For	<b>.</b> 99	0	Return of Org	anization	Exempt Fr	om Inc	come Ta	ax	OMB No 1545-0047			
		-	Under section 501(c), 527, or	1047/2\/1\ of the	Internal Payanus (	Cada (ava	ant privata fe	umdations	,  2016			
			Do not enter socia			•			Open to Public			
		the Treasury ue Service	► Information about						Inspection			
A			ndar year, or tax year beginning			and endin		<u>.                                    </u>	, 20			
В			C Name of organization HELP ONE		· · · · · · · · · · · · · · · · · · ·			D Employe	er identification number			
	Address		Doing business as HELP ONE						26-3618295			
	Name ch		Number and street (or P O box if in	all is not delivered	to street address)	Room/su	ite	E Telephor	ne number			
	Initial reti	um	P.O. BOX 26716						(919) 758-8977			
	Final retur	n/terminated	City or town, state or province, cou	ntry, and ZIP or for	eign postal code							
	Amended	d return	RALEIGH, NC 27611					<b>G</b> Gross re	ceipts \$			
	Application	on pending [	F Name and address of principal office	er: CHRISTOP	HER MARLOW		H(a) Is this a	group return for	subordinates? Yes Vo			
			2301 WATKINS STREET, RAI	EIGH, NC 2760	14				s included? Yes No			
<u></u>	Tax-exer	npt status	✓ 501(c)(3)	) ◀ (insert	no )	527	If "I	No," attach a	list (see instructions)			
<u>J</u>	Website		W.HELPONENOW.ORG				H(c) Group	exemption	number >			
K			Corporation Trust Associ	ation	L Ye	ear of format	tion 2008	M State	of legal domicile TX			
Р	art I	Summa	<del></del>	<del></del>					<del></del>			
	١	•	scribe the organization's miss		-							
Governance	}		er and resource local leaders	vho care for orp	hans and vulneral	ble childre	n to transfo	rm commu	inities and break			
Ē		Chook the	<del></del>	discontinued :				250/ of	ito not acceta			
8	l .		s box ▶ ☐ if the organization		•	•		1 1				
ڻ مح	l .		of voting members of the gover of independent voting member		-	 ! lunc 1 b\		3 4	10			
es 4			ber of individuals employed	_				5	9			
ξ	1		ber of volunteers (estimate if	=		•		6	12			
Activities &			elated business revenue from					7a	<u>0</u> 0			
_	1		ated business taxable income					7b				
	<u> </u>	TVOL UTITOR	ated business taxable income	1101111 01111 00	0 1, 1110 04 .	<del>-                                    </del>	Prior Y		Current Year			
_	8	Contributi	ions and grants (Part VIII, line	1h)		<u> </u>		2,219,443	2,359,608			
Revenue		Program s	2,335,000									
ĕ	1	_	nt income (Part VIII, column (			H-						
æ	1		enue (Part VIII, column (A), lin	•	•							
	1		nue-add lines 8 through 11 (			ine 12)		2,219,443	2,359,608			
			d similar amounts paid (Part					761,145	1,426,831			
	j.		oald to or for members (Part I		•	F		150,115	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	1	-	ther compensation, employee			5–10)		392,751	468,520			
Expenses	i .		nal fundraising fees (Part IX,			_						
ē	Ь	Total fund	Iraising expenses (Part IX, co	lumn (D), line 2	(5) ▶			. 7. 5. 7. 1				
, iii	17	Other exp	enses (Part IX, column (A), lir	nes 11a-11d, 1	1f-24e)			420,193	824,014			
	18	Total expe	enses. Add lines 13–17 (musi	equal Part IX,	column (A), line 2	<del>:5)</del> 1 .		1,574,089	2,719,365			
	19	Revenue I	less expenses. Subtract line	18 from line 12	CEIVED	.   .		645,354	(359,757)			
5 6				m		S	Beginning of C	urrent Year	End of Year			
Net Assets or Fund Balances	20	Total asse	ets (Part X, line 16)	. OC.	[·1] ₹ 2017 ·	Ř [		948,942	564,837			
a As	21	Total liabi	lities (Part X, line 26)			စ္ကု ၂		24,348	191,828			
_			s or fund balances. Subtract	line 21 from lin	e 20			924,594	564,837			
P	art II	Signat	ure Block		DEN, UI							
			y, I declare that I have examined this						my knowledge and belief, it is			
	e, correct	i, and comple	ete Declaration of preparer (ether the	officer) is based to	on all information of wi	— prepare	r nas any knov	vieage	100.00			
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Sig	-	Siona	ture of officer	<u>~</u>			D	ate [	ı			
He	ere	يك ا	hric Mirlow, C	<u> </u>	<del></del>							
		<del></del>	or print name and title	Desperation					TOTAL			
Pa	id	Printryp	e preparer's name	Preparer's signat	iure		ate	Check				
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	<u> </u>		this return with the preparer		<del>`</del>	<del></del>	· · · ·	<u>· · · · · · · · · · · · · · · · · · · </u>	Yes No			
Foi	Paperv	vork Reduc	ction Act Notice, see the separ	ate instructions	•	Cat I	No 11282Y		Form <b>990</b> (2016)			

