Form 990-T	Exempt (Organization Bus	sine	ss Inco	me T	ax <u>Return</u>	1	OMB No 1545-0687	
	•	(and proxy tax und				1406		0040	
· ·	For calendar year 2018 or o	ther tax year beginning $\c JUL \ 1$,	20	18 , and end	ung JU	N 30, 201	<u>9</u>	2018	
Department of the Treasury Internal Revenue Service	·	o to www irs gov/Form990T for it N numbers on this form as it may						Open to Public Inspection for 501(c)(3) Organizations Only	
A Check box if address changed	Name of organiz	Name of organization (Check box if name changed and see instructions.) D Employer identification numb (Employees' trust, see instructions)							
B Exempt under section	Print PEOPLE	FOR PEOPLE						1-0783225	
X 501(c/63)		and room or suite no. If a P O. bo	Y SEE IT	nstructions			E Unre	lated business activity code	
408(e) 220(e)	I Tuna I	T LINCOLN AVE	, 000 ii	noti dottorio.			(See	instructions)	
408A 530(a)		ite or province, country, and ZIP o	or foreig	n postal code			1	•	
529(a)	YAKIMA,			•			541	.519	
C Book value of all assets at end of year	F Group exemp	tion number (See instructions.)	.						
	21. G Check organiz	ration type 🕨 🛛 501(c) cor	poration	n 501	(c) trust	401(a)	trust	Other trust	
H Enter the number of the	=	· · · · · · · · · · · · · · · · · · ·	2		Describe	the only (or first) ur	ırelated	I	
trade or business here						complete Parts I-V.			
	· · · · · · · · · · · · · · · · · · ·	ne previous sentence, complete Pa	arts I an	id II, complete a	Schedule	M for each addition	al trade	e or	
business, then complete								· [37]	
	•	ary in an affiliated group or a pare	nt-subsi	idiary controlled	group?	▶ L	Y	es X No	
		the parent corporation.			Talanh	one number 🕨 5	0.0	249 6726	
J The books are in care of Part I Unrelated	Trade or Busine			(A) Inco		(B) Expenses		(C) Net	
1a Gross receipts or sale		125.		(A) 111001		(b) Expenses		(O) NCC	
b Less returns and allow		c Balance	1c	25	125.				
2 Cost of goods sold (S		C balance	2	23,				1	
3 Gross profit. Subtract	-		3	25,	125.			25,125.	
4a Capital gain net incom			4a					1	
· •	4797, Part II, line 17) (att	ach Form 4797)	4b						
c Capital loss deduction		,	4c			•			
5 Income (loss) from a	partnership or an S corpo	ration (attach statement)	5						
6 Rent income (Schedu	le C)		6						
7 Unrelated debt-finance	ed income (Schedule E)		7						
8 Interest, annuities, roy	alties, and rents from a co	entrolled organization (Schedule F)	8						
9 Investment income of	a section 501(c)(7), (9),	or (17) organization (Schedule G)	9						
10 Exploited exempt active	vity income (Schedule I)		10						
11 Advertising income (S			11						
·	structions, attach schedul	e)	12	,	105			05 105	
13 Total. Combine lines	3 through 12		13		125.			25,125.	
		ewhere (See instructions for ns must be directly connected				income)			
	icers, directors, and trusti	oos (Sahadula K)		 }			14		
15 Salaries and wages	•	RECEIVED	- (1			15	11,505.	
16 Repairs and mainten	ance		$\neg \circ$				16	•	
17 Bad debts		2010	10	1			17		
18 Interest (attach sche	dule) (see instructions)	NOV 1 2 2015	, J&		STAT	EMENT 1	18	44.	
19 Taxes and licenses			≝لي	=			19	970.	
20 Charitable contribution	ons (See instructions for	Imitation rules)GDEN, U		لـ			20		
21 Depreciation (attach	Form 4562)				21	28.	ļ		
22 Less depreciation cla	armed on Schedule A and	elsewhere on return		2	22a		22b	28.	
23 Depletion							23	505	
24 Contributions to defe	erred compensation plans	•					24	795.	
25 Employee benefit pro	-						25	2,192.	
22 Less depreciation cla 23 Depletion 24 Contributions to defe 25 Employee benefit pro 26 Excess exempt exper 27 Excess readership co							26		
				ann	GM× m	IDMDNIM O	27	1 026	
28 Other deductions (at				SEE	STAT	EMENT 2	28	4,836. 20,370.	
29 Total deductions A	OO OOR IA TOLOUND YX						29		
		aparatina logo deduction. Culti	t line or	O from line 40			200	/ // / / / / / / / / / / / / / / / / / /	
	axable income before net	operating loss deduction. Subtrac			tione)		30	4,755.	
31 Deduction for net op	axable income before net	years beginning on or after Janua			tions)		30 31 32	4,755.	

