

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 black lung
benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2005Open to Public
Inspection**A** For the 2005 calendar year, or tax year beginning **JUL 1, 2005** and ending **JUN 30, 2006****B** Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization**PARENTS HELPING PARENTS**

Number and street (or P O box if mail is not delivered to street address)

3041 OLCOTT STREET

Room/suite

City or town, state or country, and ZIP + 4

SANTA CLARA, CA 95054-3222**D** Employer identification number**94-2814246****E** Telephone number**(408) 288-5010****F** Accounting method☐ Cash ☒ Accrual☐ Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and **I** are not applicable to section 527 organizations**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶ **N/A****H(c)** Are all affiliates included? **N/A** ☐ Yes ☐ No (If "No," attach a list)**H(d)** Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I** Group Exemption Number ▶ **N/A****M** Check ☐ if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)**G** Website: ▶ **WWW.PHP.COM****J** Organization type (check only one) ▶ ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.**L** Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **1,794,619.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1 Contributions, gifts, grants, and similar amounts received				
	a Direct public support	1a	404,133.		
	b Indirect public support	1b	27,222.		
	c Government contributions (grants)	1c	823,422.		
	d Total (add lines 1a through 1c) (cash \$ 1,254,777. noncash \$)	1d	1,254,777.		
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	489,869.		
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			
	5 Dividends and interest from securities	5	9,214.		
	6 a Gross rents	6a			
	b Less rental expenses	6b			
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7 Other investment income (describe ▶)	7				
	8 a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
	b Less cost or other basis and sales expenses	8a			
	c Gain or (loss) (attach schedule)	8b			
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			
	9 Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
	a Gross revenue (not including \$ 0. of contributions reported on line 1a)	9a	36,012.		
	b Less direct expenses other than fundraising expenses	9b			
	c Net income or (loss) from special events (subtract line 9b from line 9a)	9c	36,012.		
	10 a Gross sales of inventory, less returns and allowances	10a			
	b Less cost of goods sold	10b			
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c				
11 Other revenue (from Part VII, line 103)	11	4,747.			
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	1,794,619.			
Expenses	13 Program services (from line 44, column (B))	13	1,428,524.		
	14 Management and general (from line 44, column (C))	14	221,555.		
	15 Fundraising (from line 44, column (D))	15	158,956.		
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 13, 14, 15, 16 and 44, column (A))	17	1,809,035.		
	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	<14,416.>		
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	411,843.		
Net Assets	20 Other changes in net assets or fund balances (attach explanation)	20	7,411.		
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	404,838.		

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LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2005)

9-15 12

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ <u>0</u> • noncash \$ <u>0</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc. * *	25	183,384.	183,384.	0.
26	Other salaries and wages	26	782,257.	530,055.	151,183.
27	Pension plan contributions	27			
28	Other employee benefits	28	60,764.	46,181.	9,115.
29	Payroll taxes	29	83,046.	62,950.	11,833.
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32	61,466.	45,362.	8,353.
33	Supplies	33	33,613.	22,593.	2,189.
34	Telephone	34	10,999.	7,827.	2,093.
35	Postage and shipping	35	10,175.	5,453.	995.
36	Occupancy	36	176,659.	145,515.	20,253.
37	Equipment rental and maintenance	37	10,091.	7,445.	1,559.
38	Printing and publications	38	22,847.	17,333.	1,705.
39	Travel	39	14,875.	14,069.	779.
40	Conferences, conventions, and meetings	40	6,909.	3,681.	1,184.
41	Interest	41	4,482.		4,482.
42	Depreciation, depletion, etc. (attach schedule)	42	22,037.	16,589.	3,150.
43	Other expenses not covered above (itemize):				
a	OUTSIDE SERV. (LESS	43a			
b	DON SERV)	43b	289,690.	289,690.	
c	MISCELLANEOUS	43c	18,083.	13,673.	1,773.
d	MEMBERSHIP DUES	43d	2,912.	1,978.	909.
e	SPECIFIC ASSISTANCE	43e	14,746.	14,746.	
f		43f			
g		43g			
44	Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	1,809,035.	1,428,524.	221,555.
					158,956.

Joint Costs. Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ NoIf "Yes," enter (i) the aggregate amount of these joint costs \$ N/A, (ii) the amount allocated to Program services \$ N/A,(iii) the amount allocated to Management and general \$ N/A, and (iv) the amount allocated to Fundraising \$ N/A

Form 990 (2005)

** SEE STATEMENT 4

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► SEE STATEMENT 5	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a FAMILY SERVICES – PROVIDES PROFESSIONALS SERVING AND FAMILIES WHO HAVE CHILDREN WITH SPECIAL NEEDS WITH SUPPORT, RESOURCES, AND DIRECTION TO MEET THEIR IMMEDIATE AND LONG-TERM NEEDS. SERVICES INCLUDE MENTOR PARENT MATCHES, PEER SUPPORT, ETC.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	506,457.
b EDUCATION OF PUBLIC AND PROFESSIONAL – PROVIDES INFORMATION, SUPPORT AND TRAINING ON SPECIAL EDUCATION ISSUES TO PARENTS & PROFESSIONALS. TRAINING INCLUDES TOPICS SUCH AS INDIVIDUAL EDUCATION PLANS, GOALS & OBJECTIVES, & CONFLICT RESOLUTION	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	631,231.
c HEALTH & HOSPITALS – ENCOMPASSES A VARIETY OF WORK WITH FAMILIES THAT HAVE CHILDREN WITH SPECIAL HEALTH CARE NEEDS. THE GOAL OF THESE SERVICES IS TO CARRY THE CONCEPT OF FAMILY CENTERED CARE TO ALL HEALTH PROFESSIONALS WORKING WITH KIDS	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	144,371.
d TECHNOLOGY CENTER – MAINTAINS THE PHP WEBSITE AT WWW.PHP.COM PROVIDES TECHNOLOGICAL SUPPORT TO STAFF & FAMILIES, & INCLUDES THE ITECH CENTER ON ASSISTIVE TECHNOLOGY.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	146,465.
e Other program services (attach schedule)	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	1,428,524.