Form 990 (2016) Part III Statement of Program Service Accomplishments Briefly describe the organization's mission: To be a global tribe dedicated to ending extreme poverty by helping to rescue orphans, restore their hope and renew their communities. Did the organization undertake any significant program services during the year which were not listed on the ☐ Yes ☑ No If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program ☐ Yes ☑ No If "Yes," describe these changes on Schedule O. 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. (Code: ) (Expenses \$ 365,687 including grants of \$ 365,687) (Revenue \$ Our Child Sponsorship program serves over 700 orphaned and vulnerable children in 11 communities within 6 different countries. We sponsor orphans to ensure their 24/7holistic care, including education, food, clothing and medical care; and to support their local leaders and allow them to improve the living situations for all of the children in their care. We sponsor vulnerable children so that they can receive at least one hot meal every day, so that their community's schools are supported, and, most importantly, so that local families are strengthened and vulnerable children are prevented from becoming orphans. ) (Expenses \$ 522,406 including grants of \$ 522,406 ) (Revenue \$ Community Development: Our Community Development initiatives fall into 4 categories: Education, Healthcare, Economic Empowerment, and Leadership Development. By fostering health in these 4 categories, we can transform communities in both the short-term and the long-term. In 2017, we have provided quality education for 3,500 students, clean water for 2,200 people, consistent medical care for over 600 people, and served over 1.6 million nutritious meals. We currently sustain 393 local jobs in the communities we serve, and we estimate that over 30,000 individuals receive ongoing physical, emotional and spiritual care through our international partnerships. (Code: \_\_\_\_) (Expenses \$ \_\_\_\_\_205,987 including grants of \$ \_\_\_\_\_205,987) (Revenue \$ HON Ethiopia: This holistic work includes community awareness — conferences and trainings to equip community leaders to care for orphans; family empowerment — assessment, business training and support to help families lift themselves out of extreme poverty; reunification — this goes hand in hand with awareness and empowerment as families find themselves able to provide; local adoption we have completed 100 legal domestic adoptions in Ethiopia, this includes 2 transition centers for children waiting to be adopted by Ethiopian families; and long-term orphan care — group homes providing long-term care in a family environment. We directly impacted the lives of over 5,500 Ethiopians this year. Other program services (Describe in Schedule O.) 332,751) (Revenue \$ 624,841 including grants of \$ (Expenses \$ 558,113) Total program service expenses ▶ 1,718,921

