

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

**2016**

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Department of the Treasury  
Internal Revenue Service

**A For the 2016 calendar year, or tax year beginning** \_\_\_\_\_ **and ending** \_\_\_\_\_

- B** Check if applicable:
- Address change
  - Name change
  - Initial return
  - Final return/terminated
  - Amended return
  - Application pending

**C Name of organization** Heshima Kenya Inc.  
**Doing business as**  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
 1111 N. Wells 306  
 City or town State ZIP code  
 Chicago IL 60610  
 Foreign country name Foreign province/state/county Foreign postal code

**D Employer identification number**  
26-0239864  
**E Telephone number**  
312-985-5667  
**G Gross receipts \$** 2,008,312

**F Name and address of principal officer:**  
Alisa Roadcup 1111 N. Wells St., Chicago, IL 60610  
**H(a) Is this a group return for subordinates?**  Yes  No  
**H(b) Are all subordinates included?**  Yes  No  
 If "No," attach a list. (see instructions)

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

**J Website:** www.heshimakenya.org

**H(c) Group exemption number** ▶

**K Form of organization:**  Corporation  Trust  Association  Other ▶

**L Year of formation:** 2007 **M State of legal domicile:** IL

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: To operate an informal education program, shelter, and case management program for unaccompanied refugee children and youth in Nairobi, Kenya.		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	3	13
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	<b>5</b> Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	6
	<b>6</b> Total number of volunteers (estimate if necessary)	6	43
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	7b	0	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	1,571,218	1,883,893
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	111,555	0
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	543	621
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,702,855	1,951,080
	<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		665,138	850,171
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 175,344		0	0
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		817,176	709,746
<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,482,314	1,559,917	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	220,541	391,163	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	382,898	830,792
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	30,556	49,407
		352,342	781,385

**Part II Signature Block**

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

**Sign Here**

Signature of officer: *Alisa Roadcup* Date: 8/30/17  
 Alisa Roadcup Executive Director  
 Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name: Paul D Provo Preparer's signature: *Paul Provo* Date: 8/30/2017 Check  if self-employed PTIN: P01608946  
 Firm's name ▶ Anick & Associates Firm's EIN ▶ 39-1977004  
 Firm's address ▶ 11933 W Burleigh Street, Wauwatosa, WI 53222 Phone no. 414-774-0300

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

For Paperwork Reduction Act Notice, see the separate instructions.

Part III

Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: To operate an informal education program, shelter, and case management program for unaccompanied refugee children and youth in Nairobi, Kenya.

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

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

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 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 \$ 450,711 including grants of \$ ) (Revenue \$ ) Girl's Empowerment Program (GEP) - Multi-phase program offering a safe community for girls and young women to learn about their human rights and how to access them while addressing avenues for self-sufficiency and leadership building. Participants engage in basic education, life skills, vocational training and income-generating projects.

4b (Code: ) (Expenses \$ 268,001 including grants of \$ ) (Revenue \$ ) Child Protection (CP) - Through the partnership with UNHCR Kenya, the Child Protection project aims to identify, protect and address the well-being of refugee children who are either unaccompanied, separated, orphans, at risk or with special needs in Nairobi, Mombasa and Nakuru. Activities include but are not limited to best interest assessments and determination, home assessments, family tracing, material support, identifying and training foster parents, creating safe spaces, birth registration and certification assistance.

4c (Code: ) (Expenses \$ 250,264 including grants of \$ ) (Revenue \$ ) Safe House (SH) - Provides temporary shelter to unaccompanied refugee children and youth, and on an exceptional basis, vulnerable refugee women who are experiencing homelessness or significant protection issues related to sexual gender based violence or other forms of abuse.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 224,012 including grants of \$ 0 ) (Revenue \$ 0 )

4e Total program service expenses 1,192,988