Form 990-1	(2018) · PEOPLE FOR PEOPLE			91-0/0	3344:	<u> </u>	10 Z
Part I	Total Unrelated Business Taxable Income		-	·			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	e instruc	tions)		33	4,755	<u>, </u>
34	Amounts paid for disallowed fringes		,		34	6,323	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instru	ictione)			35		_
	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the si				100		—
36	·	uiii oi			00	11,078	ł
	lines 33 and 34				36	1,000	<u>; </u>
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)				37	1,000	<u>.</u>
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line	36,				40.056	
	enter the smaller of zero or line 36				38	10,078	•
Part I	/ Tax Computation				···		
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0 21)			>	39	2,116	<u>; </u>
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount of	on line 3	8 from:		3		
_	Tax rate schedule or Schedule D (Form 1041)			•	40		
41	Proxy tax. See instructions				41		_
	Alternative minimum tax (trusts only)				42		_
42					43		—
	Tax on Noncompliant Facility Income See instructions					2,116	_
44 David N	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	•••••			44	2,110	•
Part V		т т			- 1		
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a			-l -l		
b	Other credits (see instructions)	45b			4 I		
C	General business credit Attach Form 3800	45c			4 [
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d					
е	Total credits Add lines 45a through 45d				45e		
46	Subtract line 45e from line 44				46	2,116	<u>; </u>
47	Other taxes. Check if from. Form 4255 Form 8611 Form 8697 Form 88	66	Other (a	ttach schedule)	47		
	Total tax Add lines 46 and 47 (see instructions)				48	2,116	;
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2				49) <u>.</u>
	Payments: A 2017 overpayment credited to 2018	50a		320.			Ť
			-	320	Ή ή		
	2018 estimated tax payments	50b			-		
	Tax deposited with Form 8868	50c			-l -l		
	Foreign organizations Tax paid or withheld at source (see instructions)	50d			-l -l		
	Backup withholding (see instructions)	50e			-		
f	Credit for small employer health insurance premiums (attach Form 8941)	50f			4 !		
g	Other credits, adjustments, and payments Form 2439	1 1					
	☐ Form 4136 ☐ Other ☐ Total ►	50g					
51	Total payments. Add lines 50a through 50g				51	320	١.
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached				52	70	·-
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed			•	53	1,866	
54	Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid				54		_
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax		Ref	unded	55		_
Part V		n (se			1 00 1		_
					•	Yes N	_
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature			•		TES IN	<u> 0</u>
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization						
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the	toreign i	country			 	لب
	here					<u>y</u>	
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tra	ansferor	to, a fore	eign trust?		X	<u></u>
	If "Yes," see instructions for other forms the organization may have to file.						
58	Enter the amount of tax-exempt interest received or accrued during the tax year >\$						ż
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and sta			est of my knowle	edge and b	pelief, it is true,	
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer CHIEF E	XEC	ĬŸĬŸĬ		Anually - IPA	C discuss this set	—
Here	Made On Cozboz 1 1-19 NOFFICER			, n	-	S discuss this return with er shown below (see	
	Signature of officer Date Title						lo
	<u> </u>	to.			ıf PTII		_
	Print/Type preparer's name Preparer's signature					14	
Paid	COMPACY CHORDS Start Man 111	11 (1	$\mathbf{q} \mid \mathbf{l}$	self- employed		00837115	
Prepa		1, 1,	- Ц				—
Use C	nly Firm's name ► CLIFTONLARSONALLEN LLP			Firm's EIN	4.	1-0746749	_
	610 NORTH 39TH AVENUE				<i>,</i>	\ 000 0010	
	Firm's address ► YAKIMA, WA 98902			Phone no.	509	<u>) 823-2910</u>	
823711 01-	09-19					Form 990-T (20	18)