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," organization required to complete Schedule J. Schedule of Contributors (see instructions)?  2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  3 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  4 Section 501(c)(8) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.  5 Is the organization activities of 501(c)(s) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.  6 Did the organization maintain any donor activised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II.  7 Did the organization maintain collections of works of art, historical treasures, or other similar assests? If "Yes," complete Schedule D, Part III.  8 Did the organization maintain collections of works of art, historical treasures, or other similar assests? If "Yes," complete Schedule D, Part III.  9 Did the organization report an amount in Part X, inc 21, for secrow or custodial account lability, serve as a custodian for amounts on listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  9 Did the organization or aport an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII.  10 Did the organization organization organization school in Part X, line 10? If "Yes," complete Schedule D, Part VII.  11 Did the organization organization amount to rinvestments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII.  12 Did the organization organization report an amount for thoreatments—organization and part of the part X, line 10? If "Yes	Form 99			F	Page 3
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A  2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  3 Did the organization engage in client or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I I.  4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part I II.  5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19 If "Yes," complete Schedule C, Part III.  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II.  7 Did the organization receive or hold a conservation assement, including easements to preserve one space, the environment, historical advances? If "Yes," complete Schedule D, Part II.  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II.  9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part V.  10 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part V.  10 Did the organization maintain and office, and selected organization, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part V.  11 If the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16	Part	V Checklist of Required Schedules		Ves	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  3 Did the organization ange in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I  4 Section S01(c)(S) organizations. Bid the organization engage in lobbying activities, or have a section 501(ft) election in effect during the tax year? If "Yes," complete Schedule C, Part II  5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), or 501(c)(6) part III  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part III  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III  8 Did the organization maintain collections of works of an, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 12, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 12, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 12, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 12, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 12, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 12, for escrow or escretical part X, line 12, for escrow or esc			1		
4 Section 501(s)l organizations. Did the organization energes in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.  Is the organization a section 501(c)4), 501(c)4), 501(c)5, or 501(c)6), or 501(c)6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 88-197 If "Yes," complete Schedule C, Part III.  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part III.  Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III.  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV.  Did the organization, directly or through a related organization, hold assets in temporally restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.  If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for investments—other securities in Part X, line 18 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X X and XIII.  Did the organization report an amount for other isabilities in Part X, line 18? If "Yes," complete Schedule D, Part X X and XII	2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?			
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.  5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part II.  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II.  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III.  8 Did the organization installation collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV.  9 Did the organization fractly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.  10 Did the organization fractly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VV.  10 Life the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VV.  11 Did the organization report an amount for investments—other societies in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VVI.  12 Did the organization report an amount for other labilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VVI.  13 Did the organization report an amount for other labilities in Part X, line 15 t	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3		1
assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yas," complete Schedule D, Part III .  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yas," complete Schedule D, Part III .  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, listoric land areas, or historic structures? If "Yas," complete Schedule D, Part III .  8 Did the organization report an amount in Part X, ine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, in Part X, ine 17, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine Part X, ine Part X, ine 17, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 17, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 17, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 17, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 17, for escrow or custodial account liability, serve as a custodian for amounts and the complete Schedule D, Part VII.  10 Did the organization in did in the part X, ine 18, for escrow or custodial account liability, serve as a custodian for amounts and the organization has been accounted to a custodian for amounts account in the part X, ine 17, for escrow or custodial account liability, serve as a custodian for amounts and the custodian for amounts and the custodian for a custodian for amounts and the custodian for amount for investments—other securities in Part X, line 19, for Yas			4		
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bid the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  Did the organization is nessert to any of the following questions is "Yes," then complete Schedule D, Part V VII, VIII, IX, or X as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIV.  Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIV.  Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for other lassets in Part X, line 16? If "Yes," complete Schedule D, Part X VIII.  Did the organization organization report an amount for other assets in the security of the part X viii.  Did the organization separate or consolidated, independent audited financial statements for the tax year? If yes," complete Schedule D, Part X viii.  Did the organization naintain an office, employees, or agents out	6	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		1
B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V.  Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.  If the organization, answer to any of the following questions is "Yes," then complete Schedule D, Part V.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII.  Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  Did the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X II.  Did the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X II.  Did the organization aschool described in section 170(b)(1)(A)(b)(p)? If "Yes," complete Schedule E.  Did the organization aschool described in section 170(b)(1)(A)(p)? If "Yes," complete Schedule E.  Did the organization report on Part IX, column (A), line 3, more than \$10,000 of aggregate grants or other assistance	7		7	<u> </u>	1
Did the organization report an amount in Part X, line 21, for secrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negoliation services? If "Yes," complete Schedule D, Part IV.  10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V V, VII, VIII, IX, or X as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI .  b Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI .  c Did the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII .  d Did the organization report an amount for other liabilities in Part X, line 15? If "Yes," complete Schedule D, Part VII .  e Did the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X .  10 b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII is optional is been organization answered "No" to line 12a, then completing Schedule D, Parts X and XII is optional is the organization answered "No" to line 12a, then completing Schedule D, Parts X and XII is optional is lability for uncertain and office, employees, or agents outside of the United States?  b Did the organization report on Part X, column (N), line 3, more than \$10,000 form grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV.  15 Did the organiz	_		8		
endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI VII, VIII, IX, or X as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a V Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b V 11b V 11b V 11c V 11		custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	9	<del>,</del>	
If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  Did the organization or encount and in a school in the organization of ilability for uncertain tax positions under Fin 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is optional  Is the organization aschool described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule D, Parts XI and XII is optional  Is the organization aschool described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule D, Parts XI and XII is optional  Is bid the organization and office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV.  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregat	10		10		1
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII.  b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  d Did the organization report an amount for other assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.  e Did the organization amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.  11d ✓  e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII substitution included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is optional 13 Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.  13 Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.  13 Is Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV.  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gagregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II and IV.  16 Did the organization report and than \$15,000 of expe	11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			_
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	112		<i>J</i>
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? if "Yes," complete Schedule D, Part VIII		Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  1 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X  12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and if the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  14 a Did the organization maintain an office, employees, or agents outside of the United States?  b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV.  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.  16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  17 ✓  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.  12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	е	·	$\overline{}$		
12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  14 a Did the organization maintain an office, employees, or agents outside of the United States?  b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.  17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III  19 ✓	b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			
fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV			14a	✓_	<u> </u>
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	þ	fundraising, business, investment, and program service activities outside the United States, or aggregate	Ì		
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		1	-
Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		<b>✓</b>
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10		17		<b>✓</b>
If "Yes," complete Schedule G, Part III		Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
Ann :	19			600	1

	0 (2016)			Page <b>4</b>
Part	V Checklist of Required Schedules (continued)			<del></del>
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	Yes	No /
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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? If "Yes," complete Schedule J	23		1
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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? If "Yes," complete Schedule L, Part I	24d 25a		<b>√</b>
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?  If "Yes," complete Schedule L, Part I	25b		1
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? If "Yes," complete Schedule L, Part II	26		1
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? If "Yes," complete Schedule L, Part III	27		1
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	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? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<del>                                     </del>	1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	1	
		For	<b>99</b>	0 (2016

HELP ONE NOW 26-3618295 Form 990 (2016) Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V . . . 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . 1b Did the organization comply with backup withholding rules for reportable payments to vendors and 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) . . . 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O. 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 **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 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b 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 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . . . 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7c **d** If "Yes," indicate the number of Forms 8282 filed during the year . . . . . . . . . Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e **7**f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? . . . . . . . . . Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? . . . . . Яa Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities ...

11 Section 501(c)(12) organizations. Enter: Gross income from other sources (Do not net amounts due or paid to other sources 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year. . . Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. 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 Enter the amount of reserves on hand . . . . . . . . . . . . . . . . 13c Did the organization receive any payments for indoor tanning services during the tax year? . . . 14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Form **990** (2016)

Form 99	90 (2016)		F	age 6
Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ins	tructi	ons.
Coati	Check if Schedule O contains a response or note to any line in this Part VI	<del></del>	<u>···</u>	<u> </u>
Secu	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		163	
ь 2	Enter the number of voting members included in line 1a, above, who are independent .  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?	2		<b>/</b>
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? .	3		<b>√</b>
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  Did the organization become aware during the year of a significant diversion of the organization's assets?  Did the organization have members or stockholders?  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?	4 5 6		<del>√</del> <del>√</del> <del>√</del> <del>√</del>
b 8	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		<u>'</u>
a b	The governing body?	8a 8b	1	] 
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	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.) Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a	103	<u>√</u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	<b>√</b>	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13 14 15	Did the organization have a written whistleblower policy?	13	1	
a b 16a	The organization's CEO, Executive Director, or top management official	15a 15b	<b>√</b>	
b	with a taxable entity during the year?	16a		<b>✓</b>
Secti	on C. Disclosure	1.00		Ь—
17 18	List the states with which a copy of this Form 990 is required to be filed ►  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Sectio available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.			, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re Brigid O'Boyle 19 West Hargett Street Ste. 300 Raleigh, NC 27601 (919) 758-8977	cords	: ▶	

