BEFORE THE GEORGIA GOVERNMENT TRANSPARENCY AND CAMPAIGN FINANCE COMMISSION
STATE OF GEORGIA

IN THE MATTER OF:	*	**CASE NO.: 20-0015-C**
	*	
PAUL L. HOWARD, JR.	*	
	*	
	*	
	*	

COMPLAINT

COMES NOW, the Georgia Government Transparency and Campaign Finance Commission (hereinafter "Commission") and files this Complaint (hereinafter "Complaint") against PAUL L. HOWARD, JR. (hereinafter "Respondent") and asserts the following:

1.

The Respondent is a resident of Fulton County, State of Georgia.

2.

Respondent is the current District Attorney for the Atlanta Judicial Circuit which encompasses Fulton County and has served in this capacity for 6 successive terms since January 1, 1997. Since he was first elected over 23 years ago, Respondent has been subject to the jurisdiction and venue of this Commission. *See* O.C.G.A. § 21-5-2 (The Commission is charged with the enforcement of the Georgia Government Transparency and Campaign Finance Act (hereinafter "Act") in order to protect the integrity of the democratic process and hold public officers accountable).

3.

Respondent may be served according to law at his addresses listed with the Commission; to wit: 1280 Regency Center Drive, Atlanta, Georgia, 30331, 175 Trinity Avenue Southwest, Atlanta, Georgia, 30303, or 136 Pryor Street, 3rd Floor, Atlanta, Georgia, 30303.

4.

On or about April 22, 1996, Respondent filed his declaration of intention to accept campaign contributions for his campaign for election to the Office of District Attorney for the Atlanta Circuit. As the Respondent was seeking, and continues to seek, a position with a four-year term of office, the Act requires that any action alleging a violation of its terms must be commenced within five years from the date of filing of the first report containing said violation. O.C.G.A. § 21-5-13.[1] In the case *sub judice*, the Commission instituted the above-referenced case on April 10, 2020. As such, this complaint is not barred by the five-year statute of limitations.

5.

On March 2, 2020, Respondent qualified to stand for re-election for his 7th four-year term for the Office of District Attorney for the Atlanta Circuit.

6.

The General Assembly enacted a requirement that requires public officials and candidates for public office to disclose their personal financial holdings, through a personal financial disclosure statement (hereinafter "PFDS"), on a yearly basis so that the electorate will have the opportunity to identify potential self-dealing in the official's/candidate's public acts. *See generally*, O.C.G.A. § 21-5-50.

[1] The Campaign Finance Act defines the commencement of an action for purpose of tolling the relevant statute of limitations as (1) the acceptance of a complaint pursuant to Code Section 21-5-7; or (2) the service of a summons or hearing notice by the Commission and/or the Attorney General notifying such person of the alleged violation of the Campaign Finance Act in accordance with O.C.G.A. § 50-13-1, *et seq.*

7.

Further, the General Assembly requires public officials to disclose their significant private interests to the public to determine whether these private interests have influenced their decisions as public officials to the detriment of their public duties and responsibilities. O.C.G.A. § 21-5-2.

8.

The PFDS must contain and identify:

(2) All fiduciary positions held by the candidate for public office or the filer, with a statement of the title of each such position, the name and address of the business entity, and the principal activity of the business entity. O.C.G.A. § 21-5-50(b)(2) (emphasis added).

(5) Filer's occupation, employer, and the principal activity and address of such employer, including any secondary employment. O.C.G.A. § 21-5-50(b)(5) (emphasis added).

9.

A "fiduciary position" is defined as any position imposing a duty to act primarily for the benefit of another person as an officer, director, manager, partner, guardian, or other designation of general responsibility of a business entity. O.C.G.A. § 21-5-3(13).

10.

Upon information and belief Respondent violated O.C.G.A. § 21-5-50 when he failed to disclose fiduciary positions on his PFDS:

a) Respondent violated O.C.G.A. § 21-5-50(b)(2) when he failed to disclose his fiduciary position as Chief Executive Officer of People Partnering for Progress, Inc. on his 2015 Personal Financial Disclosure Report. *See Exhibit A, Exhibit B, and Exhibit C.*

b) Upon information and belief, Respondent violated O.C.G.A. § 21-5-50(b)(5) when he failed to disclose his secondary employment as Chief Executive Officer of People Partnering for Progress, Inc., where he received a salary and failed to disclose this on his 2015 Personal Financial Disclosure Report. *See Exhibit A and Exhibit B.*

c) Respondent violated O.C.G.A. § 21-5-50(b)(2) when he failed to disclose his fiduciary position as Chief Executive Officer of People Partnering for Progress, Inc. on his 2016 Personal Financial Disclosure Report. *See Exhibit D and Exhibit E.*

d) Upon information and belief, Respondent violated O.C.G.A. § 21-5-50(b)(5) when he failed to disclose his secondary employment as Chief Executive Officer of People Partnering for Progress, Inc., where he received a salary and failed to disclose this on his 2016 Personal Financial Disclosure Report. *See Exhibit D and Exhibit E.*

e) Respondent violated O.C.G.A. § 21-5-50(b)(2) when he failed to disclose his fiduciary position as Chief Executive Officer of The Academy of Promise, Inc. on his 2016 Personal Financial Disclosure Report. *See Exhibit D, Exhibit F, and Exhibit G.*

f) Respondent violated O.C.G.A. § 21-5-50(b)(2) when he failed to disclose his fiduciary position as Chief Executive Officer of People Partnering for Progress, Inc. on his 2017 Personal Financial Disclosure Report. *See Exhibit H, Exhibit I, and Exhibit J.*

g) Upon information and belief, Respondent violated O.C.G.A. § 21-5-50(b)(5) when he failed to disclose his secondary employment as Chief Executive Officer of People Partnering for Progress, Inc., where he received a salary and failed to disclose this on his 2017 Personal Financial Disclosure Report. *See Exhibit H and Exhibit J.*

h) Respondent violated O.C.G.A. § 21-5-50(b)(2) when he failed to disclose his fiduciary position as Chief Executive Officer of The Academy of Promise, Inc. on his 2017 Personal Financial Disclosure Report. *See Exhibit H and Exhibit K.*

i) Respondent violated O.C.G.A. § 21-5-50(b)(2) when he failed to disclose his fiduciary position as Chief Executive Officer of People Partnering for Progress, Inc. on his 2018 Personal Financial Disclosure Report. *See Exhibit L, Exhibit M, and Exhibit N.*

j) Respondent violated O.C.G.A. § 21-5-50(b)(2) when he failed to disclose his fiduciary position as Chief Executive Officer of The Academy of Promise, Inc. on his 2018 Personal Financial Disclosure Report. *See Exhibit L and Exhibit O.*

k) Respondent violated O.C.G.A. § 21-5-50(b)(2) when he failed to disclose his fiduciary position as Chief Executive Officer of People Partnering for Progress, Inc. on his 2019 Personal Financial Disclosure Report. *See Exhibit P and Exhibit Q.*

l) Respondent violated O.C.G.A. § 21-5-50(b)(2) when he failed to disclose his fiduciary position as Chief Executive Officer of The Academy of Promise, Inc. on his 2019 Personal Financial Disclosure Report. *See Exhibit P and Exhibit R.*

WHEREFORE, Commission staff prays as follows:

a) That process issue and Respondent be served with a copy of this Complaint;

b) That, in the event a violation of the Campaign Finance Act is substantiated, Respondent be appropriately sanctioned by the Commission for violation of the Campaign Finance Act in accordance with O.C.G.A. § 21-5-6(14);

c) That Respondent be required to properly amend and file the personal financial disclosure statements for the calendar year 2015, 2016, 2017, 2018, and 2019.

Respectfully submitted, this the 10 day of April, 2020.

Georgia Government Transparency and
Campaign Finance Commission

David Emadi, Executive Secretary
Georgia State Bar No.: 272428

Joseph Cusack, Senior Staff Attorney
Georgia State Bar No.: 492674

200 Piedmont Ave, SE
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Atlanta, GA 30334
(404) 463-1980
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BEFORE THE GEORGIA GOVERNMENT TRANSPARENCY AND CAMPAIGN FINANCE COMMISSION
STATE OF GEORGIA

IN THE MATTER OF:	*	**CFC CASE NO.: 20-0015-C**
	*	
PAUL L. HOWARD, JR.	*	
	*	
	*	
	*	

CERTIFICATE OF SERVICE

This will certify that I have, this day, delivered and served a true and exact copy of the foregoing Complaint upon the following by placing a true and exact copy of same in the United State mail with adequate postage affixed thereto and addressed as follows:

Paul Howard
1280 Regency Center Drive
Atlanta, Georgia 30331
And
136 Pryor Street, 3rd Floor
Atlanta, Georgia 30303

John F. Sweet
Campaign Treasurer
175 Trinity Avenue Southwest
Atlanta, Georgia 30303

This 10 day of April, 2020.

Joseph Cusack, Senior Staff Attorney
Georgia State Bar No.: 492674
Georgia Government Transparency and
Campaign Finance Commission

Exhibit A

STATE OF GEORGIA
FINANCIAL DISCLOSURE STATEMENT

Original Statement

Date of this Statement: **07/19/2016** Covering Calendar Year: **2015**

Name of Public Officer or Candidate: **PAUL L. HOWARD JR.**

Mailing Address: **136 PRYOR STREET ATLANTA, GA 30303**

Telephone Number: **(404) 613-4984** Telephone Number: **(404) 696-3960**

2015 - Financial Disclosure Statement -- Elected Public Officer

Electronically filed with the Georgia Government Transparency and Campaign Finance Commission on 7/19/2016 1:06:06PM

Confirmation #F200600046836233

The electronic filing of this document constitutes an affirmation that the statement is true, complete, and correct. As per modifications of the Ethics in Government Act, filing a separate notarized affidavit is no longer required. *See* O.C.G.A. §§ 21-5-34.1(e) and 21-5-50(e).

SECTION I

MONETARY FEES RECEIVED

(This section to be completed by Public Officers only)

Identify each monetary fee or honorarium accepted from speaking engagements, participation in seminars, discussion panels, or other activities that directly relate to the official duties of, or to the office of the public officer, with a statement identifying the fee or honorarium and the person or entity from whom it was accepted.

Identify Fee or Honorarium	Amount Accepted	Identifying Information of of Person or Entity from Whom Accepted
No monetary fee or honorarium.		