Schedule A - Cost of Goods	s Sold. Enter	method of invent	tory valuation N/A	1	-			
1 Inventory at beginning of year	1		6 Inventory at end of ye	ar		6		
2 Purchases	2		7 Cost of goods sold. Subtract line 6					
3 Cost of labor	3		from line 5. Enter here	e and in F	Part I,			
4a Additional section 263A costs			line 2		7			
(attach schedule)	4a		8 Do the rules of section	n 263A (\	with respect to		Yes	No
Other costs (attach schedule)	4b		property produced or	acquired	for resale) apply to			
5 Total Add lines 1 through 4b	5		the organization?				<u> </u>	
Schedule C - Rent Income (see instructions)	(From Real	Property and	Personal Property I	Lease	d With Real Propo	erty)		
1 Description of property								
(1)								
(2)								
(3)								
(4)							·	
	2. Rent receive	ed or accrued			1			
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	than	of rent for p	nd personal property (if the percenta ersonal property exceeds 50% or if t is based on profit or income)	age	3(a) Deductions directly columns 2(a) an	connected with d 2(b) (attach s	the income in chedule)	
(1)								
(2)								
(3)								
(4)								
Total	0.	Total		0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		ter >		0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	•		0.
Schedule E - Unrelated Deb	t-Financed	Income (see	instructions)					
			2 Gross income from		Deductions directly conn to debt-finance		llocable	
1 Description of debt-fit	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		her deduction ich schedule)	is
(1)				1				
(2)						T T		_
(3)								
(4)						1		
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a	adjusted basis allocable to allocable to property a schedule)	6 Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	(column	ocable deducti 6 x total of co 3(a) and 3(b))	
(1)			%					
(2)			%					
(3)			%					
(4)			%					
					nter here and on page 1, Part I, line 7, column (A)		re and on pag ne 7, column (
Totals			•	·L	0.			0.
Total dividends-received deductions in	ncluded in column	18						0.
							orm 600_T	(2019)

Schedule F - Interest, A			npt Controlled C				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	tructions	·
1 Name of controlled organizat	identi	nployer fication nber	et unrelated income s) (see instructions)	4. Tot payr	al of specified nents made	5 Part of o included in organization	the contro	6 Deductions directly connected with income in column 5	
(1)									
(2)									
(3)				ļ					
(4)		.		<u> </u>					
Nonexempt Controlled Organi	zations								
7 Taxable Income	8 Net unrelated inco (see instruction		Total of specified pay made	ments	10. Part of colur in the controlli gross				luctions directly connected income in column 10
(1)									
(2)							Ī		
(3)									
(4)					-	-			
					Enter here and	on page 1, Pacolumn (A)	art I,	Enter he	d columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
Totals				▶			0.		0
Schedule G - Investme (see insti	ent Income of a ructions)	Section 501(c)(7), (9), or ((17) Org	ganization				
1. Desc	cription of income		2. Amount of	f income	3 Deduction directly conne (attach sched	cted	4 Set-a (attach so		5 Total deductions and set-asides (col 3 plus col 4)
(1)									
(2)									
(3)									
(4)									
			Enter here and Part I, line 9, co						Enter here and on page Part I, line 9, column (B)
Totals			•	0.					0
Schedule I - Exploited (see instru	• •	/ Income, Otl	her Than Ad	vertisin	g Income				
Description of exploited activity	2 Gross unrelated business income from trade or business	3. Expenses directly connecte with production of unrelated business income	minus colum	d trade or olumn 2 nn 3) If a te cols 5	5 Gross inco from activity t is not unrelat business inco	hat ed	6 Expe attributa colum	ble to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)									
(2)									
(2)									
(4)									
	Enter here and on page 1, Part I, line 10, col (A)	Enter here and o page 1, Part I, line 10, col (B)				2 1			Enter here and on page 1, Part II, line 26
Totals Schedule J - Advertisi	ng Income (see		0.						0
	Periodicals Rep		onsolidated	Racie	***				
- Income From								 1	
1. Name of periodical	2. Gross advertising income	3 Direct advertising of	or (loss) (costs col 3) If a g	rtising gain col 2 minus gain, comput through 7	5. Circulat e income		6 Reade costs		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)									
(2)									
(3)									
(4)									
Totals (carry to Part II, line (5))	•	0.	0.						0
									Form 990-T (201