Dart VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	-
r ar u viii	Compensation of Officers, Directors, Trustees, Rey Employees, Righest Compensated Employees,	anu
•	Independent Contractors	
	mackanicalit calificatio	

Check if Schedule O contains a response or note to any line in this Part VII . . . 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, and 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 no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ited any curren	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any	(do n box,	ot ch unles	Pos eck s pe d a d	ition more	than on the state of the state	one an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Christopher Marlow	50.00						•			
CEO/Founder		_ ✓_		✓				59,400		
(2) Mike Rusch	01.00									
Chairman		1		✓				<u> </u>		
(3) Dr. Adam Maass	00.50									
Director		✓	<u> </u>			<u></u> .		<u> </u>	<u> </u>	
(4) Joshua Williams	00.50	[								
Director		✓								
(5) Sarah Bessey	00.50									
Director		✓					<u>L</u> .			
(6) Jason Standridge	00.50									
<u>Director</u>	<u> </u>	<u> </u>	<u>L</u> .		L					
(7) Korie Robertson Director	00.50	1								
(8) Seth Haines	00.50				$\vdash$			<u> </u>		
Director	1	1	1							
(9) Blaine Boyer	00.50				Г	-				
Director	T		L	l						
(10) Jennifer Hatmaker	00.50				Γ					
Director		<u> </u>	L	L	L	<u>L</u> _	L			
(11)										
(12)										
(13)					$\vdash$					
(14)	<del></del>			-						

Form 990 (2016)

(16) (17) (18) (19) (20) (21) (22) (23) (24) (25)  1b Sub-total	Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/005	s, ar	nd H	lighes	at C	ompensated E	mployees (cor	ntinued)	raye
Sub-total   Sub			Average hours per week (list any	box, office	unles er and	Pos leck is pe	rtion more rson irect	is both or/trust	an ee)	Reportable compensation	Reportable compensation from	om ar	stimated nount of other
(15) (16) (17) (18) (20) (21) (22) (23) (24) (25)  1			related organizations below dotted	ndividual trustee or director	nstitutional trustee	Officer	(ey employee	lighest compensated	ormer	organization		c) fi org an	om the anization d related
(17) (18) (20) (21) (22) (23) (24) (25)  1b Sub-total .	(15)											_	
(18)  (20)  (21)  (22)  (23)  (24)  (25)  1b Sub-total  c Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization is any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's year.	(16)				-							<del>-  </del> -	
(19)  (20)  (21)  (22)  (23)  (24)  (25)  1b Sub-total .	(17)									ļ	<u> </u>	┼─	
220   221   222   223   223   224   225   225   225   225   225   226	(18)											<del>  -</del> -	
220   221   222   223   223   224   225   225   225   225   225   226	(19)	<del></del>		 					_	<u> </u>			·· <u>·</u>
22)  23)  24)  25)  1b Sub-total										<u></u>			
22)  23)  24)  25)  1b Sub-total				 	<u> </u>	_			$\vdash$	ļ			
23)  24)  25)  1b Sub-total													
24)  25)  1b Sub-total													
25)  1b Sub-total	23)			<u> </u>							[ 		
1b Sub-total	24)												
Total (add lines 1b and 1c)	25)												
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0  Total number of individual ▶ 0  Yes  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	C	Total from continuation sheets to Part			•	•		•	<b>&gt; &gt;</b>				
Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		Total number of individuals (including bu	t not limited			_		above	e) w	ho received m		,000 of	
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	3												Yes No
Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	4	organization and related organizations	greater th	an \$	150,	,000	? /	f "Ye	s, "	complete Sci		such	
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's year.  (A) (B) (C)	5	Did any person listed on line 1a receive of	or accrue co	ompe	nsa	tion	fro	m any	, ur	related organi		idual	
compensation from the organization. Report compensation for the calendar year ending with or within the organization's year.	Section										<u></u>	<u> </u>	
(A) Name and business address Description of services Compensation	1	compensation from the organization. Re											
			dress				•			(B) Description of s	services		
												-	
2 Total number of independent contractors (including but not limited to those listed above) who		Total number of independent account	الدرامية ميو	ne E:	н -		lie-'	- Inch		hann links i st	ove) whe		

Form 990 (2016)

