

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018, and ending 06-30-2019

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

C Name of organization: PEOPLE HELPING PEOPLE
Doing business as:
Number and street (or P.O. box if mail is not delivered to street address): 205 NORTH 400 WEST Room/suite:
City or town, state or province, country, and ZIP or foreign postal code: SALT LAKE CITY, UT 841031125

D Employer identification number: 84-1373515

E Telephone number: (801) 583-5300

G Gross receipts \$ 452,097

F Name and address of principal officer: KAYLEEN SIMMONS, 205 NORTH 400 WEST, SALT LAKE CITY, UT 841031125

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)

H(c) Group exemption number ▶

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

J Website: ▶ HTTP://WWW.PHPUTAH.ORG/

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1996

M State of legal domicile: UT

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
PEOPLE HELPING PEOPLE (PHP) IS DEDICATED TO REDUCING THE NUMBER OF CHILDREN LIVING IN POVERTY BY TEACHING LOW-INCOME WOMEN, PRIMARILY SINGLE MOMS, HOW TO EARN A LIVING WAGE EACH YEAR, 1,000 PROSPECTIVE CLIENTS ENROLL IN OUR EMPLOYMENT PROGRAM AND BEGIN RECEIVING OUR MONTHLY EMPLOYMENT TIPS CALENDAR AND OUTREACH PHONE SUPPORT OUR GOAL IS TO HAVE 500 CLIENTS PARTICIPATE IN OUR EMPLOYMENT WORKSHOPS AND 350 ENGAGE IN ONE OR MORE PHASES OF OUR 4-PHASE ONE-ON-ONE MENTORING AND COACHING PROGRAM

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)	3	20
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	20
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	12
6 Total number of volunteers (estimate if necessary)	6	100
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 34	7b	

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	700,372	426,118
9 Program service revenue (Part VIII, line 2g)	15,550	16,095
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,242	9,884
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	717,164	452,097
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
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)	354,253	334,307
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 18,342		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	107,670	130,108
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	461,923	464,415
19 Revenue less expenses Subtract line 18 from line 12	255,241	-12,318

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	1,129,032	1,111,027
21 Total liabilities (Part X, line 26)	27,567	20,773
22 Net assets or fund balances Subtract line 21 from line 20	1,101,465	1,090,254

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: ***** Date: 2020-01-06
KAYLEEN SIMMONS EX DIRECTOR
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: BOUNTIFUL PEAK ADVISORS Preparer's signature: Date: 2020-01-22 Check if self-employed PTIN: P00081558
Firm's name: BOUNTIFUL PEAK ADVISORS Firm's EIN: 46-0952065
Firm's address: 1564 SOUTH 500 WEST SUITE 201 BOUNTIFUL, UT 840107400 Phone no: (801) 294-3155

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

PEOPLE HELPING PEOPLE (PHP) IS DEDICATED TO REDUCING THE NUMBER OF CHILDREN LIVING IN POVERTY BY TEACHING LOW-INCOME WOMEN, PRIMARILY SINGLE MOMS, HOW TO EARN A LIVING WAGE EACH YEAR, 1,000 PROSPECTIVE CLIENTS ENROLL IN OUR EMPLOYMENT PROGRAM AND BEGIN RECEIVING OUR MONTHLY EMPLOYMENT TIPS CALENDAR AND OUTREACH PHONE SUPPORT OUR GOAL IS TO HAVE 500 CLIENTS PARTICIPATE IN OUR EMPLOYMENT WORKSHOPS AND 350 ENGAGE IN ONE OR MORE PHASES OF OUR 4- PHASE ONE-ON-ONE MENTORING AND COACHING PROGRAM

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 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 \$ 413,796 including grants of \$) (Revenue \$ 16,095)
See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 413,796

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules *(continued)*

		Yes	No
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? <i>If "Yes," complete Schedule J</i>	23	No
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, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	No
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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b	No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28a	Yes
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
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? <i>If "Yes," complete Schedule R, Part I</i>	33	No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	

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		2a	12		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			No
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	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			No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
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 as charitable contributions?	6a			No
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			No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			No
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			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			No
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.					
	Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring 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?					
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? Note. See the instructions for additional information the organization must report on Schedule O	13a			
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			No
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N	15			No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	16			No

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 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?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following; 8a The governing body?; 8b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, 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.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply; 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year; 20 State the name, address, and telephone number of the person who possesses the organization's books and records.

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

Check if Schedule O contains a response or note to any line 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, or 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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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) DAWN CANNON PAST CHAIR	1 00	X						0	0	0
(2) TAMMY ANTON BOARD CHAIR	2 00	X		X				0	0	0
(3) MISTI WILLIAMS VALENTE BOARD MEMBER	1 00	X						0	0	0
(4) JANET OGDEN CHAIR-ELECT	2 00	X						0	0	0
(5) ROB PALMER BOARD MEMBER	0 00	X						0	0	0
(6) MARGARET MCDERMOTT BOARD MEMBER	2 00	X						0	0	0
(7) DAVID MARX BOARD MEMBER	0 00	X						0	0	0
(8) JOEL CANNON PAST CHAIR	1 00	X						0	0	0
(9) GEORGE CANNON PAST CHAIR	2 00	X						0	0	0
(10) HEATHER CHRISTENSEN BOARD MEMBER	0 50	X						0	0	0
(11) SHELLI MECHAM BOARD MEMBER	0 50	X						0	0	0
(12) ELIZABETH TRIMIAR BOARD MEMBER	0 50	X						0	0	0
(13) SCOTT SIMMONS BOARD MEMBER	0 50	X						0	0	0
(14) AMY HU SUNDERLAND BOARD MEMBER	0 50	X						0	0	0
(15) CHARMINE WHITE BOARD MEMBER	0 50	X						0	0	0
(16) SUSAN RICHARDS BOARD MEMBER	0 50	X						0	0	0
(17) CLAIRE SCOTT SECRETARY	2 00	X		X				0	0	0

Part VIII Statement of Revenue

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

Table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-1g and 1h Total.

