOUNDATION PO BOX 2064 ELIZABETH CITY,NC 27906 | | | COLLEGE CAREER PREP | 3,000 |
| Total ▶ 3a | | | | 181,000 |
| b Approved for future payment | | | | |
| Total ▶ 3b | | | | |

| Enter gross amounts unless otherwise indicated. | | Unrelated business income | | Excluded by section 512, 513, or 514 | | (e) Related or exempt function income (See instructions.) |
|--|--|---------------------------|---------------|--------------------------------------|---------------|---|
| | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | |
| 1 Program service revenue: | | | | | | |
| a _____ | | | | | | |
| b _____ | | | | | | |
| c _____ | | | | | | |
| d _____ | | | | | | |
| e _____ | | | | | | |
| f _____ | | | | | | |
| g Fees and contracts from government agencies | | | | | | |
| 2 Membership dues and assessments | | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | | |
| 4 Dividends and interest from securities | | | | 14 | 101,460 | |
| 5 Net rental income or (loss) from real estate: | | | | | | |
| a Debt-financed property. | | | | | | |
| b Not debt-financed property. | | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | | |
| 7 Other investment income | | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | 18 | 34,030 | |
| 9 Net income or (loss) from special events: | | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | | |
| 11 Other revenue: a _____ | | | | | | |
| b _____ | | | | | | |
| c _____ | | | | | | |
| d _____ | | | | | | |
| e _____ | | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) . . | | | | | 135,490 | |
| 13 Total. Add line 12, columns (b), (d), and (e). | | | | 13 | | 135,490 |

(See worksheet in line 13 instructions to verify calculations.)

[illegible]

Part XVI Information Regarding Transfers To Noncharitable Exempt Organizations

| Yes | No |
|-----|----|
|-----|----|

| | | |
|--|--|--|
| | | |
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| | | |
|-------|--|----|
| 1a(1) | | No |
|-------|--|----|

| | | |
|-------|--|----|
| 1a(2) | | No |
|-------|--|----|

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|--------------|--|-----------|
| 1b(1) | | No |
|--------------|--|-----------|

| | | |
|-------|--|----|
| 1b(2) | | No |
|-------|--|----|

| | | |
|--------------|--|-----------|
| 1b(3) | | No |
|--------------|--|-----------|

| | | |
|--------------|--|-----------|
| 1b(4) | | No |
|--------------|--|-----------|

| | | |
|--------------|--|-----------|
| 1b(5) | | No |
|--------------|--|-----------|

| | | |
|--------------|--|-----------|
| 1b(6) | | No |
|--------------|--|-----------|

| | | |
|----|--|----|
| 1c | | No |
|----|--|----|

arket value
et value
d.

[illegible]

☐ Yes ☒ No

b If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
| | | |
| | | |
| | | |
| | | |

Sign Here

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 taxpayer) is based on all information of which preparer has any knowledge.

2024-11-08

Title

May the IRS discuss this return with the preparer shown below?
See instructions. ☐ Yes ☐ No

**Paid
Preparer
Use Only**

| | | | | | |
|-------------------------------|--|----------------------|------------|---|-----------------------------|
| Paid Preparer Use Only | Print/Type preparer's name | Preparer's Signature | Date | Check if self-employed <input type="checkbox"/> | PTIN |
| | FRANZ C SCHNEIDER CPA | | 2024-11-08 | | P00634003 |
| | Firm's name ▶ FC SCHNEIDER CPA LLC | | | | Firm's EIN ▶ 84-170217 |
| | Firm's address ▶ PO BOX 427 BATON ROUGE, LA 70821 | | | | Phone no. (225) 389-0032 |

Additional Data

[Return to Form](#)

Software ID: 23017659

Software Version: 23.1.0.0

Part VI Line 7 - Tax Paid with the Original Return: 1,906

Form 990PF - Special Condition Description:

Special Condition Description

| | | |
|---|---|--|
| Schedule B (Form 990) Department of the Treasury Internal Revenue Service | Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. | OMB No. 1545-0047 |
| | | 2023 |
| Name of the organization PERNA-ROSE FOUNDATION FOR HOPE INC | | Employer identification number 35-2357099 |

Organization type (check one):

| | |
|--------------------|---|
| Filers of: | Section: |
| Form 990 or 990-EZ | <input type="checkbox"/> 501(c)() (enter number) organization |
| | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation |
| | <input type="checkbox"/> 527 political organization |
| Form 990-PF | <input checked="" type="checkbox"/> 501(c)(3) exempt private foundation |
| | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | <input type="checkbox"/> 501(c)(3) taxable private foundation |

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

| | |
|--|--|
| Name of organization PERNA-ROSE FOUNDATION FOR HOPE INC | Employer identification number 35-2357099 |
|--|--|