Far	Vill	Check if Schedule O contains	a response or note to	any lina in this	Part VIII		п
<u>;</u>		Office if Schedule O Contains	a response or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ats ats	1a	Federated campaigns	1a				
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues	1b				
S, C	С	Fundraising events	1c	i			
ar	d	Related organizations	1d				
imi	е	Government grants (contributions)	1e				
ttor sr S	f	All other contributions, gifts, grants,					
章章		and similar amounts not included above	1f 2,359,608	ŀ			
E D	9	Noncash contributions included in lines 1a					
	h	Total. Add lines 1a-1f		2,359,608			
Program Service Revenue			Business Code	·			
eve	2a						<del></del>
Š Z	b					ļ	
Š	C			<del></del>	<del>-</del>	· · · · · · · · · · · · · · · · · · ·	
လ္ဆ	d					<del>-</del>	<del> </del>
гап	e	All ather and against the second			<del>_</del>	<u> </u>	<del> </del>
Ē	1	All other program service revenu				<u> </u>	<del></del>
<del></del> -	3	<b>Total.</b> Add lines 2a–2f Investment income (including	dividends interest			<del></del>	
		and other similar amounts) .					
	4	Income from investment of tax-exe				-	
	5						<del></del>
		Royalties	(ii) Personal		<del></del>	<del> </del>	<del>                                     </del>
	6a	Gross rents					
	ь	Less: rental expenses					
	С	Rental income or (loss)				}	
	d	Mat we stall be a second of the sex	<u> ▶</u>				
	7a	Gross amount from sales of (i) Securit	ies (ii) Other				
		assets other than inventory					
	b	Less: cost or other basis					
		and sales expenses .					
	C	Gain or (loss)					ļj
	d	Net gain or (loss)	· · <u>· · · · · · · · · · · · · · · · · </u>				<del> </del>
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1 See Part IV, line 18					
횽	b	Less: direct expenses	. b				
_		Net income or (loss) from fundra		 	···-		
	9a	Gross income from gaming activ See Part IV, line 19					
	b	Less: direct expenses	. b				
	С	Net income or (loss) from gamin					
	10a	Gross sales of inventory, returns and allowances					
	ь	Less: cost of goods sold	·	1			
	C	Net income or (loss) from sales					
		Miscellaneous Revenue	Business Code				
	11a						
	Ь						
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d					<u> </u>
	12	Total revenue. See instructions	<u> ▶</u>	2,359,608		<u> </u>	
					·		Form <b>990</b> (2016)

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Form 990 (2016).

Part IX Statement of Functional Expenses

Section	501(c)(3)	and 50	1(c)(4)	organizat	ions must	complet	e all column:	s. All other	r organizations	must complete	column (A).

	Check if Schedule O contains a respons			<del> </del>	
	nt include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
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, lines 15 and 16	1,426,831	1,426,831		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	59,400	11,880		47,520
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	354,623	161,195	121,894	71,534
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	35,950	15,119	4,566	16,265
10	Payroll taxes	21,047		.,	
11	Fees for services (non-employees):				
a	Management	42,255			42,255
b	Legal				<del></del>
c d	Accounting	14,500		14,500	
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.)	22,863	10,214	4,409	8,240
12	Advertising and promotion	345,183	10,214	1,704	343,479
13	Office expenses	17,305		14,742	2,563
14	Information technology	9,541	211	8,914	416
15	Royalties [		<u> </u>		
16	Occupancy	14,218		14,218	
17	Travel	263,266	250,312	296	12,658
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				····
19	Conferences, conventions, and meetings .	3,757	663	2,675	419
20	Interest	1,970		1,970	
21 22	Payments to affiliates	700		725	
23	Insurance	735 4,099		735 4,099	
24	Other expenses. Itemize expenses not covered	4,039			
	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.)				
а	Bank and Merchant Fees	74,611		74,611	
b	Staff Appreciation	3,428	272	2,931	225
C	Phone Expense	3,783		3,783	
d e	All other expenses	_	<del></del> -	<del></del>	
25	Total functional expenses. Add lines 1 through 24e	2,719,365	, <u></u>		
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 ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2016)

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		Check if Schedule O contains a response or note to any line in this Par		· · ·	<u> L.</u>
			(A) Beginning of year		(B) End of year
- [	1	Cash—non-interest-bearing	945,960	1	753,322
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
İ	4	Accounts receivable, net		4	
	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			
ا <del>ق</del> ا	-			6	
Assets	7	Notes and loans receivable, net	2,247	7	
•	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	3,343
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b		10c	
- 1	11	Investments—publicly traded securities		11	
	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		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	948,942	16	756,665
П	17	Accounts payable and accrued expenses	24,348	17	191,828
1	18	Grants payable		18	
ł	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	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			
<u> </u>		· · · · · · · · · · · · · · · · · · ·		22	
<b>-</b>	23	Secured mortgages and notes payable to unrelated third parties		23	
- 1	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			
ļ		of Schedule D		25	
$\dashv$	26	Total liabilities. Add lines 17 through 25	24,348	26	191,828
Ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
اق	27	Unrestricted net assets	419,990	27	98,696
Ba	28	Temporarily restricted net assets	504,604		466,141
ᅙ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
<u>s</u>	30	Capital stock or trust principal, or current funds	· · · · · · · · · · · · · · · · · · ·	30	
Sel	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
<u>ĕ</u>	33	Total net assets or fund balances	924,594	<del>                                     </del>	564,837
<b>~</b>	34	Total liabilities and net assets/fund balances	948,942	<del> </del>	756,665

romn 95	0 (5019)				Pag	je 1 <b>2</b>
Part	XI Reconciliation of Net Assets	_				
	Check if Schedule O contains a response or note to any line in this Part XI		<u>.</u>		<u>.</u> .	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	_		2,359	9,608
2	Total expenses (must equal Part IX, column (A), line 25)	2				9,365
3	Revenue less expenses. Subtract line 2 from line 1	3				9,757
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			92	4,594
5	Net unrealized gains (losses) on investments	5				
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			56	4,837
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	in ,			
	Schedule O.		Ï	"	ì	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. [	2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled (	or 📗			
	reviewed on a separate basis, consolidated basis, or both:				į	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			il	ľ	
b	Were the organization's financial statements audited by an independent accountant?		. [3	2b		<b>√</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on	a			
	separate basis, consolidated basis, or both:		Į.	$\parallel$		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				i	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o					
	of the audit, review, or compilation of its financial statements and selection of an independent account	ıntant	?   ;	2c	}	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain	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?		ı	3a	1	✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	ergo ti	ne 🗀	$\neg$		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	;	3b	\	
				Form	990	(2016