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Part IV Balance Sheets (See the instructions.)**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	45,479.	45	72,514.
	46 Savings and temporary cash investments		46	
	47 a Accounts receivable	83,691.		
	b Less: allowance for doubtful accounts		47c	83,691.
	48 a Pledges receivable			
	b Less: allowance for doubtful accounts		48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable			
	b Less: allowance for doubtful accounts		51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	7,854.	53	5,786.
	54 Investments - securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54	
	55 a Investments - land, buildings, and equipment basis			
	b Less: accumulated depreciation		55c	
56 Investments - other		56		
57 a Land, buildings, and equipment, basis	412,383.			
b Less: accumulated depreciation	237,982.	57c	174,401.	
58 Other assets (describe <input type="checkbox"/> SEE STATEMENT 6)	220,254.	58	233,581.	
59 Total assets (must equal line 74). Add lines 45 through 58	582,579.	59	569,973.	
Liabilities	60 Accounts payable and accrued expenses	149,397.	60	162,342.
	61 Grants payable		61	
	62 Deferred revenue	18,546.	62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe <input type="checkbox"/> DEFERRED RENT)	2,793.	65	2,793.
66 Total liabilities. Add lines 60 through 65)	170,736.	66	165,135.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	306,298.	67	198,833.
	68 Temporarily restricted	0.	68	100,460.
	69 Permanently restricted	105,545.	69	105,545.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	411,843.	73	404,838.
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	582,579.	74	569,973.	

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions)

a	Total revenue, gains, and other support per audited financial statements	a	1,802,030.
b	Amounts included on line a but not on Part I, line 12:		
1	Net unrealized gains on investments	b1	
2	Donated services and use of facilities	b2	
3	Recoveries of prior year grants	b3	
4	Other (specify) <u>SEE STATEMENT 7</u>	b4	7,411.
	Add lines b1 through b4	b	7,411.
c	Subtract line b from line a	c	1,794,619.
d	Amounts included on Part I, line 12, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify):	d2	
	Add lines d1 and d2	d	0.
e	Total revenue (Part I, line 12). Add lines c and d	e	1,794,619.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements	a	1,809,035.
b	Amounts included on line a but not on Part I, line 17:		
1	Donated services and use of facilities	b1	
2	Prior year adjustments reported on Part I, line 20	b2	
3	Losses reported on Part I, line 20	b3	
4	Other (specify):	b4	
	Add lines b1 through b4	b	0.
c	Subtract line b from line a	c	1,809,035.
d	Amounts included on Part I, line 17, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify):	d2	
	Add lines d1 and d2	d	0.
e	Total expenses (Part I, line 17). Add lines c and d	e	1,809,035.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
MARY ELLEN PETERSON RETURN ADDRESS	CEO 40.00	75,996.	0.	0.
F. PAUL SCHUTZ RETURN ADDRESS	CFO 40.00	50,388.	0.	0.
TRUDY MARSH HOLMES RETURN ADDRESS	CHIEF DEVELOPMENT OFFICER 40.00	57,000.	0.	0.
SEE ATTACHED SCHEDULE FOR BOD LIST	0.00	0.	0.	0.

Part VI Other Information (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	N/A		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
	N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
	N/A		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members		
	85c N/A		
d	Section 162(e) lobbying and political expenditures		
	85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
	85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
	85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
	N/A		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
	N/A		
86	501(c)(7) organizations Enter: a Initiation fees and capital contributions included on line 12		
	86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities		
	86b N/A		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders		
	87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
89 a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> , section 4912 <u>0.</u> , section 4955 <u>0.</u>		
b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		<u>0.</u>
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		<u>0.</u>
90 a	List the states with which a copy of this return is filed <u>CA</u>		
b	Number of employees employed in the pay period that includes March 12, 2005	90b	<u>39</u>
91 a	The books are in care of <u>MARY ELLEN PETERSON</u> Telephone no <u>(408) 727-5775</u> Located at <u>3041 OLCOTT STREET, SANTA CLARA, CA</u> ZIP + 4 <u>95054-3222</u>		
b	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)? If "Yes," enter the name of the foreign country <u>N/A</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country <u>N/A</u>	91c	X
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <u>N/A</u>	92	N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a SEMINARS					489,869.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					9,214.
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					36,012.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a MISCELLANEOUS					4,747.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		0.	539,842.
105 Total (add line 104, columns (B), (D), and (E))					539,842.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	SEE STATEMENT 8