Part I

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|--|----------------------------|--|
| 1 | CAROLYN COLLINS ESTATE PO BOX 2339 OMAHA, NE 68103 | <div>\$ 78,872</div> | <div><input checked="" type="checkbox"/> Person</div> <div><input type="checkbox"/> Payroll</div> <div><input type="checkbox"/> Noncash</div> <div>(Complete Part II for noncash contributions.)</div> |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | <div>\$</div> | <div><input type="checkbox"/> Person</div> <div><input type="checkbox"/> Payroll</div> <div><input type="checkbox"/> Noncash</div> <div>(Complete Part II for noncash contributions.)</div> |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | <div>\$</div> | <div><input type="checkbox"/> Person</div> <div><input type="checkbox"/> Payroll</div> <div><input type="checkbox"/> Noncash</div> <div>(Complete Part II for noncash contributions.)</div> |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | <div>\$</div> | <div><input type="checkbox"/> Person</div> <div><input type="checkbox"/> Payroll</div> <div><input type="checkbox"/> Noncash</div> <div>(Complete Part II for noncash contributions.)</div> |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | <div>\$</div> | <div><input type="checkbox"/> Person</div> <div><input type="checkbox"/> Payroll</div> <div><input type="checkbox"/> Noncash</div> <div>(Complete Part II for noncash contributions.)</div> |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | <div>\$</div> | <div><input type="checkbox"/> Person</div> <div><input type="checkbox"/> Payroll</div> <div><input type="checkbox"/> Noncash</div> <div>(Complete Part II for noncash contributions.)</div> |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | <div>\$</div> | <div><input type="checkbox"/> Person</div> <div><input type="checkbox"/> Payroll</div> <div><input type="checkbox"/> Noncash</div> <div>(Complete Part II for noncash contributions.)</div> |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | <div>\$</div> | <div><input type="checkbox"/> Person</div> <div><input type="checkbox"/> Payroll</div> <div><input type="checkbox"/> Noncash</div> <div>(Complete Part II for noncash contributions.)</div> |

| | |
|--|--|
| Name of organization PERNA-ROSE FOUNDATION FOR HOPE INC | Employer identification number 35-2357099 |
|--|--|

Part II

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
|---------------------------|--|--|----------------------|
| - | <div></div> <div></div> <div></div> | <div></div> \$ | <div></div> |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| - | <div></div> <div></div> <div></div> | <div></div> \$ | <div></div> |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| - | <div></div> <div></div> <div></div> | <div></div> \$ | <div></div> |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| - | <div></div> <div></div> <div></div> | <div></div> \$ | <div></div> |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| - | <div></div> <div></div> <div></div> | <div></div> \$ | <div></div> |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| - | <div></div> <div></div> <div></div> | <div></div> \$ | <div></div> |

| | |
|--|--|
| Name of organization PERNA-ROSE FOUNDATION FOR HOPE INC | Employer identification number 35-2357099 |
|--|--|

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------------|---------------------------------------|-------------------------------------|--|
| | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div> |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP 4 | | Relationship of transferor to transferee |
| | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div> |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP 4 | | Relationship of transferor to transferee |
| | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div> |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP 4 | | Relationship of transferor to transferee |
| | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div> |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP 4 | | Relationship of transferor to transferee |
| | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div> |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP 4 | | Relationship of transferor to transferee |
| | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div> |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP 4 | | Relationship of transferor to transferee |

Additional Data

[Return to Form](#)

Software ID: 23017659

Software Version: 23.1.0.0

TY 2023 IRS 990 e-File Render

Name: PERNA-ROSE FOUNDATION FOR HOPE INC

EIN: 35-2357099

Software ID: 23017659

Software Version: 23.1.0.0

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|-----------------|--------|--------------------------|------------------------|---|
| ACCOUNTING FEES | 2,650 | | | 2,650 |