# HELP ONE NOW

26-3618295

#### SCHEDULE A. (Form 990 or 990-EZ)

**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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

Name of the organization						Employer identification	number
	One Now					26-361	
Par							ns.
1 ne c	rganization is not a private found:  A church, convention of church						
2	A school described in section						
3	A hospital or a cooperative ho						
4	A medical research organizati	•				,, ,, ,	iii). Enter the
-	hospital's name, city, and stat		,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	d by a government	al unit described in
6	A federal, state, or local gover	•			. ,	. ,, ,, ,	
7	An organization that normally described in section 170(b)(1			port from	a govern	nmental unit or from	the general public
8	A community trust described	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9	An agricultural research organ or university or a non-land-gra university:	ization described ant college of agr	d in <b>section 170(b)(1)</b> (iculture (see instruction	(A)(ix) ope ons). Ente	erated in r the nam	conjunction with a land a land a land a land a land at a land at a land at a land at a land a	and-grant college the college or
10	An organization that normally receipts from activities related support from gross investmen acquired by the organization a	l to its exempt fu it income and uni after June 30, 197	nctions—subject to co related business taxal 75. See <b>section 509(</b> a	ertain exc ble incom a)(2). (Con	eptions, e (less se nplete Pa	and (2) no more that ection 511 tax) from irt III.)	า 33¹/₃% of its
11	An organization organized and	•	•	-			
12	An organization organized and						
	of one or more publicly supp Check the box in lines 12a thro						
_				_	_		
а	Type I. A supporting orgation the supported organization supporting organization. Y	n(s) the power to	regularly appoint or e	lect a ma	jority of t		
ь	☐ <b>Type II.</b> A supporting orga	nization supervis	ed or controlled in co	nnection	with its s	upported organizati	on(s), by having
	control or management of						
	organization(s). You must	complete Part I	V, Sections A and C.				
C	Type III functionally integ						ally integrated with,
	its supported organization	(s) (see instructio	ns). <b>You must comp</b>	lete Part	IV, Secti	ons A, D, and E.	
d	Type III non-functionally that is not functionally inte requirement (see instructionally interest)	grated. The orga	nization generally mu	st satisfy	a distribu	ıtion requirement an	
e	☐ Check this box if the orga	nization received	a written determination	on from th	ne IRS tha	at it is a Type I, Type	il, Type III
	functionally integrated, or					• • • • • • • • • • • • • • • • • • • •	
f	Enter the number of supported						· · [
9	Provide the following information		<del></del>	·	<del></del>	r	
	(ii) Name of supported organization (iii) EIN (iiii) Type of organization (described on lines 1–10 above (see instructions)) (iv) Is the organization (v) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions)						other support (see
			]	Yes	No	<u>'</u>	
						,	
(A)	- DEC	EIVED					
 (B)	REC						
				<u> </u>			
(C)	8 001	17 7 m7 S					
(D)	OGE	EN, UT					
(E)							
Total					والتناسية		

Schedule A (Form 990 or 990-EZ) 2016

Part	Support Schedule for Organiza (Complete only if you checked th						
	Part III. If the organization fails to	qualify under	r the tests lis	ted below, ple	ease complet	te Part III.)	
	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and		ļ	1			
	membership fees received. (Do not include any "unusual grants.")	ĺ	ľ	j	i	1	
•		657,368	1,123,940	1,536,648	2,219,443	2,359,608	7,897,007
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		}	i		ļ	
3	The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3	657,368	1,123,940	1,536,648	2,219,443	2,359,608	7,897,007
	- T	<del></del>	<del></del>				
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)						
6	Public support. Subtract line 5 from line 4						7,897,007
	on B. Total Support	<del></del>			<del></del>	<del></del>	
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	657,368	1,123,940	1,536,648	2,219,443	2,359,608	7,897,007
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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						7,897,007
12	Gross receipts from related activities, etc.		•			12	<del></del>
13	First five years. If the Form 990 is for the						
Cooti	organization, check this box and stop her			<u>· · · · · · · · · · · · · · · · · · · </u>	<del></del>	<u> </u>	· · • [
14	on C. Computation of Public Suppor Public support percentage for 2016 (line 6			1 column (6)		14	100.00.9/
15	Public support percentage from 2015 Sch					15	100.00 % %
16a	331/3% support test—2016. If the organization qual	zation did not	check the box	on line 13, an	d line 14 is 33	11/3% or more,	check this
b	331/3% support test—2015. If the organization						
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "torganization	ets the "facts- facts-and-circu	and-circumstaumstaumstances" te	ances" test, ch st. The organiz	eck this box a cation qualifies	ind stop here.	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization m supported organization	tion meets the neets the "fact	e "facts-and-c s-and-circums	circumstances" stances" test.	test, check t The organization	this box and son qualifies as	top here.
18	Private foundation. If the organization did instructions	d not check a l	box on line 13,	16a, 16b, 17a	, or 17b, checl	k this box and	