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
N/A	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer <i>Mary Ellen Peterson</i>		Date <i>11/14/06</i>	Type or print name and title <i>MARY ELLEN PETERSON CEO</i>
Paid Preparer's Use Only	Preparer's signature <i>[Signature]</i>	Date <i>11/10/06</i>	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP + 4 <i>BURR, PILGER & MAYER LLP 333 W. SANTA CLARA ST., STE. 920 SAN JOSE, CA 95113-1716</i>		EIN <i>[Blank]</i>	Phone no <i>(408) 298-7676</i>

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2005

Name of the organization

PARENTS HELPING PARENTS

Employer identification number

94 2814246

Part I

Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	0			

Part II-A

Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	0	

Part II-B

Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter "None " See page 2 of the instructions)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services	0	

Part III Statements About Activities (See page 2 of the instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities 1 \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		X
b Do you have a section 403(b) annuity plan for your employees?		X
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state **9** _____
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 ☐ 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization **13** ☐ Type 1 ☐ Type 2 ☐ Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**
Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	1,329,820.	1,421,352.	1,524,810.	1,547,432.	5,823,414.
16 Membership fees received				0.	
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	34,680.	4,350.	37,130.	30,832.	106,992.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	9,232.	6,079.	5,649.	7,770.	28,730.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	534,984.	364,874.	SEE STATEMENT 9 6,327.	8,284.	914,469.
23 Total of lines 15 through 22	1,908,716.	1,796,655.	1,573,916.	1,594,318.	6,873,605.
24 Line 23 minus line 17	1,874,036.	1,792,305.	1,536,786.	1,563,486.	6,766,613.
25 Enter 1% of line 23	19,087.	17,967.	15,739.	15,943.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 135,332.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 59,385.
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 6,766,613.
d Add: Amounts from column (e) for lines 18 28,730. 19 22 914,469.					26d 1,002,584.
					26e 5,764,029.
e Public support (line 26c minus line 26d total)					26f 85.1834%
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2004) (2003) (2002) (2001) N/A					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2004) (2003) (2002) (2001) N/A					
c Add: Amounts from column (e) for lines 15 16 17 20					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					NONE

Part V Private School Questionnaire (See page 7 of the instructions)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	31	
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	32d	
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	33h	
34 a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Schedule A (Form 990 or 990-EZ) 2005

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check ☒ a ☐ if the organization belongs to an affiliated groupCheck ☐ b ☐ if you checked "a" and "limited control" provisions apply**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
		N/A													
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36													
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37													
38	Total lobbying expenditures (add lines 36 and 37)	38													
39	Other exempt purpose expenditures	39													
40	Total exempt purpose expenditures (add lines 38 and 39)	40													
41	Lobbying nontaxable amount Enter the amount from the following table -														
<table border="0"> <tr> <td>If the amount on line 40 is -</td> <td>The lobbying nontaxable amount is -</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>		If the amount on line 40 is -	The lobbying nontaxable amount is -	Not over \$500,000	20% of the amount on line 40	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000	41	
If the amount on line 40 is -	The lobbying nontaxable amount is -														
Not over \$500,000	20% of the amount on line 40														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
42	Grassroots nontaxable amount (enter 25% of line 41)	42													
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43													
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44													

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Yes	No	Amount
		0.

FORM 990	GAIN (LOSS) FROM SALE OF OTHER ASSETS	STATEMENT	1
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DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
VARIOUS OFFICE EQUIPMENT	00/00/00	/ /06	PURCHASED

NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	0.	6,053.	0.	6,053.	0.
TO FM 990, PART I, LN 8		6,053.	0.	6,053.	0.

FORM 990	SPECIAL EVENTS AND ACTIVITIES	STATEMENT	2
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DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
VARIOUS EVENTS - TAXPAYER MAINTAINS DETAIL	36,012.		36,012.		36,012.
TO FM 990, PART I, LINE 9	36,012.		36,012.		36,012.

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	3
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DESCRIPTION	AMOUNT
UNREALIZED GAIN (LOSS) ON INVESTMENTS	7,411.
TOTAL TO FORM 990, PART I, LINE 20	7,411.

FORM 990	OFFICER COMPENSATION ALLOCATION	STATEMENT	4
	PART II, LINE 25		

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
MARY ELLEN PETERSON	75,996.			75,996.
A. PROGRAM SERVICES	75,996.			75,996.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
F. PAUL SCHUTZ	50,388.			50,388.
A. PROGRAM SERVICES	50,388.			50,388.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
TRUDY MARSH HOLMES	57,000.			57,000.
A. PROGRAM SERVICES	57,000.			57,000.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

TOTAL PROGRAM SERVICES				183,384.
TOTAL MANAGEMENT AND GENERAL				
TOTAL FUNDRAISING				
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PARTS V-A AND V-B				<u>183,384.</u>

FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III	STATEMENT	5
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EXPLANATION

FAMILY RESOURCE CENTER THAT BENEFITS CHILDREN WITH SPECIAL NEEDS

FORM 990	OTHER ASSETS	STATEMENT	6
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DESCRIPTION

AMOUNT

DEPOSITS/PREPAIDS	5,636.
INVESTMENTS	215,945.
UNCONDITIONAL PROMISE TO GIVE	12,000.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	233,581.

FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	7
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DESCRIPTION

AMOUNT

UNREALIZED GAIN (LOSS) ON INVESTMENTS	7,411.
TOTAL TO FORM 990, PART IV-A	7,411.