Table for Program Service Revenue with columns for Business Code and revenue amounts. Rows include 2a-2f and 2g Total.

Main revenue table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 3-11e and 12 Total revenue.

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).

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees	101,667	79,300	7,117	15,250
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	184,149	184,149		
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	19,595	18,758	488	349
10 Payroll taxes	28,896	27,663	719	514
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	18,035		18,035	
d Lobbying				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses	26,357	25,202	2	1,153
14 Information technology	15,683	15,683		
15 Royalties				
16 Occupancy	27,911	26,490	426	995
17 Travel	1,619	1,619		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,946	994	952	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,073		1,073	
23 Insurance	3,037		3,037	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CLIENT ASSISTANCE	14,186	14,186		
b TRAINING MANUALS	12,000	12,000		
c MEALS AND ENTERTAINMENT	5,393	5,345	48	
d MISCELLANEOUS	2,868	2,407	380	81
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	464,415	413,796	32,277	18,342
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	326,585	1	121,649
	2 Savings and temporary cash investments	772,018	2	110,214
	3 Pledges and grants receivable, net	3,882	3	
	4 Accounts receivable, net	20,047	4	6,621
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other 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) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	2,133	9	1,572
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	14,825		
	b Less accumulated depreciation	12,206		
		3,692	10c	2,619
	11 Investments—publicly traded securities		11	867,677
	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	675	15	675	
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,129,032	16	1,111,027	
Liabilities	17 Accounts payable and accrued expenses	27,567	17	20,773
	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 Loans and other 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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	27,567	26	20,773
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,081,465	27	1,077,628
	28 Temporarily restricted net assets	20,000	28	12,626
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	1,101,465	33	1,090,254	
34 Total liabilities and net assets/fund balances	1,129,032	34	1,111,027	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	452,097
2	Total expenses (must equal Part IX, column (A), line 25)	2	464,415
3	Revenue less expenses Subtract line 2 from line 1	3	-12,318
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,101,465
5	Net unrealized gains (losses) on investments	5	1,107
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,090,254

Part XII Financial Statements and Reporting

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

- 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?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- 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?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 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?
- 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

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Software ID:**Software Version:****EIN:** 84-1373515**Name:** PEOPLE HELPING PEOPLE

Form 990 (2018)

Form 990, Part III, Line 4a:

PROGRAM OUTLINE OUR EMPLOYMENT PROGRAM OFFERS EDUCATION, MENTORING AND COACHING THE EDUCATION COMPONENT OFFERS A SERIES OF EMPLOYMENT WORKSHOPS HELD TWICE A MONTH IN SALT LAKE AND WEBER COUNTIES WORKSHOPS ARE REPEATED REGULARLY AND ARE TAUGHT FROM THE PERSPECTIVE OF THE EMPLOYER THE MENTORING AND COACHING COMPONENT CONSISTS OF 4 PHASES PHASE 1, COACHING, FOCUSES ON EMPLOYMENT PREPARATION CLIENTS MEET ONE-ON-ONE WITH VOLUNTEER HUMAN RESOURCE COACHES TO COMPLETE EMPLOYMENT TOOLS NECESSARY FOR A SUCCESSFUL JOB SEARCH PHASE 2, MENTORING, FOCUSES ON RESUME BUILDING AND JOB SEARCH VOLUNTEER MENTORS HELP CLIENTS REVIEW WHAT THEY LEARN IN WORKSHOPS AND AT EMPLOYER MEET AND GREETINGS, IDENTIFY APPROPRIATE JOBS, CREATE EMPLOYMENT TOOLS PACKETS AND PREPARE FOR RESUME AND INTERVIEW COACHING SESSIONS THEY HELP CLIENTS DEVELOP A JOB SEARCH PLAN, APPLY FOR JOBS ONLINE AND PRACTICE FOR INTERVIEWS PHASE 3, EMPLOYMENT STRATEGIES IS DESIGNED TO SUPPORT CLIENTS DURING THE FIRST 12 MONTHS OF A NEW JOB THIS PHASE HELPS THEM NAVIGATE THROUGH THE LEARNING CURVE OF A NEW JOB, MANAGE THEIR PERSONAL LIVES, AND MAINTAIN STEADY EMPLOYMENT FOR ONE FULL YEAR PHASE 4, WOMEN'S PROFESSIONAL NETWORK (WPN) FOCUSES ON GETTING AHEAD AND PROVIDES ONGOING EDUCATION, SKILLS AND EMPLOYMENT TOOLS DEVELOPMENT, ALONG WITH OPPORTUNITIES FOR MEMBERS TO GAIN NETWORKING AND LEADERSHIP SKILLS EVIDENCE OF NEED 173,000 OF UTAH CHILDREN LIVE IN SINGLE PARENT FAMILIES, 98,000 OF UTAH CHILDREN LIVE IN POVERTY, 20,000 OF UTAH SINGLE PARENTS W/KIDS LIVE BELOW POVERTY, 176,000 OF UTAH CHILDREN HAVE PARENTS WHO LACK SECURE EMPLOYMENT UTAH CURRENTLY HAS 77,000 LOW-INCOME WORKING FAMILIES WITH CHILDREN UTAH HAS THE SECOND LARGEST GENDER WAGE GAP IN THE NATION IN WHICH WOMEN EARN 71 CENTS PER DOLLAR THAT A MAN EARNS, ACCORDING TO THE MOST RECENT CENSUS DATA THE GAP IS MORE SIGNIFICANT FOR WORKING MOTHERS UTAH WOMEN HOLD 65% OF LOW-WAGE JOBS (DEFINED AS THOSE PAYING 10 10 PER HOUR OR LESS) IN UTAH, 59% OF MOTHERS WITH CHILDREN UNDER THE AGE OF SIX AND 73% OF MOTHERS WITH CHILDREN BETWEEN SIX AND 17 ARE IN THE WORK FORCE UTAH IS ALSO RANKED FIRST IN THE NATION FOR THE NUMBER OF EMPLOYED WOMEN WHO WORK PART-TIME WHERE THEY ARE LESS LIKELY TO RECEIVE EMPLOYER PROVIDED BENEFITS 26 3% PERCENT OF MOTHERS IN UTAH ARE THE SOLE OR PRIMARY BREADWINNERS FOR THEIR FAMILIES 88,000 FAMILIES IN UTAH HAVE A FEMALE HEAD OF HOUSEHOLD WITH 26% LIVING BELOW THE POVERTY LINE HOWEVER, THIS NUMBER JUMPS TO 37 5% FOR FEMALE-HEADED HOUSEHOLDS WITH CHILDREN UNDER 18 AND CLIMBS HIGHER TO 46 9% IN FAMILIES IN WHICH THE CHILDREN ARE UNDER THE AGE OF 5 CHILDREN LIVING IN POVERTY ARE AT HIGH RISK FOR MALNUTRITION, HOMELESSNESS, SCHOOL DROPOUT, DRUG ABUSE, TEEN PREGNANCY, GANG INVOLVEMENT AND CRIMINAL ACTIVITY FURTHERMORE, CHILDREN WHOSE FAMILIES RECEIVE WELFARE ARE MORE LIKELY TO BE ON WELFARE THEMSELVES IN THE AREAS WE SERVE OVER 76,000 CHILDREN DO NOT HAVE HEALTH INSURANCE, OVER 50,000 FAMILIES RECEIVE FOOD STAMPS AND OVER 130,000 CHILDREN ARE ELIGIBLE FOR SCHOOL FREE/REDUCED LUNCH PROGRAMS WHILE THE ECONOMY IS DOING WELL AND UNEMPLOYMENT IS AT AN ALL-TIME LOW, FOR LOW-INCOME WOMEN AND SINGLE MOMS, THINGS HAVE NOT IMPROVED MUCH ACCORDING TO FACT FINDER CENSUS GOV, THE MEDIAN HOUSEHOLD INCOME IN SALT LAKE COUNTY IS 71,471 MALES IN SALT LAKE COUNTY HAVE AN AVERAGE INCOME THAT IS 1 54 TIMES HIGHER THAN THE AVERAGE INCOME OF FEMALES, WHICH IS 42,277 THE INCOME INEQUALITY IN SALT LAKE COUNTY (MEASURED USING THE GINI INDEX) IS 0 48, WHICH IS HIGHER THAN THE NATIONAL AVERAGE TO MAKE THINGS MORE CHALLENGING, THE MEDIAN HOUSEHOLD INCOME, ACCORDING TO THE NEW FEDERAL GUIDELINES FOR SALT LAKE CITY, HAS JUMPED TO 80,000 WITH THE DISPARITY IN EARNINGS AND THE COST OF HOUSING, WOMEN ARE STRUGGLING TO PROVIDE FOR THEMSELVES AND THEIR FAMILIES EMPLOYMENT SOLUTION WHILE THERE IS NO ONE-SIZE FITS ALL SOLUTION TO THIS COMPLEX PROBLEM, WE BELIEVE THAT THE ONLY PERMANENT ROUTE OUT OF POVERTY IS AN ADEQUATE INCOME, THAT A GOOD JOB, WITH A GOOD COMPANY AND LONG-TERM EMPLOYMENT SUPPORT CAN GO A LONG WAY IN HELPING SINGLE MOMS BECOME FINANCIALLY SELF-SUFFICIENT WHEN LOW-INCOME WOMEN LEARN HOW TO FIND A GOOD JOB, KEEP A GOOD JOB, SEEK RAISES AND PROMOTIONS AND EVENTUALLY EARN ENOUGH TO PAY THEIR BILLS, THEY CAN STABILIZE THEIR HOUSING SITUATIONS, AFFORD BETTER CHILDCARE AND GAIN ACCESS TO HEALTHCARE FOR THEMSELVES AND THEIR FAMILIES THROUGH THEIR EMPLOYER THEY CAN ALSO PARTICIPATE IN COMPANY OFFERED