Name: PERNA-ROSE FOUNDATION FOR HOPE INC

EIN: 35-2357099

Software ID: 23017659

Software Version: 23.1.0.0

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|---|------------------------|-------------------------------|
| 1507 shares of FEPIX FIDELITY ADVISOR TOTAL BOND CL I | 16,117 | 14,150 |
| 250 shares of IBM INTL BUSINESS MACHINES CORP | 19,582 | 43,238 |
| 648 shares of VHT VANGUARD HEALTH CARE ETF | 27,426 | 60,116 |
| 790 shares of VIS VANGUARD INDUSTRIALS ETF | 45,156 | 47,750 |
| 335 shares of VGT VANGUARD INFORMATION TECHNOLOGY ETF | 37,193 | 92,254 |
| 1145 shares of VDC VANGUARD CONSUMER STAPLES ETF | 49,139 | 64,564 |
| 1786 shares of DVY ISHARES SELECT DIVIDEND ETF | 132,764 | 159,210 |
| 50 shares of KD KYNDRYL HOLDINGS INC | 858 | 1,316 |
| 2475 shares of XLE SECTOR ENERGY SELECT SECTOR SPDR ETF | 167,822 | 197,157 |
| 2160 shares of FBND FIDELITY TOTAL BOND ETF | 100,067 | 97,049 |
| 1900 shares of FISR SSGA ACTIVE TR SPDR FIXED INCOME | 50,308 | 48,317 |
| 1530 shares of PFF ISHARES TRUST ISHARES PREFERRED | 49,955 | 48,272 |
| 275 shares of VTV VANGUARD VALUE ETF | 39,372 | 44,113 |
| 360 shares of JEPI JPMORGAN EQUITY PREMIUM INCOME ETF | 20,247 | 20,405 |
| 1370 shares of XLSR SSGA ACTIVE TR SPSDR US SECTOR | 60,041 | 69,719 |
| SPY SPDR SP 500 ETF | 100,378 | 125,171 |
| XLY CONSUMER DISCRETIONARY SELECT SECTOR SPDR ETF | 25,098 | 25,901 |
| XLC SELECT SECTOR COMMUNICATION SERVICES SELECT SECTOR SPDR ETF | 25,037 | 26,383 |
| AAPL APPLE INC | 2,392 | 2,949 |
| MCD MCDONALDS CORP | 2,508 | 2,294 |
| PG PROCTOR GAMBLE CO | 2,243 | 2,309 |
| RS RELIANCE INC | 2,321 | 1,999 |
| WMT WALMART | 4,179 | 4,672 |
| SKYY FIRST TRUST CLOUD COMPUTING INDEX ETF | 2,301 | 2,293 |
| TDIV FIRST TRUST NASDAQ TECHNOLOGY DIVIDEND INDEX ETF | 1,522 | 1,665 |
| RSP INVESCO SP 500 EQUAL WEIGHT ETF | 3,658 | 3,614 |
| SHY ISHARES 1-3 YR TREASURY BOND ETF | 7,437 | 7,430 |
| IJH ISHARES CORE SP MID CAP ETF | 3,161 | 3,102 |
| IGV ISHARES EXPANDED TECH SOFTWARE SECTOR ETF | 2,313 | 2,346 |
| IYE ISHARES US ENERGY ETF | 2,533 | 2,496 |
| ITB ISHARES US HOME CONSTRUCTION ETF | 2,714 | 2,425 |
| HYGH ISHARES INTEREST RATE HEDGED HIGH YIELD BOND ETF | 1,882 | 1,870 |
| TFLO ISHARES TREASURY FLOATING RATE BOND ETF | 1,267 | 1,267 |
| HYS PIMCO 0-5 YR HIGH YIELD CORPORATE BOND INDEX ETF | 1,866 | 1,854 |
| DIA SPDR DOW JONES INDUSTRIAL AVERAGE ETF | 5,501 | 5,476 |
| XLI INDUSTRIAL SELECT SECTOR SPDR ETF | 3,483 | 3,412 |
| XLK SECTOR TECHNOLOGY SELECT SECTOR SPDR ETF | 1,877 | 2,036 |
| MOAT VANECK MORNINGSTAR WIDE MOAT ETF | 3,349 | 3,291 |
| SMH VANECK SEMICONDUCTOR ETF | 3,406 | 3,911 |

TY 2023 IRS 990 e-File Render

Name: PERNA-ROSE FOUNDATION FOR HOPE INC

EIN: 35-2357099

Software ID: 23017659

Software Version: 23.1.0.0

**US Government Securities - End of
Year Book Value:**

100,019

**US Government Securities - End of
Year Fair Market Value:**

99,725

**State & Local Government
Securities - End of Year Book
Value:**

1,475,118

**State & Local Government
Securities - End of Year Fair
Market Value:**

1,213,484

TY 2023 IRS 990 e-File Render

Name: PERNA-ROSE FOUNDATION FOR HOPE INC

EIN: 35-2357099

Software ID: 23017659

Software Version: 23.1.0.0

| Description | Beginning of Year - Book Value | End of Year - Book Value | End of Year - Fair Market Value |
|--------------------|-----------------------------------|-----------------------------|------------------------------------|
| ORGANIZATION COSTS | 347 | | |

TY 2023 IRS 990 e-File Render

Name: PERNA-ROSE FOUNDATION FOR HOPE INC

EIN: 35-2357099

Software ID: 23017659

Software Version: 23.1.0.0

| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|----------------------|--------------------------------|-----------------------|---------------------|---------------------------------------|
| INVESTMENT MGMT FEES | 5,410 | 5,410 | | |
| OFFICE EXPENSE | 187 | | | 187 |
| AMORTIZATION | 347 | | | 347 |

TY 2023 IRS 990 e-File Render

Name: PERNA-ROSE FOUNDATION FOR HOPE INC

EIN: 35-2357099

Software ID: 23017659

Software Version: 23.1.0.0

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|---------------|--------|--------------------------|------------------------|---|
| FEDERAL TAXES | 721 | | | 721 |