SECTION II

FIDUCIARY POSITIONS

Name all fiduciary positions held by the candidate for public office or the public officer at any time during the covered year.. (You may expand this section if necessary to include all positions.) A **fiduciary position** is any position imposing a duty to act primarily for another's benefit as officer, director, manager, partner, guardian, or other designations of general responsibility of a business entity. A fiduciary position may be a **paid or unpaid position**. A **business entity** is any corporation, sole proprietorship, partnership, limited partnership, limited liability company, limited liability partnership, professional corporation, enterprise, franchise, association, trust, joint venture, or other entity, whether **profit or nonprofit**.

Title of Position	Name, address, and principal activity of business entity
No fiduciary positions in any business entity.	

SECTION III

DIRECT OWNERSHIP INTERESTS IN BUSINESS ENTITY

Direct ownership interest is the holding or possession of good legal or rightful title of property or the holding or enjoyment of real or beneficial use of the property by any person and includes any interest owned or held by a spouse of the person if such interest is held jointly or as tenants in common between the person and spouse.

Identify the name, address and principal activity of any business entity and the office held by and the duties of the candidate for public office or public officer within a business entity any time during the covered year in which a direct ownership interest: (A) Is more than 5 percent of the total interest in the business; or (B) Has a net fair market value of more than $5,000.00.

Name, address, and principal activity of business entity	Office held by candidate or public officer Duties of the candidate or public officer	Ownership Interests
No direct ownership interests in any business entity.		

SECTION IV
DIRECT OWNERSHIP INTERESTS IN REAL PROPERTY

Direct ownership interest is the holding or possession of good legal or rightful title of property or the holding or enjoyment of real or beneficial use of the property by any person and includes any interest owned **or** held by a spouse of the person if such interest is held jointly or as tenants in common between the person and spouse.

Identify each tract of real property in which the candidate for public office or public officer has a direct ownership interest as of December 31 of the covered year when that interest has a fair market value in excess of $5,000.00. "Fair market" value means the appraised value of the property for ad valorem tax purposes. Check one box to show the applicable valuation range for each tract.

County and State where property is located	General description of property (give street address or location, size of tract, and nature or use of property)	Value of tract
Fulton, GA	1280 Regency Center Drive Atlanta, Georgia 30331 Primary Residence	More than $200,000
Troup, GA	103 Heatherbrook Drive Lagrange, Georgia 30240 Secondary Residence	Between $5,000 and $100,000

SECTION V
SPOUSE'S DIRECT OWNERSHIP INTERESTS IN REAL PROPERTY

Identify each tract of real property in which the filer's spouse has a direct ownership interest as of December 31 of the covered year when that interest has a fair market value in excess of $5,000.00. Check one box to show the applicable valuation range for each tract.

County and State where property is located	General description of property (give street address or location, size of tract, and nature or use of property)	Value of tract
Lee, AL	1404 Monroe STreet Opelika, Alabama 36801 Investment Property	Between $5,000 and $100,000

SECTION VI
EMPLOYMENT AND FAMILY MEMBERS

Filer's Occupation:	District Attorney
Filer's Employer:	Fulton County
Employer's Address:	136 Pryor Street, SW Atlanta, Georgia 30303
Employer's Principal Activity:	County Government
Filer's Secondary Occupation:	
Filer's Secondary Employer:	
Employer's Secondary Address:	
Employer's Secondary Principal Activity:	

Filer's Spouse's Name:	Petrina M. Howard
Spouse's Occupation:	School Counselor
Spouse's Employer:	Atlanta Public School System
Spouse's Employer's Address:	130 Trinity Avenue, SW Atlanta, Georgia 30303
Spouse's Employer Principal Activity:	Public School System
Spouse's Secondary Occupation:	
Spouse's Secondary Employer:	
Spouse's Secondary Employer's Address:	
Spouse's Secondary Employer's Principal Activity:	

SECTION VII
INVESTMENT INTERESTS

List the name of any business or subsidiary thereof or investment in which the filer (either individually or with any other legal or natural person or entity) owns a direct ownership interest that: (1) is more than 5 percent of the total interests in such business or investment, or (2) has a net fair market value of more than $5,000.00. (Do not list individual stocks and bonds that are held by mutual funds.)

Business or Investment Entity Name

No investment interests that is more than 5 percent of the total interests in such business or investment, or with a fair market value of more than $5,000.00.

SECTION VIII

KNOWN BUSINESS OR INVESTMENT INTERESTS OF SPOUSE AND DEPENDENT CHILDREN

Identify any business or investment known to the filer in which the filer's spouse or dependent children have a direct ownership interest (either individually or with any other legal or natural person or entity) which interest: (1) is more than 5 percent of the total interest in the business or investment, (2) has a net fair market value exceeding $10,000.00, or (3) is one in an entity for which the filer's spouse or a dependent child serves as an officer, director, equitable partner, or trustee. (Do not list individual stocks and bonds that are held by mutual funds.)

a. Name of Business or Investment Entity,
b. Ownership (spouse/dependent children),
c. Indicate if officer, director, equitable partner, or trustee (where applicable)

No known business or investment interests of spouse and dependent children.

SECTION IX

ANNUAL PAYMENTS RECEIVED FROM THE STATE OF GEORGIA

(This section to be completed by Public Officers only)

Identify all annual payments in excess of $10,000.00 received by the public officer, or by any business entity identified in Section III above, from the State or any agency, department, commission or authority created by the State, and authorized and exempted from disclosure under O.C.G.A. § 45-10-25.

Name, address of state entity making payment, and general nature of the consideration for the payment	**Amount of annual payment**
No annual payments in excess of $10,000.00 from any State entity.	

Exhibit B

efile Public Visual Render | ObjectId: 201711359349206711 - Submission: 2017-05-15 | TIN: 14-1906395

Form 990-EZ

Short Form
Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

OMB No. 1545-1150

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015

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

C Name of organization
People Partnering for Progress Inc

Number and street (or P. O. box, if mail is not delivered to street address) | Room/suite
PO Box 54575

City or town, state or province, country, and ZIP or foreign postal code
Atlanta, GA 303080575

D Employer identification number
14-1906395

E Telephone number

F Group Exemption Number ▶ 0000

G Accounting Method: ☑ Cash ☐ Accrual Other (specify) ▶

H Check ▶ ☐ required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶

J Tax-exempt status (check only one) - ☑ 501(c)(3) ☐ 501(c)( ) ◀(insert no.) ☐ 4947(a)(1) or ☐ 527

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, column (B) below) are $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 150,000

Part I **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I ☑

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	150,000
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments		3	
	4	Investment income		4	
	5a	Gross amount from sale of assets other than inventory	5a		
	b	Less: cost or other basis and sales expenses	5b		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	6	Gaming and fundraising events			
	a	Gross income from gaming (attach Schedule G if greater than $15,000)	6a		
	b	Gross income from fundraising events (not including $ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)	6b		
	c	Less: direct expenses from gaming and fundraising events	6c		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less: cost of goods sold	7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	
	8	Other revenue (describe in Schedule O)		8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶		9	150,000
Expenses	10	Grants and similar amounts paid (list in Schedule O)		10	
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	90,712
	13	Professional fees and other payments to independent contractors		13	1,875
	14	Occupancy, rent, utilities, and maintenance		14	
	15	Printing, publications, postage, and shipping		15	
	16	Other expenses (describe in Schedule O)		16	50,782
	17	**Total expenses.** Add lines 10 through 16 ▶		17	143,369
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	6,631
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	31,753
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20		21	38,384

Part II **Balance Sheets**(see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II . . . . . ☐

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	31,753	**22**	38,384
23 Land and buildings	0	**23**	0
24 Other assets (describe in Schedule O)	0	**24**	0
25 Total assets	31,753	**25**	38,384
26 Total liabilities (describe in Schedule O)	0	**26**	0
27 Net assets or fund balances (line 27 of column (B) **must** agree with line 21)	31,753	**27**	38,384

Part III **Statement of Program Service Accomplishments** (see the instructions for Part III)
Check if the organization used Schedule O to respond to any question in this Part III . . ☐

What is the organization's primary exempt purpose?
Youth violence prevention

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

28 DA Community Prosecution Program- to reduce teen violence and improve community relationship workshops and community meetingstechnology for Atl PD (Grants $ 125,000) If this amount includes foreign grants, check here . . . ▶ ☐	**28a**	114,788
29 Gang Intelligence Program -Established platform to capture critical gang related data to share between the District Attorneys office and the Atlanta police department (Grants $ 25,000) If this amount includes foreign grants, check here . . . ▶ ☐	**29a**	25,000
30 (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐	**30a**	
31 Other program services (describe in Schedule O) (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐	**31a**	
32 Total program service expenses (add lines 28a through 31a) . . . . . ▶	**32**	139,788

Part IV **List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated see the instructions for Part IV)
Check if the organization used Schedule O to respond to any question in this Part IV. . . . . ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) **(if not paid, enter -0-)**	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Raymond P Carpenter CFO	5.00	0	0	0
Paul Howard Jr CEO	10.00	50,000	0	0
Kym Norman Secretary	5.00	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V . . . . . ☐

			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		No
35a	Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		No
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		No
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections4912, 4955, and 4958 ▶			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		No
41	List the states with which a copy of this return is filed. ▶ GA			
42a	The organization's books are in care of ▶ Paul Howard Jr DA Telephone no. ▶ (404) 612-4981			
	Located at ▶ PO Box 54575Atlanta, GA ZIP + 4 ▶ 303080575			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		No
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for **FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)**			
c	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		
	If "Yes," enter the name of the foreign country: ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** - Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year 43			
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		No
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		No
c	Did the organization receive any payments for indoor tanning services during the year?	44c		No
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		No

45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	**45b**		No

			Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	**46**		No

Part VI **Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI . . . . . ☐

			Yes	No
47	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	**47**		No
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . .	**48**		No
49a	Did the organization make any transfers to an exempt non-charitable related organization?	**49a**		No
b	If "Yes," was the related organization a section 527 organization?	**49b**		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over $100,000 . . . ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over $100,000. . . . . ▶ _____

52 Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must attach a completed Schedule A . . . . . ▶ ☑ **Yes** ☐ **No**

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

Sign Here

▶ Signature of officer	2017-05-02 Date
▶ Raymond P Carpenter CFO Type or print name and title	

Paid Preparer Use Only

Print/Type preparer's name MERIAN L CALLAWAY CPA	Preparer's signature	Date 2017-05-15	Check ☐ if self-employed	PTIN P00841470
Firm's name ▶ MERIAN L CALLAWAY CPA LLC			Firm's EIN ▶ 20-0466882	
Firm's address ▶ PO Box 72854 Marietta, GA 30007			Phone no. (770) 241-2166	

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶ ☐ Yes ☒ No

Additional Data

Return to Form

Software ID:
Software Version:

Form 990-EZ, Special Condition Description:

Special Condition Description

Exhibit C

GEORGIA
CORPORATIONS DIVISION

BRAD RAFFENSPERGER

HOME

BUSINESS SEARCH

BUSINESS INFORMATION

Business Name: PEOPLE PARTNERING FOR PROGRESS, INC.
Control Number: 0420744
Business Type: Domestic Nonprofit Corporation
Business Status: Active/Owes Current Year AR
Business Purpose: NONE
Principal Office Address: 136 PRYOR STREET, SW, 3RD FLR., ATLANTA, GA, 30303, USA
Date of Formation / Registration Date: 3/29/2004
State of Formation: Georgia
Last Annual Registration Year: 2019

REGISTERED AGENT INFORMATION

Registered Agent Name: CARPENTER, RAYMOND P
Physical Address: 625 COLONIAL PARK DR STE 201, ROSWELL, GA, 30075, USA
County: Fulton

OFFICER INFORMATION

Name	Title	Business Address
KYM NORMAN	Secretary	469 HOLDENE DRIVE, ATLANTA, GA, 30311, USA
PAUL L HOWARD, JR	CEO	136 PRYOR ST SW, ATLANTA, GA, 30303, USA
RAYMOND P CARPENTER	CFO	625 COLONIAL PARK DR STE 201, ROSWELL, GA, 30075, USA

Back | Filing History | Name History | Return to Business Search

Exhibit D

STATE OF GEORGIA
FINANCIAL DISCLOSURE STATEMENT

Original Statement

Date of this Statement: **12/29/2016** Covering Calendar Year: **2016**

Name of Public Officer or Candidate: **PAUL L. HOWARD JR.**

Mailing Address: **136 PRYOR STREET ATLANTA, GA 30303**

Telephone Number: **(404) 613-4984** Telephone Number: **(404) 696-3960**

2016 - Financial Disclosure Statement -- Elected Public Officer

Electronically filed with the Georgia Government Transparency and Campaign Finance Commission on 1/6/2017 7:51:41AM

Confirmation #F200600046836393

The electronic filing of this document constitutes an affirmation that the statement is true, complete, and correct. As per modifications of the Ethics in Government Act, filing a separate notarized affidavit is no longer required. *See* O.C.G.A. §§ 21-5-34.1(e) and 21-5-50(e).

SECTION I

MONETARY FEES RECEIVED

(This section to be completed by Public Officers only)

Identify each monetary fee or honorarium accepted from speaking engagements, participation in seminars, discussion panels, or other activities that directly relate to the official duties of, or to the office of the public officer, with a statement identifying the fee or honorarium and the person or entity from whom it was accepted.

Identify Fee or Honorarium	Amount Accepted	Identifying Information of of Person or Entity from Whom Accepted
No monetary fee or honorarium.		

SECTION II

FIDUCIARY POSITIONS

Name all fiduciary positions held by the candidate for public office or the public officer at any time during the covered year.. (You may expand this section if necessary to include all positions.) A **fiduciary position** is any position imposing a duty to act primarily for another's benefit as officer, director, manager, partner, guardian, or other designations of general responsibility of a business entity. A fiduciary position may be a **paid or unpaid position**. A **business entity** is any corporation, sole proprietorship, partnership, limited partnership, limited liability company, limited liability partnership, professional corporation, enterprise, franchise, association, trust, joint venture, or other entity, whether **profit or nonprofit**.

Title of Position	Name, address, and principal activity of business entity
No fiduciary positions in any business entity.	

SECTION III

DIRECT OWNERSHIP INTERESTS IN BUSINESS ENTITY

Direct ownership interest is the holding or possession of good legal or rightful title of property or the holding or enjoyment of real or beneficial use of the property by any person and includes any interest owned or held by a spouse of the person if such interest is held jointly or as tenants in common between the person and spouse.

Identify the name, address and principal activity of any business entity and the office held by and the duties of the candidate for public office or public officer within a business entity any time during the covered year in which a direct ownership interest: (A) Is more than 5 percent of the total interest in the business; or (B) Has a net fair market value of more than $5,000.00.

Name, address, and principal activity of business entity	Office held by candidate or public officer Duties of the candidate or public officer	Ownership Interests
No direct ownership interests in any business entity.		

SECTION IV
DIRECT OWNERSHIP INTERESTS IN REAL PROPERTY

Direct ownership interest is the holding or possession of good legal or rightful title of property or the holding or enjoyment of real or beneficial use of the property by any person and includes any interest owned or held by a spouse of the person if such interest is held jointly or as tenants in common between the person and spouse.

Identify each tract of real property in which the candidate for public office or public officer has a direct ownership interest as of December 31 of the covered year when that interest has a fair market value in excess of $5,000.00. "Fair market" value means the appraised value of the property for ad valorem tax purposes. Check one box to show the applicable valuation range for each tract.

County and State where property is located	General description of property (give street address or location, size of tract, and nature or use of property)	Value of tract
Fulton, GA	1280 Regency Center Drive Atlanta, Georgia 30331 Primary Residence	More than $200,000
Troup, GA	103 Heatherbrook Drive Lagrange, Georgia 30240 Secondary Residence	Between $5,000 and $100,000

SECTION V
SPOUSE'S DIRECT OWNERSHIP INTERESTS IN REAL PROPERTY

Identify each tract of real property in which the filer's spouse has a direct ownership interest as of December 31 of the covered year when that interest has a fair market value in excess of $5,000.00. Check one box to show the applicable valuation range for each tract.

County and State where property is located	General description of property (give street address or location, size of tract, and nature or use of property)	Value of tract
Lee, AL	1404 Monroe STreet Opelika, Alabama 36801 Investment Property	Between $5,000 and $100,000

SECTION VI
EMPLOYMENT AND FAMILY MEMBERS

Filer's Occupation:	District Attorney
Filer's Employer:	Fulton County
Employer's Address:	136 Pryor Street, SW Atlanta, Georgia 30303
Employer's Principal Activity:	County Government
Filer's Secondary Occupation:	
Filer's Secondary Employer:	
Employer's Secondary Address:	
Employer's Secondary Principal Activity:	
Filer's Spouse's Name:	Petrina M. Howard
Spouse's Occupation:	School Counselor
Spouse's Employer:	Atlanta Public School System
Spouse's Employer's Address:	130 Trinity Avenue, SW Atlanta, Georgia 30303
Spouse's Employer Principal Activity:	Public School System
Spouse's Secondary Occupation:	
Spouse's Secondary Employer:	
Spouse's Secondary Employer's Address:	
Spouse's Secondary Employer's Principal Activity:	

SECTION VII
INVESTMENT INTERESTS

List the name of any business or subsidiary thereof or investment in which the filer (either individually or with any other legal or natural person or entity) owns a direct ownership interest that: (1) is more than 5 percent of the total interests in such business or investment, or (2) has a net fair market value of more than $5,000.00. (Do not list individual stocks and bonds that are held by mutual funds.)

Business or Investment Entity Name

No investment interests that is more than 5 percent of the total interests in such business or investment, or with a fair market value of more than $5,000.00.

SECTION VIII

KNOWN BUSINESS OR INVESTMENT INTERESTS OF SPOUSE AND DEPENDENT CHILDREN

Identify any business or investment known to the filer in which the filer's spouse or dependent children have a direct ownership interest (either individually or with any other legal or natural person or entity) which interest: (1) is more than 5 percent of the total interest in the business or investment, (2) has a net fair market value exceeding $10,000.00, or (3) is one in an entity for which the filer's spouse or a dependent child serves as an officer, director, equitable partner, or trustee. (Do not list individual stocks and bonds that are held by mutual funds.)

a. Name of Business or Investment Entity,
b. Ownership (spouse/dependent children),
c. Indicate if officer, director, equitable partner, or trustee (where applicable)

No known business or investment interests of spouse and dependent children.

SECTION IX

ANNUAL PAYMENTS RECEIVED FROM THE STATE OF GEORGIA

(This section to be completed by Public Officers only)

Identify all annual payments in excess of $10,000.00 received by the public officer, or by any business entity identified in Section III above, from the State or any agency, department, commission or authority created by the State, and authorized and exempted from disclosure under O.C.G.A. § 45-10-25.

Name, address of state entity making payment, and general nature of the consideration for the payment	**Amount of annual payment**

No annual payments in excess of $10,000.00 from any State entity.

Exhibit E

efile Public Visual Render | ObjectId: 201721359349206662 - Submission: 2017-05-15 | TIN: 14-1906395

Form 990-EZ

Short Form
Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

OMB No. 1545-1150

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2016 calendar year, or tax year beginning 01-01-2016 , and ending 12-31-2016

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

C Name of organization
People Partnering for Progress Inc

Number and street (or P. O. box, if mail is not delivered to street address) | Room/suite
PO Box 54575

City or town, state or province, country, and ZIP or foreign postal code
Atlanta, GA 303080575

D Employer identification number
14-1906395

E Telephone number

F Group Exemption Number ▶ 0000

G Accounting Method: ☑ Cash ☐ Accrual Other (specify) ▶

H Check ▶ ☐ required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶

J Tax-exempt status (check only one) - ☑ 501(c)(3) ☐ 501(c)( ) ◀(Insert no.) ☐ 4947(a)(1) or ☐ 527

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, column (B) below) are $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 125,000

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I ☑

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	125,000
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments		3	
	4	Investment income		4	
	5a	Gross amount from sale of assets other than inventory	5a		
	b	Less: cost or other basis and sales expenses	5b		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	6	Gaming and fundraising events			
	a	Gross income from gaming (attach Schedule G if greater than $15,000)	6a		
	b	Gross income from fundraising events (not including $ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)	6b		
	c	Less: direct expenses from gaming and fundraising events	6c		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less: cost of goods sold	7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	
	8	Other revenue (describe in Schedule O)		8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶		9	125,000
Expenses	10	Grants and similar amounts paid (list in Schedule O)		10	
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	21,021
	13	Professional fees and other payments to independent contractors		13	2,000
	14	Occupancy, rent, utilities, and maintenance		14	
	15	Printing, publications, postage, and shipping		15	
	16	Other expenses (describe in Schedule O)		16	7,169
	17	**Total expenses.** Add lines 10 through 16 ▶		17	30,190
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	94,810
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	38,384
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20		21	133,194

Part II **Balance Sheets**(see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II . . . . . ☐

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	38,384	**22**	133,194
23 Land and buildings	0	**23**	0
24 Other assets (describe in Schedule O)	0	**24**	0
25 Total assets	38,384	**25**	133,194
26 Total liabilities (describe in Schedule O)	0	**26**	0
27 Net assets or fund balances (line 27 of column (B) **must** agree with line 21)	38,384	**27**	133,194