TRAINING AND EDUCATION REIMBURSEMENT PROGRAMS THAT WILL HELP THEM BECOME MORE VALUABLE TO THEIR EMPLOYER POPULATION SERVED OVER 82% OF OUR CLIENTS ARE SINGLE MOTHERS AND MANY RECEIVE PUBLIC ASSISTANCE 84% ARE CAUCASIAN, 6% ARE AFRICAN AMERICAN, 3% ARE AMERICAN INDIAN, 1% ARE PACIFIC ISLANDER, 3% ARE ASIAN AND 3% ARE MULTIPLE RACE, 10% ARE HISPANIC 100% ARE CONSIDERED LOW-INCOME BY HUD GUIDELINES WHEN THEY ENTER OUR PROGRAM 96% ARE CONSIDERED EXTREMELY LOW-INCOME VOLUNTEERS & COLLABORATIONS PHP MANAGES HUNDREDS OF VOLUNTEER HOURS EACH YEAR VOLUNTEERS ARE AN INTEGRAL PART OF OUR SUCCESS APPROXIMATELY 100 LOCAL BUSINESS PROFESSIONALS SERVE AS VOLUNTEER MENTORS, COACHES AND TRAINERS PHP COLLABORATES WITH MULTIPLE AGENCIES INCLUDING HOUSING AUTHORITIES, UTAH COMMUNITY ACTION, DEPARTMENT OF WORKFORCE SERVICES, HEAD START, AND UTAH STATE DIVISION OF REHABILITATION MEASUREMENT AND REPORTING PHP MEASURES PROGRAM PARTICIPATION THROUGH REGULAR TRACKING OF CLIENT INTAKE FORMS, WORKSHOP ATTENDANCE, AND COMPLETION OF EMPLOYMENT TOOLS AND COACHING SESSIONS CLIENTS ARE REWARDED FOR COMPLETION OF EACH PROGRAM PHASE STATISTICS ARE REPORTED QUARTERLY IN FISCAL 2019 OVER 6500 LOW-INCOME WOMEN LEARNED ABOUT OUR PROGRAM THROUGH OUR COMMUNITY OUTREACH EFFORTS, 1,775 SIGNED UP TO RECEIVE MONTHLY MAILERS AND FOLLOW-UP SUPPORT, 607 PARTICIPATED IN ONE OR MORE WORKSHOPS AND 669 ENGAGED IN AT LEAST ONE PHASE OF OUR MENTORING AND COACHING PROGRAM FOR PARTICIPATION IN VARIOUS EDUCATIONAL, COACHING AND MENTORING ACTIVITIES, CLIENTS EARNED 1974 AWARDS AND CERTIFICATES 322 EDUCATION, 770 PHASE 1 COACHING, 334 PHASE 2 MENTORING, 162 PHASE 3 EMPLOYMENT STRATEGIES & PHASE 4 WOMEN'S PROFESSIONAL NETWORK AND 386 EMPLOYMENT MILESTONES IN ADDITION, EACH YEAR PHP ASKS GRADUATES TO PARTICIPATE IN A SURVEY MEASURING THEIR EMPLOYMENT PROGRESS FOR FISCAL 2019 SURVEYS FROM PHASE 4 GRADUATES PROVIDED THE FOLLOWING RESULTS 100% ARE EMPLOYED FULL-TIME WITH AN AVERAGE WAGE OF 23 70 PER HOUR, 96% HAVE BENEFITS OFFERED THROUGH THEIR EMPLOYER, 85% HAVE BEEN WITH THE SAME EMPLOYER FOR MORE THAN 5 YEARS, 82% RECEIVED AT LEAST ONE RAISE WITH AN AVERAGE OF 1 45 PER HOUR, 42% HAVE ACCESS TO COMPANY TRAINING AND EDUCATION REIMBURSEMENT SINCE ENROLLING IN OUR EMPLOYMENT PROGRAM PHASE 4 GRADUATES REPORTED THE FOLLOWING ACCOMPLISHMENTS 93% ARE NO LONGER RECEIVING ASSISTANCE, 92% PAID OFF THEIR DEBT, 89% RECEIVED RECOGNITION AT WORK, 85% BOUGHT A NEW CAR, 71% STARTED A SAVINGS ACCOUNT OR A RETIREMENT PLAN, 68% ENROLLED THEIR KIDS IN COLLEGE, 50% BOUGHT A NEW HOME, 43% COMPLETED A 2 OR 4-YEAR DEGREE SUSTAINABILITY AND HISTORY SINCE 1993, PHP HAS PROVIDED EXTENSIVE EMPLOYMENT SERVICES TO LOW-INCOME WOMEN, EFFECTIVELY LEVERAGED RESOURCES THROUGH VOLUNTEERS AND COMMUNITY COLLABORATION AND POSITIVELY IMPACTED OUR COMMUNITY WE CURRENTLY HAVE OFFICES IN SALT LAKE AND WEBER/DAVIS COUNTIES WE HAVE DEVELOPED RELATIONSHIPS WITH MANY COMMUNITY PARTNERS WHO SEE THE VALUE IN THE WORK WE DO AND ARE COMMITTED TO OUR ONGOING SUCCESS SUMMARY SINCE OUR EMPLOYMENT PROGRAM WAS EXPANDED 16 YEARS AGO, PHP HAS COLLABORATED WITH OVER 300 COMMUNITY AND GOVERNMENT AGENCIES, PROVIDED OUTREACH PHONE SUPPORT AND MONTHLY EMPLOYMENT TIPS POSTCARDS TO OVER 16,775 WOMEN, EDUCATED OVER 7,200 WOMEN THROUGH OUR EMPLOYMENT WORKSHOPS SERIES, PARTNERED OVER 3,000 WOMEN WITH MENTORS AND COACHES, DEVELOPED AN EMPLOYMENT STRATEGIES NETWORK (ESN) TO SUPPORT NEWLY EMPLOYED AND ONGOING JOB SEARCH CLIENTS AND A WOMEN'S PROFESSIONAL NETWORK (WPN) TO PROVIDE CAREER PLANNING AND ONGOING EMPLOYMENT SUPPORT FOR PROGRAM GRADUATES, RECRUITED AND MANAGED OVER 3 6 MILLION DOLLARS IN VOLUNTEER HOURS, AND MADE AN ECONOMIC IMPACT FOR BOTH TAX PAYERS AND OUR COMMUNITIES OF OVER 31 MILLION SUCCESSFUL EMPLOYMENT MAKES A HUGE DIFFERENCE IN THE LIVES OF THE WOMEN AND CHILDREN WE SERVE IN OUR PROGRAM WOMEN WHO BECOME SUCCESSFULLY EMPLOYED CONTRIBUTE IN MANY WAYS THEY BECOME TAX PAYING CITIZENS, SUPPORT THE ECONOMY BY PURCHASING GOODS AND SERVICES, BECOME HOMEOWNERS AND SEND THEIR CHILDREN TO COLLEGE AT PHP, WE BELIEVE THE ONLY PERMANENT ROUTE OUT OF POVERTY IS AN ADEQUATE INCOME OUR EMPLOYMENT PROGRAM, THROUGH THE WORK OF DEDICATED VOLUNTEERS AND STAFF, IS COMMITTED TO CREATING AN ENVIRONMENT WHERE THE SINGLE MOMS WE SERVE CAN AND WILL FLOURISH BOTH IN THEIR CAREERS AND IN LIFE WE BELIEVE THAT WHEN MOMS DO BETTER, KIDS DO BETTER WHEN KIDS DO BETTER, COMMUNITIES DO BETTER, AND WHEN COMMUNITIES DO BETTER, WE