FORM 990	PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES	STATEMENT	8
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LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
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93A	SEMINARS ARE PROVIDED TO TEACH OTHERS HOW TO REPLICATE THIS AGENCY AND SKILLS NECESSARY TO ASSIST CHILDREN WITH SPECIAL NEEDS.
96	DIVIDEND RECEIVED IS USED BY THE AGENCY TO FUND EXPANSION & PROGRAMS
101	FUND RAISING EVENTS HELP TO FUND PROGRAMS AND SERVICES. THE EVENTS ALSO SERVE TO COMMUNICATE THE SERVICE AVAILABLE TO THE COMMUNITY.
103	MISCELLANEOUS REIMBURSEMENTS.

SCHEDULE A	OTHER INCOME			STATEMENT	9
DESCRIPTION	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT	
MISC. INC.	0.	8,680.	6,327.	8,284.	
SEMINARS	534,984.	356,194.	0.	0.	
TOTAL TO SCHEDULE A, LINE 22	534,984.	364,874.	6,327.	8,284.	

Parents Helping Parents
Depreciation Schedule by G/L Account Number
For the 12 Months Ended 06/30/06

09/21/06
03:43PM

Asset No	Asset Description	Date Acquired	Method	Life	Sold?	Cost	Accum Depr 07/01/05	Current Depreciation	Accum Depr 06/30/06
1632 Capital Asset - Computer									
00428	Projector - Toshiba Multimedia	05/03/02	ST LINE	05/00	N	3,071.00	1,941.88	614.20	2,556.08
00430	Laptop - Dell Inspiron 8100	07/01/02	ST LINE	05/00	N	1,642.00	985.20	328.40	1,313.60
00434	Monitor - Dell	07/01/02	ST LINE	05/00	N	150.00	90.00	30.00	120.00
00435	PC - Dell	07/01/02	ST LINE	05/00	N	941.00	564.60	188.20	752.80
00438	Monitor - Dell	07/01/02	ST LINE	05/00	N	150.00	90.00	30.00	120.00
00439	PC - Dell	07/01/02	ST LINE	05/00	N	941.00	564.60	188.20	752.80
00447	PC - Compaq	07/15/02	ST LINE	05/00	N	1,000.00	592.33	200.00	792.33
00431	Laptop - IBM ThinkPad	08/07/02	ST LINE	05/00	N	1,500.00	869.59	300.00	1,169.59
00436	Monitor - IBM	08/07/02	ST LINE	05/00	N	100.00	57.97	20.00	77.97
00440	Monitor - IBM	08/07/02	ST LINE	05/00	N	100.00	57.97	20.00	77.97
00441	PC - IBM NetVista	08/07/02	ST LINE	05/00	N	1,400.00	811.62	280.00	1,091.62
00442	Laptop - IBM ThinkPad	08/07/02	ST LINE	05/00	N	1,500.00	869.59	300.00	1,169.59
00443	Monitor - IBM	08/07/02	ST LINE	05/00	N	100.00	57.97	20.00	77.97
00444	PC - IBM NetVista	08/07/02	ST LINE	05/00	N	1,400.00	811.62	280.00	1,091.62
00446	Laptop - IBM ThinkPad	08/07/02	ST LINE	05/00	N	1,500.00	869.59	300.00	1,169.59
00445	Laptop - IBM ThinkPad	09/05/02	ST LINE	05/00	N	1,500.00	845.75	300.00	1,145.75
00458	Laptop - IBM ThinkPad	09/05/02	ST LINE	05/00	N	1,500.00	845.75	300.00	1,145.75
00459	Laptop - IBM ThinkPad	09/05/02	ST LINE	05/00	N	1,500.00	845.75	300.00	1,145.75
00432	Dynavox	10/01/02	ST LINE	05/00	N	3,000.00	1,648.77	600.00	2,248.77
00433	Laptop - Apple iBook	11/01/02	ST LINE	05/00	N	850.00	453.33	170.00	623.33
00451	PC - Chat	01/31/03	ST LINE	05/00	N	1,759.00	849.14	351.80	1,200.94
00453	Monitor - IBM	01/31/03	ST LINE	05/00	N	200.00	96.55	40.00	136.55
00454	PC - IBM	01/31/03	ST LINE	05/00	N	1,200.00	579.29	240.00	819.29
00456	PC - IBM	01/31/03	ST LINE	05/00	N	1,200.00	600.00	240.00	840.00
00463	Projector - InFocus	06/23/03	ST LINE	05/00	N	1,009.00	408.02	201.80	609.82
00464	Laptop computer - Dell	06/29/04	ST LINE	05/00	N	1,388.84	279.29	277.77	557.06
00466	Projector	06/29/04	ST LINE	05/00	N	1,021.35	205.39	204.27	409.66
00468	Laptop - Toshiba Satellite	11/01/04	ST LINE	05/00	N	1,833.57	243.14	366.71	609.85
00469	Projector - Infocus LCD	01/14/05	ST LINE	05/00	N	904.95	83.30	180.99	264.29
00471	Monitor - Apple FlatScreen	05/05/05	ST LINE	05/00	N	594.29	18.56	118.86	137.42
00472	Computer - Apple G5	05/05/05	ST LINE	05/00	N	3,576.16	111.69	715.23	826.92
00473	PC - Dell	12/13/05	ST LINE	05/00	N	0.00	0.00	0.00	0.00
00474	PC - Dell	12/13/05	ST LINE	05/00	N	0.00	0.00	0.00	0.00
00475	PC - Dell	12/13/05	ST LINE	05/00	N	0.00	0.00	0.00	0.00
00486	Laptop - Toshiba	12/13/05	ST LINE	05/00	N	1,158.35	0.00	126.94	126.94
00487	PC - Compaq - Server	03/16/06	ST LINE	05/00	N	541.24	0.00	31.73	31.73
Total for (Capital Asset - Computer)						114,035.75	86,444.19	11,782.01	98,226.20
1633 Capital Asset - Phone									
00218	Phone Server - AT&T	06/01/95	ST LINE	07/00	N	49,085.00	49,085.00	0.00	49,085.00
00241	Phone - Merlin Module	03/04/98	ST LINE	07/00	N	2,805.00	2,805.00	0.00	2,805.00
ph1	Phone - Merlin Module	04/09/01	ST LINE	07/00	N	5,880.00	3,570.00	840.00	4,410.00
Total for (Capital Asset - Phone)						57,770.00	55,460.00	840.00	56,300.00
1634 Restricted Fixed Asset									
00144	Printer - HP	07/01/97	ST LINE	05/00	N	522.00	522.00	0.00	522.00