Part III **Statement of Program Service Accomplishments** (see the instructions for Part III)
Check if the organization used Schedule O to respond to any question in this Part III . . ☐

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

What is the organization's primary exempt purpose?
Youth violence prevention

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

28 DA Community Prosecution Program- to reduce teen violence and improve community relationship workshops and community meetings (Grants $ 125,000) If this amount includes foreign grants, check here . . . ▶ ☐		**28a**	21,021
29 (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐		**29a**	
30 (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐		**30a**	
31 Other program services (describe in Schedule O) (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐		**31a**	
32 Total program service expenses (add lines 28a through 31a) . . . . . ▶		**32**	21,021

Part IV **List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated see the instructions for Part IV)
Check if the organization used Schedule O to respond to any question in this Part IV. . . . . ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) **(if not paid, enter -0-)**	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Raymond P Carpenter CFO	5.00	0	0	0
Paul Howard Jr CEO	10.00	20,000	0	0
Kym Norman Secretary	5.00	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V . . . . . ☐

			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		No
35a	Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		No
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . .	38a		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 . . . . . 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		No
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections4912, 4955, and 4958 ▶ _____			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ _____			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		No
41	List the states with which a copy of this return is filed. ▶ GA			
42a	The organization's books are in care of ▶ Paul Howard Jr DA Telephone no. ▶ (404) 612-4981			
	Located at ▶ PO Box 54575 Atlanta, GA ZIP + 4 ▶ 303080575			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		No
	If "Yes," enter the name of the foreign country: ▶ _____			
	See the instructions for exceptions and filing requirements for **FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)**			
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? . . .	42c		
	If "Yes," enter the name of the foreign country: ▶ _____			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** - Check here . . . . . ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year . . . . ▶ 43			

			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		No
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		No
c	Did the organization receive any payments for indoor tanning services during the year?	44c		No
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		No

45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	**45b**		No

		Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	**46**		No

Part VI **Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI . . . . . ☐

		Yes	No
47 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	**47**		
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . .	**48**		No
49a Did the organization make any transfers to an exempt non-charitable related organization?	**49a**		
b If "Yes," was the related organization a section 527 organization?	**49b**		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	**(b)** Average hours per week devoted to position	**(c)** Reportable compensation (Forms W-2/1099-MISC)	**(d)** Health benefits, contributions to employee benefit plans, and deferred compensation	**(e)** Estimated amount of other compensation
NONE				

f Total number of other employees paid over $100,000 . . . . . ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	**(b)** Type of service	**(c)** Compensation
NONE		

d Total number of other independent contractors each receiving over $100,000. . . . . ▶ _____

52 Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must attach a completed Schedule A . . . . . ▶ ☑ **Yes** ☐ **No**

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

Sign Here

▶ _____ Signature of officer	2017-04-20 Date
▶ Raymond P Carpenter CFO Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name MERIAN L CALLAWAY CPA	Preparer's signature	Date 2017-05-15	Check ☐ if self-employed	PTIN P00841470
	Firm's name ▶ MERIAN L CALLAWAY CPA LLC			Firm's EIN ▶ 20-0466882	
	Firm's address ▶ PO BOX 72854 Marietta, GA 30007			Phone no. (770) 241-2166	

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶ ☐ Yes ☒ No

Form **990-EZ** (2016)

Additional Data

Return to Form

Software ID:
Software Version:

Form 990-EZ, Special Condition Description:

Special Condition Description

Exhibit F

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

ANNUAL REGISTRATION

Electronically Filed
Secretary of State
Filing Date: 7/28/2016 11:55:15 AM

BUSINESS INFORMATION	
CONTROL NUMBER	16059690
BUSINESS NAME	The Academy of Promise, Inc.
BUSINESS TYPE	Domestic Nonprofit Corporation
EFFECTIVE DATE	07/28/2016

PRINCIPAL OFFICE ADDRESS	
ADDRESS	136 Pryor Street, Third Floor, Atlanta, GA, 30303, USA

REGISTERED AGENT'S NAME AND ADDRESS	
NAME	**ADDRESS**
Dexter Bond	136 Pryor St SW, Third Floor, Fulton, Atlanta, GA, 30303, USA

OFFICERS INFORMATION

NAME	TITLE	ADDRESS
George Andrews	CFO	136 Pryor Street, Third Floor, Atlanta, GA, 30303, USA
Paul Howard	CEO	136 Pryor Street, Third Floor, Atlanta, GA, 30303, USA
Thomas Dortch	SECRETARY	136 Pryor Street SW, Third Floor, Atlanta, GA, 30303, USA

AUTHORIZER INFORMATION	
AUTHORIZER SIGNATURE	A. Zakiya Watson-Caffe
AUTHORIZER TITLE	Incorporator

Brian P. Kemp
Secretary of State

Exhibit G

Control Number : 16059690

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF INCORPORATION

I, Brian P. Kemp, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

The Academy of Promise, Inc.

a **Domestic Nonprofit Corporation**

has been duly incorporated under the laws of the State of Georgia on **06/21/2016** by the filing of articles of incorporation in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta
and the State of Georgia on 06/23/2016

Brian P. Kemp
Secretary of State

ARTICLES OF INCORPORATION
OF
THE ACADEMY OF PROMISE, INC.

ARTICLE I
Name

The name of the corporation is "The Academy of Promise, Inc." (the "Corporation").

ARTICLE II
Authority

The Corporation is organized pursuant to the provisions of the Georgia Nonprofit Corporation Code (the "Code"). [O.C.G.A. § 14-3-202].

ARTICLE III
Purpose

The objects and purposes of the Corporation are to acquire and administer funds and property which, after the payment of necessary expenses, shall be devoted exclusively to charitable, scientific, literary or educational purposes.

ARTICLE IV
Members

The Corporation will not have members.

ARTICLE V
Board of Directors

(a) The affairs of the Corporation shall be managed by a board of directors, the number of which shall be fixed from time to time by the By-Laws. The method of electing the board of directors shall be determined by the bylaws of the Corporation.

(b) The initial board of directors shall consist of three directors whose names and addresses are as follows:

- Paul Howard – 136 Pryor St SW, Third Floor, Atlanta, GA 30303
- George Andrews – 136 Pryor St SW, Third Floor, Atlanta, GA 30303
- Thomas Dortch - 136 Pryor St SW, Third Floor, Atlanta, GA 30303

ARTICLE VI
Bylaws

The bylaws of the Corporation may be altered, amended, or repealed, and new bylaws shall be adopted, only by the affirmative vote of a majority of the directors.

ARTICLE VII
Limitations and Regulation of Corporate Powers

The Corporation is not organized and shall not be operated for pecuniary gain or profit. No part of the property of the Corporation and no part of its net earnings shall inure to the benefit of or be distributable to any director, member, or other private individual. The Corporation shall never be authorized to engage in a regular business of a kind ordinarily carried on for profit or in any other activity except in furtherance of the purposes stated above for which the Corporation is organized.

No substantial part of the activities of the Corporation shall consist of attempting to influence legislation, by propaganda or otherwise. The Corporation shall not participate or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office.

ARTICLE VIII
Registered Office and Registered Agent

The street address of the initial registered office of the Corporation is: 136 Pryor St SW, Third Floor, Atlanta, GA 30303, in the County of Fulton. The initial registered agent of the Corporation is Dexter Bond.

ARTICLE IX
Dissolution

In the event of the dissolution of the Corporation, to the extent allowed under applicable law, after all lawful debts and liabilities of the Corporation have been paid, all the assets of the Corporation shall be distributed to, or its assets shall be sold and the proceeds shall be distributed to, another organization organized and operating for the same purposes for which the Corporation is organized and operating, or to one or more corporations, funds or foundations organized and operating exclusively for charitable, scientific, literary, or educational purposes, which shall be selected by the board of directors of the Corporation; provided, however, that any such recipient organization or organizations shall at that time qualify as exempt from taxation under the provisions of Section 501(a) of the Internal Revenue Code of 1986, as an organization described in Section 501(c)(3) of the Internal Revenue Code of 1986, or the corresponding provisions of any subsequent law. In the event that upon the dissolution of the Corporation the board of directors of the Corporation shall fail to act in the manner provided within a reasonable time, a court of competent jurisdiction in the county in which the principal office of the Corporation is located shall make such distribution as herein provided upon the application of one or more persons having a real interest in the Corporation or its assets.

ARTICLE X
Personal Liability

Liability of all directors of the Corporation to the Corporation for monetary damages for any action taken, or any failure to take any action as a director, is hereby eliminated to

the fullest extent allowed by §14-3-202(b)(4) of the Georgia Nonprofit Corporation Code or any successor statute.

ARTICLE XI
Delegation of Investment Duties To A Fiscal Agent

The Corporation shall have the power to appoint a fiscal agent, which may be a bank or trust company, and may delegate to such agent the care and management, investment and reinvestment of its funds and the maintenance of its books and records, and may pay said agent such compensation as may be agreed upon by the board of directors.

ARTICLE XII
Incorporator

The name and address of the incorporator is:

A. Zakiya Watson-Caffe, Esq.
Watson Law LLC
366 Powder Springs Street
Suite 216
Marietta, Georgia 30064

ARTICLE XIII
Principal Mailing Address

The principal mailing address of the Corporation is: 136 Pryor St SW, Third Floor, Atlanta, GA 30303.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation on the 21st day of June, 2016.

A. Zakiya Watson-Caffe, Esq.
Incorporator

STATE OF GEORGIA)
) ss.:
COUNTY OF Cobb)

On this 21st day of June, 2015, before me personally came A. Zakiya Watson-Caffe and known to me to be the person described in and who executed the foregoing Articles of Incorporation.

Barbara Lunceford
Notary Public

My Commission Expires:

BARBARA LUNCEFORD
NOTARY
My Comm. Expires July 6, 2018
PUBLIC
COBB COUNTY, GEORGIA

Brian P. Kemp
Secretary of State

OFFICE OF SECRETARY OF STATE
CORPORATIONS DIVISION
2 Martin Luther King Jr. Dr. SE
Suite 313 West Tower
Atlanta, Georgia 30334
(404) 656-2817
sos.georgia.gov/corporations

TRANSMITTAL INFORMATION FORM
GEORGIA PROFIT OR NONPROFIT CORPORATION

IMPORTANT: Please provide the entity's primary email address when completing this form.

Primary Email Address: zakwatsonesq@hotmail.com

NOTICE TO APPLICANT: PRINT PLAINLY OR TYPE REMAINDER OF THIS FORM

1. _____
Corporate Name Reservation Number (if one has been obtained: if articles are being filed without prior reservation, leave this line blank)

The Academy of Promise, Inc.
Corporate Name (List exactly as it appears in articles.)