SCHEDULE A
(Form 990 or
990EZ)

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.

▶ Go to www.irs.gov/Form990 for the latest information.

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
PEOPLE HELPING PEOPLE

Employer identification number

84-1373515

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 12, 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 (Form 990 or 990-EZ))
- 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 agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10 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)
- 11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

(Complete only if you checked the box on line 5, 7, 8, or 9 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	457,324	594,010	626,588	700,372	426,118	2,804,412
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	457,324	594,010	626,588	700,372	426,118	2,804,412
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)						409,240
6	Public support. Subtract line 5 from line 4						2,395,172

Section B. Total Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	457,324	594,010	626,588	700,372	426,118	2,804,412
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	183	291	678	1,242	1,190	3,584
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						2,807,996
12	Gross receipts from related activities, etc. (see instructions)					12	61,439

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 2018 (line 6, column (f) divided by line 11, column (f))	14	85.300 %
15	Public support percentage for 2017 Schedule A, Part II, line 14	15	84.730 %

16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and 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—2017. 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—2018. 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2017. 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 VI 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 10 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 year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 VI.)						
13	Total support. (Add lines 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 2018 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. 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—2017. 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 Supporting Organizations

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

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

Additional Data

Software ID:

Software Version:

EIN: 84-1373515

Name: PEOPLE HELPING PEOPLE

Part VI **Supplemental Information.** Provide the explanations required by Part II, 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 B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
PEOPLE HELPING PEOPLE

Employer identification number
84-1373515

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of 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" on 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) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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 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 7/25/06, 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, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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 XIII, 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" on 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 XIII, 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) Revenue included on 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 Revenue included on 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 XIII
- 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 the organization answered "Yes" on 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 XIII and complete the following table
- | | Amount |
|----------------------------------------|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | |
|--------------------------------------------------------------------------------------------------------|-----|----|
| (i) unrelated organizations | Yes | No |
| (ii) related organizations | | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(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				
d Equipment		14,825	12,206	2,619
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				2,619

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(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)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶	

Part VIII Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	▶

Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶

2. Liability for uncertain tax positions In Part XIII, 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) Check here if the text of the footnote has been provided in Part XIII

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	669,255
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	1,108
b	Donated services and use of facilities	2b	216,050
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	217,158
3	Subtract line 2e from line 1	3	452,097
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	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	452,097

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	680,465
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	216,050
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	216,050
3	Subtract line 2e from line 1	3	464,415
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	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	464,415

Part XIII Supplemental Information

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, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation	
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Part XIII **Supplemental Information (continued)**

Return Reference	Explanation
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Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
 ▶ **Attach to Form 990 or Form 990-EZ.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
PEOPLE HELPING PEOPLE

Employer identification number
84-1373515

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)
 Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.
 Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total						▶ \$						

Part III Grants or Assistance Benefiting Interested Persons.
 Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) THE SIMMONS GROUP	OWNED BY ED	12,000	PURCHASE OF MANUALS		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation

SCHEDULE O
(Form 990 or 990-EZ)**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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018**Open to Public Inspection**

Department of the Treasury

Name of the organization
PEOPLE HELPING PEOPLE

Employer identification number

84-1373515

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	PEOPLE HELPING PEOPLE (PHP) IS DEDICATED TO REDUCING THE NUMBER OF CHILDREN LIVING IN POVERTY BY TEACHING LOW-INCOME WOMEN, PRIMARILY SINGLE MOMS, HOW TO EARN A LIVING WAGE EACH YEAR, 1,000 PROSPECTIVE CLIENTS ENROLL IN OUR EMPLOYMENT PROGRAM AND BEGIN RECEIVING OUR MONTHLY EMPLOYMENT TIPS CALENDAR AND OUTREACH PHONE SUPPORT OUR GOAL IS TO HAVE 500 CLIENTS PARTICIPATE IN OUR EMPLOYMENT WORKSHOPS AND 350 ENGAGE IN ONE OR MORE PHASES OF OUR 4-PHASE ONE-ON-ONE MENTORING AND COACHING PROGRAM