Parents Helping Parents
Depreciation Schedule by G/L Account Number
For the 12 Months Ended 06/30/06

Asset No.	Asset Description	Date Acquired	Method	Life	Sold?	Cost	Accum Depr 07/01/05	Current Depreciation	Accum Depr 06/30/06
1632 Capital Asset - Computer									
00345	Monitor - Future Power	05/10/00	ST LINE	05/00	N	161.00	161.00	0.00	161.00
00346	PC - SOS	05/10/00	ST LINE	05/00	N	861.00	861.00	0.00	861.00
00347	Keyboard	05/10/00	ST LINE	05/00	Y	75.00	75.00	0.00	75.00
00348	Monitor	05/10/00	ST LINE	05/00	N	161.00	161.00	0.00	161.00
00349	PC - SOS	05/10/00	ST LINE	05/00	Y	861.00	861.00	0.00	861.00
00351	Monitor - Future Power	05/10/00	ST LINE	05/00	Y	161.00	161.00	0.00	161.00
00352	PC - SOS	05/10/00	ST LINE	05/00	N	861.00	861.00	0.00	861.00
00354	Monitor - Future Power	05/10/00	ST LINE	05/00	N	161.00	161.00	0.00	161.00
00355	PC - SOS	05/10/00	ST LINE	05/00	N	861.00	861.00	0.00	861.00
00364	Laptop - Sony	09/01/00	ST LINE	05/00	N	2,170.00	2,096.28	72.33	2,168.61
00380	PC - SOS	10/01/00	ST LINE	05/00	N	991.00	941.04	49.55	990.59
00365	PC - Emachine	11/01/00	ST LINE	05/00	N	843.00	786.18	56.20	842.38
00366	PC - Emachine	11/01/00	ST LINE	05/00	N	803.00	748.88	53.53	802.41
00367	PC - Emachine	11/01/00	ST LINE	05/00	N	843.00	786.80	56.20	843.00
00371	Laptop - Sony	11/01/00	ST LINE	05/00	N	1,732.00	1,615.27	115.47	1,730.74
00381	PC - Emachine	11/01/00	ST LINE	05/00	N	803.00	748.88	53.53	802.41
00383	PC - Emachine	11/01/00	ST LINE	05/00	N	843.00	786.18	56.20	842.38
00386	PC - SOS	11/01/00	ST LINE	05/00	N	991.00	924.21	66.07	990.28
00376	PC - Emachine	11/10/00	ST LINE	05/00	N	803.00	744.92	53.53	798.45
00375	PC - Antec	12/01/00	ST LINE	05/00	N	831.00	761.33	69.25	830.58
00378	PC - Antec	12/01/00	ST LINE	05/00	N	831.00	761.33	69.25	830.58
00398	Laptop - IBM ThinkPad	09/24/01	ST LINE	05/00	N	2,506.00	1,921.27	501.20	2,422.47
00425	Scanner - HP 7400C	09/24/01	ST LINE	05/00	N	475.00	357.88	95.00	452.88
00388	Monitor - Dell Black	10/01/01	ST LINE	05/00	N	250.00	187.40	50.00	237.40
00389	PC - Dell Black	10/01/01	ST LINE	05/00	N	833.00	624.41	166.60	791.01
00390	Monitor - Dell Black	10/01/01	ST LINE	05/00	N	250.00	187.40	50.00	237.40
00391	PC - Dell Black	10/01/01	ST LINE	05/00	N	833.00	624.75	166.60	791.35
00392	Monitor - Dell Black	10/01/01	ST LINE	05/00	N	250.00	187.40	50.00	237.40
00393	PC - Dell Black	10/01/01	ST LINE	05/00	N	834.00	625.50	166.80	792.30
00396	Pc - Dell Black	10/01/01	ST LINE	05/00	N	834.00	625.50	166.80	792.30
00397	Monitor - Dell Black	10/01/01	ST LINE	05/00	N	250.00	187.40	50.00	237.40
00399	Monitor - Dell Black	10/01/01	ST LINE	05/00	N	250.00	187.40	50.00	237.40
00400	PC - Dell Black	10/01/01	ST LINE	05/00	N	834.00	625.16	166.80	791.96
00401	Monitor - Dell Black	10/01/01	ST LINE	05/00	N	250.00	187.40	50.00	237.40
00403	Monitor - Dell Black	10/01/01	ST LINE	05/00	N	250.00	187.40	50.00	237.40
00404	PC - Dell Black	10/01/01	ST LINE	05/00	N	834.00	625.16	166.80	791.96
00405	PC - Dell Black	10/01/01	ST LINE	05/00	N	834.00	625.16	166.80	791.96
00406	Monitor - Dell Black	10/01/01	ST LINE	05/00	N	250.00	187.40	50.00	237.40
00407	Monitor - Dell Black	10/01/01	ST LINE	05/00	N	250.00	187.50	50.00	237.50
00408	PC - Dell Black	10/01/01	ST LINE	05/00	N	834.00	625.16	166.80	791.96
00414	Monitor - Dell Black	10/01/01	ST LINE	05/00	N	250.00	187.40	50.00	237.40
00415	PC - Dell Black	10/01/01	ST LINE	05/00	N	834.00	625.16	166.80	791.96
00416	PC - Dell Black	10/01/01	ST LINE	05/00	N	834.00	625.16	166.80	791.96
00418	PC - iMac Blue	11/01/01	ST LINE	05/00	N	1,910.00	1,399.27	382.00	1,781.27