2. A Zakuya Watson-Calle
Name of Person Filing Articles of Incorporation (Certificate will be mailed to this person at email address listed below.)

3560 Powder Springs Road Suite 216
Address

Marietta, Georgia 30064
City State Zip Code

zakwatsonesq@hotmail.com
Filer's Email Address

404 660 1771
Telephone Number

3. Dexter Bond
Name of Registered Agent in Georgia

136 Pryor Street, Third Floor
Registered Office Street Address in Georgia (Post office box or mail drop not acceptable for registered office address.)

Atlanta Fulton GA 30303
City County State Zip Code

Dexter.Bond@fultoncountyga.gov
Registered Agent's Email Address

4. Mail the following items to the Secretary of State at the above address:

1) This transmittal form;
2) The Articles of Incorporation; and
3) Filing fee of $100.00 payable to Secretary of State. Filing fees are non-refundable.

I certify that a Notice of Incorporation or Notice of Intent to Incorporate with a publication fee of $40.00 has been or will be mailed or delivered to the official organ of the county where the initial registered office of the corporation is to be located. (The clerk of superior court can advise you of the official organ in a particular county.) I understand that the information on this form will be entered in the Secretary of State business entity database, and I certify that the above information is true and correct to the best of my knowledge.

A Watson Calle
Signature of Authorized Person

21 June 2016
Date

A Zakuya Watson-Calle
Print name

Incorporator
Title

Exhibit H

STATE OF GEORGIA
FINANCIAL DISCLOSURE STATEMENT

Original Statement

Date of this Statement: **06/16/2017** Covering Calendar Year: **2017**

Name of Public Officer or Candidate: **PAUL L. HOWARD JR.**

Mailing Address: **136 PRYOR STREET ATLANTA, GA 30303**

Telephone Number: **(404) 613-4984** Telephone Number: **(404) 696-3960**

2017 - Financial Disclosure Statement -- Elected Public Officer

Electronically filed with the Georgia Government Transparency and Campaign Finance Commission on 6/16/2017 5:02:45PM

Confirmation #F200600046837218

The electronic filing of this document constitutes an affirmation that the statement is true, complete, and correct. As per modifications of the Ethics in Government Act, filing a separate notarized affidavit is no longer required. *See* O.C.G.A. §§ 21-5-34.1(e) and 21-5-50(e).

SECTION I

MONETARY FEES RECEIVED

(This section to be completed by Public Officers only)

Identify each monetary fee or honorarium accepted from speaking engagements, participation in seminars, discussion panels, or other activities that directly relate to the official duties of, or to the office of the public officer, with a statement identifying the fee or honorarium and the person or entity from whom it was accepted.

Identify Fee or Honorarium	Amount Accepted	Identifying Information of of Person or Entity from Whom Accepted
No monetary fee or honorarium.		

SECTION II

FIDUCIARY POSITIONS

Name all fiduciary positions held by the candidate for public office or the public officer at any time during the covered year.. (You may expand this section if necessary to include all positions.) A **fiduciary position** is any position imposing a duty to act primarily for another's benefit as officer, director, manager, partner, guardian, or other designations of general responsibility of a business entity. A fiduciary position may be a **paid or unpaid position**. A **business entity** is any corporation, sole proprietorship, partnership, limited partnership, limited liability company, limited liability partnership, professional corporation, enterprise, franchise, association, trust, joint venture, or other entity, whether **profit or nonprofit**.

Title of Position	Name, address, and principal activity of business entity
No fiduciary positions in any business entity.	

SECTION III

DIRECT OWNERSHIP INTERESTS IN BUSINESS ENTITY

Direct ownership interest is the holding or possession of good legal or rightful title of property or the holding or enjoyment of real or beneficial use of the property by any person and includes any interest owned or held by a spouse of the person if such interest is held jointly or as tenants in common between the person and spouse.

Identify the name, address and principal activity of any business entity and the office held by and the duties of the candidate for public office or public officer within a business entity any time during the covered year in which a direct ownership interest: (A) Is more than 5 percent of the total interest in the business; or (B) Has a net fair market value of more than $5,000.00.

Name, address, and principal activity of business entity	Office held by candidate or public officer Duties of the candidate or public officer	Ownership Interests
No direct ownership interests in any business entity.		

SECTION IV
DIRECT OWNERSHIP INTERESTS IN REAL PROPERTY

Direct ownership interest is the holding or possession of good legal or rightful title of property or the holding or enjoyment of real or beneficial use of the property by any person and includes any interest owned **or** held by a spouse of the person if such interest is held jointly or as tenants in common between the person and spouse.

Identify each tract of real property in which the candidate for public office or public officer has a direct ownership interest as of December 31 of the covered year when that interest has a fair market value in excess of $5,000.00. "Fair market" value means the appraised value of the property for ad valorem tax purposes. Check one box to show the applicable valuation range for each tract.

County and State where property is located	General description of property (give street address or location, size of tract, and nature or use of property)	Value of tract
Fulton, GA	1280 Regency Center Drive Atlanta, Georgia 30331 Primary Residence	More than $200,000
Troup, GA	103 Heatherbrook Drive Lagrange, Georgia 30240 Secondary Residence	Between $5,000 and $100,000

SECTION V
SPOUSE'S DIRECT OWNERSHIP INTERESTS IN REAL PROPERTY

Identify each tract of real property in which the filer's spouse has a direct ownership interest as of December 31 of the covered year when that interest has a fair market value in excess of $5,000.00. Check one box to show the applicable valuation range for each tract.

County and State where property is located	General description of property (give street address or location, size of tract, and nature or use of property)	Value of tract
Lee, AL	1404 Monroe STreet Opelika, Alabama 36801 Investment Property	Between $5,000 and $100,000

SECTION VI
EMPLOYMENT AND FAMILY MEMBERS

Filer's Occupation:	District Attorney
Filer's Employer:	Fulton County
Employer's Address:	136 Pryor Street, SW Atlanta, Georgia 30303
Employer's Principal Activity:	County Government
Filer's Secondary Occupation:	
Filer's Secondary Employer:	
Employer's Secondary Address:	
Employer's Secondary Principal Activity:	
Filer's Spouse's Name:	Petrina M. Howard
Spouse's Occupation:	Retired
Spouse's Employer:	Retired
Spouse's Employer's Address:	Retired
Spouse's Employer Principal Activity:	Retired
Spouse's Secondary Occupation:	
Spouse's Secondary Employer:	
Spouse's Secondary Employer's Address:	
Spouse's Secondary Employer's Principal Activity:	

SECTION VII
INVESTMENT INTERESTS

List the name of any business or subsidiary thereof or investment in which the filer (either individually or with any other legal or natural person or entity) owns a direct ownership interest that: (1) is more than 5 percent of the total interests in such business or investment, or (2) has a net fair market value of more than $5,000.00. (Do not list individual stocks and bonds that are held by mutual funds.)

Business or Investment Entity Name

No investment interests that is more than 5 percent of the total interests in such business or investment, or with a fair market value of more than $5,000.00.

SECTION VIII

KNOWN BUSINESS OR INVESTMENT INTERESTS OF SPOUSE AND DEPENDENT CHILDREN

Identify any business or investment known to the filer in which the filer's spouse or dependent children have a direct ownership interest (either individually or with any other legal or natural person or entity) which interest: (1) is more than 5 percent of the total interest in the business or investment, (2) has a net fair market value exceeding $10,000.00, or (3) is one in an entity for which the filer's spouse or a dependent child serves as an officer, director, equitable partner, or trustee. (Do not list individual stocks and bonds that are held by mutual funds.)

a. Name of Business or Investment Entity,
b. Ownership (spouse/dependent children),
c. Indicate if officer, director, equitable partner, or trustee (where applicable)

No known business or investment interests of spouse and dependent children.

SECTION IX

ANNUAL PAYMENTS RECEIVED FROM THE STATE OF GEORGIA

(This section to be completed by Public Officers only)

Identify all annual payments in excess of $10,000.00 received by the public officer, or by any business entity identified in Section III above, from the State or any agency, department, commission or authority created by the State, and authorized and exempted from disclosure under O.C.G.A. § 45-10-25.

Name, address of state entity making payment, and general nature of the consideration for the payment	**Amount of annual payment**

No annual payments in excess of $10,000.00 from any State entity.

Exhibit I

Control Number : 0420744

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF REINSTATEMENT

I, Brian P. Kemp, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

PEOPLE PARTNERING FOR PROGRESS, INC.

a **Domestic Nonprofit Corporation**

was formed on 03/29/2004, and later administratively dissolved on 12/07/2016. Said entity has filed an application for reinstatement and has paid all fees and penalties due to the Secretary of State. Attached hereto is a true and correct copy of said application.

WHEREFORE, said entity is hereby reinstated as of 04/18/2017, having met the requirements for reinstatement under Title 14 of the Official Code of Georgia Annotated. The reinstatement shall relate back to and take effect as of the date of the administrative dissolution and the entity may resume its business as if the administrative dissolution had never occurred.

WITNESS my hand and official seal in the City of Atlanta
and the State of Georgia on 04/26/2017

Brian P. Kemp
Secretary of State

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

Application for Reinstatement

Electronically Filed
Secretary of State
Filing Date: 4/18/2017 12:30:58 PM

BUSINESS INFORMATION

BUSINESS NAME	: PEOPLE PARTNERING FOR PROGRESS, INC.
CONTROL NUMBER	: 0420744
BUSINESS TYPE	: Domestic Nonprofit Corporation
ADMININSTRATIVE DISSOLUTION DATE	: 12/07/2016

Ground(s) for the administrative dissolution either did not exist or have been eliminated. All taxes owed by the entity have been paid.