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PAGE 2, PART III, LINE 4A</p>	<p>PROGRAM OUTLINE OUR EMPLOYMENT PROGRAM OFFERS EDUCATION, MENTORING AND COACHING THE EDUCATION COMPONENT OFFERS A SERIES OF EMPLOYMENT WORKSHOPS HELD TWICE A MONTH IN SALT LAKE AND WEBER COUNTIES WORKSHOPS ARE REPEATED REGULARLY AND ARE TAUGHT FROM THE PERSPECTIVE OF THE EMPLOYER THE MENTORING AND COACHING COMPONENT CONSISTS OF 4 PHASES PHASE 1, COACHING , FOCUSES ON EMPLOYMENT PREPARATION CLIENTS MEET ONE-ON-ONE WITH VOLUNTEER HUMAN RESOURCE COACHES TO COMPLETE EMPLOYMENT TOOLS NECESSARY FOR A SUCCESSFUL JOB SEARCH PHASE 2, MENTORING, FOCUSES ON RESUME BUILDING AND JOB SEARCH VOLUNTEER MENTORS HELP CLIENTS REVIEW WHAT THEY LEARN IN WORKSHOPS AND AT EMPLOYER MEET AND GREETINGS, IDENTIFY APPROPRIATE JOBS, CREATE EMPLOYMENT TOOLS PACKETS AND PREPARE FOR RESUME AND INTERVIEW COACHING SESSIONS THEY HELP CLIENTS DEVELOP A JOB SEARCH PLAN, APPLY FOR JOBS ONLINE AND PRACTICE FOR INTERVIEWS PHASE 3, EMPLOYMENT STRATEGIES IS DESIGNED TO SUPPORT CLIENTS DURING THE FIRST 12 MONTHS OF A NEW JOB THIS PHASE HELPS THEM NAVIGATE THROUGH THE LEARNING CURVE OF A NEW JOB, MANAGE THEIR PERSONAL LIVES, AND MAINTAIN STEADY EMPLOYMENT FOR ONE FULL YEAR PHASE 4, WOMEN'S PROFESSIONAL NETWORK (WPN) FOCUSES ON GETTING AHEAD AND PROVIDES ONGOING EDUCATION, SKILLS AND EMPLOYMENT TOOLS DEVELOPMENT, ALONG WITH OPPORTUNITIES FOR MEMBERS TO GAIN NETWORKING AND LEADERSHIP SKILLS EVIDENCE OF NEED 173,000 OF UTAH CHILDREN LIVE IN SINGLE PARENT FAMILIES, 98,000 OF UTAH CHILDREN LIVE IN POVERTY, 20,000 OF UTAH SINGLE PARENTS W/KIDS LIVE BELOW POVERTY, 176,000 OF UTAH CHILDREN HAVE PARENTS WHO LACK SECURE EMPLOYMENT UTAH CURRENTLY HAS 77,000 LOW-INCOME WORKING FAMILIES WITH CHILDREN UTAH HAS THE SECOND LARGEST GENDER WAGE GAP IN THE NATION IN WHICH WOMEN EARN 71 CENTS PER DOLLAR THAT A MAN EARNS, ACCORDING TO THE MOST RECENT CENSUS DATA THE GAP IS MORE SIGNIFICANT FOR WORKING MOTHERS UTAH WOMEN HOLD 65% OF LOW-WAGE JOBS (DEFINED AS THOSE PAYING 10.10 PER HOUR OR LESS) IN UTAH, 59% OF MOTHERS WITH CHILDREN UNDER THE AGE OF SIX AND 73% OF MOTHERS WITH CHILDREN BETWEEN SIX AND 17 ARE IN THE WORK FORCE UTAH IS ALSO RANKED FIRST IN THE NATION FOR THE NUMBER OF EMPLOYED WOMEN WHO WORK PART-TIME WHERE THEY ARE LESS LIKELY TO RECEIVE EMPLOYER PROVIDED BENEFITS 26.3% PERCENT OF MOTHERS IN UTAH ARE THE SOLE OR PRIMARY BREADWINNERS FOR THEIR FAMILIES 88,000 FAMILIES IN UTAH HAVE A FEMALE HEAD OF HOUSEHOLD WITH 26% LIVING BELOW THE POVERTY LINE HOWEVER, THIS NUMBER JUMPS TO 37.5% FOR FEMALE-HEADED HOUSEHOLDS WITH CHILDREN UNDER 18 AND CLIMBS HIGHER TO 46.9% IN FAMILIES IN WHICH THE CHILDREN ARE UNDER THE AGE OF 5 CHILDREN LIVING IN POVERTY ARE AT HIGH RISK FOR MALNUTRITION, HOMELESSNESS, SCHOOL DROPOUT, DRUG ABUSE, TEEN PREGNANCY, GANG INVOLVEMENT AND CRIMINAL ACTIVITY FURTHERMORE, CHILDREN WHOSE FAMILIES RECEIVE WELFARE ARE MORE LIKELY TO BE ON WELFARE THEMSELVES IN THE AREAS WE SERVE OVER 76,000 CHILDREN DO NOT HAVE HEALTH INSURANCE, OVER 50,000 FAMILIES RECEIVE FOOD STAMPS</p>