Parents Helping Parents
Depreciation Schedule by G/L Account Number
For the 12 Months Ended 06/30/06

09/21/06
03:43PM

Asset No.	Asset Description	Date Acquired	Method	Life	Sold?	Cost	Accum Depr 07/01/05	Current Depreciation	Accum Depr 06/30/06
1634 Restricted Fixed Asset									
00186	Printer - HP	07/01/97	ST LINE	05/00	N	522.00	522.00	0.00	522.00
00242	Printer - HP	07/01/98	ST LINE	05/00	N	361.00	361.00	0.00	361.00
00243	Printer - HP	07/01/98	ST LINE	05/00	N	361.00	361.00	0.00	361.00
00248	Projector - Proxima Desktop & Cas	08/19/98	ST LINE	05/00	N	6,819.00	6,819.00	0.00	6,819.00
00259	PC - Sony	08/31/98	ST LINE	05/00	N	1,289.00	1,289.00	0.00	1,289.00
00260	Monitor - Sony	08/31/98	ST LINE	05/00	N	650.00	650.00	0.00	650.00
00263	Laptop - Dell Notebook	10/01/98	ST LINE	05/00	N	3,251.00	3,251.00	0.00	3,251.00
00309	Laptop - Fujitsu	10/01/98	ST LINE	05/00	N	1,947.00	1,947.00	0.00	1,947.00
00300	Keyboard	04/01/99	ST LINE	05/00	N	75.00	75.00	0.00	75.00
00301	PC - HP Net Server E50	04/01/99	ST LINE	05/00	Y	2,162.00	2,162.00	0.00	2,162.00
00290	PC - Dell	04/20/99	ST LINE	05/00	N	1,690.00	1,690.00	0.00	1,690.00
00291	Monitor - Dell	04/20/99	ST LINE	05/00	N	400.00	395.78	0.00	395.78
00293	Monitor - Sony	05/20/99	ST LINE	05/00	N	216.00	213.77	0.00	213.77
00294	PC - Compaq	05/20/99	ST LINE	05/00	N	599.00	592.82	0.00	592.82
00296	PC - Compaq	05/20/99	ST LINE	05/00	N	574.00	568.08	0.00	568.08
00297	Keyboard	05/20/99	ST LINE	05/00	N	73.00	72.25	0.00	72.25
00299	Monitor - Sony	05/20/99	ST LINE	05/00	N	216.00	213.77	0.00	213.77
00302	Monitor - Sony	05/20/99	ST LINE	05/00	N	216.00	216.00	0.00	216.00
00289	Keyboard - Dell	05/21/99	ST LINE	05/00	N	75.00	75.00	0.00	75.00
00306	PC - HP Server	06/28/99	ST LINE	05/00	N	2,655.00	2,655.00	0.00	2,655.00
00335	Keyboard	05/10/00	ST LINE	05/00	N	75.00	75.00	0.00	75.00
00336	Monitor - Future Power	05/10/00	ST LINE	05/00	N	161.00	161.00	0.00	161.00
00337	PC - SOS	05/10/00	ST LINE	05/00	N	790.00	790.00	0.00	790.00
00465	Interpretation System - Listen (15	06/29/04	ST LINE	05/00	N	2,635.00	529.88	527.00	1,056.88
00467	Camcorder - Sony digital	06/29/04	ST LINE	05/00	N	880.00	176.96	176.00	352.96
Total for (Restricted Fixed Asset)						29,214.00	26,384.31	703.00	27,087.31
1681 Improvements (Lib.ceil/tele.rm)									
1lh	Cropped Ceiling	10/01/94	ST LINE	10/00	N	2,124.00	2,124.00	0.00	2,124.00
2lh	Phone Room	11/01/94	ST LINE	30/00	N	655.00	232.86	21.83	254.69
Total for (Improvements (Lib ceil/tele rm))						2,779.00	2,356.86	21.83	2,378.69
1682 Elevator									
5lh	Elevator	10/01/99	ST LINE	30/00	N	121,880.00	23,360.35	4,062.67	27,423.02
Total for (Elevator)						121,880.00	23,360.35	4,062.67	27,423.02
1683 Handicapped Entrance									
4lh	Handicapped Entrance	04/23/97	ST LINE	30/00	N	50,434.00	13,869.32	1,681.13	15,550.45
Total for (Handicapped Entrance)						50,434.00	13,869.32	1,681.13	15,550.45
1684 Touchstone Office									
3lh	Temp Wall construction	01/26/98	ST LINE	10/00	N	2,500.00	1,875.00	250.00	2,125.00
Total for (Touchstone Office)						2,500.00	1,875.00	250.00	2,125.00
1685 Library/Family Room Remodel									
6lh	Library & Family room remodel	05/30/00	ST LINE	30/00	N	18,538.00	3,192.64	617.93	3,810.57
Total for (Library/Family Room Remodel)						18,538.00	3,192.64	617.93	3,810.57
1686 Lobby & itech remodel									
7lh	Lobby & iTech remodel	11/01/01	ST LINE	10/00	N	19,035.00	6,979.50	1,903.50	8,883.00