10							30187
	e A (Form 990 or 990-EZ) 2016						Page 3
Part							
•	(Complete only if you checked th						nder Part II.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	omplete Part	II.)	
	on A. Public Support		<del></del>		<del></del>		<del></del>
alen	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.")  Gross receipts from admissions, merchandise		ļ	ļ	<b>}</b>		
-	sold or services performed, or facilities		1			ļ	
	furnished in any activity that is related to the		l				
3	organization's tax-exempt purpose Gross receipts from activities that are not an		<del></del>	<b></b> _		<del>-</del>	<del></del>
•	unrelated trade or business under section 513		l				
4	Tax revenues levied for the		<del> </del>			<del>                                     </del>	<u> </u>
•	organization's benefit and either paid		ļ	ļ	ļ	ļ	
	to or expended on its behalf						
5	The value of services or facilities					-	
	furnished by a governmental unit to the		1				
	organization without charge		1	Ì	Ì	]	
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .				<u></u>	<u> </u>	
b	Amounts included on lines 2 and 3						
	received from other than disqualified		]	1	}	Ì	
	persons that exceed the greater of \$5,000			ļ	ļ	ļ	ļ
	or 1% of the amount on line 13 for the year		<u> </u>	ļ. <u>.                                   </u>			
C	Add lines 7a and 7b					<u> </u>	<u> </u>
8	Public support. (Subtract line 7c from						
4	line 6.)		<u>                                     </u>	<u> </u>	<u> </u>	<u></u>	
	on B. Total Support	(-) 0040	7.10040	1 1 2011	4.0.045	1 1 1 1 1 1 1	
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 10a			<del> </del>	<del> </del>	<del> </del>	-	
IUa	payments received on securities loans, rents,						
	royalties and income from similar sources .		}		}	)	
ь	Unrelated business taxable income (less	-	<u> </u>	<del> </del>	<del>                                     </del>		
-	section 511 taxes) from businesses		ļ				
	acquired after June 30, 1975				{	ŀ	ļ
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether	ı		Ţ	Į.	Į.	Į.
	or not the business is regularly carried on		<u> </u>				
12	Other income. Do not include gain or						
	loss from the sale of capital assets			Į.			
•-	(Explain in Part VI.)		<u> </u>	<del> </del>	<u> </u>	<b></b>	<u> </u>
13	Total support. (Add lines 9, 10c, 11,			Į			
	and 12.)		<u> </u>	<u> </u>		<u> </u>	501()(0)
14	First five years. If the Form 990 is for the						
20.04	organization, check this box and stop he			<del></del>	<del></del>	<del></del>	· · · <b>P</b> []
	on C. Computation of Public Suppor			12 och /6\		145	
15 16	Public support percentage for 2016 (line & Public support percentage from 2015 Sch						<u>%</u> %
16 Secti	on D. Computation of Investment In			· · · · ·	<del></del>	10	
17	Investment income percentage for 2016 (			v line 13 colu	mn (fl)	17	%
18	Investment income percentage for 2015 (		• •	-			
19a	331/2% support tests—2016. If the organ						
	17 is not more than 331/3%, check this box						

b 331/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/23%, check this box and stop here. The organization qualifies as a publicly supported organization  $\blacktriangleright$ Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Page 4

Schedule A (Form 990 or 990-EZ) 2016

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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 <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (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.	2 3a		
b		3b		
С		3c	9	
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 <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		<del>-</del>
C	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
5a	purposes.  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 <b>Part VI</b> , 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).	4c 5a	c	٠
b		5b		
С	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 <b>Part VI</b> .	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		<del></del>
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			_
b	in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI.</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	9a	<del>                                     </del>	├
U	the supporting organization had an interest? If "Yes," provide detail in <b>Part VI.</b>	9b	<del> </del>	
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	- 30	$\vdash$	$\vdash$
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
0a	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 10b below.	10a		 
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		<b> </b>	

determine whether the organization had excess business holdings.)

10b

Schedule A (Form 990 or 990-EZ) 2016 Part IV Supporting Organizations (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? 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? 11a **b** A family member of a person described in (a) above? 11b A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 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? 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. 1 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? 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. 2 Section C. Type II Supporting Organizations No Yes 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)? 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). 1 Section D. All Type III Supporting Organizations Yes No 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? 1 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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1 The organization satisfied the Activities Test. Complete line 2 below. а The organization is the parent of each of its supported organizations. Complete line 3 below. 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. Yes 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? 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. 2a 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? 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. 2b Parent of Supported Organizations. Answer (a) and (b) below. 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? Provide details in Part VI. 3a Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. 3b

Schedule A (Form 990 or 990-FZ) 2016

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations						
1 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 organ	izat	ions must complete Section	ons 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	<del></del>				
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):						
a Average monthly value of securities	1a					
<b>b</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	L	<u> </u>			
7 Check here if the current year is the organization's first as a non-functional	y in	tegrated Type III supportin	g organization (see			