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<p>FORM 990, PAGE 2, PART III, LINE 4A</p>	<p>AND OVER 130,000 CHILDREN ARE ELIGIBLE FOR SCHOOL FREE/REDUCED LUNCH PROGRAMS WHILE THE ECONOMY IS DOING WELL AND UNEMPLOYMENT IS AT AN ALL-TIME LOW, FOR LOW-INCOME WOMEN AND SINGLE MOMS, THINGS HAVE NOT IMPROVED MUCH ACCORDING TO FACT FINDER CENSUS GOV. THE MEDIAN HOUSEHOLD INCOME IN SALT LAKE COUNTY IS 71,471 MALES IN SALT LAKE COUNTY HAVE AN AVERAGE INCOME THAT IS 1.54 TIMES HIGHER THAN THE AVERAGE INCOME OF FEMALES, WHICH IS 42,277 THE INCOME INEQUALITY IN SALT LAKE COUNTY (MEASURED USING THE GINI INDEX) IS 0.48, WHICH IS HIGHER THAN THE NATIONAL AVERAGE TO MAKE THINGS MORE CHALLENGING, THE MEDIAN HOUSEHOLD INCOME, ACCORDING TO THE NEW FEDERAL GUIDELINES FOR SALT LAKE CITY, HAS JUMPED TO 80,000 WITH THE DISPARITY IN EARNINGS AND THE COST OF HOUSING, WOMEN ARE STRUGGLING TO PROVIDE FOR THEMSELVES AND THEIR FAMILIES EMPLOYMENT SOLUTION WHILE THERE IS NO ONE-SIZE FITS ALL SOLUTION TO THIS COMPLEX PROBLEM, WE BELIEVE THAT THE ONLY PERMANENT ROUTE OUT OF POVERTY IS AN ADEQUATE INCOME, THAT A GOOD JOB, WITH A GOOD COMPANY AND LONG-TERM EMPLOYMENT SUPPORT CAN GO A LONG WAY IN HELPING SINGLE MOMS BECOME FINANCIALLY SELF-SUFFICIENT WHEN LOW-INCOME WOMEN LEARN HOW TO FIND A GOOD JOB, KEEP A GOOD JOB, SEEK RAISES AND PROMOTIONS AND EVENTUALLY EARN ENOUGH TO PAY THEIR BILLS, THEY CAN STABILIZE THEIR HOUSING SITUATIONS, AFFORD BETTER CHILDCARE AND GAIN ACCESS TO HEALTHCARE FOR THEMSELVES AND THEIR FAMILIES THROUGH THEIR EMPLOYER THEY CAN ALSO PARTICIPATE IN COMPANY OFFERED TRAINING AND EDUCATION REIMBURSEMENT PROGRAMS THAT WILL HELP THEM BECOME MORE VALUABLE TO THEIR EMPLOYER POPULATION SERVED OVER 82% OF OUR CLIENTS ARE SINGLE MOTHERS AND MANY RECEIVE PUBLIC ASSISTANCE 84% ARE CAUCASIAN, 6% ARE AFRICAN AMERICAN, 3% ARE AMERICAN INDIAN, 1% ARE PACIFIC ISLANDER, 3% ARE ASIAN AND 3% ARE MULTIPLE RACE, 10% ARE HISPANIC 100% ARE CONSIDERED LOW-INCOME BY HUD GUIDELINES WHEN THEY ENTER OUR PROGRAM 96% ARE CONSIDERED EXTREMELY LOW-INCOME VOLUNTEERS & COLLABORATIONS PHP MANAGES HUNDREDS OF VOLUNTEER HOURS EACH YEAR VOLUNTEERS ARE AN INTEGRAL PART OF OUR SUCCESS APPROXIMATELY 100 LOCAL BUSINESS PROFESSIONALS SERVE AS VOLUNTEER MENTORS, COACHES AND TRAINERS PHP COLLABORATES WITH MULTIPLE AGENCIES INCLUDING HOUSING AUTHORITIES, UTAH COMMUNITY ACTION, DEPARTMENT OF WORKFORCE SERVICES, HEAD START, AND UTAH STATE DIVISION OF REHABILITATION MEASUREMENT AND REPORTING PHP MEASURES PROGRAM PARTICIPATION THROUGH REGULAR TRACKING OF CLIENT INTAKE FORMS, WORKSHOP ATTENDANCE, AND COMPLETION OF EMPLOYMENT TOOLS AND COACHING SESSIONS CLIENTS ARE REWARDED FOR COMPLETION OF EACH PROGRAM PHASE STATISTICS ARE REPORTED QUARTERLY IN FISCAL 2019 OVER 6500 LOW-INCOME WOMEN LEARNED ABOUT OUR PROGRAM THROUGH OUR COMMUNITY OUTREACH EFFORTS, 1,775 SIGNED UP TO RECEIVE MONTHLY MAILERS AND FOLLOW-UP SUPPORT, 607 PARTICIPATED IN ONE OR MORE WORKSHOPS AND 669 ENGAGED IN AT LEAST ONE PHASE OF OUR MENTORING AND COACHING PROGRAM FOR PARTICIPATION IN VARIOUS EDUCATIONAL,</p>