Book Basis

Parents Helping Parents
Depreciation Schedule by G/L Account Number
For the 12 Months Ended 06/30/06

09/21/06

03:43PM

Asset No.	Asset Description	Date Acquired	Method	Life	Sold?	Cost	Accum Depr 07/01/05	Current Depreciation	Accum Depr 06/30/06
1631 Furniture & Fixtures									
00054	Typewriter - IBM	07/01/85	ST LINE	05/00	N	1,000.00	1,000.00	0.00	1,000.00
00118	Postage Scales - Pitney Bowes	09/27/91	ST LINE	07/00	N	700.00	700.00	0.00	700.00
00201	TTY - Ultratec	07/01/98	ST LINE	05/00	N	550.00	550.00	0.00	550.00
Total for (Furniture & Fixtures)						2,250.00	2,250.00	0.00	2,250.00
1632 Capital Asset - Computer									
00076	Printer - HP	09/06/94	ST LINE	05/00	N	993.00	993.00	0.00	993.00
00090	Printer - HP	12/01/94	ST LINE	05/00	N	993.00	993.00	0.00	993.00
00004	Printer - HP	06/08/95	ST LINE	05/00	Y	500.00	500.00	0.00	500.00
00154	Printer - HP	07/01/95	ST LINE	05/00	N	867.00	867.00	0.00	867.00
00111	Printer - HP	08/01/95	ST LINE	05/00	N	1,700.00	1,700.00	0.00	1,700.00
00150	PC - Server	08/01/95	ST LINE	05/00	N	6,241.00	6,241.00	0.00	6,241.00
00215	Hob - 24 port (Merlin Phone syste	08/01/95	ST LINE	05/00	Y	969.00	969.00	0.00	969.00
00045	Monitor - Acer	08/08/95	ST LINE	05/00	N	273.00	273.00	0.00	273.00
00206	PC - Lotus Pacific	04/23/96	ST LINE	05/00	N	5,509.00	5,509.00	0.00	5,509.00
00127	PC - Mac	10/01/96	ST LINE	05/00	N	750.00	750.00	0.00	750.00
00234	Monitor - Mac	10/01/96	ST LINE	05/00	N	250.00	250.00	0.00	250.00
00200	PC - IBM 300GL	05/07/97	ST LINE	05/00	N	2,274.00	2,274.00	0.00	2,274.00
00138	Monitor - MiTAc	07/01/97	ST LINE	05/00	N	300.00	300.00	0.00	300.00
00203	PC - IBM (97 Cisco \$)	07/01/97	ST LINE	05/00	N	1,964.00	1,964.00	0.00	1,964.00
00278	Monitor - Hansol 500P	02/19/99	ST LINE	05/00	N	200.00	200.00	0.00	200.00
00279	PC - Pentium II	02/19/99	ST LINE	05/00	N	1,257.00	1,257.00	0.00	1,257.00
00303	Laptop - IBM ThinkPad	05/15/99	ST LINE	05/00	N	3,000.00	3,000.00	0.00	3,000.00
00307	Laptop - Clio	07/01/99	ST LINE	05/00	Y	1,000.00	1,000.00	0.00	1,000.00
00308	Keyboard - HP	10/01/99	ST LINE	05/00	N	75.00	75.00	0.00	75.00
00310	Monitor - IBM	10/01/99	ST LINE	05/00	N	250.00	250.00	0.00	250.00
00311	Keyboard - IBM	10/01/99	ST LINE	05/00	N	75.00	75.00	0.00	75.00
00312	PC - IBM	10/01/99	ST LINE	05/00	N	1,575.00	1,575.00	0.00	1,575.00
00313	Keyboard - IBM	10/01/99	ST LINE	05/00	N	75.00	75.00	0.00	75.00
00314	PC - IBM	10/01/99	ST LINE	05/00	N	1,575.00	1,575.00	0.00	1,575.00
00315	Keyboard - IBM	10/01/99	ST LINE	05/00	N	75.00	75.00	0.00	75.00
00316	Monitor - IBM	10/01/99	ST LINE	05/00	N	250.00	250.00	0.00	250.00
00317	PC - IBM	10/01/99	ST LINE	05/00	N	1,575.00	1,575.00	0.00	1,575.00
00318	Monitor - IBM	10/01/99	ST LINE	05/00	Y	250.00	250.00	0.00	250.00
00327	Keyboard	02/01/00	ST LINE	05/00	N	85.00	85.00	0.00	85.00
00328	PC - Usi	02/07/00	ST LINE	05/00	N	980.00	980.00	0.00	980.00
00332	Keyboard	05/01/00	ST LINE	05/00	N	75.00	75.00	0.00	75.00
00334	PC - SOS	05/01/00	ST LINE	05/00	N	701.00	701.00	0.00	701.00
00356	Laptop - Compaq Presario	05/08/00	ST LINE	05/00	N	2,489.00	2,489.00	0.00	2,489.00
00333	Monitor - Future Power	05/10/00	ST LINE	05/00	N	250.00	250.00	0.00	250.00
00338	Keyboard - Fujitsu	05/10/00	ST LINE	05/00	N	75.00	75.00	0.00	75.00
00339	Monitor - Future Power	05/10/00	ST LINE	05/00	N	161.00	161.00	0.00	161.00
00340	PC - SOS	05/10/00	ST LINE	05/00	N	861.00	861.00	0.00	861.00
00341	Keyboard	05/10/00	ST LINE	05/00	Y	75.00	75.00	0.00	75.00
00343	PC-SOS	05/10/00	ST LINE	05/00	N	861.00	861.00	0.00	861.00