%

columns 2 through 7 on a	•	-	rate Basis (For ea	ich perio	dical listed in Pa	art II, fill in	
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7		culation 6.	Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)							
(2)							
(3)							
(4)							
Totals from Part I	0.	0.			•		0.
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)					Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	0.	0.					0.
Schedule K - Compensation	n of Officers, I	Directors, and	Trustees (see in	nstructioi	ns)		
1 Name			2 Title		3 Percent of time devoted to business		pensation attributable nrelated business
(1)					%		

Form **990-T** (2018)

0.

(2) (3) (4)

Total. Enter here and on page 1, Part II, line 14

FORM 990-T	INTEREST PAID	STATEMENT 1
DESCRIPTION		AMOUNT
INTEREST EXPENSE LOAN FEES		33.
TOTAL TO FORM 990-T,	PAGE 1, LINE 18	44.
FORM 990-T	OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
INSURANCE SUPPLIES TELEPHONE OCCUPANCY OTHER SERVICES RENT/EQUIP LEASE		1,626. 76. 96. 370. 8.
CONTRACT FEES ALLOCATED ADMINISTRAT	IVE EXPENSES	92. 2,563.
TOTAL TO FORM 990-T,	PAGE 1, LINE 28	4,836

SCHEDULE M (Form 990-T)

Department of the Treasury Internal Revenue Service (99)

Unrelated Business Taxable Income for Unrelated Trade or Business

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019

Figure 2018 or other tax year beginning UUL 1, 2016, and ending UN 30, 201

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

ENTITY 1

0040

Open to Public Inspection for 501(c)(3) Organizations Only

Name	of the organization PEOPLE FOR PEOPLE	-		-	Employer ide		
	Unrelated business activity code (see instructions) ► 54180	0			<u>-</u>		
	Describe the unrelated trade or business ADVERTISI	NG					
Ра	rt I Unrelated Trade or Business Income		(A) Incon	ne	(B) Expense	es	(C) Net
1 a	Gross receipts or sales 4,157.						
	Less returns and allowances c Balance	1c	4,	157.			
2	Cost of goods sold (Schedule A, line 7)	2			,		
3	Gross profit Subtract line 2 from line 1c	3	4,	157.			4,157.
4 a	Capital gain net income (attach Schedule D)	4a					
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b					
С	Capital loss deduction for trusts	4c					
5	Income (loss) from a partnership or an S corporation (attach						
	statement)	5					
6	Rent income (Schedule C)	6_					
7	Unrelated debt-financed income (Schedule E)	7_					
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Schedule F)	8					
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G)	9					
10	Exploited exempt activity income (Schedule I)	10	***			_	
11	Advertising income (Schedule J)	11	***				
12	Other income (See instructions, attach schedule)	12					
13	Total. Combine lines 3 through 12	13	4,	157.			4,157.
Pa	Deductions Not Taken Elsewhere (See instruction deductions must be directly connected with the understanding the second sec					cept fo	or contributions,
14	Compensation of officers, directors, and trustees (Schedule K)					14	
15	Salaries and wages					15	
16	Repairs and maintenance					16	
17	Bad debts					17	
18	Interest (attach schedule) (see instructions)					18	
19	Taxes and licenses					19	64.
20	Charitable contributions (See instructions for limitation rules)					20	
21	Depreciation (attach Form 4562)		2	1			
22	Less depreciation claimed on Schedule A and elsewhere on return		22	а		22b	
23	Depletion					23	
24	Contributions to deferred compensation plans					24	
25	Employee benefit programs					25	
26	Excess exempt expenses (Schedule I)					26	
27	Excess readership costs (Schedule J)					27	
28	Other deductions (attach schedule)		SEE	STATE	MENT 3	28	4,553.
29	Total deductions. Add lines 14 through 28					29	4,617.
30	Unrelated business taxable income before net operating loss deduce	ction	Subtract line 29	from line 1	3	30	-460.
31	Deduction for net operating loss arising in tax years beginning on o	r after	January 1, 2018	3 (see			
	(netriotions)					1 21 1	