ADDRESS, REGISTERED AGENT, AND OFFICERS AT TIME OF ADMINISTRATIVE DISSOLUTION

PRINCIPAL OFFICE ADDRESS	: 136 PRYOR STREET, SW, 3RD FLR., ATLANTA, GA, 30303
REGISTERED AGENT NAME	: CARPENTER, RAYMOND P
AGENT ADDRESS	: 625 COLONIAL PARK DR STE 201, Fulton, ROSWELL, GA, 30075, USA

OFFICER	TITLE	ADDRESS
KYM NORMAN	Secretary	469 HOLDENE DRIVE, ATLANTA, GA, 30311, USA
PAUL L HOWARD, JR	CEO	136 PRYOR ST SW, ATLANTA, GA, 30303, USA
RAYMOND P CARPENTER	CFO	625 COLONIAL PARK DR STE 201, ROSWELL, GA, 30075, USA

CURRENT ADDRESS, REGISTERED AGENT, AND OFFICERS

PRINCIPAL OFFICE ADDRESS	: 136 PRYOR STREET, SW, 3RD FLR., ATLANTA, GA, 30303, USA
REGISTERED AGENT NAME	: CARPENTER, RAYMOND P
AGENT ADDRESS	: 625 COLONIAL PARK DR STE 201, Fulton, ROSWELL, GA, 30075, USA

OFFICER	TITLE	ADDRESS
KYM NORMAN	Secretary	469 HOLDENE DRIVE, ATLANTA, GA, 30311, USA
PAUL L HOWARD, JR	CEO	136 PRYOR ST SW, ATLANTA, GA, 30303, USA
RAYMOND P CARPENTER	CFO	625 COLONIAL PARK DR STE 201, ROSWELL, GA, 30075, USA

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	: Raymond P. Carpenter
AUTHORIZER TITLE	: Registered Agent

Exhibit J

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93492102004188

Form 990-EZ

Short Form
Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990ez.

OMB No 1545-1150

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
People Partnering for Progress Inc

Number and street (or P O box, if mail is not delivered to street address) | Room/suite
PO Box 54575

City or town, state or province, country, and ZIP or foreign postal code
Atlanta, GA 303080575

D Employer identification number
14-1906395

E Telephone number

F Group Exemption Number ▶ 0000

G Accounting Method ☑ Cash ☐ Accrual Other (specify) ▶

H Check ▶ ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶

J Tax-exempt status (check only one) - ☑ 501(c)(3) ☐ 501(c)( ) ◀(insert no) ☐ 4947(a)(1) or ☐ 527

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts If gross receipts are $200,000 or more, or if total assets (Part II, column (B) below) are $500,000 or more, file Form 990 instead of Form 990-EZ . . . . . ▶ $ 68,100

Part I **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I . . . . . ☑

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	68,100
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments		3	
	4	Investment income		4	
	5a	Gross amount from sale of assets other than inventory	5a		
	b	Less cost or other basis and sales expenses	5b		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	6	Gaming and fundraising events			
	a	Gross income from gaming (attach Schedule G if greater than $15,000)	6a		
	b	Gross income from fundraising events (not including $ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)	6b		
	c	Less direct expenses from gaming and fundraising events	6c		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less cost of goods sold	7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	
	8	Other revenue (describe in Schedule O)		8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		▶ 9	68,100
Expenses	10	Grants and similar amounts paid (list in Schedule O)		10	3,000
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	70,000
	13	Professional fees and other payments to independent contractors		13	7,700
	14	Occupancy, rent, utilities, and maintenance		14	
	15	Printing, publications, postage, and shipping		15	
	16	Other expenses (describe in Schedule O)		16	79,105
	17	**Total expenses.** Add lines 10 through 16		▶ 17	159,805
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-91,705
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	133,194
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20		21	41,489

Part II **Balance Sheets** (see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II . . . . . ☐

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	133,194	22	41,489
23 Land and buildings	0	23	0
24 Other assets (describe in Schedule O)	0	24	0
25 Total assets	133,194	25	41,489
26 Total liabilities (describe in Schedule O)	0	26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	133,194	27	41,489

Part III **Statement of Program Service Accomplishments** (see the instructions for Part III)
Check if the organization used Schedule O to respond to any question in this Part III . . ☐

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)

What is the organization's primary exempt purpose?
Youth violence prevention

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28
See Additional Data Table

(Grants $) If this amount includes foreign grants, check here . . . ▶ ☐ **28a**

29 See Additional Data Table

(Grants $) If this amount includes foreign grants, check here . . . ▶ ☐ **29a**

30 See Additional Data Table

(Grants $) If this amount includes foreign grants, check here . . . ▶ ☐ **30a**

31 Other program services (describe in Schedule O) . . . . . .

(Grants $) If this amount includes foreign grants, check here . . . ▶ ☐ **31a**

32 Total program service expenses (add lines 28a through 31a) . . . . . ▶ **32** 146,699

Part IV **List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated — see the instructions for Part IV)
Check if the organization used Schedule O to respond to any question in this Part IV. . . . . ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Raymond P Carpenter CFO	5 00	0	0	0
Paul Howard Jr CEO	10 00	70,000	0	0
Kym Norman Secretary	5 00	0	0	0

Part V **Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V . . . . . ☐

			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name Otherwise, explain the change on Schedule O (see instructions)	34		No
35a	Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		No
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . .	38a		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b			
39	Section 501(c)(7) organizations Enter			
a	Initiation fees and capital contributions included on line 9 . . . . . 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____ , section 4912 ▶ _____ , section 4955 ▶ _____			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		No
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections4912, 4955, and 4958 ▶ _____			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ _____			
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		No

41 List the states with which a copy of this return is filed ▶ GA

42a The organization's books are in care of ▶ Paul Howard Jr DA Telephone no ▶ (404) 612-4981

Located at ▶ PO Box 54575 Atlanta, GA ZIP + 4 ▶ 303080575

			Yes	No
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		No
	If "Yes," enter the name of the foreign country ▶ _____			
	See the instructions for exceptions and filing requirements for **FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)**			
c	At any time during the calendar year, did the organization maintain an office outside the U S ?	42c		No
	If "Yes," enter the name of the foreign country ▶ _____			

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** - Check here . . . . . ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the tax year . . . . ▶ 43

			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		No
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		No
c	Did the organization receive any payments for indoor tanning services during the year?	44c		No
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		No
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		No

			Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46		No

Part VI **Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.
Check if the organization used Schedule O to respond to any question in this Part VI ☐

			Yes	No
47	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	47		No
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		No
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		No
b	If "Yes," was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization If there is none, enter "None "

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over $100,000 ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization If there is none, enter "None "

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over $100,000. ▶

52 Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must attach a completed Schedule A ▶ ☑ Yes ☐ No

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

Sign Here

****** Signature of officer — 2018-05-01 Date

Raymond Carpenter Esq CFO Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Merian L Callaway		2018-04-12		P00841470

Firm's name ▶ Merian L Callaway CPA LLC — Firm's EIN ▶

Firm's address ▶ PO Box 72854, Marietta, GA 30007 — Phone no (770) 241-2166

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☑ No

Additional Data

Software ID:
Software Version:
EIN: 14-1906395
Name: People Partnering for Progress Inc

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations; optional for others.)	
28 DA Community Prosecution Program- to reduce teen violence and improve community relationship workshops and community meetings (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐	**28a**	70,000

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations; optional for others.)	
29 Gang Intelligence Program -Established platform to capture critical gang related data to share between the District Attorneys office and the Atlanta police department (Grants $ 60,000) If this amount includes foreign grants, check here . . . ▶ ☐	**29a**	60,000

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations; optional for others.)	
30 First Urban Prosecutors Summit - Panel conference to identify and address the challenges of gang activity in the community (Grants $ 8,100) If this amount includes foreign grants, check here . . . ▶ ☐	**30a**	16,699

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OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

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.**

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

2017

Open to Public Inspection

Name of the organization
People Partnering for Progress Inc

Employer identification number
14-1906395

Part I **Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170 (b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____

10 ☑ An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

11 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s)

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

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

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
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						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2013	(b)2014	(c)2015	(d)2016	(e)2017	(f)Total
7 Amounts from line 4						
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						

12 Gross receipts from related activities, etc (see instructions) **12**

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) **14**

15 Public support percentage for 2016 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2017.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test—2016.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2016.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")			150,000	125,000	68,100	343,100
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5			150,000	125,000	68,100	343,100
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6)						343,100

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6			150,000	125,000	68,100	343,100
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)	0		150,000	125,000	68,100	343,100

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☑

Section C. Computation of Public Support Percentage

15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15
16	Public support percentage from 2016 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2017** (line 10c, column (f) divided by line 13, column (f))	17
18	Investment income percentage from **2016** Schedule A, Part III, line 17	18

19a **33 1/3% support tests—2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	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
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *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		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *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

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

a ☐ The organization satisfied the Activities Test Complete **line 2** below

b ☐ The organization is the parent of each of its supported organizations Complete **line 3** below

c ☐ The organization supported a governmental entity Describe in **Part VI** how you supported a government entity (see instructions)

			Yes	No
2	Activities Test **Answer (a) and (b) below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *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		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *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		
3	Parent of Supported Organizations **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	3a		
b	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		

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 organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d **Total** (add lines 1a, 1b, and 1c)	1d		
e **Discount** claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4 Enter greater of line 2 or line 3	4	
5 Income tax imposed in prior year	5	
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in **Part VI**) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**) See instructions	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 $			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 **Excess distributions carryover to 2018.** Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ **Attach to Form 990 or 990-EZ.**

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
People Partnering for Progress Inc

Employer identification number
14-1906395

990 Schedule O, Supplemental Information

Return Reference	Explanation
List of grants and similar amounts paid Part I line 10	Activity Women empowerment Grantee Women Looking Ahead Street P O Box 767277 City, State, Zip Roswell, GA 30076Relationship charitable contribution Amount 3,000

990 Schedule O, Supplemental Information

Return Reference	Explanation
Description of other expenses Part I line 16	Description AmountGeneral and Administrative 2,407Direct Program Costs 76,698

Exhibit K

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

ANNUAL REGISTRATION

Electronically Filed
Secretary of State
Filing Date: 3/23/2017 9:07:31 AM

BUSINESS INFORMATION

CONTROL NUMBER	16059690
BUSINESS NAME	The Academy of Promise, Inc.
BUSINESS TYPE	Domestic Nonprofit Corporation
EFFECTIVE DATE	03/23/2017

PRINCIPAL OFFICE ADDRESS

ADDRESS	136 Pryor Street, Third Floor, Atlanta, GA, 30303, USA

REGISTERED AGENT'S NAME AND ADDRESS

NAME	**ADDRESS**
Dexter Bond	136 Pryor St SW, Third Floor, Fulton, Atlanta, GA, 30303, USA

OFFICERS INFORMATION

NAME	**TITLE**	**ADDRESS**
George Andrews	CFO	136 Pryor Street, Third Floor, Atlanta, GA, 30303, USA
Paul Howard	CEO	136 Pryor Street, Third Floor, Atlanta, GA, 30303, USA
Thomas Dortch	SECRETARY	136 Pryor Street SW, Third Floor, Atlanta, GA, 30303, USA

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	Dexter Bond
AUTHORIZER TITLE	Registered Agent

Brian P. Kemp
Secretary of State

Exhibit L

STATE OF GEORGIA
FINANCIAL DISCLOSURE STATEMENT

Original Statement

Date of this Statement: **06/08/2018** Covering Calendar Year: **2018**

Name of Public Officer or Candidate: **PAUL L. HOWARD JR.**

Mailing Address: **136 PRYOR STREET ATLANTA, GA 30303**

Telephone Number: **(404) 613-4984** Telephone Number: **(404) 696-3960**

2018 - Financial Disclosure Statement -- Elected Public Officer

Electronically filed with the Georgia Government Transparency and Campaign Finance Commission on 6/8/2018 3:40:10PM

Confirmation #F200600046839137

The electronic filing of this document constitutes an affirmation that the statement is true, complete, and correct. As per modifications of the Ethics in Government Act, filing a separate notarized affidavit is no longer required. *See* O.C.G.A. §§ 21-5-34.1(e) and 21-5-50(e).