Book Basis

Parents Helping Parents
Depreciation Schedule by G/L Account Number
For the 12 Months Ended 06/30/06

09/21/06

03:43PM

Asset No.	Asset Description	Date Acquired	Method	Life	Sold?	Cost	Accum Depr 07/01/05	Current Depreciation	Accum Depr 06/30/06
1686	Lobby & itech remodel								
	Total for (Lobby & itech remodel)					19,035.00	6,979.50	1,903.50	8,883.00
	Client Subtotal Before Sales					418,435.75	222,172.17	21,862.07	244,034.24
	Less Assets Sold					6,053.00			6,053.00
	Total					412,382.75	222,172.17	21,862.07	237,981.24



The Family Resource Center
Empowering families and communities to meet children's special needs

BOARD OF DIRECTORS
2006-2007

Name & Address	Business Address	Affiliation/ Term Expires
Robert Badagliacco 1556 Darlene Ave San Jose, CA. 95125 Chair: Development Committee	Vice-President Corporate Advisory Services Trammell Crow Company 650-687-0706 Fax: 408 282-4415 rbadagliacco@trammellcrow.com	6/30/07
Tom Downey 10192 Peninsula Ave Cupertino, CA. 95074 Treasurer	CFO / Finance Manager Finisar Corporation Wk: 408 542-4152 Cell: 408-203-4536 tom.downey@finisar.com	6/30/07
Allen Fleishman Chair: Marketing Committee	Attorney at Law Law Offices of Allen Fleishman 79 Devine St. #200 San Jose, CA. 95110 408-975-1075 dclarkson@fleishmanlaw.com	6/30/07
Suzanne Frank 227 Ada #A Mountain View, CA. 94043 650-968-2075	Pediatrician Kaiser Santa Teresa 276 International Circle San Jose, CA. 95119	6/30/08
Joanna Jaeger 707 Cardiff Place Milpitas, CA. 95035 408-946-1609 Board Chair	Educational Rights Advocate Cell: jaegs@comcast.net	Parent 6/30/08
Wayne Jasper 1272 Mandarin Dr. Sunnyvale, CA. 95087-2027 408-773-1274 Chair: Program Committee	Educational Consultant Cell: 408 505-9540 waynejasper@earthlink.net	Parent 6/30/07

Kazue Lowenstein 1200 California St., Apt. 9C San Francisco, CA 94109-0002 415-931-6181	Facilitator, Japanese Support Group with Special Needs Children at PHP 408-727-5775, ext. 165 kazue@php.com	Parent 6/30/05
George Marr 18 Highlands Ct Belmont, CA. 94002 Emeritus Board Director	gcmarr99@yahoo.com cell 650 787-1471 China Direct Dial 011-86-138-16-800-880	Emeritus
Antoinette Penton Mailing address: 1445 Foxworthy Ave, Suite 50 #105 San Jose, CA. 95118	Disability Attorney & Community College Professor <u>Business : 408-483-83-8557</u> <u>Home: 408-972-2450</u> am_penton@yahoo.com	Parent 6/30/08
Jim Quaranta 1954 Cabana Drive San Jose, CA 95125	408-371-2245 jqaq@sbcglobal.net	6/30/09
Kathy Robertson 10285 Center Avenue Gilroy, CA 95020	Statewide Roofing Owner/Office Administrator 5542 Monterey Road #2 San Jose, CA 95138 Business: 408-286-7828 Home: 408-842-1944	Grandparent 6/30/09
Joyce Uggle, Secretary 2061 El Sereno Los Altos, CA 94024 650-965-9169	Consultant Home: 650-965-9169 Cell: 650-906-6059 juggle@sigaba.com	Parent 6/30/06

PHP requires that Board Members:

- Be experienced individuals with integrity, status, proven performance capacity and have a willingness to work.
- Must represent no one except the long-term interests of the organization.
- Take time to carry out the functions of board membership.
- Have competence in administrative and program areas
- Have community leadership abilities.
- Be willing to make a personal stretch contribution to the organization.
- Will act as a bridge / ambassador to constituents.
- Be independent of management.