823741 01-28-19

Schedule M (Form 990-T) 2018

Unrelated business taxable income Subtract line 31 from line 30

LHA For Paperwork Reduction Act Notice, see instructions.

Page 3

PEOPLE FOR	R PEOPLE				91-078	<u> 3225</u>	ı	
Schedule A - Cost of Goods	Sold. Enter	method of inven-	tory valuation 🕨 N/A					
1 Inventory at beginning of year	1		6 Inventory at end of year	ar		6		
2 Purchases	2		7 Cost of goods sold S	ubtract I	ine 6			
3 Cost of labor	3		from line 5 Enter here					
4a Additional section 263A costs			line 2		·	7		
(attach schedule)	4a		8 Do the rules of section	263A (\	with respect to		Yes	S No
b Other costs (attach schedule)	4b		property produced or a	acquired	for resale) apply to			
5 Total Add lines 1 through 4b	. 5		the organization?	· 	,			Х
Schedule C - Rent Income (F	rom Real	Property and		ease	d With Real Prop	erty)		
(see instructions)					•			
Description of property								
(1)								
(2)								
(3)								
(4)								
	2 Rent receive	ed or accrued						
(a) From personal property (if the perce rent for personal property is more than 10% but not more than 50%)	entage of han	of rent for p	nd personal property (if the percenta ersonal property exceeds 50% or if t is based on profit or income)	ıge	3(a) Deductions directly columns 2(a) ar	connecte d 2(b) (att	d with the income ach schedule)	חו
(1)						_		
(2)								
(3)			_					
(4)								
Total	0.	Total		0.				
(c) Total income Add totals of columns 2 here and on page 1, Part I, line 6, column		ter -		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	•		0.
Schedule E - Unrelated Debt		Income (see	instructions)			<u> </u>		
		,			3 Deductions directly coni			
			2 Gross income from or allocable to debt-	(-)	to debt-finance		 	
1 Description of debt-fina	nced property		financed property	(a)	Straight line depreciation (attach schedule)	'	Other deducted (attach schedule	
(1)				İ				
(2)								
(3)	-							
(4)								
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis illocable to need property n schedule)	6. Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)		Allocable deduction 6 x total of c 3(a) and 3(b)	columns
(1)		-	%					
(2)			%			1		
(3)			%					
(4)			%					
					nter here and on page 1, Part I, line 7, column (A)		ter here and on pa art I, line 7, columi	
Totals			_		0	.		0.
Total dividends-received deductions Inc	duded in column	18						0.
TOTAL MINIMENIAS-TERESIAEN MENNETIONS HIC	noucu iii colullii							

FORM 990-T (M)	OTHER DEDUCTIONS		STATEMENT 3
DESCRIPTION			AMOUNT
PROFESSIONAL SERVICES COMMUNICATIONS			3,255. 1,298.
TOTAL TO SCHEDULE M, PART	II, LINE 28	٠.	4,553.