SECTION I

MONETARY FEES RECEIVED

(This section to be completed by Public Officers only)

Identify each monetary fee or honorarium accepted from speaking engagements, participation in seminars, discussion panels, or other activities that directly relate to the official duties of, or to the office of the public officer, with a statement identifying the fee or honorarium and the person or entity from whom it was accepted.

Identify Fee or Honorarium	Amount Accepted	Identifying Information of of Person or Entity from Whom Accepted
No monetary fee or honorarium.		

SECTION II

FIDUCIARY POSITIONS

Name all fiduciary positions held by the candidate for public office or the public officer at any time during the covered year.. (You may expand this section if necessary to include all positions.) A **fiduciary position** is any position imposing a duty to act primarily for another's benefit as officer, director, manager, partner, guardian, or other designations of general responsibility of a business entity. A fiduciary position may be a **paid or unpaid position**. A **business entity** is any corporation, sole proprietorship, partnership, limited partnership, limited liability company, limited liability partnership, professional corporation, enterprise, franchise, association, trust, joint venture, or other entity, whether **profit or nonprofit**.

Title of Position	Name, address, and principal activity of business entity
No fiduciary positions in any business entity.	

SECTION III

DIRECT OWNERSHIP INTERESTS IN BUSINESS ENTITY

Direct ownership interest is the holding or possession of good legal or rightful title of property or the holding or enjoyment of real or beneficial use of the property by any person and includes any interest owned **or** held by a spouse of the person if such interest is held jointly or as tenants in common between the person and spouse.

Identify the name, address and principal activity of any business entity and the office held by and the duties of the candidate for public office or public officer within a business entity any time during the covered year in which a direct ownership interest: (A) Is more than 5 percent of the total interest in the business; or (B) Has a net fair market value of more than $5,000.00.

Name, address, and principal activity of business entity	Office held by candidate or public officer Duties of the candidate or public officer	Ownership Interests
No direct ownership interests in any business entity.		

SECTION IV
DIRECT OWNERSHIP INTERESTS IN REAL PROPERTY

Direct ownership interest is the holding or possession of good legal or rightful title of property or the holding or enjoyment of real or beneficial use of the property by any person and includes any interest owned or held by a spouse of the person if such interest is held jointly or as tenants in common between the person and spouse.

Identify each tract of real property in which the candidate for public office or public officer has a direct ownership interest as of December 31 of the covered year when that interest has a fair market value in excess of $5,000.00. "Fair market" value means the appraised value of the property for ad valorem tax purposes. Check one box to show the applicable valuation range for each tract.

County and State where property is located	General description of property (give street address or location, size of tract, and nature or use of property)	Value of tract
Fulton, GA	1280 Regency Center Drive Atlanta, Georgia 30331 Primary Residence	More than $200,000
Troup, GA	103 Heatherbrook Drive Lagrange, Georgia 30240 Secondary Residence	Between $5,000 and $100,000

SECTION V
SPOUSE'S DIRECT OWNERSHIP INTERESTS IN REAL PROPERTY

Identify each tract of real property in which the filer's spouse has a direct ownership interest as of December 31 of the covered year when that interest has a fair market value in excess of $5,000.00. Check one box to show the applicable valuation range for each tract.

County and State where property is located	General description of property (give street address or location, size of tract, and nature or use of property)	Value of tract
Lee, AL	1404 Monroe STreet Opelika, Alabama 36801 Investment Property	Between $5,000 and $100,000

SECTION VI
EMPLOYMENT AND FAMILY MEMBERS

Filer's Occupation:	District Attorney
Filer's Employer:	Fulton County
Employer's Address:	136 Pryor Street, SW Atlanta, Georgia 30303
Employer's Principal Activity:	County Government
Filer's Secondary Occupation:	
Filer's Secondary Employer:	
Employer's Secondary Address:	
Employer's Secondary Principal Activity:	
Filer's Spouse's Name:	Petrina M. Howard
Spouse's Occupation:	Retired
Spouse's Employer:	Retired
Spouse's Employer's Address:	Retired
Spouse's Employer Principal Activity:	Retired
Spouse's Secondary Occupation:	
Spouse's Secondary Employer:	
Spouse's Secondary Employer's Address:	
Spouse's Secondary Employer's Principal Activity:	

SECTION VII
INVESTMENT INTERESTS

List the name of any business or subsidiary thereof or investment in which the filer (either individually or with any other legal or natural person or entity) owns a direct ownership interest that: (1) is more than 5 percent of the total interests in such business or investment, or (2) has a net fair market value of more than $5,000.00. (Do not list individual stocks and bonds that are held by mutual funds.)

Business or Investment Entity Name

No investment interests that is more than 5 percent of the total interests in such business or investment, or with a fair market value of more than $5,000.00.

SECTION VIII

KNOWN BUSINESS OR INVESTMENT INTERESTS OF SPOUSE AND DEPENDENT CHILDREN

Identify any business or investment known to the filer in which the filer's spouse or dependent children have a direct ownership interest (either individually or with any other legal or natural person or entity) which interest: (1) is more than 5 percent of the total interest in the business or investment, (2) has a net fair market value exceeding $10,000.00, or (3) is one in an entity for which the filer's spouse or a dependent child serves as an officer, director, equitable partner, or trustee. (Do not list individual stocks and bonds that are held by mutual funds.)

a. Name of Business or Investment Entity,
b. Ownership (spouse/dependent children),
c. Indicate if officer, director, equitable partner, or trustee (where applicable)

No known business or investment interests of spouse and dependent children.

SECTION IX

ANNUAL PAYMENTS RECEIVED FROM THE STATE OF GEORGIA

(This section to be completed by Public Officers only)

Identify all annual payments in excess of $10,000.00 received by the public officer, or by any business entity identified in Section III above, from the State or any agency, department, commission or authority created by the State, and authorized and exempted from disclosure under O.C.G.A. § 45-10-25.

Name, address of state entity making payment, and general nature of the consideration for the payment	**Amount of annual payment**

No annual payments in excess of $10,000.00 from any State entity.

Exhibit M

RECEIVED
SECRETARY OF STATE
INTAKE DIVISION
2018 MAR -6 PM 3:05

STATE OF GEORGIA

2018 Annual Registration

OFFICE OF THE SECRETARY OF STATE
2 Martin Luther King Jr Dr.
313 West Tower
Atlanta, Georgia 30334

Information on record as of: 2/26/2018

Entity Control No. 0420744 **Amount Due:$30** **Amount Due AFTER April 01,2018 $55**

PEOPLE PARTNERING FOR PROGRESS, INC.
136 PRYOR STREET, SW, 3RD FLR.,
ATLANTA, GA 30303

Each business entity registered or filed with the Office of Secretary of State is required to file an annual registration each year by April 1. Amount due for this entity is indicated above and below on the remittance form. Annual registration fee is $30. If amount is more than $50.00, the total reflects amount(s) due from previous year(s) and any applicable late fee(s). If your annual registration and payment are not postmarked by 04/01/2018, you will be assessed a $25.00 late filing penalty fee. Return completed form to the Secretary of State at the above address.

Entity Name	Address	City	State	Zip
PEOPLE PARTNERING FOR PROGRESS, INC.	136 PRYOR STREET, SW, 3RD FLR.	ATLANTA	GA	30303
AGT: CARPENTER, RAYMOND P	625 COLONIAL PARK DR STE 201	ROSWELL	GA	30075
SEC: KYM NORMAN	469 HOLDENE DRIVE	ATLANTA	GA	30311
CEO: PAUL HOWARD L JR	136 PRYOR ST SW	ATLANTA	GA	30303
CFO: RAYMOND CARPENTER P	625 COLONIAL PARK DR STE 201	ROSWELL	GA	30075

IF ABOVE INFORMATION HAS CHANGED, TYPE OR PRINT CORRECTIONS BELOW:

Entity Address:				
AGT:				
CEO :				
CFO :				
SEC :				
I CERTIFY THAT I AM AUTHORIZED TO SIGN THIS FORM AND THAT THE INFORMATION IS TRUE AND CORRECT.	P.O. BOX NOT ACCEPTABLE FOR REGISTERED AGENT'S ADDRESS	COUNTY OF REGISTERED OFFICE: FULTON	COUNTY CHANGE OR CORRECTION :	
AUTHORIZED SIGNATURE: Raymond Carpenter		Date: March 4, 2018		
PRINT NAME: Ray Mond P. Carpenter				Total Due:
Title: Treasurer	Email: RPCarpenter@pppsc.org			$30

Exhibit N

apps.irs.gov/app/eos/displayAll.do?dispatchMethod=displayAllInfo&Id=5541086&ein=141906395&country=US&deductibility=all&dispatchMethod=searchAll&isDescending=false&city=&ein1=&pos...

Apps | Microsoft Office Ho... | ethics.ga.gov | State of Georgia - S... | GGTCFC Intranet H... | All Apps | Adobe Cr... | GA Easy Filewww.g...

Form 990-N (e-Postcard)

Organizations who have filed a 990-N (e-Postcard) annual electronic notice. Most small organizations that receive less than $50,000 fall into this category.