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<p>FORM 990, PAGE 2, PART III, LINE 4A</p>	<p>COACHING AND MENTORING ACTIVITIES, CLIENTS EARNED 1974 AWARDS AND CERTIFICATES 322 EDUCATION, 770 PHASE 1 COACHING, 334 PHASE 2 MENTORING, 162 PHASE 3 EMPLOYMENT STRATEGIES & PHASE 4 WOMEN'S PROFESSIONAL NETWORK AND 386 EMPLOYMENT MILESTONES IN ADDITION, EACH YEAR PHP ASKS GRADUATES TO PARTICIPATE IN A SURVEY MEASURING THEIR EMPLOYMENT PROGRESS FOR FISCAL 2019 SURVEYS FROM PHASE 4 GRADUATES PROVIDED THE FOLLOWING RESULTS 100% ARE EMPLOYED FULL-TIME WITH AN AVERAGE WAGE OF 23.70 PER HOUR, 96% HAVE BENEFITS OFFERED THROUGH THEIR EMPLOYER, 85% HAVE BEEN WITH THE SAME EMPLOYER FOR MORE THAN 5 YEARS, 82% RECEIVED AT LEAST ONE RAISE WITH AN AVERAGE OF 1.45 PER HOUR, 42% HAVE ACCESS TO COMPANY TRAINING AND EDUCATION REIMBURSEMENT SINCE ENROLLING IN OUR EMPLOYMENT PROGRAM PHASE 4 GRADUATES REPORTED THE FOLLOWING ACCOMPLISHMENTS 93% ARE NO LONGER RECEIVING ASSISTANCE, 92% PAID OFF THEIR DEBT, 89% RECEIVED RECOGNITION AT WORK, 85% BOUGHT A NEW CAR, 71% STARTED A SAVINGS ACCOUNT OR A RETIREMENT PLAN, 68% ENROLLED THEIR KIDS IN COLLEGE, 50% BOUGHT A NEW HOME, 43% COMPLETED A 2 OR 4-YEAR DEGREE SUSTAINABILITY AND HISTORY SINCE 1993, PHP HAS PROVIDED EXTENSIVE EMPLOYMENT SERVICES TO LOW-INCOME WOMEN, EFFECTIVELY LEVERAGED RESOURCES THROUGH VOLUNTEERS AND COMMUNITY COLLABORATION AND POSITIVELY IMPACTED OUR COMMUNITY WE CURRENTLY HAVE OFFICES IN SALT LAKE AND WEBER/DAVIS COUNTIES WE HAVE DEVELOPED RELATIONSHIPS WITH MANY COMMUNITY PARTNERS WHO SEE THE VALUE IN THE WORK WE DO AND ARE COMMITTED TO OUR ONGOING SUCCESS SUMMARY SINCE OUR EMPLOYMENT PROGRAM WAS EXPANDED 16 YEARS AGO, PHP HAS COLLABORATED WITH OVER 300 COMMUNITY AND GOVERNMENT AGENCIES, PROVIDED OUTREACH PHONE SUPPORT AND MONTHLY EMPLOYMENT TIPS POSTCARDS TO OVER 16,775 WOMEN, EDUCATED OVER 7,200 WOMEN THROUGH OUR EMPLOYMENT WORKSHOPS SERIES, PARTNERED OVER 3,000 WOMEN WITH MENTORS AND COACHES, DEVELOPED AN EMPLOYMENT STRATEGIES NETWORK (ESN) TO SUPPORT NEWLY EMPLOYED AND ONGOING JOB SEARCH CLIENTS AND A WOMEN'S PROFESSIONAL NETWORK (WPN) TO PROVIDE CAREER PLANNING AND ONGOING EMPLOYMENT SUPPORT FOR PROGRAM GRADUATES, RECRUITED AND MANAGED OVER 3.6 MILLION DOLLARS IN VOLUNTEER HOURS, AND MADE AN ECONOMIC IMPACT FOR BOTH TAXPAYERS AND OUR COMMUNITIES OF OVER 31 MILLION SUCCESSFUL EMPLOYMENT MAKES A HUGE DIFFERENCE IN THE LIVES OF THE WOMEN AND CHILDREN WE SERVE IN OUR PROGRAM WOMEN WHO BECOME SUCCESSFULLY EMPLOYED CONTRIBUTE IN MANY WAYS THEY BECOME TAX PAYING CITIZENS, SUPPORT THE ECONOMY BY PURCHASING GOODS AND SERVICES, BECOME HOMEOWNERS AND SEND THEIR CHILDREN TO COLLEGE AT PHP, WE BELIEVE THE ONLY PERMANENT ROUTE OUT OF POVERTY IS AN ADEQUATE INCOME OUR EMPLOYMENT PROGRAM, THROUGH THE WORK OF DEDICATED VOLUNTEERS AND STAFF, IS COMMITTED TO CREATING AN ENVIRONMENT WHERE THE SINGLE MOMS WE SERVE CAN AND WILL FLOURISH BOTH IN THEIR CAREERS AND IN LIFE WE BELIEVE THAT WHEN MOMS DO BETTER, KIDS DO BETTER WHEN KIDS DO BETTER, COMMUNITIES DO BETTER, AND WHEN COMMUNITIES DO BETTER, WE</p>

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FORM 990, PAGE 6, PART VI, LINE 11B	THE 990 IS REVIEWED BY THE FINANCE & AUDIT COMMITTEE AND EXECUTIVE COMMITTEE PRIOR TO FILING

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FORM 990, PAGE 6, PART VI, LINE 12C	THE CONFLICT OF INTEREST POLICY REQUIRES THAT ALL BOARD MEMBERS AND MEMBERS OF MANAGEMENT DISCLOSE POTENTIAL CONFLICTS OF INTEREST ANNUALLY THE POTENTIAL CONFLICTS OF INTEREST ARE REVIEWED BY THE EXECUTIVE COMMITTEE THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR DETERMINING WHETHER A CONFLICT EXISTS AND THE APPROPRIATE ACTION TO BE TAKEN TO MITIGATE THE EFFECT ON THE ORGANIZATION SPECIFIC ACTIONS TO BE TAKEN ARE IDENTIFIED ON A CASE-BY-CASE BASIS

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FORM 990, PAGE 6, PART VI, LINE 15A	THE EXECUTIVE DIRECTOR'S COMPENSATION IS DETERMINED BY THE BOARD OF DIRECTORS, INDEPENDENT OF THE EXECUTIVE DIRECTOR MARKET COMPATABILITY DATA IS USED TO ESTABLISH A REASONABLE LEVEL OF COMPENSATION COMPENSATION IS DISCUSSED AT THE EXECUTIVE COMMITTEE MEETING DELIBERATION AND DETERMINATION OF DOCUMENTATION IS DOCUMENTED IN EXECUTIVE COMMITTEE MEETING MINUTES

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FORM 990, PAGE 6, PART VI, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST AT THE ORGANIZATION'S OFFICES