Schedule A (Form 990 or 990-EZ) 2016

	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Secti	on D - Distributions			Current Year			
_1_	Amounts paid to supported organizations to accomplish						
2	Amounts paid to perform activity that directly furthers exe	rted					
	organizations, in excess of income from activity	<del></del>					
_3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations				
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. <b>Total annual distributions.</b> Add lines 1 through 6.	<del></del>					
_7_		L 4b					
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	n the organization is res	ponsive				
9	Distributable amount for 2016 from Section C, line 6						
	Line 8 amount divided by Line 9 amount						
_10_	Line 8 amount divided by Line 9 amount	<del></del>	(ii)	(iii)			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016			
1_	Distributable amount for 2016 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required – explain in Part VI). See instructions.	;					
3	Excess distributions carryover, if any, to 2016:						
a							
b	<u> </u>						
<u></u> c	From 2013						
<u>d</u>	From 2014						
8	From 2015						
f	Total of lines 3a through e						
	Applied to underdistributions of prior years						
<u>h</u>	Applied to 2016 distributable amount			<u></u>			
<u>i_</u>	Carryover from 2011 not applied (see instructions)			<del></del>			
i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2016 from Section D, line 7: \$		٥				
a	Applied to underdistributions of prior years						
b	Applied to 2016 distributable amount						
С	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2016, if						
_	any. Subtract lines 3g and 4a from line 2. For result						
	greater than zero, explain in Part VI. See instructions.						
6	Remaining underdistributions for 2016. Subtract lines 3h		<del> </del>				
	and 4b from line 1. For result greater than zero, explain in						
	Part VI. See instructions.			L			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.						
8	Breakdown of line 7:						
а	<u> </u>						
b	Excess from 2013						
С	Excess from 2014						
<u>d</u>	Excess from 2015			<u> </u>			
	Excess from 2016		<u></u> _	<u> </u>			

Schedule A (Form 990 or 990-EZ) 2016 Page 8 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.)

## HELP ONE NOW

26-3618295

OMB No. 1545-0047

#### **SCHEDULE F** (Form 990)

### **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990.

2016

Department of the Treasury Internal Revenue Service

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

ame (	of the organization				Emp	loyer identification number
	One Now					26-3618295
Par	General Information Form 990, Part IV, line		es Outside	the United States. Comp	plete if the organization	on answered "Yes" on
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?	gibility for the	grants or as			
2	For grantmakers. Describe assistance outside the Unite		he organizati	on's procedures for monit	oring the use of its	grants and other
3	Activities per Region. (The fo	llowing Part I	i, line 3 table o	can be duplicated if addition	nal space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (c a program service, describe specific type service(s) in the region	expenditures for and investments
(1)	Central America & Caribbean	3	3	Program Services	Community Developn	nent 544,063
(2)	South America	1_	1	Program Services	Community Developn	nent 105,741
(3)	Sub-Saharan Africa	5	7	Program Services	Community Developm	nent 777,027
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
— (15)						
<u>.                                    </u>						
<u>· · · ·</u> (17)						
3a	Sub-total			<del></del>		1,426,831
b	Total from continuation sheets to Part I					
C	Totals (add lines 3a and 3b)					1,426,831

Page 2

Schedule F (Form 990) 2016

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, (f) Method of valuation (book, FMV, appralsal, other) 15 (h) Description of noncash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Amount of noncash assistance (f) Manner of cash disbursement 6,000 wire transfer 287,325 wire transfer 105,740 wire transfer 160,995 wire transfer 13,800 wire transfer 75,943 wire transfer 223,812 wire transfer 158,800 wire transfer 122,325 wire transfer 30,000 wire transfer 39,600 wire transfer 41,086 wire transfer 91,205 wire transfer 12,000 wire transfer 58,200 wire transfer by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (e) Amount of cash grant (d) Purpose of grant Central America & C Sub-Saharan Africa South America (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization Part II E 12 <u>E</u> **₹** (15) 9 16) <u>@</u> 至 2 9 E 8

Schedule F (Form 990) 2016

Enter total number of other organizations or entities

က

Page 3 Schedule F (Form 990) 2016 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, lirle 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance Schedule F (Form 990) 2016 Part III Ξ Ξ <del>1</del>00 (13) (14) (15) <del>(</del>16) (18) 8 ල ₹ <u>O</u> ε 9 (12) 5 9 **©** 

Schedule F (Form 990) 2016

Page 4

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)		☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	1	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)		✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	,	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? In "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)		☑ No

Schedule F (Form 990) 2016

Schedule F (Form 990) 2016.

Part V	Supplemental Information
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Part I Line 2 : Conduct periodic field investigations by officer.					

### HELP ONE NOW

26-3618295

#### 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.

OMB No. 1545-0047

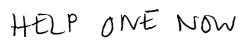
2016

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer Identification number			
HELP ONE NOW	26-3618295			
Part III Line 4d - Expenses: \$624,841 including grants of: \$332,751 Revenue: \$558,113. Orphan prevent	ion and family empowerment projects.			
Part VI Line 11b - CFO and Director of U.S. Operations review and approve Form 990 prior to submissi	on.			
Part VI Line 12c - The board follows the conflict of interest policy and recertifies that there were no conflicts during the year.				
Part VI Line 15a or 15b - The board determines compensation based on similar organizations for each	position. Approval provided in writing.			
Part VI Line 19 - The organization makes its governing documents and financial information available for inspection upon request.				
·····				



Schedule O (Form 990-62) (2016)	Page 2
Name of the organization	Employer identification number