Tax Year 2018 Form 990-N (e-Postcard)

Tax Period:
2018 (01/01/2018 - 12/31/2018)

EIN:
14-1906395

Legal Name (Doing Business as):
People Partnering For Progress Inc

Mailing Address:
136 Pryor Strteet SW 3rd Floor
ATLANTA, GA 30303
United States

Principal Officer's Name and Address:
Paul Howard

136 Pryor Strteet SW 3rd Floor
Atlanta, GA 30303
United States

Gross receipts not greater than:
$50,000

Organization has terminated:
No

Website URL:

Exhibit O

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

ANNUAL REGISTRATION

Electronically Filed
Secretary of State
Filing Date: 2/2/2018 4:29:56 PM

BUSINESS INFORMATION	
CONTROL NUMBER	16059690
BUSINESS NAME	The Academy of Promise, Inc.
BUSINESS TYPE	Domestic Nonprofit Corporation
EFFECTIVE DATE	02/02/2018

PRINCIPAL OFFICE ADDRESS	
ADDRESS	136 Pryor Street, Third Floor, Atlanta, GA, 30303, USA

REGISTERED AGENT'S NAME AND ADDRESS	
NAME	**ADDRESS**
Dexter Bond	136 Pryor St SW, Third Floor, Fulton, Atlanta, GA, 30303, USA

OFFICERS INFORMATION

NAME	TITLE	ADDRESS
George Andrews	CFO	136 Pryor Street, Third Floor, Atlanta, GA, 30303, USA
Paul Howard	CEO	136 Pryor Street, Third Floor, Atlanta, GA, 30303, USA
Thomas Dortch	SECRETARY	136 Pryor Street SW, Third Floor, Atlanta, GA, 30303, USA

AUTHORIZER INFORMATION	
AUTHORIZER SIGNATURE	Dexter Bond
AUTHORIZER TITLE	Registered Agent

Exhibit P

STATE OF GEORGIA
FINANCIAL DISCLOSURE STATEMENT

Original Statement

Date of this Statement: **06/30/2019** Covering Calendar Year: **2019**

Name of Public Officer or Candidate: **PAUL L. HOWARD JR.**

Mailing Address: **136 PRYOR STREET ATLANTA, GA 30303**

Telephone Number: **(404) 613-4984** Telephone Number: **(404) 696-3960**

2019 - Financial Disclosure Statement -- Elected Public Officer

Electronically filed with the Georgia Government Transparency and Campaign Finance Commission on

Confirmation #F200600046840536

The electronic filing of this document constitutes an affirmation that the statement is true, complete, and correct. As per modifications of the Ethics in Government Act, filing a separate notarized affidavit is no longer required. *See* O.C.G.A. §§ 21-5-34.1(e) and 21-5-50(e).

SECTION I

MONETARY FEES RECEIVED

(This section to be completed by Public Officers only)

Identify each monetary fee or honorarium accepted from speaking engagements, participation in seminars, discussion panels, or other activities that directly relate to the official duties of, or to the office of the public officer, with a statement identifying the fee or honorarium and the person or entity from whom it was accepted.

Identify Fee or Honorarium	Amount Accepted	Identifying Information of of Person or Entity from Whom Accepted
No monetary fee or honorarium.		

SECTION II

FIDUCIARY POSITIONS

Name all fiduciary positions held by the candidate for public office or the public officer at any time during the covered year.. (You may expand this section if necessary to include all positions.) A **fiduciary position** is any position imposing a duty to act primarily for another's benefit as officer, director, manager, partner, guardian, or other designations of general responsibility of a business entity. A fiduciary position may be a **paid or unpaid position**. A **business entity** is any corporation, sole proprietorship, partnership, limited partnership, limited liability company, limited liability partnership, professional corporation, enterprise, franchise, association, trust, joint venture, or other entity, whether **profit or nonprofit**.

Title of Position	Name, address, and principal activity of business entity
No fiduciary positions in any business entity.	

SECTION III

DIRECT OWNERSHIP INTERESTS IN BUSINESS ENTITY

Direct ownership interest is the holding or possession of good legal or rightful title of property or the holding or enjoyment of real or beneficial use of the property by any person and includes any interest owned or held by a spouse of the person if such interest is held jointly or as tenants in common between the person and spouse.

Identify the name, address and principal activity of any business entity and the office held by and the duties of the candidate for public office or public officer within a business entity any time during the covered year in which a direct ownership interest: (A) Is more than 5 percent of the total interest in the business; or (B) Has a net fair market value of more than $5,000.00.

Name, address, and principal activity of business entity	Office held by candidate or public officer Duties of the candidate or public officer	Ownership Interests
No direct ownership interests in any business entity.		

SECTION IV
DIRECT OWNERSHIP INTERESTS IN REAL PROPERTY

Direct ownership interest is the holding or possession of good legal or rightful title of property or the holding or enjoyment of real or beneficial use of the property by any person and includes any interest owned or held by a spouse of the person if such interest is held jointly or as tenants in common between the person and spouse.

Identify each tract of real property in which the candidate for public office or public officer has a direct ownership interest as of December 31 of the covered year when that interest has a fair market value in excess of $5,000.00. "Fair market" value means the appraised value of the property for ad valorem tax purposes. Check one box to show the applicable valuation range for each tract.

County and State where property is located	General description of property (give street address or location, size of tract, and nature or use of property)	Value of tract
Fulton, GA	1280 Regency Center Drive Atlanta, Georgia 30331 Primary Residence	More than $200,000
Troup, GA	103 Heatherbrook Drive Lagrange, Georgia 30240 Secondary Residence	Between $5,000 and $100,000

SECTION V
SPOUSE'S DIRECT OWNERSHIP INTERESTS IN REAL PROPERTY

Identify each tract of real property in which the filer's spouse has a direct ownership interest as of December 31 of the covered year when that interest has a fair market value in excess of $5,000.00. Check one box to show the applicable valuation range for each tract.

County and State where property is located	General description of property (give street address or location, size of tract, and nature or use of property)	Value of tract
Lee, AL	1404 Monroe STreet Opelika, Alabama 36801 Investment Property	Between $5,000 and $100,000

SECTION VI
EMPLOYMENT AND FAMILY MEMBERS

Filer's Occupation:	District Attorney
Filer's Employer:	Fulton County
Employer's Address:	136 Pryor Street, SW Atlanta, Georgia 30303
Employer's Principal Activity:	County Government
Filer's Secondary Occupation:	
Filer's Secondary Employer:	
Employer's Secondary Address:	
Employer's Secondary Principal Activity:	
Filer's Spouse's Name:	Petrina M. Howard
Spouse's Occupation:	Retired
Spouse's Employer:	Retired
Spouse's Employer's Address:	Retired
Spouse's Employer Principal Activity:	Retired
Spouse's Secondary Occupation:	
Spouse's Secondary Employer:	
Spouse's Secondary Employer's Address:	
Spouse's Secondary Employer's Principal Activity:	

SECTION VII
INVESTMENT INTERESTS

List the name of any business or subsidiary thereof or investment in which the filer (either individually or with any other legal or natural person or entity) owns a direct ownership interest that: (1) is more than 5 percent of the total interests in such business or investment, or (2) has a net fair market value of more than $5,000.00. (Do not list individual stocks and bonds that are held by mutual funds.)

Business or Investment Entity Name

No investment interests that is more than 5 percent of the total interests in such business or investment, or with a fair market value of more than $5,000.00.

SECTION VIII

KNOWN BUSINESS OR INVESTMENT INTERESTS OF SPOUSE AND DEPENDENT CHILDREN

Identify any business or investment known to the filer in which the filer's spouse or dependent children have a direct ownership interest (either individually or with any other legal or natural person or entity) which interest: (1) is more than 5 percent of the total interest in the business or investment, (2) has a net fair market value exceeding $10,000.00, or (3) is one in an entity for which the filer's spouse or a dependent child serves as an officer, director, equitable partner, or trustee. (Do not list individual stocks and bonds that are held by mutual funds.)

a. Name of Business or Investment Entity,
b. Ownership (spouse/dependent children),
c. Indicate if officer, director, equitable partner, or trustee (where applicable)

No known business or investment interests of spouse and dependent children.

SECTION IX

ANNUAL PAYMENTS RECEIVED FROM THE STATE OF GEORGIA

(This section to be completed by Public Officers only)

Identify all annual payments in excess of $10,000.00 received by the public officer, **or** by any business entity identified in Section III above, from the State or any agency, department, commission or authority created by the State, and authorized and exempted from disclosure under O.C.G.A. § 45-10-25.

Name, address of state entity making payment, and general nature of the consideration for the payment	**Amount of annual payment**

No annual payments in excess of $10,000.00 from any State entity.

Exhibit Q

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

ANNUAL REGISTRATION

Electronically Filed
Secretary of State
Filing Date: 3/8/2019 11:21:48 AM

BUSINESS INFORMATION	
CONTROL NUMBER	0420744
BUSINESS NAME	PEOPLE PARTNERING FOR PROGRESS, INC.
BUSINESS TYPE	Domestic Nonprofit Corporation
EFFECTIVE DATE	03/08/2019

PRINCIPAL OFFICE ADDRESS	
ADDRESS	136 PRYOR STREET, SW, 3RD FLR., ATLANTA, GA, 30303, USA

REGISTERED AGENT		
NAME	**ADDRESS**	**COUNTY**
CARPENTER, RAYMOND P	625 COLONIAL PARK DR STE 201, ROSWELL, GA, 30075, USA	Fulton

OFFICERS INFORMATION		
NAME	**TITLE**	**ADDRESS**
KYM NORMAN	SECRETARY	469 HOLDENE DRIVE, ATLANTA, GA, 30311, USA
PAUL L HOWARD, JR	CEO	136 PRYOR ST SW, ATLANTA, GA, 30303, USA
RAYMOND P CARPENTER	CFO	625 COLONIAL PARK DR STE 201, ROSWELL, GA, 30075, USA

AUTHORIZER INFORMATION	
AUTHORIZER SIGNATURE	Raymond P. Carpenter
AUTHORIZER TITLE	Officer

Exhibit R

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

ANNUAL REGISTRATION

Electronically Filed
Secretary of State
Filing Date: 2/21/2019 4:35:20 PM

BUSINESS INFORMATION	
CONTROL NUMBER	16059690
BUSINESS NAME	The Academy of Promise, Inc.
BUSINESS TYPE	Domestic Nonprofit Corporation
EFFECTIVE DATE	02/21/2019

PRINCIPAL OFFICE ADDRESS	
ADDRESS	136 Pryor Street, Third Floor, Atlanta, GA, 30303, USA

REGISTERED AGENT		
NAME	**ADDRESS**	**COUNTY**
Dexter Bond	136 Pryor St SW, Third Floor, Atlanta, GA, 30303, USA	Fulton

OFFICERS INFORMATION

NAME	TITLE	ADDRESS
George Andrews	CFO	136 Pryor Street, Third Floor, Atlanta, GA, 30303, USA
Paul Howard	CEO	136 Pryor Street, Third Floor, Atlanta, GA, 30303, USA
Thomas Dortch	SECRETARY	136 Pryor Street SW, Third Floor, Atlanta, GA, 30303, USA

AUTHORIZER INFORMATION	
AUTHORIZER SIGNATURE	Paul Howard
AUTHORIZER TITLE	Officer